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TESTIMONY

TAKEN BY THE

SPECIAL COMMITTTEE APPOINTED TO INVESTIGATE THE AFFAIRS AND MANAGEMENT

OF THE

STATE LUNATIC ASYLUM AT UTICA.

JOHN H. MIMMS,

Stenographer.

ALSO THE

REPORT OF THE COMMITTEE

ALBANY:
WEED, PARSONS & COMPANY.
1884.

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1884

INVESTIGATION

OF THE STATE LUNATIC ASYLUM AT UTICA.

In Assembly,
February 13, 1884.

Mr. Haskell, of Madison, called up his resolution respecting the death of Evan D. Hughes, in the State Lunatic Asylum, at Utica.

An amendment was offered to the original resolution, and the amendment being accepted by the mover, the resolution was carried, as follows:

Whereas, Evan E. Hughes, late of the town of Nelson, county of Madison, State of New York, deceased, was committed to the Utica Insane Asylum, on or about the 26th day of January, 1884, as an insane person, and while an inmate of said institution died a violent death, caused by injuries received at the hands of his attendants; and

Whereas, Other charges of a grave nature have been made against said institution and its management; and

Whereas, By reason of the said violent death of said Hughes, and the other charges aforesaid, the public have lost confidence in the management of said institution, and regard with horror the atrocities alleged to have been there committed; therefore

Resolved, That a special committee of five, to be appointed by the Speaker, be and they hereby are directed, authorized and empowered to make thorough investigation of the affairs and management of said Utica Insane Asylum, and particularly of the circumstances surrounding the death of said Evan D. Hughes, and to report thereon to this House, with all convenient speed, to the end that any and all guilty persons may be brought to justice, and that such steps may be taken in the premises as may be necessary and

proper to restore public confidence in said institution and the management thereof.

Resolved, That said committee be, and they hereby are, authorized, in making said investigation, to subpœna witnesses, send for and examine books, papers and documents, hold sittings at such other places than Albany as they may deem proper, and employ counsel and a stenographer.

In pursuance of the above resolution the Speaker announced the appointment of the following named gentlemen as such special committee:

Messrs. Howe, of New York; Haskell, of Madison; Olin, of Broome; Rice, of Ontario, and J. H. Brown, of Schoharie.

Mr. S. S. Morgan, of West Winfield, counsel, and John H. Mimms, of Albany, stenographer.

On Friday morning, February 16, the special committee proceeded to Utica.

At 1:30 P. M. the committee visited the Asylum, and were met by Messrs. Lowery, Swan and Rogers, of the board of managers of the Asylum, and by Dr. John P. Gray, superintendent.

The committee were escorted into the office of the superintendent, and an informal conversation occurred as to the nature of the investigation, mode of procedure, etc.

Dr. Gray said, in substance, that in view of the strong comments and criticism in the press he was glad to see that a committee had been appointed, and that they were present for an investigation. He trusted the investigation would be thorough; the books, attendants, physicians, etc., were all open to a full examination. If the committee, after such investigation as they should deem proper to make, should make any suggestions we shall be glad to carry them out.

Senator LOWERY said: If it is in order now, I desire to say a few words and explain the position of the managers; for myself, and I think I speak for the other managers in this respect, I appear here with a feeling of delicacy, in view of the proceedings in the Assembly when the matter of this investigation was under consideration. I understand complaint has been made that during the course of the investigation of last year, that some of the managers, or the Asylum authorities, were present at the examinations, and that their presence had an influence upon the committee, and perhaps it will be better if we are not present; we are at your service; we are desirous of

rendering you all the assistance in our power, but do not wish to intrude our presence if we are not wanted; when you do not want us present, we will keep away, and when you want us, and we can render you any assistance, we shall be happy to be of service to the committee; I say this in view of the criticism made upon the presence of the authorities during the last investigation. We trust you will make a full and complete investigation; the closer you examine into matters the more we shall be satisfied. The accident that has occurred, that gave rise to the resolution under which you are acting, no one regrets more than the managers. If there is any thing wrong about the management of the institution, point it out to us and we will endeavor to set it right.

Mr. Howe — I am very glad you have made the suggestion, as it will relieve the committee of some embarrassment as to the conduct of the investigation; we shall be pleased to have the assistance and co-operation of the board, but inasmuch as criticisms on this matter have been made in regard to the last investigation, perhaps it will be advisable that our sessions should be carried on without your presence, unless something arises rendering the presence of some of the managers necessary to facilitate our inquiry.

The committee then, in company with Dr. Gray, Dr. Brush, Dr. Pilgrim and Dr. Backus, visited the wards of the north, or male department of the institution, returning to the superintendent's office about 5:30 P. M.

After another informal conversation as to matters pertaining to the care of the insane, etc., suicides in the Asylum, etc., the committee retired.

In the evening, an executive session was held in room 48, Baggs hotel, and the committee mapped out a general plan of proceeding, Mr. S. S. Morgan, counsel for the committee, being present.

Adjourned until Friday, February 22, 1884.

TESTIMONY.

UTICA, N. Y., *February* 22, 1884.

Pursuant to adjournment, the committee met in one of the asylum office rooms.

Present — Messrs HOWE, Chairman, HASKELL, OLIN, RICE and BROWN of committee.

Mr. S. S. MORGAN, counsel for the committee.

At 9:30 o'clock, A. M., the committee was called to order by Chairman HOWE, and the following proceedings were had:

John P. Gray, sworn and examined, testified as follows

By Mr. MORGAN:

Q. What is your age?

A. Fifty-eight.

Q. How long have you been Superintendent of the Utica Insane Asylum?

A. Since the year 1854.

Q. From what source do you get your appointment?

A. From the board of managers.

Q. How many are there of the board of managers?

A. Nine.

Q. How many of the board of managers are residents of Oneida county?

A. Now, at the present time, they are all residents of this county—Oneida county—but one; let me see; they are all residents now; this is the first time it has been so.

Q. The board of managers are nominated by the Governor and confirmed by the Senate, are they not?

A. Yes, sir.

Q. In the nomination of the managers, are you usually consulted by the Governor before the nomination is made?

A. No, sir.

Q. And have you at any time taken any part in the securing of the confirmation or rejection of any person named as manager?

A. I have not; never, not in the slightest degree, directly or in directly.

Q. Are your duties prescribed and directed by written or printed rules or laws?

A. They are.

Q. What are your duties as you understand them?

A. As I understand them from the statute, I am the chief executive officer of the asylum; I am directed to see that every department is efficiently and economically administered and carried out, and according to the rules and regulations which are printed; that in regard to the officers, I am to nominate the resident officers, the assistant physicians, the steward and matron, and the managers appoint them.

Q. When you recommend a steward or physician, your nomination has to go before the board of managers; that is, it must be in writing, and come before the board of managers, and a majority of the board of managers confirm?

A. Well, the board of managers confirms, either in majority or otherwise; I do not think it states in the law as to that.

Q. Who is the next in order to yourself in the asylum?

A. The first assistant physician.

Q. What is his name?

A. Dr. E. N. Brush.

Q. And who is the second?

A. Well, just now it is Dr. Charles W. Pilgrim; he is acting second physician; Dr. George A. Bloomer, the second assistant physician, having gone abroad to take a degree at Edinburgh; while absent over there, he was attacked with typhoid fever, and he is still lying ill with it; and will not be back until next May.

Q. And in his absence Dr. Pilgrim discharges his duties?

A. Yes, sir; he discharges the duties of Dr. Bloomer.

Q. And what is Dr. Pilgrim's position in the asylum when the second assistant is here?

A. Third assistant.

Q. Dr. Pilgrim is the regular third assistant?

A. Yes, sir.

Q. Who is the present acting third physician?

A. Dr. Ogden Backus; he is discharging the duties of the third physician, and Dr. Hamilton Quinn, of Utica, is discharging the duties of fourth assistant physician.

Q. And that is the extent of the medical staff, from the first to the fourth assistant physicians?

A. Yes, sir.

Q. How old a man is Doctor Brush?

A. I do not know; I should have to ascertain their ages from them, personally; they are all mature men.

Q. Those gentlemen are nominated by you and approved or confirmed by the board of managers?

A. Yes, sir.

Q. Who are the board of managers at the present time?

A. The board of managers at the present time are: Mr. Samuel Campbell, president; he is a manufacturer and his place of business is at the New York Mills, Utica; Theodore Pomeroy, secretary of the board; he is also a manufacturer—I believe of oils, paints and that sort of thing—in Utica Mr. P. B. Rogers; Mr. Rogers is a banker, of the First National Bank; Mr. Dwight D. Winston, I believe his firm are forwarders and merchants, wholesale and retail dealers of grains and provisions; he is also of Utica.

Q. Who is the next?

A. Then there is Mr. S. S. Lowery; he is engaged in manufacturing knitting goods; General James McQuade; I don't know his business; I believe he is a lawyer by profession; he is, I think, connected with some mining companies, or something of that kind, in New York; his residence is in Utica; then there is Judson R. Swan, a lawyer of Utica; George A. Barnard, of Rome, a banker; you asked me as to the directors in Oneida county, I did not think of him; and then there is Louis H. Lawrence, of Utica.

Q. What is his business?

A. He used to be a lumber man; he is now a retired gentleman.

Q. And he spends his winters in Florida?

A. Yes, sir.

Q. Now, then, doctor, you may continue in stating what your duties are?

A. In addition to what I have stated, in the way of being connected with the organization of the asylum, I am to determine with the managers, as to the number of assistants, attendants and employees necessary to carry on effectively the affairs of the institution. Then I have to maintain a general government over all those matters; I have to direct the steward in the employment of the necessary number of employees, and in case of their inefficiency, or any violation of the rules of the institution, I have to direct him to discharge them, giving the grounds of such discharge. Then I have the general supervision of the entire medical department. I am directed to appoint the first assistant and second assistant in charge of each of the departments, male and female; also the third and fourth assistant physician; and direct them to do such work, or perform such other service as may be required by the necessities of the institution, and to see generally that good order prevails everywhere in the institution; to familiarize myself with all these duties as the general executive; then I am directed also to see that all the necessary books and records are kept, recording the history of the patients, of their admission, and their progressive history through the entire time that they are here.

Q. How often is that progressive history written up?

A. Well, it is written up constantly; in some cases they have to be written every day; some less, and some more frequently; it is according to the character of the case.

Q. Any thing further in relation to your duties, or does that comprise generally the outline of your duties?

A. No, sir; I do not think there is any thing further; I think that embraces them all; of course it does not embrace them specifically but generally.

Q. What are your duties so far as visiting the patients and examining them is concerned?

A. It is my duty to visit the patients and to know their condition; of course that means a knowledge of all cases that need any change every day, and to know their condition, which I do by constant consultation with the medical assistants in charge of those wards. I will say this: I am now incapacitated for full duty; ordinarily, before I received this injury, from which I have not yet fully recovered, I endeavored to go through each side of the house — a complete visit each side of the house — twice a week; and I generally would take the most of the day on Friday as a day to adjust the business matters with which I am related to the institution.

Q. In speaking of your injury, you may state its nature and extent and how it occurred; it was the shooting I suppose?

A. On the 16th of March, 1882, I had just returned from Washington, on the six o'clock train, and came home and took a cup of tea; I went into my office, that was about seven o'clock, and a person came in and shot me while I was sitting at my desk; the name of the man who shot me was Henry Remshaw.

Q. Had he been a patient in the institution?

A. No, sir.

Q. Describe to the committee the extent of the injury you received, and where the ball struck?

A. The ball struck me just at the outer and lower angle of the eye and the cheek, on the left side, and fractured the upper jaw or cheek bone and passed under, taking out the soft tissues and base of the nose and coming out through the right cheek, five inches from where the ball entered, fracturing the right jaw also in its passage.

Q. Mr. Remshaw was a resident of what place?

A. Of Utica.

Q. Had you had any difficulty with Remshaw?

A. No, sir.

Q. Do you know of any reason why the assault was made upon you?

A. No, sir; I have not been able to conceive any reason except that which he had in his own mind; I knew of nothing of the kind until after I was shot; I do not think I had ever seen him a dozen times in my life.

Q. He had expressed disapproval of your evidence in the Guiteau case in Washington?

A. Yes, sir; he stated afterward and it did appear that he had stated what he would do.

Q. Had you had any difficulty with him?

A. No, sir; the only knowledge I had of him was that he was an

attendant in charge of a bath for some time at Bagg's Hotel, and I only knew that his name was Henry, and that he had charge of the baths; I had taken probably three or four baths there, but I don't think otherwise than in that respect I had ever seen him five or six times.

Q. To what extent has that injury disqualified you or rendered you unable to perform the usual duties that have devolved upon you?

A. Simply to the extent of visiting the wards as frequently as I should desire to, to discharge those duties.

Q. Before receiving that injury, you often visited the several wards, and made personal examination and investigation of the condition of the patients?

A. There was probably not a day passed by that I was not in some of the wards; I tried to visit the wards in such a way as to see all the wards on each side of the house, at least twice during the week.

Q. And you would see all of the patients?

A. Well I could not say always that I saw all of them; some of them might be out working, or perhaps in the ironing-room or somewhere else about the place.

Q. Since that injury how often have you visited the several wards and made a personal investigation of the patients?

A. Until July or August of that year I was either confined to my room, or away; my face was entirely paralyzed; I was entirely unable to move any of the muscles of my face until sometime in June, and I had paralysis of the lower eyelid at the time, and some of the powder in the eye itself; I also had double vision, so that I could not do any thing; for instance, I could not pick up an article like this (indicating the ink-stand) without putting my hand along the table, so that, during that period, I was absolutely unfit to do any thing. I went up to St. Paul and Winnipeg, with a view of getting clear, dry air, as it was exceedingly painful to breathe the ordinary air, especially when filled with dust, or dampness; I then returned, and for a time I entered upon the office duties, and visited the wards occasionally, as far as I could; I saw the sick and any persons that needed especial attention. Then I was away a short time again; I began to have great pain and trouble through my face; the bones did not unite; then I returned again to duty and did all the office duties and wrote my annual report, and examined patients when they came in, and directed about all those matters until into March, 1883, when I began to suffer very much; then I thought I would go South, but I went as far as Washington and stayed there some days and did not feel any better and came home and tried to "tuddle" it through; then I entered on my duties again, until the 16th of May; the bones of my face not uniting, and beginning to feel anxious, I consulted some surgeons for fear that I would have—or that I would lose the bones of the face from non-union. I then went away again, of course with the managers' assent from the be-

ginning, that I should do what was best for my recovery; I went to Newport quietly, and after some weeks the process of union of the bones set in; I then came home and looked over the affairs of the institution a little and went back.

Q. How long did you remain at home?

A. About a week, until I got so that every thing was going on all right; that is, until I saw how matters were going; I then went back to Newport and remained there until the latter part of August, and since that time I have been almost constantly at work; I have been able to work probably from eight to twelve hours a day. I have visited all over the house occasionally, and visited the sick frequently; nowI am awaiting an operation which I think will give me entire relief.

Q. That is a surgical operation?

A. Yes, sir; the removing of the obstructions in the nostrils which prevents my breathing, except through the mouth; in walking it is very troublesome to me.

Q. What portion of the time have you been absent from the institution since the 16th of March, 1882?

A. Except the times I have mentioned?

Q. You did not give us the length of time that you were absent; taking it all together, how much would you say would be the proportion of the time that you were absent, that is, how much time altogether?

A. I went away then, I think it was on 24th of May; I think I was first able to be out of bed somewhere about the 16th of May, 1882.

Q. Then about two months you were confined to your room?

A. Yes, sir; and nearly all of that time confined to my bed; and then, I think it was the 24th or 26th of May, I could not tell exactly which without looking, but it was either the 24th or the 26th of May that I went away, and returned in July.

Q. You went away on the 24th or the 26th of May, 1882?

A. Yes, sir.

Q. And returned what time in July?

A. I could not say the date, but it was about the middle of July or before the middle of July.

Q. Then you were absent two months at that time?

A. Yes, sir.

Q. Then you returned here, and how long did you remain in the asylum then?

A. I remained—I don't know just how long it was, but I afterward went away with one of my sons for a couple of weeks.

Q. And then you returned to the asylum?

A. Yes, sir; returned to the asylum and remained until the time I speak of, in March (March, 1883), when I went down to Washington; I think I was gone about two weeks altogether, and then I returned to the asylum; I remained until the 16th of May when I went to Newport as I have stated, and came back toward the last of August.

Q. About how long did you remain at Newport at that time; how long were you absent from the asylum?

A. Until after the middle of August; coming home twice and leaving my family there.

Q. And when you came home on those two occasions, how long did you remain here?

A. Well, each time I remained, I think, a little more than a week or two.

Q. Were you in a condition then, on your return to the asylum, to look over the affairs and see what the condition of the asylum was and in what manner it had been carried on in your absence?

A. Yes, sir; I looked over every thing and went all through the institution and all about the building, everywhere; and I read over, and had read over to me, the history of the cases, etc., and I consulted fully with the doctors.

Q. And visited the patients?

A. Yes, sir; I went through all of the wards at that time.

Q. And then you went back to Newport and finally returned to the asylum; now when did you return to the asylum with your family?

A. Sometime in the latter part of August; I am not confident as to the date.

Q. How long did you remain at the asylum then?

A. I have remained ever since; I have been away down to New York twice for a few days; and I went off to Boston for a few days.

Q. During the time that you were away at the west or north-west, and at Washington and Newport and other places, who filled your position in the asylum and officiated in your absence?

A. Dr. Brush; and perhaps I might be allowed to say that during all that time he wrote constantly to me and telegraphed me as well in any important matter; he had the entire charge during my absence, the law providing for that.

Q. During your absence you say that Dr. Brush communicated with you by letter and on some occasions by telegram; was there any difficulty occurred — any unusual disturbance in the asylum during your absence?

A. Yes, sir.

Q. What was that?

A. One instance was the death of a patient caused by another patient.

Q. Who was the patient that died?

A. A Mr. B——, of U.; I ought to say this that it occurred during my illness, while I was confined to my bed; Mr. B., of U., a patient was struck by Mr. P——, another patient, and his skull was fractured, and death resulted from the injury; I knew of that injury by being told of it at the time.

Q. That was while you were confined to your room?

A. Yes, sir; I did not know it till just afterward; the doctor communicated with me by telegram while I was in St. Paul upon

the question of whether or not he should give the facts of the case to the newspapers; I then wrote to him about it.

Q. What was your reply to his inquiry about the newspapers?

A. I replied that having communicated the matter instantly after the occurrence to the coroner and to the friends, and the matter having been acted upon, I would advise him at once to consult the board of managers and do whatever they advised?

Q. Do you know what advice the managers gave in reference to giving that case to the public?

A. Only by the record; it appears in their communication, in their report to the Legislature of last year, that they did not think it was necessary to publish the thing themselves, or to give it to the newspapers; and I also learned, as a matter of record, the fact that the son of Mr. B., who came with the coroner, went to the newspapers and asked them not to publish it, as it would only grieve his mother who was an old lady; that he was satisfied that nothing could have prevented it under the circumstances; and that he had asked not to have it published; so that no action was taken one way or the other, or a word said about it at the time to any persons unconnected with the asylum, or to the newspapers; some newspaper in Syracuse, however, published the matter.

Q. Where did Mr. B--- reside?

A. In Utica, or near here; his son resided in Utica, and he is the ticket agent of the N. Y. C. & H. R. R. R.

Q. P—— was the assailant, and he was an inmate?

A. Yes, sir.

Q. P—— is here now?

A. Yes, sir.

Q. And he is now kept under restraint?

A. Part of the time under restraint.

Q. Where is he from?

A. He was sent from—I don't know what county, but he was sent for some crime, I think, and he was sent to the Syracuse Penitentiary; there he had a violent altercation with some persons and he was found to be insane by persons who were appointed by Judge Riegel to examine him, and Judge Riegel discharged him from imprisonment; he did not, however, order him sent to the Criminal Asylum at Auburn; which, perhaps I ought to say, the law specifically directs, but he delivered him to his friends, and he was afterward taken home, and his friends being unable to do any thing with him, he was brought here; he is a very dangerous man.

Q. Under what power could Judge Riegel, after conviction and sentence, discharge that man from that sentence and return him to his friends?

A. I have no idea; I know it was referred to the district attorney.

Q. How long has this man been in the asylum now; I mean P——?

A. He was brought here during the time I was ill, during the spring of 1882 it was.

Mr. RICE — Mr. Morgan, I wish you would ask him how he knows that fact that he mentions about Judge Riegel; perhaps it may be hearsay?

A. No, it was from the officers that I got it; and from the papers; from the officers who brought him here; I requested Dr. Brush to refer the matter to the District Attorney of this county, and he knows all about it.

Q. Was there an investigation into the death of Mr. B——. by the coroner?

A. Yes, sir.

Q. Did he call a jury?

A. No, sir.

Q The coroner investigated himself without a jury?

A. Yes, sir; the coroner came here, and he, and the son of the man who was killed, were here immediately after the occurence.

Q. In brief, the coroner did not think it a case in which it was necessary to call a jury?

A. No, sir, that was it.

Q. He made his report of it himself?

A. Yes, sir; he made his report himself.

Q. Who was the coroner then?

A Dr. James G. Hunt, of Utica.

By the CHAIRMAN:

Q. What was the report, or result of the coroner's inquiry?

A. Just how he came to his death, and that there was no person to blame in the matter.

Q. That is no responsible person?

A. No, sir; that is, such as attendants, etc.

Q. How did the killing occur; state about that?

A. It was in the morning, while they were all preparing for breakfast; they were on the open ward; this Mr. P——. was on the ward; Mr. B——. was an old man, and he was walking toward the wash-room to wash his hands and face, and Mr. P——, suddenly took a table leg, like this one (indicating the table at which the committee were sitting), and gave it a jerk and broke it off, and in an instant he struck Mr. B——. with it; the patients and attendants were on the ward, and the attendants ran instantly to him; it was too late, however, for he had given the blow, and struck him on the back of the head; Mr. B——. immediately fell down, and they sent a special message to his son, and immediately to the coroner; that has been the course pursued, and they came up at once; and I understood that they made an examination of the attendants and persons on the wards, in the presence of young Mr. B——. and he talked with them himself; and that was the decision rendered; the case is reported in the Board of Manager's Report to the Legislature of last year.

Q. There was no judicial action then taken in the case?

A. No, sir.

Q. During the time of your disability or absence, was there any unusual disturbance in the asylum?

A. There was the case of Mr. Silkman; I don't know whether you would call that an unusual disturbance or not; I never saw Mr. Silkman as an inmate of the asylum.

By Mr. MORGAN (resuming):

Q. Was he in the asylum?

A. Yes, sir; he came in April or May, sometime; I would not be positive about the time, but I think that was it; I never saw him, and he was discharged by an order of Judge Barnard; that case was telegraphed to me.

Q. Where were you when these proceedings were taken?

A. That was the time that I went from here down to Newport, the same spring, and after I came back from the west; I thought I was able to go to work then, but found I was not, and I was told that I probably would have caries, or necrosis of the bones of the face, and lose them, if I occupied my nervous system in attempting to work, and so I went away; I knew of the short time he was here during that time, simply from reading the case books over and having them read to me, and conversing with the physicians about the matters of the institution; when I was in Newport they telegraphed me that this writ had been served, and asking what they should do; I told them instantly to make a report in accordance with the order of the court; to confer with Mr. Swann or any other lawyer on the board of managers, and in all respects to act in accordance with their directions in every way; Mr. Silkman had a hearing before Judge Barnard, before whom the writ was returnable, and he was discharged from the asylum upon *habeas corpus;* I think I saw him once; it was afterward, when he came here to serve a subpœna upon me.

Q. And that was in Miss Lathrop's case?

A. Yes, sir.

Q. When was Mr. Silkman admitted to the asylum?

A. I would have to get the record to find that out, I think you will find it in the annual report for 1883; I find that he was admitted on the 21st of May, 1882.

Q. And he was taken out upon a writ of *habeas corpus*?

A. Yes, sir; that was on the 19th of August, 1882.

Q. Before he was admitted to the asylum, after you received your injury, and he was taken out on Judge Barnard's writ before your recovery and returned to the asylum to your duties?

A. Yes, sir.

Q. And that accounts for you not seeing him?

A. Yes, sir; that accounts for my not seeing him.

Q. During the time of your absence was there any other disturbance?

A. I don't think that there was any thing, except those two matters; the most of the letters I received were ordinarily consultations, about the ordinary affairs of the institution. If there is any thing you have in mind I will thank you to call my attention to it, if you know it, but I do not think of any thing myself.

Q. Were you acquainted with Miss Lathrop?

A. Yes, sir; I knew her well.

Q. When was she admitted to the asylum?

A. I shall have to refer to find that.

Q. What was Mr. Silkman discharged for?

A. On the ground that he was found to be sane.

Q. And Miss Lathrop upon the same ground?

A. Yes, sir.

Q. Was it assumed that he was sane when he came there?

A. Yes, sir; Judge Barnard discharged him on the ground that he was sane, and so stated; but I do not believe he was sane; Judge Barnard in his decision stated that he did not believe that Mr. Silkman was ever insane.

Q. How did he get here — Mr. Silkman, how did he get into the asylum?

A. He was brought here by his own family, his brother-in-law and his son were the persons who became responsible for him, and they paid the bills.

Q. He was a paying patient?

A. Yes, sir.

Q. Was he brought there by his friends, or were any proceedings taken to have him confined in the asylum?

A. Oh, regular proceedings were taken, and he was considered to be a dangerous man.

By Mr. Rice:

Q. Upon what proceeding; upon the certificates of two physicians, or was it upon a writ of inquiry?

A. I don't know, really; I could not state without referring; I only know of the case at that time from what I was told.

Q. Would your case book show all the particulars concerning that?

A. Yes, sir; that will show.

Q. And will it show what proceedings were taken?

A. Yes, sir; it will show all about it; I can get that case book and refer to it.

[The case book, above referred to, was then produced and examined by the witness.]

Witness (continuing). I find he was brought by a deputy sheriff from Westchester county and a Mr. V. Plank, on the certificates of two medical men, namely: Dr. A. C. Benedict and Dr. G. B. Balch, both of Yonkers, and upon a bond executed by Theodore H. Silkman and D. G. Crosby; the first named was the son of Mr. Silkman and the other was his brother-in-law, I believe.

Q. What is the nature of the usual bond given to the institution in such cases?

A. It is simply an agreement; it is an agreement between the treasurer of the asylum and the parties to pay the expenses of the person who is to be confined in the asylum as long as the person remains there.

Q. And such a bond is always taken in private cases?

A. Yes, sir; such a bond as is authorized by the board of managers.

Q. That authority is given to them under the law which enables them to make such arrangement?

A. Yes, sir.

Q. What is done in the case of pauper patients?

A. If the person is actually a pauper without means, and is sent here on the certificate of the superintendent of the poor, with an order accompanying the certificate, and the certificate of two physicians, who have been directed by the courts to examine, and who have been appointed medical examiners in lunacy, those certificates are to be approved on the back by the county judge of the county from which the patient comes, or by a justice of the Supreme Court of the district; if a person is in indigent circumstances and not a pauper, or, as the law states it, "a pauper unable to support himself and his family under the visitation of insanity," then the judge makes an inquiry into the matter, as well as an investigation into the case; in case it is found that the person examined is dangerous to be at large the judge issues a warrant for his arrest and confinement here; the usual certificate accompanies that, though that may or may not be the case, because the judge is supposed to have examined it; in criminal cases they are sent by judges of the Supreme Court, and no certificates accompany them.

Q. How do you recognize the signatures of the judges; is there a seal appended to it? A. Yes, sir; there is the ordinary certificate, a copy of the original, with the seal of the county clerk upon it.

Q. How long are such patients kept in the institution? A. The criminals are kept until they are sent off by a proper order; others are detained until they are restored to their right mind; in other cases they are retained here until they do recover; when they have recovered, it is explained to the commissioner in lunacy and he would appear and examine the case and I would then make to the justice of the Supreme Court of this district a sworn statement of the case together with my opinion; that opinion would be confirmed or not as the State Commissioner in Lunacy may or may not see fit. But it would have to be in writing. Then the judge makes an examination of the person himself, orders the person before him, and he is examined, and I am also examined and if it is thought proper the discharge of the patient is made. If the case remains here and is one that is not liable to recover and becomes so dangerous as to make it improper for him to remain among persons of this class, then I make a written application, under oath, to a justice of the Supreme Court, stating the facts of the case, and why I

consider him dangerous, and then I transmit that to him with the papers upon which he was committed to the asylum. In that case he also then examines me, then he requests the district attorney—that is the justice, or the State Commissioner in Lunacy orders the district attorney — to make an examination and report to him; he also requests or directs me then to communicate the matter to the district attorney of the county from which the patient comes; then he examines that patient and the transfer is made; the judge orders a transfer to the criminal asylum at Auburn.

Q. What then becomes of the patient; does his case go to the district attorney to be tried for his crime?

A. Yes, sir; then the law states, or the order usually states the same thing, and then within sixty days he has to be remanded to the county from whence he came to await his trial, or to be otherwise discharged; that is the way criminals get in and out of the asylum.

Q. After your return to the asylum, and, in a measure, your recovery from your injury, then what part of the duties did you assume and perform?

A. It would be difficult to answer that question; almost everything except what I have stated heretofore.

Q. Did you, after your return, visit the patients in the asylum?

A. Yes, sir; I visited them.

Q. What is the greatest length of time that has elapsed that you have not visited and seen the patients in the several wards?

A. Well, I could hardly tell; I don't think there has been a day that I have not been in the wards; in some of them; but it is some time now since I went through the entire house consecutively, because I found it was more of a labor than I could perform without being sick, or without suffering from it; I suffered from the after-pain and disturbance to such an extent that I concluded afterward, and so stated to the managers, that I could not go through the wards upon these consecutive visitations until I was relieved; and then I have no doubt I have consulted a great deal more with the physicians about the cases than I would have done if I had been able to see them myself more frequently.

Q. Can you give us the greatest length of time that has elapsed during which you have not visited and seen all of the patients in the asylum?

A. No, sir; I don't think I could, Mr. Morgan; that has not occurred to me.

Q. Has it been for a space of three weeks?

A. No, sir; I don't think there has been a space of three weeks.

Q. Has there been a period of two weeks?

A. That I have not been through the whole house?

Q. Yes; since your return.

A. Yes, sir; I think there has been; there has never been a week but what I have been to the house; if you are speaking of my under-

taking to go through the entire wards and back, I think probably there may be that time.

Q. Two weeks?

A. Yes, sir.

Q. Would there be three weeks, do you think?

A. I hardly think there would be, because I have gone in through half of the place, and then stopped and then gone in again.

Q. In lieu of passing through and investigating, or seeing the patients during this time, what rule have you adopted in place of that personal examination?

A. When I have passed through, I have generally made personal examinations.

Q. But when you have not been able to do them, what course have you adopted instead of the personal examination?

A. By talking to the physicians, and often to the matron, and sometimes to attendants; though as a general rule I like to obtain every thing through the direct authorities under me.

Q. And did you keep any record of the reports and investigations made by yourself with the attendants and physicians who have passed through the asylum?

A. Yes, sir; I was going to say in addition to that, that I read the notes — the current notes, of the attending physicians; we have what we call "ward books" on the men's side and on the women's; which contain the name of every patient; the name of every patient is in that book and it contains current notes that are taken of their daily condition, especially of those requiring notation, it is contained in that book; then there is a series of morning reports that are made by the night watchers of the condition of patients; and then there is a report that is made by the heads of the departments of each ward, containing their movements of every day, where they are and what they are doing.

Q. The attendants or the patients do you mean?

A. Patients I mean; and with all these things I have had to use them more to help me in keeping myself posted, and I do keep myself posted better then I would be if I had been able to go through myself; I have used all these means to inform myself of their condition, and if any question has arisen in reference to any particular case, then I have asked specifically about that particular case.

Q. Who makes the first original records in these ward books of the condition of the patients?

A. Do you mean in the book that the doctors carry?

Q. You have an original entry that is made in the small book — a ward book — how about that?

A. Whatever the physician finds on visitation, he makes that record.

Q. Is there any record made by the attendants?

A. Yes, sir, that is what I alluded to; there is a daily report.

Q. Made by whom?

A. The attendants, of the movements of the patients; and that

is kept; those are filed; then, every morning there is a report made of each department, which is in the office.

Q. Now, in the various wards there are more than one attendant, I suppose?

A. There is no ward but what has more than one attendant.

Q. Who makes the report in that case?

A. The head attendant.

Q. Who does he report to?

A. He reports to the supervisor.

Q. Of his ward?

A. Yes, sir; unless he reports directly, as he always does, to the physician in attendance, when a case arises of sufficient importance to warrant it; the attendant also reports to the physician as he goes through the ward, any thing occurring on that ward; he reports to the supervisor so that he may go to the office; and no ward shall be left without the head attendant upon it.

Q. If the attendant reports to the supervisor, who does the supervisor report to?

A. Instantly to the doctor, the physician in charge; and if he goes into the office, and the physician is not in, there is always some doctor here; this office is never left without some doctor; for instance, in a case of suicide or an accident, I do not think that the office has ever been left for a minute, or for half an hour, without a physician in it; it should not be, of course, and it is a rule that is always observed.

Q. That is if one of the physicians should absent himself from the asylum for any space of time, even to go out upon the grounds, would that not be a violation of the rule?

A. Yes, sir; a physician doing that would not be a suitable person to be in the institution.

Q. What arrangement have you for regulating that matter with regard to the physicians in attendance in order that they may not all absent themselves at one time?

A. If a physician is going outside, anywhere, if he is called outside, he always tells the others; he says, I am going out, so and so, and then the other would not leave the office; I have never known or seen such an instance, since I have been here, of there being no physician in the office.

Q. There is a principal office for those several physicians?

A. Yes, sir.

Q. They all occupy one office?

A. Yes, sir.

Q. And you occupy a separate office?

A. Yes, sir.

Q. When a report is made by an attendant to the supervisor, and by the supervisor to the physician, then what becomes of that report?

A. That is a verbal report if an accident happens or any thing of that kind.

Q. How is it in regard to these daily reports?

A. That is on file in the office; I can show you that.

Q. In this general office of the physicians?

A. Yes, sir; it is filed there.

Q. Suppose there is an unusual disturbance on any of the wards, how is that reported?

A. That is reported instantly.

Q. And when that gets to the physician of that ward, what becomes of that report?

A. That is reported verbally, and when he reports it he puts it down in his ward book and that comes to me.

Q. Who reports that to you?

A. The physician.

Q. Having charge of that ward?

A. Yes, sir; and if he is not in one of the other physicians immediately goes and they report to me.

Q. What do you do?

A. I direct whatever is necessary, or go in myself if there is any thing special, I go in myself; for instance, if there were some question about putting a restraint upon a patient, they might immediately consult me about it, if it were some person who had not been accustomed to any restraint especially; if it were some person that they knew about the paroxysms, they would know what restraint to put on. There was a consultation the other day; a man came here with a certain history; now I was satisfied from my conversation with him that he was suicidal; and I don't know but he was more than that; now, in that case, I said to the attending physician, "I think you will have to look out for him, he is a smart fellow, but he evidently is controlled by deeper delusions than he has given evidence of;" and so we put him under careful observation. He had got Bright's disease, and we put him right under treatment for that condition.

By the CHAIRMAN:

Q. State as to how accessible the physicians are to the supervisors at night?

A. We have four night watches, and when they go on duty they are expected to report everything. There are two on each side, besides special night watchers in the wards; and one of them has to report at once any thing that occurs.

Q. To whom?

A. To the physicians in charge.

Q. Where can the physician be found? A. He is right on the second story, above here; they all reside in the asylum; it is on the third story; I am forgetting that this is the first; the first floor contains the offices and dining-room of the steward and matron and the assistant physicians; on the second story is the residence of the superintendent; the third story is occupied by the assistant physicians, and it is as accessible as this story is to those wards here; I

do not think that an assistant physician is three minutes away from any place in this house at night; then, if there is any thing unusual, they come to me.

Q. Now, in the care of an attendant; suppose, in the night, a patient should be taken violently sick, what is done?

A. The attendants all sleep on the wards, and they have their doors open, and if they hear any noise they are quick to detect it.

Q. Is there not a man there whose duty it is —

A (Interrupting.) Then the night-watch reports; he speaks to an attendant and reports at once to the physician, and, if a person is taken sick, the physician goes right in.

Q. How many night-watchmen are there on duty?

A. There are two night-watchmen inside; one night-watch for the sick, and one for the suicidal; and then when it is necessary, if any person is sick on any ward, an attendant is designated to be put there, one of the attendants of that ward, and he is permitted to sleep through the day.

Q. And if a person is taken violently sick, or taken sick at all, what is done?

A. If a patient is taken sick at all — suppose he should complain of stomach-ache, or headache, it is immediately reported; the night watch would at once tell the attendant, and would then report to the doctor; of course the night watch would be in full dress and could go out, but the attendant would be undressed.

Q. The attendant would stay on duty while the night watch reported to the physician?

A. Yes, sir.

Q. Does it frequently happen that a patient is taken sick, or that a patient becomes violent in the night?

A. I should not say that it was frequent, but it not infrequently happens.

Q. Occasionally?

A. Well, not infrequently would be the term.

By Mr. Morgan:

Q. In those cases are you ever called?

A. Yes, sir; I have been called; I am not called without — well, for instances, suppose a person should barricade his door — all these other things are immediately looked after — and he should be making a disturbance, and we should be of the opinion that he would be apt to kill himself or something of that kind, I should be notified of that.

Q. When were you last called in the night to look after a patient?

A. Unless it was very necessary they would not call me.

Q. (Repeated.)

A. Well, I really could not say.

Q. Have you been called by a physician, or by any person in care, within the last three years?

A. Oh! yes, sir.

Q. Have you within a year?

A. Yes, sir, within a year.

Q. And when you are called, do you always respond?

A. I always respond; I may advise what they had better do and not go myself, but I always respond; if I consider it necessary, I go and see the patient, but it is not very often necessary.

Q. Does it often occur that you consider it unnecessary to go?

A. Sometimes it is not necessary.

Q. And for what reason do you think it is not necessary?

A. Well, from the nature of the case, and from my knowledge of the patient; sometimes it is necessary to do nothing more than to send out and get the carpenter to open the door; I have advised about such matters; they most always occur in the day-time and rarely at night.

Q. And is there any other reason than the fact that you have confidence in the physician in charge?

A. I was going to remark that I have complete confidence that they will properly attend to the matter. I will cite a case: Sometime ago a patient barred himself in his room in the evening; he was a violent man, and though the physicians were perfectly competent to deal with the matter, they knew that I for some reason had more influence with that patient than anyboy else; I immediately went up and I soon persuaded him to open the door, to take the bed away from it; but ordinarily I would have no more influence than anybody else.

Q. How is this to your own personal influence with the patients?

A. That would be somewhat of a delicate matter for me to give an opinion upon; do you not think so?

Q. Well, you know how it is?

A. Yes, sir; I know I have influence with the patients.

Q. That others might not have?

A. Yes, sir.

Q. Then, is not the case that sometimes your influence would be entirely useless?

A. Yes, sir; entirely useless; and so it is with some of the physicians — a patient will sometimes have an unfounded prejudice toward some physician, and in that case I would send another physician to do do any thing with that patient.

Q. Is it not true that there are physicians in the asylum who can go and visit patients and talk with them, and they will talk quietly and very sensibly to them, while they would be very much excited and enraged even at your making your appearance?

A. Yes, sir; there are such cases as that, where they consider me, apparently, the principal offender in confining them.

Q. Take the case of a patient who has conceived the idea that you are the cause of his imprisonment, as he would call it, would you feel it your duty, or would you think it advisable not to visit that patient? A. In going my regular rounds I should visit him,

but I should abstain from talking to him; to give you an illustration, there is the case of F—— C——, he believes that I am the center of all the evils which he fancies surround him, and that I exercise control in every direction to oppress him and injure him, and injure the Catholic Church and all sorts of things; now any conversation with him would be as injudicious on my part as it would be for me to open a sore and scrape it.

Q. F—— C——, gets excited even at the mention of your name? A. Yes, sir; or Judge T——, and various other names.

Q. Now as to books; do you allow the patients to have books to read? A. Yes, sir.

Q. Has there ever been any effort to take from F—— C—— his book; he has a book there of his own, has he not? A. Yes, sir; he has; no, sir; there has never been any thing done in that direction as the taking away of his book.

Q. When you go into the violently insane departments do you usually have an attendant with you? A. The attendants are somewhere near; but I must frankly say that I have no fear when I go on that ward.

Q. Have you ever been struck by a patient? A. I have been struck three times since I have been here, and sometimes a woman in the female department has slapped me, but not with intention of hurting me. I have not had any serions injury in that way; men have arranged to attack me sometimes, but one of the main safeguards is that there are no combinations here, and I should say that one man has formed the idea of attacking me; they have no idea of combination and that is the safety of the asylum; we have a large number of slungshots, knives, and various things that patients have secured with the intention of inflicting an injury.

Q. Where do they get them?

A. While they are out walking, they will get a stone and tie it up in a handkerchief. The case that I referred to was one of a Mr. S——, whose case is one about which there was a disturbance last year; he got a knife; I don't know how he made his knife, but he got a piece of steel that goes through a lady's corset, and had it mad every sharp, and got a wooden handle tied on to it, and he expressed the fact, when he was detected, that he intended to kill one of the doctors; he said he could have cut his throat and severed an artery, just as a man did with Dr. Cook in the Canandaigua asylum. Sometimes in such cases the patient meditating violence will commnicate his intentions to others. Now, he told his intentions to two others, one of whom was a very discontented man who thought he had great grievances himself, but he was filled with horror that S—— should desire to take such vengeance, and he wrote me a note informing me of the matter, and telling me never to divulge it; that S—— was so dangerous he would kill him if he should learn that he had written me this letter; afterward he wrote me half a dozen letters about it and was very fearful about the matter.

Q. Then there is danger of the patients securing some instrument by which they may do damage?

A. Yes, sir; nails, stones, crooks and horse shoes.

Q. What means do you adopt for the purpose of guarding against those?

A. We soon find out the class, and they are examined from time time; that is their bed clothing and their wearing apparel.

Q. Is it a fact that the patitents do occasionally go out for a walk?

A. Yes, sir.

Q. And when they are sent out what means are taken to protect them and to protect the public; what means do you adopt?

A. We always send a sufficient number of attendants with them; enough to take care of them.

Q. Do you have to in any way restrain a patient when they are going out?

A. No, sir.

Q. Does it sometimes occur when they are out walking that they commit trespasses by breaking away from their attendants?

A. They sometimes attempt to escape, and occasionally one has escaped; but I do not know of any particular injury to property that anyone has ever done; I do not recall any such instance now.

Q. I mean by running into a man's yard for instance?

A. Yes, sir; they may run in to get away, they would do it for that purpose, but not with the intent of harming the yard at all.

Q. Have there been cases where they have actually gone to the door of a house and attempted to get in?

A. Yes, sir; to get protection, but that is all.

Q. Now, in such a case as that, the attendants would at once recapture the man and bring him back into line?

A. Yes, sir.

Q. Suppose an attendant finds that a patient, when out for a walk, is disposed to get away, what does he do?

A. Upon his return he at once reports the fact to the office.

Q. Do they keep on their walk with such a man and let him continue to walk with them, or do they send him back to the asylum?

A. They generally take him close beside them so as to keep a watch upon him, and then continue their walk.

Q. Have there been any cases reported to you at any time of a man being knocked down by an attendant while out walking?

A. I do not recall a case where any man has been knocked down; I recall several cases where they have had had a struggle with an attendant, but I do not recall any case of being knocked down.

Q. Has there been a case of a man being knocked down and kicked by an attendant?

A. No, sir; there has been a case reported where a patient complained that he had been kicked.

Q. Who reported that?

A. The attendant himself reported the case; he reported the fact that the patient complained that he had been kicked, and also

reported the fact that while they were out this occurred that an attendant did kick a patient.

Q. Who reported it?

A. One of the other attendants, who was out; it is the rarest possible thing that there is only one attendant; nearly always there are two or three together; that was reported to the doctor who happened to be near, and then it was reported to me; this happened when they were out working, not walking.

Q. What did you do when it was reported to you?

A. I instantly ordered the attendant discharged; I examined into the matter and ascertained that it was true; I also ought to say that the man was not hurt; but it was all the same to me whether he was hurt or not, and the patient was discharged in ten minutes.

Q. Do you mean the patient?

A. The attendant.

Q. About when was it that occurred; how long ago?

A. It was a year or two ago.

Q. Then, taking it generally, if a case is reported to you of ill treatment, or injury, or an attempted injury, by an attendant upon a patient, do you investigate that yourself, personally?

A. Always; first I let some body else make their report, and then I investigate it myself.

Q. Do you call the person charged with doing the offense before you?

A. Not always; because sometimes it is so manifest and plain that I order him right out to the steward's office to be dismissed; for instance, when a charge is made against an attendant and he admits that the charge is true, of course there is not any use in my going any further in that case; if a man acknowledges he did it, I dismiss him instantly, without any thing further.

Q. When those attendants, who are out with patients, return from their walk, do they always make a report of their outside work?

A. No, sir; not always; sometimes it happens that they want to go further than usual, to the cemetry, for instance, and they report before they go, and ask permission. They are expected to go out walking or working in the yard every day unless the weather prevents it.

Q. You have a first assistant physician in charge?

A. Yes, sir.

Q. Who is the first assistant physician in charge now?

A. Doctor E. N. Brush.

Q. Who next?

A. Doctor Charles W. Pilgrim.

Q. What part of the institution is immediately under the supervision of Dr. Brush?

A. The women's side of the house.

Q. Does Dr. Brush have any supervision over the male department?

A. Not without I request him; I have sometimes requested Dr. Brush to do certain things for me.

Q. Who has the supervision of the male department?

A. Dr. C. W. Pilgrim; and Dr. Quinn is associated with Dr. Brush on the women's side, and Dr. Backus with Dr. Pilgrim on the men's side.

Q. Have you a diary from which you can give to the committee the time that you have been absent from the institution for the last five years?

A. No, sir; I never keep a diary.

Q. Are you in the habit of being away delivering lectures?

A. Yes, sir; I deliver — for the last few years I have delivered lectures, with one winter's exception, at Bellevue Medical College, and have lectured occasionally, or within the meantime, before the medical class at the Albany Medical School; I do not know that I should say I delivered lectures, but I delivered three or four talks of an hour each to the college class this winter, just as I am talking here.

Q. At what college?

A. Bellevue.

Q. What is your compensation in the asylum?

A. Four thousand dollars.

Q. And furnished?

A. Yes, sir, I live here.

Q. You live in the institution?

A. Yes, sir.

Q. And your house is furnished by the State?

A. Well, it ought to be, but is mainly furnished by myself, simply for my own preference.

Q. But so far as your servants, are they not paid by the State?

A. Yes, sir, by the institution; I have servants; they are in common with the others.

Q. They go on to the pay-roll with other attendants?

A. Yes, sir.

Q. And when you go away to deliver lectures do you get — are you compensated for that?

A. No, sir; I have been compensated some times, but I am not generally; I do not get even my expenses when I go down and deliver these lectures at Bellevue.

Q. You are not on the regular staff of this college?

A. Yes, sir; no — there are three or four special lecturers, for instance, Dr. Noyes lectures on the eye, some one on the ear, and I have lectured on insanity and jurisprudence.

Q. But you receive no compensation?

A. None, now.

Q. Are you not sometimes called away as an expert witness?

A. Yes, sir.

Q. Frequently?

A. Not very frequently; I have gone away when I felt I could not get out of it.

Q. Occasionally?

A. Yes, sir.

Q. In those cases do you receive compensation?

A. Sometimes I do and sometimes I do not.

Q. Take the Guiteau case, for instance; what compensation did you receive there?

A. I received there a certain *per diem*, when it was over, but I do not know that I ought to state it; I would rather not; it was not any great compensation.

By Mr. HASKELL:

Q. Is it not a matter of record, at Washington, how much you received?

Q. I suppose it is.

Q. Then why can you not state it here?

A. Some are still trying to get their compensation adjusted; to a part of them they paid twenty-five dollars a day, and to some of the rest they gave fifty dollars, and we paid our own expenses. I got fifty dollars a day and paid my own expenses, and for a while I was concerned in some other matter where I got thirty dollars a day in addition, afterward.

By the CHAIRMAN:

Q. Are you willing to state any sum which you can say would limit your total receipts, outside, in the way of fees as an expert?

A. I don't know; but it is not an amount that amounts to enough for me to be willing to do it, and I have refused on every occasion I could; I have sent Dr. Brush, and used to send Dr. Andrews; I do not consider that in expert testimony, taking my life together, has compensated me.

Q. You are aware that the people outside of the asylum have an idea that you have made a large amount of money out of the expert business?

A. In some cases — take one case, the Hagar case, I did not receive half the amount of my ordinary hotel bill.

Q. Have you ever taken any private practice outside of the asylum?

A. No, sir; I have never taken any private practice.

Q. Have you been called upon?

A. I have been called in consultation in some cases.

Q. And you have received compensation?

A. Yes, sir; about the ordinary fee.

Q. Do you ever charge a person a fee who comes here to the asylum and consults with you?

A. Not without that person would be some person who was

thoroughly able to pay a fee, a person who is not coming here to the asylum to stay; for instance a gentleman came here some time ago from Canada; he wrote to me that he wanted to consult me and came down and spent two hours that evening; he came to obtain my advice in a certain matter about a prominent man there, and I advised him what to do; I charged him precisely the same as if he had gone to the city; it was a case wherein the party was competent to pay a fee for consultation; I have some letters now from people who want to come and see me, and want to know what my fee will be; I shall not say any thing about the fee, but I shall not charge them a fee; if I were to say I would charge them any thing, they would not come here.

Q. If you were requested to go to New York to examine a patient there — a person of means — in order to advise such person's friends, would you be disposed in such a case to accept a retainer; that is, would you accept a fee in such a case?

A. Yes, sir.

Q Would yon accept such employment?

A. Yes, sir; I should not always go; I might and I might not; I have refused; I think I may safely say that I have refused a great many more cases than I have attended to; I have refused cases recently, and at all times.

Q. Can you give the committee a statement of the outside work that you have done?

A. That would be a pretty difficult thing to do.

Q. Have you any means of furnishing a statement?

A. Nothing but my memory.

Q. Suppose you were called to New York to examine a patient there, and you do go and make an examination, and receive a fee, and return home, do you make any record of that?

A. No, sir; I do not think I have been often enough to necessitate my making a record of it.

Q. So that you would not make any record of it?

A. No, sir.

Q. Has it been an unusual thing during the last five years for you to go away from the asylum upon such private employment?

A. Yes, sir; it has been an unusual thing; I have been asked and pressed to go to various places; to go to Canada, Connecticut, Massachusetts and Rhode Island; and also to go through this State, and my usual reply has been, I have usually refused to go and unusually gone. I went once to visit a person while I was away, when I went to Boston on a visit; I went out to see a person there; I got a very pressing letter from a physician in Michigan, who somehow or other learned I was there in Boston. I was there visiting an uncle of Mrs. Gray; she had gone down there on an anniversary, or something of that kind, to the Rev. Dr. Lathrop's on the occasion of his birthday. He had

asked me to go before and I had refused, but inasmuch as I was in Boston, and that it was a particular friend,I thought I would comply with his request, and I did so. But, as I stated, I have refused to go in a large number of cases; I have declined to go to New York a number of times this year, and I have written a long letter rather than go; I have sent Dr. Ford of this city; Dr. Ford was formerly an assistant here. I have sent him and I have sent some others with whom I was familiar, to attend to such matters in place of me.

By Mr. RICE:

Q. When were you last called to any private consultation, outside of the hospital, doctor?

A. Within a few weeks in a case in this city.

Q. Have you been employed as an expert in any private or civil cases within the last year or two?

A. I went once in the case of Mrs. Fillmore's will at Buffalo; that occurred a short time ago.

By the CHAIRMAN:

Q. And did you receive a fee as an expert in that case?

A. Yes, sir.

Q. Have you been to New York city recently as an expert in any case?

A. No, sir; do not recall any.

Q. Can you not state some period of time that you have been engaged, in the aggregate, in this line of expert business; can you not state that you have not been engaged more than a certain definite time within the last two years?

A. I think I could; yes, sir.

Q. Take the year 1883, can you state about what portion of the past year you think you were away from the asylum on expert work?

A. During the past year, taking out cases where a judge has directed me to go down and examine into cases, one a criminal case at Ithaca, I should say that I do not think I have been away a week altogether.

Q. For this past year?

A. Yes, sir.

Q. How much were you away the previous year, if you recollect?

A. Not at all, that I can now recall; yes, sir, I was away in a case that year; I went down to see the daughter of a sick friend; there is that occasion and the instances I have mentioned.

Q. During the time you were absent on account of your illness, did you perform any professional work of such a character?

A. No, sir.

Q. None whatever?

A. No, sir, except what I would do anywhere, and in cases that would go without any particular fee; nothing more than to see a person who was a child of a very dear friend of mine, which I would do now.

By Mr. MORGAN:

Q. How much time did you devote to expert business in 1882?

Mr. RICE — That is the year he received his injury, is it not?

A. Yes, sir.

Q. How much time did you spend that year in expert business?

A. Not any.

Q. In 1881 how much time did you spend in that direction?

A. I do not recall any, except the case of Guiteau.

Q. How long a time were you engaged away from the asylum in the Guiteau case?

A. I was subpœnaed before he was tried — or rather I was not subpœnaed, but I was telegraphed to, and I declined; I had not read a word about the case, and I did not want to go; then I got a kind of a telegram that the board of managers thought that unless I went voluntarily, after receiving that, that I should be compelled to go, and I thought I had better go; that was some days, and I think it must have been two weeks before the trial; I went down then and examined him and made a report verbally, and afterward that report was taken down by a shorthand reporter and I came home, with the expectation —

Q. (Interrupting.) Having been occupied about how many days?

A. I think I must have been there a week; I think I left here Friday night and did not get back until Saturday of the following week; then I was not expected to go back to Washington until near the end of the trial; then I was to go back as an expert witness; on Saturday night I got a telegram saying "return to Washington at once" — or words to that effect — "we need you here;" I went there then, and then I was there some time.

Q. State how long you remained there then?

A. Well, I remained there then until some time in January.

By the CHAIRMAN:

Q. How many weeks were you there at that time?

A. About six weeks — well, more than that, it was about two months.

Q. And then did you return home to Utica?

A. Yes, sir.

Q. And you did not return again to the trial?

A. No, sir; then afterwards I got a communication requesting me to go to Washington, they desired me to examine the exceptions taken during the trial, and I went back there.

Q. For a short time?

A. Yes, sir; I was only there a short time on that occasion.

Q. How long did you spend there on that occasion?

A. I think, I went either the last of February or the first of March, and came home on the sixteenth day of March.

Q. Making about a fortnight that you were there?

A. Yes, sir; just about a fortnight.

Q. Now go back to the year 1881, how much time did you spend away from the institution during that year in professional occupation, including your lectures?

A. Well, it is so little that I cannot really tell.

Q. How much time altogether do your lectures take annually at Bellevue; how many days absence from the institution in a year?

A. Well, they are all comprised within two weeks; that is about all the time they take; I usually go down Wednesday afternoon at two o'clock, and lecture on Thursday and Friday morning, and then come immediately home; sometimes there are three lectures in that time; the highest number of lectures I have delivered have been twelve.

Q. Twelve in one winter?

A. Yes, sir; one winter term; then three years ago I only delivered four.

Q. Can you recall any other professional expert work that you have performed outside of the asylum in the year 1882 except the Guiteau trial?

A. No, sir; I cannot just now.

Q. Can you recall any other professional work outside of the institution?

A. In the year 1879 on my way to Europe, I stayed over a day in New York, I went down the day before I sailed; that was in a case there that I attended and I spent a day there; and I think I went up to Batavia in that year.

Q. On a private case?

A. No, sir.

Q. Is that a case where you were subpœnaed?

A. No, sir; I have not always been subpœnaed; I have generally gone at the request of the district attorney. These were both in cases of violence or threatened violence; it would not be public business in every sense, of course.

Q. You spoke about going to Europe; how long were you away on your trip to Europe?

A. I was away from June of that year until the 6th of September.

Q. Was that a pleasure trip?

A. It was a pleasure trip partly; I went to visit the institution for the insane on the other side of the Atlantic, in Scotland, France and Italy, and of England especially.

Q. And did you visit such institutions?

A. Yes, sir; I visited the principal institutions.

Q. Were your expenses paid entirely by yourself?

A. Oh, entirely; I have never been away anywhere except to

meetings of the associations, or of the superintendents, except my expenses were paid by myself; except on occasions that I have gone for the institution.

Q. In the year 1878, can you recall how much time you spent in private professional employment outside of the institution?

A. I have been in some cases that I cannot confine to any particular year; but, in thinking it over, it was not very much; perhaps it was a month; but I will look the matter up and after lunch I will state it.

Q. Do you recollect of an instance where you were employed, about that time, to inquire into the mental condition of a gentleman in New York, where you were paid a considerable fee?

A. Yes, sir.

Q. Please state about what time that occurred?

A. That occurred — I think it was either '78 or '79; I cannot state just when that was.

Q. About how much time did that occupy you away from home?

A. I did a good deal of that work at home here during the evenings; I did it at night time, that is, reading it over; when I have such matters to engage my attention, I usually attend to them in the evening; I should say it was about fifteen days that I was away from the institution, because I went at several different times.

Q. What was the nature of your employment in that case?

A. It was a private case; the nature of the employment was this: I was employed to make an examination into the mental condition of this gentleman to whom you refer; to examine him and then to read the testimony, and the papers, and various things upon the subject, and then form my opinion upon all those things.

Q. What was the occasion of such inquiry?

A. It was in relation, I think, to the recovery of the charge of his property; or to create a trustee for his property, I think that was it.

Q. Did you perform a portion of that work in the institution here?

A. Yes, sir; I performed a portion of that work in this institution, as I have stated, during my evenings.

Q. What compensation did you receive in that case?

A. I received for the whole of that work, $1,800.

Q. Did that include your disbursements?

A. Yes; every thing.

Q Were you engaged in any other case within the last three years in the city of New York in which you received a large fee?

A. Yes, sir; I was in the Vanderbilt will case.

Q. In what year was that case heard?

A. That must have been before; no, I think it was after the last named case that I spoke of; I cannot state positively whether it was before or after, it may have been after; I think it was in 1878 or 1879.

Q. Was that before the death of Mr. Vanderbilt, or was it upon the occasion of the contest of his will?

A. It was the contest of his will.

Q. About how much time did that occupy you away from this institution?

A. The three times that I was there upon that case — I think it was only three or four days; I was there three times, and two of those times I was on the stand, and it was when I went down to lecture. Then I spent some time in reading over the testimony; I read over a large amount of it here, nights. I think I ought to say in justice to myself that I never read or wrote a line of any such matter within the twelve hours required by the work of this institution; it was done between nine o'clock at night and two o'clock in the morning; at which time I read that testimony. And in the other case I referred to I did not take any of the time from the services or labors required by the institution, except the time I spoke of when I went to New York.

Q. As a witness?

A. Yes, sir.

Q. That you stated, I believe, was three or four days?

A. Yes, sir; well, it was more than that; I had to go down three times; the first time I went down I could not find them at all, they gave me no clue to any thing, told me to go there and meet them, and I could not find them.

Q. Did it occupy you two weeks?

A. No, sir; I don't think I was occupied two weeks in that matter.

Q. Did it occupy you one week?

A. Yes, sir; perhaps more than one week.

Q. Between one and two weeks, did you say?

A. Yes, sir.

Q. Will you state what it was you received in that Vanderbilt case?

A. That was not the Vanderbilt case that I was speaking about; I was talking about the other case.

Q. How much time did you occupy in the Vanderbilt case?

A. I should think it was ten or twelve days, and probably twice as many nights.

Q. The nights were occupied here?

A. Yes, sir; except one or two.

Q. But you spent twice as many nights in the institution as you were engaged days there?

A. Yes, sir.

Q. What was your compensation in that case?

A. I received exactly the same compensation as in the former case — $1,800 — the same as the other case I mentioned.

Q. Do you recall any other case in which you have received large fees?

A. No, sir. In justice to myself I ought to say that in regard to the statements that have been made about my outside engagements ; two or three years ago I looked the matter up to ascertain if I had gained any thing financially from expert testimony, and the reason of it was that Mr. Woodin's committee asked me in that direction, I thought the matter over, and I thought that the amounts that I had received, including the occasions when I had received nothing and paid my own expenses — that the amount that I received had not up to that time compensated me; that is, I did not think I had received more than I had paid out for disbursements and expenses in connection with such cases.

Q. That Woodin testimony was not taken until 1880, was it?

A. Yes, sir; that is when it was taken, and since then I had made up my mind that I would not go away on such matters unless I was compelled to go; I had looked the matter up previous to the time of taking testimony by the Woodin committee.

Q. Do you now consider that you ought not to accept this outside work?

A. Yes, sir.

Q. You consider it as inconsistent with your duties here at the asylum?

A. I do not know that I could answer it in that way ; I think somebody, occasionally, has to go to such places ; I have appealed to the board of managers to prevent me from going.

Q. When have you made such appeals?

A. I did that recently ; I did it in the case of Smith, in Cattaraugus county some time ago, and in a case a number of years ago — the Buckhout case, and under the advice of Mr. Kernan I tried to resist it.

Q. Was that a case where you were subpœnaed to go?

A. No, sir ; I had not been subpœnaed, but I was requested to go.

Q. Do you receive a substantial fee in such cases?

A. Yes, sir ; but I do not want to go through the labor and anxiety and strain of it and the stress of it; but the result was in both of those cases that I was compelled to go by their sending for me and compelling me.

Q. Mr. Haskell, by a subpœna?

A. Yes, sir ; by the sheriff and a demand of the court.

Q. Have you ever refused to accept employment as an expert where a substantial fee would have been expected?

A. Yes, sir ; I have on several occasions where it has been offered and where they have said to me "you may make your own terms." I have declined such cases within the last few years several times.

Q. Why did you make such refusal?

A. Because I did not want to do it ; and do not want to do any thing of the kind unless compelled to.

Q. For the reason you believe it is your duty to stay here?

A. Yes, sir; and because I preferred not to go.

Q. Was there any other cases in New York city, where you have had an opportunity to receive a considerable fee, that you have declined to accept employment in?

A. Yes, sir.

Q. Within the last few years?

A. Yes, sir; within the last four years I should say; any way within the last seven.

Q. What reason have you to believe that you have had substantial fees in those cases?

A. I was told by the attorneys in such cases — by the counsel — that I could make my own terms. In some of the cases I have been assured that my fee would be liberal; some have used that expression — your fee shall be liberal; and in other cases, as I have stated, I have been told that I might make my own fee, but I have declined a great many times in such cases. Some of the cases were represented to me as being in connection with estates that were reputed to be very large. I remember of two instances where I was informed that they would give me a retainer, but I said I had never received a retainer in my life for any thing of that kind and never would take one; that when I had got through with the services, then that whatever they were worth, I would receive that.

By Mr. Rice:

Q. Within the last month, doctor, have you been called upon for counsel either at the institution or in private matters outside of the institution?

A. Not beyond the case I have mentioned.

Q. Has that occurred within a month?

A. No, sir.

Q. Have you, since the 1st of January, been called upon for consultation in private cases or at the asylum or at any other places; if so, how many times?

A. Yes, twice; persons have been here to see me on two occasions.

Q. When you received compensation?

A. Yes, sir; for which I received compensation; and there has been a number of times in which I have not received compensation.

Q. Besides the cases that you have spoken of, where people have come here to take your advice, have there been cases where you have given such advice for which you received no compensation?

A. Yes, sir, for which I received no compensation.

Q. How many of those cases have occurred since the 1st of January?

A. I should say about six where I have given advice and have declined to receive any thing.

Q. During that period of time have you been called upon in cases in the city of Utica or in other places?

A. Never, except the instances I have spoken of; except in one case, I have declined to go several times within that period.

Q. Now go back and take the last four months; how many times

have you been called upon either here or at other places in private matters to give counsel in such matters?

A. In consultation or attendance do you mean?

Q. I mean in consultation; where your time was actually taken up in consultation in private cases?

A. I do not now recall a case.

Q. You have no memorandum of such things?

A. No, sir; I have been once up to Vernon to see Mr. Williams, but that was a complimentary thing and I did not charge any thing.

Q. I do not think the question of charge is of very much importance to the committee; I want to get at the *time* you spent in such matters more particularly?

A. I went up there on Thanksgiving day at one o'clock, and I came back about four or five o'clock in the afternoon; I rode out to Clinton on Sunday, and came back the same day; and I rode out on the afternoon of another day; I cannot think of any thing else, unless you have any suggestions to make; if you have any matter in mind, and will call my attention to it, I may be reminded of something.

Q. Would the call made upon you here and elsewhere average one a day?

A. For my going out?

Q. In the case of persons calling upon you here to see you in a private capacity upon professional matters, or of your going away from the asylum in that capacity, would such cases average one a day?

A. No, sir; they would not amount to twice a week.

Q. Would they amount to more than once a week?

A. I do not think that they would; I doubt very much whether they would amount to that.

Q. That you are called upon here at the institution and elsewhere?

A. Yes, sir; in the majority of cases that come here I consider them a sort of official thing, especially if they are cases where insanity is threatened; I have been asked for advice as to what they should do or what they should not do; a man called the other day to see me privately and personally; he wanted to see me about a member of his family; I told him what I thought he ought to do, or he wanted to bring the person here; I considered it within the line of my official duty to give advice to a person in such a case as that, but I do not think I have taken much of my time in that way; I have taken very little time here away from the duties of the institution, and I will say on oath that I do not recall a duty that I have neglected in connection with any person who has ever come here for advice and counsel, whether it has been for pay or not for pay.

Q. To what extent do the physicians connected with the institution go away, if at all? Are they called away for professional expert work not connected with the institution?

A. Not very much; I think Dr. Brush is the only one, with the exception that Dr. Pilgrim has been down — was away in regard to some case — down to Fort Plain, some time ago.

Q. Do they ever go on private professional employment?

A. No, sir, not often; I think they have sometimes.

Q. It is not unusual for them to go?

A. Yes, sir, it is rather unusual; that is, to go away on private employment, and for fee, I mean; yes, it is rather unusual.

Q. But they do it sometimes?

A. Yes, they do it sometimes.

Q. Do you regard that as a proper thing for them to do, consistent with a thorough performance of their duties here?

A. Taking into consideration the particular cases for which it is done, I do not think any of the duties of the institution are neglected; I have done things myself that, perhaps, do not belong to me to do, but there has been no duty neglected.

Q. Have any of them gone to New York city on such employment as that, or to Buffalo?

A. Yes, sir; Dr. Brush went to Buffalo on the Filmore will case; I do not think he has been to New York, but he has been down to Johnstown, and one or two, perhaps three or four, other cases; he was up the other day at the Haight trial.

Q. Was he employed there as an expert by private parties or was he subpœnaed?

A. No, sir; the district attorney came to see me about the matter, and I told him I could not possibly attend to it; that I could not have any thing to do with it; Dr. Brush went, and he was subpœnaed by the county and paid by the county for going there.

Q. I hand you this pamphlet or book; please look it over, and state if it is a printed copy of the rules and regulations of the State Lunatic Asylum?

A. Yes, sir; that is a copy of the rules and regulations.

[Marked Exhibit No. 1.]

Witness — I was inquired of by your chairman, Mr. Howe, as to the number of suicides that have occurred in this institution during a certain period of years past; I promised him that I would prepare such a statement; here it is (presenting the same to the committee).

Said statement is marked "Exhibit No. 2," and is as follows:

EXHIBIT 2.

Suicides in New York State Lunatic Asylum from January 1, 1871, to January 1, 1884.

NAME.	Residence.	Admitted.	Age.	Married or single.	Children.		Suicidal on admission.	How accomplished.	Date.
S. B.	Steuben county	May 30, 1872	63	M.	4	Melancholia	Yes.	Suspension	June 6, 1872
D. L.	Tompkins county	Nov. 18, 1872	47	M.	2	Melancholia	Yes.	Cutting femoral art'y.	Nov. 20, 1872
B. M.	Dutchess county	May 23, 1871	23	S.	....	Sub-Acute Mania	No.	Suspension	Sept. 17, 1873
J. S.	Erie county	Mar. 28, 1873	55	M.	8	Acute Mania	No.	Suspension	May 9, 1874
T. F.	Oswego county	Feb. 19, 1874	24	S.	....	Acute Mania	No.	Suspension	Dec. 6, 1874
J. P.	Queens county	Nov. 22, 1867	56	M.	9	Melancholia	Yes.	Suspension	Apr. 16, 1875
C. T. B.	Genesee county	Dec. 15, 1875	40	S.	....	Acute Mania	No.	Drowning	Aug. 15, 1876
D. P.	Albany county	Dec. 3, 1875	31	S.	....	Melancholia	No.	Cut throat	Mar. 14, 1876
U. S. H.	Oneida county	Nov. 26, 1876	49	M.	5	Melancholia	Yes.	Suspension	Nov. 18, 1877
M. E. A.	Chemung county	Dec. 28, 1876	41	M.	5	Melancholia	Yes.	Suspension	Mar. 13, 1877
C. G.	St. Lawrence county	Dec. 11, 1877	37	M.	3	Melancholia	No.	Suspension	Mar. 24, 1878
D. W.	Chenango county	Mar. 1, 1878	46	M.	4	Melancholia	Yes.	Suspension	Apr. 27, 1878
Wm. M. R.	Oneida county	May 7, 1878	38	M.	1	Melancholia	Yes.	Throw'g under engine	Aug. 27, 1878
H. W.	Cattaraugus county	Jan. 29, 1879	42	M.	3	Acute Mania	No.	Suspension	Oct. 7, 1879
D. B. H.	Madison county	Dec. 21, 1878	40	M.	2	Paresis	No.	Suspension	June 22, 1880
L. P.	Montgomery county	Oct. 20, 1881	58	M.	2	Melancholia	Yes?	Strangulation	Oct. 23, 1881
T. J. B.	Lewis county	Feb. 2, 1882	53	M.	6	Melancholia	Yes.	Strangulation	Feb. 11, 1882
Wm. R.	Onondaga county	July 28, 1883	22	S.	....	Melancholia	No.	Drowning	July 21, 1883

WITNESS — In order that the committee may be enabled to institute a comparison between this asylum and similar institutions abroad, I have prepared an abstract from the English reports, the Blue Books. This book shows the number of patients in the asylums referred to, the number of attendants, the restraint used, labor, amusements, exercises, etc., etc.

The book referred to is marked "Exhibit No. 3," J. H. M.

By Mr. HASKELL:

Q. Can you furnish to the committee a tabulated statement of persons receiving physical injuries from the year 1875 to the present date? And will you make such a statement?

A. Yes, sir.

Q. From what source is derived the information furnished by Exhibit 3?

A. It is from the Thirty-third Report of the Lunacy Commission of England, made in the years 1879–80. It is an analysis of certain facts pertaining to fifty-eight of the public institutions of England, relating to the number of patients, their recoveries, the proportion of attendants employed to patients, the restraints, seclusions, injuries, employment, amusements, exercise, wages, and such like information.

Q. And this is an analysis that you have made yourself?

A. Yes, sir.

Q. And you consider it a fair digest or analysis of that report?

A. Yes, sir.

By Mr. MORGAN (resuming):

Q. Do you know the case of Mrs. S——, of B——, who called upon you at the asylum in relation to her daughter who was afflicted with insanity?

A. She was afflicted with some kind of nervous disease.

Q. Do you remember when she called?

A. Yes; it is some two or three years ago, or four years.

Q. She came here to the asylum and saw you here?

A. She came here a great many times; she came here and was annoying me almost.

Q. What did you charge her for each visit she made to you here?

A. A very small sum; I do not remember, but if I had taken all her visits and every thing else, it would not have been a dollar.

Q. Did you not charge her five dollars for every visit?

A. I did not.

Q. She was a poor woman?

A. No, sir; I don't know that she was poor, she never said so.

Q. And you did not charge her $5 a visit?

A. No, sir; nor $4, nor $3 a visit.

Q. How much would it have amounted to?

A. It might have amounted to a dollar or two dollars a visit.

Q. And that was received by you individually?

A. Yes, sir; that was received by me.

Q. The asylum fund is not credited with any of those receipts?

A. No, sir.

Q. Do you remember the case of Mrs. B—— from D—— R——, who came here to have you investigate herself and see whether she was insane?

A. Yes, sir; one night, I remember her very well; she wanted to get a sort of certificate.

Q. She came for an examination of herself to be made here?

A. Yes, sir; and some other things.

Q. You gave her a certificate, did you not?

A. No, sir; I did not give her a certificate; she wanted me to write to her brother or some one, she wanted a certificate of her condition, or something like that.

Q. She wanted a certificate that she was not insane?

A. Yes, sir; she wanted that I should write a history of what I believed to be her exact condition.

Q. Now, how much did you charge her?

A. Five dollars.

Q. Did you understand that that was all the money that she had?

A. No, sir; she did not say so.

Q. Did she make any complaint to you that it left her without money to provide for her wants?

A. No, sir; if she had made one word or intimated that she had not abundant means, or that she had not enough, I should not have charged a cent, although it took my evening up.

Q. She went away from here in the dark?

A. Yes, sir.

Q. And you say that you had no knowledge that she was left without means to take care of herself?

A. No, sir; not at all, if I had, I should not have charged her any thing at all; if she had intimated to me that she was a poor person, in limited circumstances, I should not have charged her a cent.

Q. Whatever you did receive, n.00 or whatever it was, it went to you individually, and the institution was not credited with it?

A. No, sir.

Q. Doctor Ford, to whom you referred, is a practicing physician in this city, is he not?

A. Yes, sir.

Q. You regard him as a very able man in cases of insanity do you not?

A. Yes, sir; and generally as an able physician, very competent in his profession.

Q. But he is especially adapted and qualified for cases of insanity?

A. Yes, sir.

Q. In your opinion, with a man of his ability in the city of Utica,

as Dr. Ford, do you not think it would be better in all private cases to send such cases to Dr. Ford, or some other competent practitioner?

A. I have done it generally, have given them notes to him, given his address and sent them there to him.

Q. He was a long time connected with the institution?

A. Yes, sir; I have not intended to do any thing outside of my duties here, but some of these very cases that come to me have been to him first; and when I have spoken about sending them to him, they would say that they had been to see him.

By the CHAIRMAN:

Q. I observe in the Rules and Regulations of the asylum a provision that the asylum shall be visited by the whole board at the annual meetings, and by a majority at the quarterly meetings, and by individual members at other times; is that rule observed?

A. Yes, sir.

Q. Is there an executive committee of the board of managers?

A. It is not called an executive committee, but it is practically an executive committee; there is a business committee.

Q. Which meets how often?

A. I do not know how often they meet; they do not meet here.

Q. They do not meet here?

A. No, sir; they have the auditing of the bills and every thing of that kind; they do not meet here for that; they meet in the town somewhere.

Q. At the treasurer's office?

A. I suppose so, but I do not know that.

Q. Is there any regular system of inspection of the asylum by any of the managers?

A. Yes, sir; in the first place they meet at the quarterly meetings and at the annual meetings, and at those times they do; and then I suppose — I do not think there is a week in the year that some of the managers are not here; I think I may say that Mr. Campbell, the president of the board, averages in coming here to see what is going on — I think I may say twice a week; that would be his average.

Q. Does he then go through the institution himself occasionally?

A. Yes, sir; occasionally, but not usually; he looks over things generally, and I consult with him a great deal in regard to matters, and also with General McQuade, chairman of this committee who audits the accounts; he comes here a great many times to see how matters are going.

Q. Does he then merely come to your office, or does he go over the wards?

A. Sometimes he goes into the wards, and any complaints that he hears, or any thing at all, he is in the habit of speaking about them at once; and Mr. Swann, a member of that committee, is here often, and I have consulted him in legal matters.

Q. Is there any regular weekly inspection by one or more of the board of managers?

A. No, sir; no regular weekly inspection; it has not been done in that way since I have been here; there used to be such a rule at one time.

By Mr. HASKELL:

Q. Down to what time was there a rule requiring weekly inspections?

A. Not since 1842–1843.

Q. There has been no regular weekly inspection since 1842 or 1843?

A. No; that is, if you mean by an "inspection," going all over the house.

Q. That is what I mean.

A. No, sir; there has not been.

Q. So that the actual supervision of the managers is occasional?

A. Yes, sir; as the occasion requires; it has been more with reference to the business part of the institution than the medical, they have not been so much in regard to that.

Q. That is, they have attended principally to the business management?

A. Yes, sir; the business matters and management of the institution.

Q. And they left the direction and management of the house—

A. (Interrupting.) To me; all the medical matters and the patients, etc.; that has been left to me.

Q. And they have not particularly supervised that?

A. No, sir.

By Mr. MORGAN:

Q. In your judgment, would it not give more satisfaction to the people of the State if some of the board of managers could be residents of some other county, outside of Oneida county?

A. There has always been until this last time; heretofore, until within the last two years — they have resided in various parts of the State, and we have always had a doctor on the board. This is the first time in the history of the institution that there is no doctor on the board, there ought to be one medical man on the board.

Q. You are aware that the complaint is made that it has become a "local" board?

A. I have seen that, Mr. Morgan; Dr. Vanderpoel, of New York, was superseded last year by one resident of Utica.

Q. Who took Dr. Vanderpoel's place; Senator Lowery?

A. Yes — no; he took Mr. Cox's place, and it was about the same time that they were appointed. In previous years the board were scattered about the State. The law requires, and I think it is a proper thing, that five of the nine managers shall re-

side within five miles of the institution, because they ought to be here to be called at any time; there ought not to be any time when the superintendent cannot call upon a majority of the board in regard to any difficult matter.

Q. Outside of that number — five — a majority, in your opinion would it not give better satisfaction if the managers were distributed in other parts of the State than Oneida county?

A. I think so.

By the CHAIRMAN:

Q. I am informed that at other institutions for the insane in this State there is a regular weekly visitation by members of the board who are appointed in rotation, and who make such visitations regularly, and on such occasions go over the whole institution?

A. Yes, sir.

Q. Would you think such a weekly or frequent visitation desirable for this institution?

A. I think that kind of visitation, in that way, of non-medical persons, would be likely, while it might satisfy the public, I think as far as the institution and patients are concerned, it would not be a benefit; they could not do any thing except look at them; they could have no knowledge of what was necessary to do for their discipline, their care, their medical direction, or any thing else.

Q. Would not the regular visitations at uncertain times have an influence upon the attendants?

A. I did not quite complete what I was going to say; I think that occasional and irregular periods of visitation would be beneficial; that is delegated somewhat, now, under the law, I suppose, to the State Board of Charities and State Commissioner in Lunacy.

Q. How often do the Board of Charities send a representative to this institution?

A. Once or twice a year there is one of their representatives in this city.

Q. How often does any member of that Board visit this institution during the year? Do you say it as often as once or twice a year?

A. Yes, sir.

Q. Upon such occasions does such representative pass through the wards?

A. Generally.

Q. How often does the State Commissioner in Lunacy visit the institution?

A. From three to five times.

Q. Upon such occasions does he go through the wards?

A. Yes, sir; generally goes more or less without me; I present to him every instance of complaint, or requests of persons wishing to be examined or any thing else, and let him examine them alone.

Q. Are you accustomed to report to the State Board of Charities the proceedings of this institution or its condition, etc?

A. I do not make a report to any person except to the board of managers.

Q. Have you been requested by the State Board of Charities to make any report to them?

A. Yes, sir; I have been, and should have made it — made all reports except one — an inventory that has not been given.

Q. What is the excepted one that you have not made at their request?

A. It is what I think would be called an inventory — a classified inventory of materials and things used, etc.

Q. Why have you not made such report?

A. Simply because I referred it to the board of managers, I had not the time, or means, or arrangements to do any thing of the kind.

Q. Did the board of manages direct you not to comply with the request of the State Board of Charities?

A. Oh; I could not make it; I merely referred it to them, and they did not direct me one way or the other.

Q. Is that the only inquiry of the State Board of Charities that you have refrained from making?

A. The only inquiry I have refrained from making to the Board.

Q. How often has that request been made?

A. I think it has been made twice; two or three years ago; not within two years, I think.

Q. Are you informed as to whether a similar inquiry has been made of all the other institutions in the State?

A. Only from what I saw in their report.

Q. Does it appear by that report that other similar institutions have complied with the request?

A. Yes, sir; I believe it does.

Q. Are you aware of any that have not complied?

A. The institution at Buffalo; I only know from what I saw in the report.

Q. So that this institution and the Buffalo asylum are the only institutions subject to the visitation of the State Board of Charities, which have refused to comply with the request?

A. That is what they say; I have not made any refusal to do it, you know.

Q. It is the board that has refused, is it?

A. Well they stated — I heard them state — I heard some of the statement — I was once in the Comptroller's office, in the presence of Mr. Van Antwerp, who asked me about it in the presence of Comptroller Davenport; he asked me why the board did not do it, I said — or why I did not do it; I said I would do it if the board directed me; that I did not think I had any authority in the matter unless I was directed to have some person do it. He asked why the board did not do it, I said the board had communicated to Mr. Devereux the reasons; he pressed me, and I said that Mr. Campbell, the president, thought it was an unbusiness like and nonsensical affair, of no use to anybody in the world; that it would be of no use, would not be worth the paper it was done on; that it was not accounting but was simply an inventory which would be changed the day after it was made.

Q. An inventory that included what?

A. Oh! it included various items that were used in the asylum and classified them; for instance, we make a report to the Legislature of all our expenses, for labor, expenses for gas, lighting, fuel; of incidental expenses of patients, miscellaneous expenses of patients, which means funeral and all those sort of things and expenses, and all matters pertaining to certain classified heads. Now this inventory would be included under that; but the Board of Charities want a detailed list, for instance, how many spools of cotton, how many skeins of thread, how many dozen of pins and needles, and to tell for what they were apportioned. How many — well, in other words, all the information that is asked for there by them is on the books here, and can be found — it is under the several heads of expenditures, detailed and openly spread on the books, and they are all fully and clearly set forth in items in the books of this institution.

Q. Is that information conveyed to the State Board of Charities in any other form?

A. Yes, sir; it is classified under those various heads, and the beoks are always open to them.

Q. Do you make that report to them?

A. Yes, certainly; it is made every year.

Q. As a special report to the State Board of Charities?

A. Yes, sir.

Q. And as distinguished from the annual report of the asylum made to the Legislature?

A. Yes, sir; now, I noticed the other day an article somewhere, in the *Argus* I think it was, that we had declined to do this with reference to private patients. Those items are clearly set forth in the public report — what. we receive from public and private patients. The only thing we have objected to doing — that I ever objected to doing — was with reference to Mr. Apgar, when he asked me to give him the names of every private patient in the house, I told him I could not do it; I told him that from the treasurer he could get his books, and he could see the names of every private patient, but that we would not be justified in giving the names of any persons to put in public print; that the friends would uot permit it, and that we thought it would be unprofessional. He went to the treasurer, and he did not know what I had said, and so the treasurer declined to give the names unless he got an order from the board of managers, and the board of managers declined to permit it; they said he could see the books, but he declined to give the names to be printed, or go forth to the friends; and that I think is the only thing I have ever refused to do, and that I deemed it my duty to do; I am frequently requested not to do so. I may be wrong in declining to give these names of private patients, but that is the way we regard it.

Q. Are you satisfied that the board of managers are right in their refusal to make this report to the State Board of Charities?

A. I don't know about that; I would not like to pass judgment upon that; for myself I do not see any particular use it could be put to; I do not see what use the inventory could be to them. I do not see that there would be any objection to appointing somebody to make it; it would require the work of a couple of months.

By Mr. OLIN:

Q. Every year?

A. Yes, sir, every year; I do not see what good it would do; it would not throw any light on the management of affairs here, or upon what those articles were used for; whereas the original books here that we always open to the Legislature, Comptroller, Board of State Charities or State Commissioner in Lunacy, they are always open and always contain an account, classified, of the articles that are used in the asylum.

By Mr. MORGAN:

Q. J. C. Devereux of this city is upon the State Board of Charities?

A. Yes, sir.

Q. How often has he visited this institution for the past year?

A. I should much rather he should answer that himself.

Recess until two o'clock P. M.

AFTERNOON SESSION.

TWO O'CLOCK, P. M.

James Mulherrin, sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside?

A. Twenty-seven Henry street, Utica.

Q. What is your age?

A. Twenty-nine.

Q. How long have you been employed in the asylum?

A. Since July, 1882.

Q. What is your business here?

A. Night-watch.

Q. Upon what ward?

A. The ninth ward.

Q. How long have you been engaged here in the asylum as night-watch?

A. Since the 16th of May, last.

Q. Who is the night-watch with you, on your ward?

A. Mr. Somers takes my place when I am away from the ward for any thing.

Q. How many patients are there under your charge, nights?

A. They vary from thirty-four up to thirty-six; sometimes thirty-eight and forty.

Q. Are there any violent cases on your ward?

A. No, sir; generally melancholy, suicidal, and such.

Q. When the patients are violent, what is done in reference to securing them?

A. Well, there is the covered beds there on that ward, and we report them to the doctor, if they become so that —

Q. When they go to bed orderly, what do you do with your patients?

A. I see that they remain in bed.

Q. And see that they go to bed, or are put to bed?

A. Yes, sir.

Q. What do you do with reference to the room, is it locked?

A. No, sir; their rooms are left open all night.

Q. In case of a disturbance, what do you do?

A. I call up the attendants if it is necessary.

Q. Where are the attendants of ward nine, with reference to the ward?

A. They sleep on the ward?

Q. Can you call them without going to their room?

A. No, sir; not very well; the ward is quite long; probably 200 feet; there are three dormitories and a hallway, and it is quite long.

Q. When there is a disturbance made, you report to the attendant — what is then done?

A. There is a report sent to the doctor immediately to find out what the trouble is.

Q. Who takes the report to the doctor?

A. I go sometimes myself, and do not notify Mr. Somers, the general night-watchman; he is the general watchman, who patrols all the wards; goes around every hour; but he generally takes word to the doctor, Mr. Somers does.

Q. Suppose you go yourself to make a report to the doctor, in that case who stays to watch while you are gone?

A. The attendants; I generally make a practice to call them up; that is the doctor's orders.

Q. Do you at any time go and call the physicians of that ward without getting an attendant to take your place?

A. No, sir; never.

Q. Have you had any difficulty with the patients on your ward when on night watch?

A. No, sir; never had any more than to speak to them, and as a general thing I can reason with them sufficiently to show them the benefit for them to remain in bed; and when they do not, I report to the doctors, as I told you.

Q. Does it sometimes happen that a patient gets up and goes out of his room?

A. Yes, sir.

Q. Then, in that case, what do you do?

A. We generally reason with them and they go back to bed; if they repeat it frequently, we have orders from the doctor to put them in the covered bed; that is when they do not remain in the open bed.

Q. Do you have any difficulty in getting them into the covered bed?

A. No, sir; I have never had any difficulty.

Q. Have you ever had any accident occur by their being put in that bed?

A. No, sir; never; we have had one man throw things over a patient, and over those around them.

Q. Do the patients object to going into the covered bed which is commonly called a crib, is it not?

A. Yes, sir.

Q. Do they object to going in there?

A. Not to my recollection; I have not had any object.

Q. Have you ever called assistance to put one into a covered bed?

A. I don't think I have.

Q. That bed is made of hard wood and strong material with a cover that goes on and fits into hinges and is then locked?

A. Yes, sir.

Q. It is sufficiently open to be well ventilated?

A. Yes, sir; well ventilated.

Q. Have you ever sent for a physician to come to the ward in the night when he has not responded?

A. No, sir; I never have; they are always willing to respond and be woke up every hour if it is necessary.

Q. Have you ever had a physician come into the ward when he said to you that he thought it was not necessary that you should have called him; that you could have got along with the patient without; or ought to have got along with the patient yourself?

A. No, sir; they always recommend us to call them on the least provocation, and never object to it in any way, shape or form.

Q. You never had a physician say to you: "In this case you ought to have got along with this man yourself, without calling me"?

A. No, sir; never have had any such thing.

Q. What instructions do the physicians give you in reference to your duties, and what you shall do?

A. The general instructions is to see that patients sleep well, and that they do not harm themselves during the night, and if it is necessary, or if any thing that is necessary, to call them and inform them immediately, and they attend to it.

Q. Have you at any time had any difficulty with patients, that is, I mean personal encounter?

A. No, sir; not to my recollection.
Q. Did a patient ever strike you?
A. Yes, sir; I have had patients strike me, but I never retaliated.
Q. Have you ever been charged with striking a patient?
A. No, sir; I believe there is nothing on the minutes of the asylum charging me with any thing of that kind.
Q. Have you ever been brought before Dr. Gray on any charge?
A. No, sir; neither Dr. Gray, nor any of the physicians.
Q. Have you ever been brought before Dr. Dryer, the steward, upon any charge?
A. No, sir.
Q. Who employs you?
A. Well, Dr. Gray, under the instructions of the steward, I believe; the steward is the one, I believe.
Q. Do you know who the steward is?
A. A. Yes, sir; Mr. Dryer.
Q. Before you were employed, what examination or investigation was made in reference to your fitness for the place?
A. I'd not really know how I could answer that question.
Q. You were called, or rather you made application for a position, did you not?
A. Yes, sir.
Q. Through whom did you make your application?
A. Through Judge Coxe.
Q. And he made the application here?
A. Yes, sir.
Q. How long had Judge Coxe been acquainted with you?
A. He was spoken to by a gentleman in the city here.
Q. Were you acquainted with Judge Coxe when you made the application to him for a position here?
A. No, sir; I had no personal acquaintance.
Q. What had been your business before that time?
A. Photographing.
Q. For whom?
A. Anthony & Company.
Q. Traveling?
A. No, sir; I never done any traveling.
Q. After making this application that you have spoken of, were you directed to come to the asylum; If, so, who directed you?
A. My friends recommended me to come here; I had been out of a situation quite a while.
Q. Did you come up here without being notified by Judge Coxe or anybody else?
A. Yes, sir.
Q. When you came here who did you make application to?
A. Mr. Dryer.
Q. What was then done by Mr. Dryer in reference to your case?
A. I was notified to come the next day; a place was vacant.

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Q. You came and saw Mr. Dryer, and what took place between you and him then?

A. I don't understand you.

Q. You say that you applied to Judge Coxe to assist you in getting a situation, and soon after that you came to the asylum to see Mr. Dryer; you saw Mr. Dryer?

A. Yes, sir.

Q. What occurred between you and Mr. Dryer at that interview?

A. Nothing further than to tell me the duties of the place and what was required of me as attendant, to be faithful, etc., and perform my duties to the best of my ability, and telling me the regulations of the house.

Q. Did he make any investigation or inquiry of you as to your former business, and your education?

A. Of me personally?

Q. Yes?

A. No, sir, I do not think he did; I think it would be better of him to make such inquiries from other parties; he did not do it to my recollection.

Q. Did you see Dr. Gray at that interview?

A. No, sir.

Q. Then Mr. Dryer told you to report to such a person for duty?

A. Yes, sir, for duty.

Q. How much were to have a month?

A. Twenty (20) dollars for the first six months and board in the institution.

Q. For the first six months twenty dollars—how much after that?

A. Twenty-two dollars.

Q. Has your pay been advanced from twenty-two dollars?

Y. Yes, sir; I am now night watch and board at home.

Q. What do you get now?

A. Forty dollars and board at home.

Q. Do you go on watch in the evening?

A. Yes, sir.

Q. At what time?

A. Eight o'clock.

Q. And at what time are you relieved in the morning?

A. The bell rings at six in the morning in the winter months when the attendants gets up, and when every thing is in shape, I retire then.

Q. Is there any particular hour when you are permitted to leave; is that hour fixed?

A. That hour is fixed for the other night watchman.

Q. Upon ringing the bell at six o'clock in the morning it is the duty of the attendant to rise?

A. Yes, sir.

Q. And as soon as they take their places you go?

A. Yes, sir.

Q. And you go to your home and remain there until eight o'clock at night?

A. Yes, sir.

Q. How often do you see Dr. Gray?

A. I do not have any personal business with him.

Q. Does he come on to your hall at any time, or on to your ward when you are there?

A. No, sir; the physician in charge of the north side comes.

Q. Who is he?

A. Dr. Pilgrim.

Q. How often does Dr. Pilgrim come on to your ward while you are there?

A. Never, except when it is necessary for him to come; when he is sent for.

Q. Does he come at any time except when he is sent for?

A. No, sir; the patients are all in bed then, and the house is all quiet.

Q. Do you get the patients up in the morning before you leave?

A. Some of them; as soon as the bell rings I wake the attendants up, and then, may be, myself, I get some of them up and get them dressed and bring them to their respective halls; most of the time the other attendants see to their patients.

Q. There are patients on your hall that are day patients on other halls?

A. Yes, sir.

Q. Then you did not hire out to Dr. Gray; you hired out to Mr. Dryer?

A. As I understand it, Mr. Draper has the hiring of the men.

Q. You hired out to Mr. Dryer, and not to Dr. Gray?

A. Yes, sir — no, sir.

Q. Did Dr. Gray make any examination of you in reference to your fitness for the place?

A. No, sir.

Q. Made no inquiry of you, whatever?

A. No, sir; not of me, personally.

Q. When did you come here, did you say?

A. July, 1882.

Q. And have you been here continually ever since?

A. Yes, sir.

Q. And during the whole time, have never been called before the superintendent?

A. No, sir: nor before any of the physicians.

Q. How is the conduct and treatment of the attendants toward the patients on your ward and on others?

A. As a general thing I have found that they have been exceedingly kind to them, so far as my observation went.

Q. There have, I suppose, been some cases where they have been unkind, and have handled patients pretty severely?

A. The only case I recollect of that came under my observation,

and I can think of now, has been some cases where they have had to hold them in chairs while they were in their spells, and the insanity would pass off.

Q. In any of those cases have there been any injuries complained of by the patient?

A. No, sir; not as I know of.

Q. In your ward they have a stationary heavy chair?

A. No, sir; not in that ward; there is none there.

Q. When a patient gets up and sometimes exhibits more insanity than usual, they sit him down in a chair?

A. Yes, I believe that is the way they do.

Q. Suppose a patient insists upon getting up and walking round, what do they do then?

A. In the night time?

Q. In the morning, or before you put them to bed?

A. Patients in all cases, is allowed the full sweep of the hall to exercise themselves, walking up and down, etc., and when they become noisy, or liable to injure other patients by striking them, I have noticed in all cases where attendants have taken them and set them in a chair until that insanity would pass off.

Q. Have you known of any instance of one patient injuring another?

A. Yes, sir; it very frequently happens.

Q. How is that done?

A. More or less through their delusions; they form a delusion against most any one at times.

Q. They get a spite against some one that is a patient?

A. Yes, sir; and strike them.

Q. How do they usually attack the one that they want to vent their spite upon?

A. As a general thing they have the same method as a sane person would — with their fist.

Q. Is there any thing in that hall that they can use as a weapon to inflict an injury upon another patient?

A. No, sir; every thing is properly secured, except they break their arm on a chair.

A. Are the attendants allowed to carry pocket knives?

A. No, sir.

Q. Or pistols?

A. No, sir.

Q. Or any thing in their pocket by which they could injure a patient?

A. No, sir.

Q. You have never been out walking with any of the patients?

A. No, sir.

Q. Have you at any time done day duty at any time here?

A. Yes; I did day duty previous to being night watch.

Q. How long were you engaged in day duty?

A. I was engaged in day duty not quite a year.

Q. And what were your duties then?
A. Dining hall man.
Q. Worked in the dining hall?
A. Yes, sir.
Q. And did you ever have any difficulty in the dining hall?
A. Nothing further than speaking to a patient; probably they would get cross and speak to them; you would have to be firm with them and speak to them.
Q. Did you ever see any demonstration by the patients in the dining hall?
A. As a general thing they are always very good in the dining hall, and they seem to be inclined to eat, etc.
Q. After they have got through eating, how is it, do they go out — I suppose that when they come into the dining hall, they are all marched in line?
A. No, sir; we do not as a general thing march them in line; they are notified by the call man that the dinner is ready, and they all go up just the same as most any man would do — go to dinner.
Q. Do they all have their own places at dinner?
A. Yes, sir.
Q. And do they take that place?
A. Yes, sir.
Q. When they get through eating, do they get up and go away without waiting for any signal?
A. As a general thing the knives and forks are collected before they leave the table, to see that they do not carry out any thing to do any injury to themselves, or others; the knives and forks are all collected.
Q. After the knives and forks are all collected, then what do they do?
A. They are allowed to go on to the floor for exercise, in the hall, so that the dining-room can be straightened up again, when it comes to the time to take the knives and forks.
Q. Do the patients get offended frequently when that is done?
A. No, sir; I have never known them to.
Q. Have you ever known a patient securing a knife and fork?
A. Yes, sir; I have had some try to hide away a knife and fork, occasionally.
Q. Do they ever succeed in getting from the table on to the hall with a knife or fork?
A. No, sir; never have known of one in my experience.
Q. Then the care and vigilance is sufficient to prevent that?
A. Yes, sir.
Q. Can you think of any mistakes, errors or abuses that have come within your knowledge since you have been in the asylum in any department?
A. Of the patients?
Q. Of any one whatever — or any neglects or abuses of any kind?

A. I have never had any strict account, and it would be hardly fair for me to rely on my memory.

Q. Do you remember of any lack of duty in any one that came within your observation?

A. No, sir; I think I have noticed that every thing, and every one has fulfilled their duty always.

By Mr. Rice:

Q. I wish you would not say what you think — tell us what you know?

A. I have noticed since I have been in my position in this house, everybody has fulfilled their duty.

Q. Has there ever been an attendant discharged from your ward since you have been here?

A. No, sir.

Q. Either when you were on day duty or on night duty?

A. There has been several discharged since I have been on night duty, though I don't know any thing about them.

Q. Any attendants, I mean?

A. No, sir; not when I was on duty.

Q. Have any of the attendants upon that ward been discharged?

A. Yes, sir; there have been some.

Q. Do you know who was discharged from your ward; what attendant — do you remember the name?

A. There was none discharged while I was on day duty on my halls; but since I have been on night duty, I believe there has been some discharged, but I don't know what they were discharged for.

Q. Have you known who they were that were discharged; that is, what their names were?

A. There have been so many there since I have been around that I don't know as I can recollect any names.

Q. Have you ever known of any attendants coming on duty under the influence of liquor?

A. No, sir; I have never seen any.

Q. There have been a great number of attendants discharged from here for intoxication, have there not?

A. Not to my knowledge; as a general thing we do not hear what they are discharged for.

Q. Then they are discharged without your knowing what they are discharged for?

A. Yes, sir; of course it is a practice not to inquire into such things.

Q. Can you now recollect of any attendant having been discharged where you have thought that he had not done his duty, and where you could yourself see the reason for his being discharged?

A. I don't think I could see the reason for his being discharged; I might have if I knew the reason, but I don't know as I knew.

Q. Do you say that you have not seen any misconduct or want of

attention on the part of an attendant by which you, in your judgment, thought he ought to be discharged?

A. I cannot get the meaning of your question?

Q. Can you call to mind a single instance where you thought that an attendant should be discharged because you thought he was not a proper man for that place, and thought he had better be discharged?

A. I do not think I have seen where they have; but I can't get the drift of your question.

Q. Do you known of any case where an attendant has been kept upon the ward, or in the employ here, where you thought he was not a fit person for the place?

A. I have seen or heard of some that had not performed their duly as required by the officers, but as I thought they had performed their duty very well.

Q. Can you name one?

A. Mr. Williams; he had remained away over night without permission.

Q. He left the institution and was gone away over night and came back the next day?

A. Yes, sir.

Q. You thought that there was nothing wrong abeut that, did you?

A. Well, I did not see as it was; I thought it was not very bad.

Q. It is strictly against the rules for a man to absent himself without permission?

A. Yes, sir.

Q. And that is such a violation of the rules as that you understand an attendant ill be discharged for doing it?

A. Yes, sir.

Q. You have nothing to do with the female department?

A. No, sir.

Q. Do you know of any one who is now retained here who has been absent over night without leave?

A. No, sir; I don't know of any body.

Q. Have you ever seen an attendant who was under the influence of liquor?

A. No, sir; I have never seen one.

Q. That is a violation of the rules as you understand it?

A. Yes, sir.

Q. Have you ever heard of any one being discharged for that reason — for intoxication?

A. I believe there has been one instance of it since I have been here.

Q. Do you remember who that was?

A. No, sir, I can't think of his name; I was trying to think of it, but I can't tell it now.

Q. Is that the only one yon think of?

A. Yes, sir.

Q. The only one you think of since 1882?

A. Yes, sir.

Q. If any one were so discharged you would be likely to hear of it among the other attendants?

A. I think it is likely that I would.

Q. They speak about those things among themselves, do they not?

A. Yes, sir; they do, but I have not spent much time among them, and lately I do not see them at all.

Q. Did you know Mr. Hughes?

A. I knew him by being introduced to him when I came on duty that night.

Q. He was on your ward?

A. Yes, sir.

Q. And it was your duty to look after him?

A. Yes, sir.

Q. How was he when he came into your ward? Did he come to your ward when he first came here, or was he transferred to your ward afterward?

A. I did not know he was on the hall when I came on duty at night.

Q. And whether he had been in the asylum any length of time, or not, you do not know?

A. No, sir; I did not know.

Q. Was he upon your ward when he met his accident?

A. No, sir.

Q. What ward was he on then?

A. The fourth ward.

Q. He was not on your ward at the time he received his injuries?

A. No, sir.

Q. Did you hear it talked about by the patients, about the injury?

A. Not then.

Q. How did he behave on your ward?

A. Up to eleven o'clock he remained in bed, and after that, when he began to revive from the effects of chloral that he had received, he began to get out of bed, and did not remain in bed, so that when I went to supper, Mr. Somers put him in the covered bed.

Q. What time did you go to supper?

A. A quarter past eleven.

Q. Who did you say put him in the covered bed?

A. Mr. Somers; the other night watch.

Q. And kept him there until morning?

A. Yes, sir.

Q. Was he noisy while in bed?

A. Yes, sir; noisy all night — very much disturbed.

Q. Did he make violent efforts to get out?

A. No, sir.

Q. He was simply noisy?

A. Yes, sir; calling on folks at home, telling them that there was

such and such things in the cellar that they could get if they went there.

Q. Did you inform the doctor of his condition?

A. Yes; I notified Mr. Somers and he notified the doctor; I believe it was Dr. Pilgrim that night.

Q. Did the doctor come?

A. No, sir; they sent him some quieting medicine.

Q. Did you notify the doctor? Who gave him the quieting medicine?

A. Mr. Somers brought it from the physician.

Q. Who gave it to Mr. Hughes?

A. Mr. Somers.

Q. Were you there when he gave the medicine to Mr. Hughes?

A. Yes, sir.

Q. Was that when he was in the covered bed?

A. Yes, sir.

Q. After he was recovering from the effects of the chloral?

A. Yes, sir.

Q. And the doctor did not come?

A. No, sir.

Q. Did he come at any time during the night?

A. No, sir; he was not notified again after that.

Q. At what time was the doctor notified?

A. The doctor was notified between twelve and one o'clock.

Q. And Mr. Hughes you say remained all night long, quiet?

A. Yes, sir.

Q. And you did not notify the doctor again?

A. No, sir.

Q. Who gave him the chloral?

A. I don't know as I read in the paper who the physician was; I saw it in the paper that he had received chloral before he came to the institution, and that kept him clear up to that time.

Q. You do not know, as a fact whether he had received chloral or not?

A. No, sir; not until between twelve and one o'clock, when the physician of the asylum sent it to him.

Q. Did he send him chloral?

A. He sent him night medicine, and I believe there is usually some in it.

Q. Was this the first night this man was in the institution?

A. It was the first night he was in the institution; he was sent to the ninth ward, that is the suicidal ward; then he was transferred to the fonrth ward.

Q. How long did he remain in your ward?

A. He was there when I left in the morning.

Q. He stayed there one night?

A. Yes.

Q. Did you find him there when you came on duty?

A. I found him when I came on duty.

Q. At what hour?
A. Eight o'clock.
Q. And he was then sleeping quietly?
A. Yes, sir; I think so.
Q. Was he sleeping?
A. Yes, sir; I passed through the dormitory and he was asleep at my first and second visit through the dormitory.
Q. How many beds are there in that dormitory?
A. Ten.
Q. Did the other patients complain that he was disturbing them?
A. Yes, sir.
Q. When he was taken and put in the covered bed was that in another room?
A. Yes, sir; that is in another room.
Q. A room off to the end of the hall?
A. Yes, sir.
Q. When he was put in that covered bed, was any notice given to Dr. Pilgrim of your intention to put him in the covered bed?
A. Yes, sir; we always do that.
Q. What word came back from Dr. Pilgrim?
A. To do the best we could with him and try and keep him quiet.
Q. The doctor did not come himself?
A. No, sir; he generally if he deems it necessary; he generally comes, most all the time, but on this case we simply reported that he was noisy.
Q. Do you ever put patients in the covered bed without instructions from the doctor?
A. No, sir.
Q. Does the doctor ever give any such instructions, or or does he usually give them without coming himself to see that they are carried out?
A. As a general thing he does.
Q. Does he come, or does he not — which do you mean?
A. Does not come.
Q. As a general thing he does not come — is that what you mean?
A. Yes sir; does not come.
Q. He sends word to you to put the patient in a covered bed?
A. Yes, sir.
Q. Does any doctor come into your ward to visit regularly, every night?
A. No, sir; not regularly.
Q. Usually the doctor does not come into the ward after you go on duty?
A. No, sir.
Q. It is a rare thing for the doctor to come into the ward after you go on duty?
A. He never comes except when he is sent for.
Q. After eight o'clock at night that is?

A. No, sir; he does not as a general thing; the patients are all in bed, and if they see the physician coming though it kinder disturbs them, and they want to talk with him. So I think it much better for them to remain away unless they are wanted.

Q. Who is the supervisor of your ward?

A. Mr. Jones.

Q. He is not there during the night?

A. No, sir.

Q. Where does he live?

A. He lives out of the asylum.

Q. He is not there nights?

A. No, sir.

By Mr. Haskell:

Q. When you found that the medicine Dr. Pilgrim sent did not have any quieting effect upon Mr. Hughes, why did you not notify him again?

A. I thought it was not necessary; when the first dose did not take effect, I supposed it would be useless to administer it any more to him.

Q. So that after notifying the physician, you use your own judgment as to whether it is necessary or best to do it?

A. For the physician to come?

Q. Yes; or sending again for medicine?

A. Well, we will simply notify the physician that a patient is sick.

Q. And after notifying the physician once, you think you have done your whole duty?

A. No, sir; if it is necessary, we send again.

Q. But you exercise your own judgment as to whether it is necessary or not to send again, after you have once sent?

A. Yes, sir.

Q. Do you not think that if Dr. Pilgrim had come and visited Mr. Hughes that night that he could have quieted him by medicine?

A. I don't think he could.

Q. What appeared to be the main hobby that Mr. Hughes dwelt upon?

A. On home, mostly.

Q. Did he talk as though he thought he was then at home?

A. Yes, sir; I think he did; he seemed as though he was talking with some persons; he did not mention any names; sometimes he would speak in Welch, and sometimes in English; he was saying that there was potatoes and apples in the kitchen, and that they could go and get them if they wanted them; that is what he was talking about.

Q. Is it a common occurrence on your ward for a patient to be awake and noisy?

A. Yes, sir.

Q. When a patient is awake and noisy, do you always notify the doctor?

A. Yes, sir.

Q. And do you ever notify the doctor a second time, if the patients keep up their being noisy and awake?

A. Yes, sir; we very often do.

Q. And notwithstanding the fact that you often do notify the doctor a second time in regard to some of the patients, you still say that the only reason that you did not notify him in regard to Mr. Hughes the second time, was because you did not think it necessary?

A. Well, sir, that is a pretty strong question to answer, probably it was a fault of mine for not notifying him the second time, but I did not see that any thing could be done for him any further than what was done.

Q. After the first occasion when you put him in the covered bed?

A. Yes, sir — no, sir; he was put on the covered bed before the doctor was notified; the doctor sleeps in the center here.

Q. How long after Hughes was pnt in the covered bed, before the doctor was notified?

A. Probably twenty minutes — from a quarter of an hour to twenty minutes; as soon as the other night watch came round; I told him he had better notify the doctor about it.

Q. Was that before or after you had supper?

A. After.

Q. Was he put in the covered bed before or after your supper?

A. It was while I was away at supper that he was put in the covered bed.

Q. Then you were not there present when he was put into the covered bed?

A. No, sir.

Q. Why did not Mr. Somers tell you to notify the doctor that he had put Mr. Hughes into the covered bed?

A. I don't know, it is probably a matter — he always goes to the physician and notifies him if there is any thing wrong in the different halls, so that I let him go.

Q. Why did he wait until you told him to go?

A. He was going his rounds in the other hall, and seeing that things were quiet; and I had to wait until he came round.

Q. You say that Mr. Somers put Mr. Hughes into the covered bed while you were at supper, and that you did not know about it until you found him in the covered bed when you came back?

A. Yes, sir.

Q. Did you know that he was going to put him in the covered bed when you went to supper?

A. No, sir.

Q. The first you knew was that you found him in the covered bed?

A. Yes, sir.

Q. And Somers did not inform the doctor until you called his attention to it, that he ought to?

A. No, sir; he did not.

Q. Did Somers say he had any difficulty in putting Mr. Hughes into the covered bed?

A. No, sir; he went in very quietly, he said.

Q. After you came back did Mr. Hughes ask to be let out of that?

A. No, sir.

Q. You stated he was noisy; did he talk very loud?

A. Yes, sir; very loud; you could hear him from one end of the hall to another.

Q. There was no way that you could quiet him?

A. No, sir; I tried to reason with him the best I could, but he was so much disturbed that it did not seem to take much effect upon him.

Q. Do you not think it would have been a good idea to have sent for the doctor and had him come and see if he could not do something for him; a new patient in a new place?

A. I don't know but it would have been a good idea.

By Mr. MORGAN:

Q. Suppose the Hughes case were to be repeated with another patient, suppose a new patient is brought into the asylum, and the first night, after sleeping a while quietly, he becomes violent — Mr. Hughes was violent, was he not?

A. Well, that I don't know; he was noisy, and what we call disturbed.

Q. Greatly disturbed, was he not?

A. Well, considerably noisy.

Q. If that case were to be repeated by another patient, would you be content with sending to a physician and his sending up a package of medicine for you to give the patient, would you be content with that if the patient continued disturbed?

A. I do not think I would; I should notify him again.

Q. Have you ever sent for a physician to come to your ward in the night?

A. Yes, sir; very often.

Q. Who did you send for?

A. There is two physicians for the north side, and either one of them comes; Dr. Pilgrim and Dr. Backus are the physicians, and one of them two comes.

Q. Have you ever sent for them when they have failed to respond?

A. No, sir; never.

Q. What message do you send when you want the physician to come?

A. That he is wanted.

Q. Do you report the fact that a patient is uneasy, or whatever

the fact is, and leave it to the physician's judgment as to whether he shall send medicine or come himself?

A. We leave it to his judgment.

Q. You do not send and ask that he shall come, but you send the facts and let him use his own judgment as to whether he will come or not?

A. Well, if the patient is sick, and it seems necessary for him to come and attend to them, he generally comes.

Q. Then sometimes you suggest the propriety of the physician coming, and sometimes you simply report the fact that there is some disturbance or sickness, or whatever it is?

A. Yes.

By the CHAIRMAN:

Q. How often do you see Dr. Gray up there; do you ever see him up there at night?

A. I have seen him up there, but not on my ward; I have seen him passing through the halls to attend to sick patients and perform services that are required.

Q. What time in the night?

A. I have seen him there as late as twelve o'clock several times, and sometimes between ——, well, whatever time, of course, he is called upon, but I never have seen him later than that.

Q. And never have seen him on your ward?

A. No, sir.

Q. How long have you been on your ward?

A. Since the 16th of last May.

Q. Upon which of the wards were you engaged while you were here as a day attendant?

A. I was here as an "extra" for a long time, and I was about the different halls; I have been on and about wards three, eight and seven.

Q. Now, during that time you say you were a day attendant for about a year?

A. Yes, sir; about a year or ten months.

A. How many times during that space of time did you see Dr. Gray on your ward?

A. The exact amount I could not say because I have never kept any record of it.

Q. Should you say it would be once in two or three weeks?

A. Yes, sir.

Q. Would it be as often as that?

A. Yes, sir.

Q. Oftener?

A. I do not think it would be oftener than that.

Q. Would you swear that there was any period of more than three weeks that he did not visit your ward?

A. I do not tink I would swear to that.

Q. Would you swear that he was there as often as once in every three or four weeks?

A. I do not think I could.

Q. Would you swear that he was there as often as once a month?

A. Yes, sir; I guess I could.

Q. You think you can swear that he was there on the ward as often as once a month during the time you were there?

A. Of course there was times when I would be away, I could not tell how often he was on there then, and Sundays and half days when I would be off duty, and I would not be able to tell about such times as that.

Q. I mean when you were there; during the times that you were there, do you think you saw him as often as once a month during that year?

A. I don't think I could.

Q. Would you swear that you saw him there once in every two months during that year?

A. I guess I could.

Q. You would swear to that?

A. Yes, sir.

Q. Can you swear you saw him as often as once in every six weeks during that year?

A. I don't know as to that.

Q. But you will swear that he was there as often as once in every two months?

A. I think I could swear to that.

Q. Do you think that would fairly represent the number of his visits within your observation, about once in every two months?

A. I think it would.

Q. In what part of the building was that — what ward?

A. As I said, I have been on so many wards.

Q. Now you are speaking of all the wards you were on?

A. Yes, sir.

Q. During that time then you were in nearly all the wards in the house on the male side?

A. Pretty nearly.

Q. When you left the hall where was Mr. Hughes?

A. He was still in the covered bed, I believe

Q. And when you came back on duty that night, he was gone?

A. Yes, sir.

Q. Did he complain in the morning before you went away of any pain?

A. No, sir; I was not speaking to him, and I did not remove him from the covered bed in the morning; the day men took him off.

Q. Was he awake and talking when you went away?

A. Yes.

Q. Did he sleep any after he was put into the covered bed?

A. He was a little quiet between five and six o'clock, but I don't think he slept any.

Q. Did you hear any complaint of pain or injury?

A. No, sir.

Q. When did you first hear that he had received an injury?

A. When I came on duty the following night.

Q. Who told you about it?

A. The day attendant on the hall.

Q. On your hall?

A. Yes, sir.

Q. The attendant that worked on the hall where he received his injury?

A. No, sir.

Q. Has any one talked with you in reference to your evidence in this case; that is, any one connected with the asylum; have they talked with you in regard to the evidence you were to give?

A. No, sir.

Q. You have not talked with Dr. Gray or any of the physicians?

A. No, sir.

Q. Or any of the attendants?

A. No, sir, I made it a practice to keep by myself.

By Mr. Haskell:

Q. Did you mention the fact to anybody that you had been subpœnaed?

A. I have to the attendants on the hall when your representative gave it to me; that night there was several standing by that see me get it, and I was asked about it.

Q. Have you had any conversation with Dr. Pilgrim?

A. In regard to the case?

Q. Yes, since you were subpœnaed?

A. No, sir.

Q. Dr. Backus?

A. No, sir; I haven't spoken to any one.

Q. Have you had any talk with Dr. Pilgrim at all since you were subpœnaed?

A. Upon business in regard to the hall, that is — notifying him him about patients, but nothing further.

Q. Then you have seen Dr. Pilgrim to talk with him about other patients since you were subpœnaed?

A. Yes, sir.

Q. And with Dr. Backus?

A. No, sir.

Q. Where and when did you talk with Dr. Pilgrim?

A. I talked to him last night, about a patient that was sick.

Q. Did you go and see him?

A. No, sir, he was on the hall then.

Q. Have you talked with Mr. Dryer, the steward?

A. No, sir,

Q. Have you seen him?

A. I saw him this afternoon as I came in.

Q. Did you have any talk with him then?

A. No, sir.

Q. And you have not had any conversation with any person connected with the asylum since you were subpœnaed about the fact of your having been subpœnaed?

A. No, sir, I haven't had any conversation further than with those that just asked me — those attendants — the night watch asked me was I subpœnaed, and I said yes; further than that I have had no conversation.

By Mr. Morgan:

Q. Is it a frequent occurrence for a patient to soil his bed at night?

A. Yes, sir, it is frequent.

Q. What do you do in a case of that kind?

A. Simply take him up and change him, that is, change the sheets and put on clean linen.

Q. You have to change the sheets in the room?

A. Yes, sir.

Q. Have you ever known of an instance where a patient who has soiled his bed, and as a punishment has had it rubbed upon him?

A. No, sir, I have not known of that.

Q. Did you ever hear of any thing of that kind?

A. No, sir, that would be nonsense to do that.

Q. Have you ever seen them, when mopping out or scouring the hall?

A. Yes, sir, I have been present when it was done when I was on day duty.

Q. Have you ever known of a patient interfering with an attendant?

A. No, sir, I do not recollect of any.

Q. And have you known of any insult given by an attendant to a patient at that time?

A. No, sir, I do not recollect that I ever did.

John Somers, sworn and examined, testified as follows:

By Mr. Morgan:

Q. Where do you reside when you are at home?

A. Green street, near York, city of Utica.

Q. What is your age?

A. I think — I am not quite certain — but I think it is forty-seven or forty-eight; I won't be certain.

Q. What countryman are you?

A. Born in Ireland.

Q. How long have you been in this country?

A. I will be here eight years the 14th of April coming.

Q. What was your business before you came to this country?

A. My business was a carpenter.

Q. How long have you been engaged in the asylum?

A. I came into this institution the 23d of May, 1876.

Q. What was your employment when you first came here into the asylum?

A. I was employed as an attendant on the sixth ward; as a day attendant.

Q. What pay did you get then?

A. Twenty dollars a month for the first six months, and twenty-two the next; and after a year I got twenty-four.

Q. How much are you getting now?

A. Forty dollars a month, and board outside.

Q. Are you now employed as night watchman?

A. Yes, sir.

Q. What time do you go on duty?

A. At eight o'clock at night I go on to the wards.

Q. What time do you leave in the morning?

A. Six o'clock.

Q. What ward are you on?

A. I am general watchman for eleven wards; there is one ward where there is a night watchman stationed all night, the suicidal ward; that is the ninth ward.

Q. What is his name?

A. Mr. Mulherrin.

Q. And your business is to patrol the institution?

A, Yes, sir.

Q. And you commence at eight o'clock at night and close at six o'clock in the morning?

A. Yes, sir.

Q. When you come on to your duty, are not the patients usually in bed?

A. Yes, sir; the majority of them are in bed, except the patients in the hall.

Q. State what your duties are; what do you have to do?

A. I have to make my rounds every hour through the wards, and any patient that is out of bed, or noisy, or sick, I have to see to them; I have to see that all gas-lights are turned out at the proper hour, and see that all the water-faucets are closed.

Q. What time does the gas have to be turned out?

A. The gas has to be turned out after the patients goes to bed; as soon as they go to bed the gas is turned out to take the light away from the patients, but the gas is burning in the attendants' rooms; I think they go to bed at ten o'clock; I have also to watch and guard against fire, and the like of that, and be ever diligent for to see what will occur; then we have to clean up the filthy men during the night; we have from thirty, thirty-five to forty filthy men that we clean up; twice during the night we have to take him and

clean him; thirty-five or forty; we do that twice in the night, if a man makes a mess we take him to the bath-tub and clean him up.

Q. And change his bed?

A. Change every thing; all that is mussed up.

Q. Who assists you in doing that?

A. Mr. John Ferris; he is the night watchman in the center; he goes with me twice in the night to help me clean up these men.

Q. Do you notify him at the time to go? A. No, sir; he goes with me at night and we change these men; that is about midnight; and we change them again about half-past three o'clock; it takes us an hour or an hour and a quarter to go through with the filthy men and get them cleaned up.

Q. How long does it take you to go the round of the eleven wards when you have cleaning up to do?

A. I should say twenty minutes or half an hour, according to what I have to do through the ward; if a man knocks to get a drink of water, or if I have to let him out to empty a vessel, or any thing, I can't tell how long it will take me, because I never timed it.

Q. Suppose a patient calls for a drink of water, what do you do?

A. I will take and get him a drink of water, or may be he will prefer to go himself, and then I go along with him and take him back to his room.

Q. Are they allowed to have a tumbler or a goblet in the room?

A. In some wards they have, where they can know how to use them.

Q. Where the patients can be trusted? A. Yes, sir; in some wards they have a mug.

Q. But in the wards where the vicious are they do not have them? A. No, sir; because you might get one of them in the forehead when you would go into their room, you know.

Q. Do you ever have the patients barricade the door?

A. Sometimes we do.

Q. What do you then do in a case of that kind?

A. Coax them and try to get them away.

Q. Do you always succeed?

A. Pretty much always.

Q. If you do not succeed, what do you do?

A. If we do not succeed, we would go and report the occurrence to the officer in charge of the north side, one of the doctors; we should not report that to a supervisor; he would come out to the ward himself; he would see and get it taken away.

Q. But you generally succeed in coaxing them to do it?

A. Yes; but sometimes, may be, we would have to send for a carpenter to cut the door and get the barricade away.

Q. How do they barricade them?

A. Sometimes they barricade the door with their bedsteads, sometimes they put a bureau, and sometimes they will put a bureau and the bedstead as well.

Q. And then it is effectually barricaded?

A. Yes, sir.

Q. Were you upon the ninth ward on the night that Mr. Hughes was there, the first night he spent there?

A. Yes, sir.

Q. Who put him into the covered bed?

A. I did.

Q. Why did you do that?

A. Because he would not stop in bed.

Q. What seemed to be the trouble with him? What disturbed him?

A. I could not say only he would not stop in bed; he was not speaking much at the time, and when he did speak I did not understand the language he talked in; he said it was Welsh.

Q. He talked Welsh a good deal, did he not?

A. Yes, sir.

Q. When you put him into the covered bed, did you have any trouble getting him in there.

A. No, sir

Q. What did you say to him? A. I told him that if he would not stop in bed, we would have to put him in the covered bed, so that he would have a good sleep, and be fresh in the morning.

Q. What did he say to that?

A. He did not answer me.

Q. When you said he must go into the covered bed, what was done?

A. He said he would go, or he did not say any thing to me, but he went as soon as I came out of the dormitory and came into the day-room he would come out after me; I would no sooner have the lantern set down on the table than Mr. Hughes would be out after me; I took another man out of the covered bed and I said: Now Mr. Hughes you get in there; he got in and I locked him down.

Q. There was another man that you took out of the covered bed?

A. Yes, sir.

Q. And put Mr. Hughes into that bed?

A. Yes, sir.

Q. What did you do with the man you took out of of the covered bed?

A. I put him into the open bed.

Q. Into Mr. Hughes bed?

A. Yes, sir.

Q. After you got Mr. Hughes into the covered bed, what did he do?

A. By this time Mr. Mulherrin came on duty again; I was there to relieve him when he went to his supper; I was not long there, about three-quarters of an hour.

Q. When did you next see Mr. Hughes?

A. The next time was between twelve and one o'clock; then when I was on my rounds looking up the other men, when I was coming up stairs, Mr. Mulherrin called my attention to that state

that Mr. Hughes was in, that he was very noisy and that I had better see the doctor.

Q. Did you go and see the doctor?

A. Yes, sir; I did; I went to see Dr. Backus.

Q. What did you say to him?

A. I told him that Mr. Hughes was noisy.

Q. Was that all you said to him?

A. That is all; I said he was noisy.

Q. Did you tell him you had had to put him into the covered bed?

A. I did not; because, on that ninth ward, at the time Dr. Josselyn was there, he told us any man that would not stop in bed on the ninth ward, we could take a quiet man out of a covered bed and put the man in that was making trouble.

Q. So that you put him into the covered bed without any other than that general direction?

A. Yes, sir.

Q. When you reported to Dr. Backus, you simply told him that Mr. Hughes was noisy?

Q. What did Dr. Backus say?

A. He prescribed some medicine for him and I carried it into the covered bed.

Q. Did he get up and get the medicine?

A. He did get up in his room and get the medicine.

Q. Do you know what he gave him?

A. No, sir; I don't know what medicine he gave; I don't know one medicine from another.

Q. How was it put up to give to him?

A. Out of a little cup with some water; I gave it to him according to the doctor's directions.

Q. Did he give you a powder?

A. No powder; it was some liquid medicine, you know, and I gave it to him in some water and he drank it.

Q. Did you have any trouble in getting him to drink it?

A. No, sir; he sat up half ways in a covered bed and he drank it and laid down, and that is all I know about Mr. Hughes.

Q. Did you raise the cover of the bed when you gave it to him?

A. Certainly; I opened it and he took the medicine.

Q. Did he make any complaint because you gave that to him?

A. No; he took it and drank it every drop.

Q. Why didn't you ask Dr. Backus to go up and see him?

A. I did not; if a man is merely noisy and singing, or any thing like that, the doctor will send them up something to keep them quiet; but if he was violent or sick the doctor would come.

Q. Did Mr. Hughes make any complaint of pain to you?

A. No, sir.

Q. Could you understand his talk after he got into bed?

A. No, sir, I could not; I did not know what he was saying.

Q. Do you know of cases where patients have been violent in the night?

A. Oh, yes, I have.

Q. In that case what do you do?

A. The doctor would come and see them.

Q. How is it reported?

A. Some one reports to the doctor that such a man was violent and he would go and see him.

Q. Did you ever know of a case in which the doctor refused to go, or did not go?

A. No, sir, never; the doctor was always willing to jump right out of bed and come along.

Q. When the doctor comes to see a man has he ever said to you that you might have got along without calling him—the doctor?

A. No, sir; never said a word of that kind.

Q. Or ever make any complaint?

A. No, sir; never heard the doctor make any complaint, and I have awakened them as much as four or five or six times in the night.

Q. Did you ever hear any of the patients complain that the doctor ought to come and see them?

A. No, sir; I would not hear them make any such complaint; some of them will tell me I have no right to keep them; that I should open the door and let them out.

Q. You don't obey them, of course?

A. No, sir; I guess not.

Q. Since you have been here, have you known of attendants being discharged?

A. I have known of attendants going away and it would be reported that they would be discharged and some one would say that they went away themselves; but I don't know, I can't say about that.

Q. Do you know of any attendants that have been here since you have been here, that you thought have not been doing their duty?

A. I could not exactly say as to that because it would not be my place to say to an attendant that he was not doing his duty.

Q. You could tell whether he was not doing his duty?

A. As far as I could understand some of them would be a little careless, and some of them would be not-so.

Q. Have you ever witnessed any injury to a patient since you have been here?

A. No, sir; that is the only injury that I have known of since I have been here.

Q. You were not present when this occurred?

A. I was not, doctor.

Q. Have there been any cases that you have observed where any of the attendants have neglected their duty since you have been here?

A. I cannot say that I do, doctor.

Q. Do you know of any case where an attendant has been away from duty when they ought to have been on duty?

A. I always see them attending to their duties, and they are in the house, that is, when I see them.

Q. Can you explain to us why it is that the attendants that are discharged from the institution all of them complain that there is harsh treatment by the other attendants?

A. I don't know; I never could see any thing; I don't think I ever saw an attendant treat a patient harshly, nor abuse them, or pound them.

Q. Never since you have been here?

A. Never, sir.

Q. Have you ever seen struggles between attendants and patients where an attendant undertook to have a patient go to bed, or sit down or keep still, where they have to struggle?

A. I have not; because where I was first put upon it was the sixth ward when I came here, and that is a quiet ward; the seventh ward also was a quiet ward, and I was also upon that, and on the suicidal ward; of course there was other wards and we were not allowed to visit from one ward to another; so that I could not tell what went on in another ward.

Q. The fourth ward is the most violent ward in the asylum?

A. Yes, sir.

Q. In your traveling around during the night on duty do you ever have any struggles with the patients?

A. I might say not much; of course when we get a man kinder ugly taking him out of bed to clean him up, you have to take hold of him with another man to help you clean him up; sometimes they are ugly.

Q. And they sometimes resist you, do they?

A. Yes, sir.

Q. When they resist, I suppose you use sufficient force to overcome their resistance?

A. Why, we put them in bed again.

(Q. Repeated.)

A. You have to use strength enough to put them into bed.

Q. Has there every been any complaint that you have been too harsh with a patient?

A. I have not heard anybody say so.

Q. Have you ever been called before Dr. Gray?

A. No, sir; never.

Q. Have you ever been called to account for any act you have done here?

A. No, sir; never.

Q. There never has been any investigation against you?

A. No, sir; never to my knowledge or belief.

Q. When you sought a situation here in the institution, what did you do?

A. I came here and applied for a situation.
Q. To whom did you apply?
A. To Mr. Dyrer.
Q. Did you have any recommendation from any friends?
A. Yes, sir.
Q. From whom?
A. I had recommends with me from Canada.
Q. From any asylum?
A. Yes, sir; Joseph Workman from the asylum at Toronto.
Q. Had you been employed there?
A. Yes, sir; I was there about a year and a half.
Q. When you applied to Mr. Dryer to a situation, what did he say or do?
A. He told me that my "testimonies" were very satisfactory; I showed him two or three; he said they were very satisfactory; he said he would let me know in a couple of weeks whether he would give me a place or not, and he sent for me and gave me the place; he sent up by word of mouth.
Q. Who did he send?
A. He sent word by John Graham, the fireman of the institution.
Q. And then you came to work?
A. Yes, sir.
Q. What then occurred?
A. Then he put me onto the ward.
Q. Was there something said about wages?
A. Of course; he did not say any thing about wages only that I would get twenty dollars for the first six months, twenty dollars for the next six months and then twenty-four dollars.
Q. Provided you discharged your duties satisfactorily?
A. Yes, sir.
Q. Did you talk with Dr. Gray any before you entered upon the discharge of your duties?
A. No, sir.
Q. Was there any examination or inquiry made about your habits?
A. No, sir; nothing.
Q. Didn't they ask you if you were in the habit of getting intoxicated?
A. No; I had "testimonies" that might satisfy any person in the State that I was not in the habit of getting intoxicated; I had some of the best recommends in Canada.
Q. Have you a family?
A. Yes, sir.
Q. Where do they live?
A. Green street.
Q. You remain at home during the day?
A. Yes, sir.
Q. And return here at night?

A. Yes, sir.

Q. Have you ever heard any of the patients complain of unkind treatment or neglect by the attendants?

A. Sometimes you would hear them complaining about the attendants.

Q. Have you ever had occasion to report of an attendant to Dr. Gray, Dr. Brush, or Dr. Pilgrim?

A. No, sir.

Q. Never occasion to report of an attendant as inefficient?

A. I have made a report about them leaving the doors open; I would report that to the doctor.

Q. Have you ever reported an attendant as inefficient; not doing his duty?

A. I never have, because there is the supervisor here; if he sees a man that does not do his duty it will be his place to report to the doctor, and then the man would be seen by the doctor; it is the supervisors, duty to report that.

Q. Suppose you should find an attendant that you were satisfied that he had not done his duty, what would he do?

A. I don't know.

Q. You never had a case of that kind?

A. No, sir; I have not.

Q. Have you ever seen attendants under the influence of liquor?

A. I did once.

Q. Who was he?

A. I forget his name.

Q. Did you do any thing in reference to that?

A. Yes, sir; I went and reported that.

Q. Who to?

A. Dr. Josselyn.

Q. What was the result?

A. He was discharged.

Q. How long ago was that?

A. I think it was last winter.

Q. Do you think they would permit a man to remain here as an attendant who got intoxicated?

A. They would not, or any man who comes in the institution the worse for liquor, he is reported, either by me or the other man, who is at the door, the other night watchman and then that man would be discharged in the morning.

Q. There has been a good many discharged within the eight years in which you have been here for intoxication, have there not?

A. There have been two or three; I cannot say exactly how many.

Q. Do you know of any attendants being absent from the asylum building without permission?

A. No, sir.

Q. Do you know of a case where an attendant has been discharged for that reason?

A. There was a man who went out without leave one evening; he stopped out about an hour or an hour and a half, and they discharged him for it.

Q. Do they enforce the rules here very strictly?

A. Yes, sir; they do.

Q. And have you ever known of a person violating the rules that those who knew of it did not report such persons?

A. No, sir; I do not.

Q. Have you ever had an attendant approach you and say he did not want you to report them?

A. No, sir; I do not remember any.

Q. Never had an occasion of that kind?

A. No, sir; an attendant would let me know any thing.

Q. Mr. Hughes was removed from that ward, was he not?

A. So I heard; I was not here.

Q. On the night following, did you see Mr. Hughes?

A. I did.

Q. Where was he then?

A. He was on the eighth ward; that was on the night following; that was the night after he was injured; he was injured on the fourth ward.

Q. Then after he received his injuries he was taken onto the eighth ward?

A. Yes, sir.

Q. Did you see him on the fourth ward?

A. I did not.

Q. He was on the ninth ward when you put him in the covered bed?

A. Yes, sir.

Q. What day did he come to the asylum?

A. It was the 25th January; that was the first night he was in the building.

Q. And that night you put him in the covered bed?

A. Yes, sir.

Q. On the 26th he was taken to the fourth ward?

A. Yes, sir.

Q. And it was on that day that he received his injury?

A. Yes.

Q. And then he was taken to the eighth ward?

A. Yes, sir.

Q. It was on the next day after he came that he was injured?

A. Yes, sir.

Q. Why was he taken onto the eighth ward?

A. Because it is a quiet place.

Q. That is a quiet ward compared with the others?

A. Yes, sir.

Q. What was being done with him when you saw him on the eighth ward?

A. He was lying in bed.

Q. Who was with him?

A. Dr. Gray was in with him, and Dr Backus and Dr. Pilgrim.

Q. What time did you see Dr. Gray there?

A. I think it was between nine and ten o'clock; Dr. Gray has been up there several nights with him afterward; I see him there at about eleven o'clock.

Q. What was Dr. Gray doing when you saw him there?

A. He was examining him and giving him nourishment.

Q. Could you understand any of the talk of Mr. Hughes?

A. No, sir; he talked Welsh.

Q. Did he appear to be in a great deal of distress?

A. He did not appear so to me; but I could not tell; I am not a physician, and of course I don't know.

Q. You saw him on that eighth ward several times after the injury?

A. Yes, sir.

Q. How long did he remain on the eighth ward?

A. I think he died on the Saturday or Friday forenoon.

Q. He died the next Friday or Saturday, as he was injured on the Saturday previous?

A. Yes, sir.

Q. How soon after his injury was it before you saw his son here?

A. I won't be certain what day it was that I saw him, because I took no note of it.

Q. Was Mr. Hughes uneasy after the injury?

A. I did not hear him; there was a man sat up with him in the room all the time after he received his injuries, and until he died.

By Mr. Haskell:

Q. That you saw Mr. Hughes, when you got the medicine; did you see him again that night; were you in the ninth ward again that night?

A. I was.

Q. Was Mr. Hughes still noisy?

A. Yes, sir.

Q. Why did you not report the fact to the doctor that he was still noisy, and that the medicine had not done him any good?

A. I did not report the second time.

Q. Why didn't you?

A. Well, I did not do it.

Q. Were you in there more than once that night?

A. I was in there back and forward; but I was not in the room with him, because the other night watchman was with him all the time.

Q. Did you hear him every time you came in?

A. I can't say now; I took the notes from the watchman in the morning; he reported him at twelve, one, two, three and four o'clock noisy and awake; at five o'clock I entered them in the note book.

Q. You say that on the ninth ward, with reference to those patients that Dr. Josselyn told you what to do about putting them into covered beds?

A. I say if they would not stop in bed, I was to do that.

Q. Did Dr. Josselyn tell you that you might put patients into the covered bed without informing him?

A. Yes, sir; them that would not stay in bed.

Q. When was that?

A. Some time ago; six months ago.

Q. Was Dr. Josselyn here six months ago?

A. Yes, sir.

Q. Is he here now?

A. No, sir; he is not here now.

Q. Is that done on the other wards? A. No, sir; we do not put a man in a covered bed unless by the doctor's orders; unless it is on the suicidal ward; and that was the first ime I ever put a man into a covered bed without an order; and if that order had not been given some time before, I would have gone and seen the doctor first; I should have gone and ask the doctor what to do about such a man, that he would not stop in bed, and then he would tell us to put him in the covered bed.

Q. How often do you go to a physician and get permission to put a man into a covered bed.

A. It is according to when it would be necessary.

Q. Hew often does that occur?

A. Not very often.

Q. Once or twice a week?

A. No, sir; sometimes, not often; but sometimes more often than at others.

Q. And you say that the doctor told you to put them into the covered bed whenever they are noisy and disturbed?

A. Yes, sir.

Q. How long ago is it since you were promoted to be night-watchman?

A. It will be six years in August.

Q. Then during the years 1876 and 1877, you were a day attendant?

A. Yes, sir.

Q. And you were employed on wards six and seven?

A. Yes, sir.

Q. During that time who were the physicians besides Dr. Gray?

A. There was Dr. Andrews and Dr. Livingstone; they were physicians when I was promoted to be night watch here.

Q. They were here during the time you were here as a day attendant?

A. Yes, sir.

Q. How often would Dr. Gray come through the wards that you were an attendant upon?

A. Several times; I cannot say how many.

Q. Several times during the two years?

A. Yes, sir; I knew of him coming several times on the first ward, but I could not say how many.

Q. How often would Dr. Andrews be up on the wards?

A. A couple of times a day; sometimes three times in a day.

Q. And at stated hours he would be on the wards without being sent for?

A. Oh, yes, sir; he often came into the wards in the evening.

Q. Did Dr. Andrews make a practice of being in the wards at least twice a day?

A. Yes, sir; on the wards that I was on.

Q. Who was the other physician?

A. Dr. Livingstone; there was him and Dr. Andrews; they were there every day, I should say; of course sometimes I might be out in the garden or on the farm, and then I could not say how often they would be on at that time.

Q. Then your duties took you on to the farm sometimes?

A. Yes, I took the patients out to work sometimes, after the work was done in the wards.

Q. How many other attendants were there on the ward at that time?

A. There would be four, that is, four regular attendants and the supervisor.

Q. How many patients?

A. Twenty-three or twenty-five; perhaps thirty; I could not say how many there were.

Q. And sometimes you used to take the patients out?

A. Yes, sir.

Q. Did you ever take the patients out walking?

A. Yes, sir.

Q. Did you go alone when you took the patients out walking?

A. No; other attendants would go with me, sometimes four or five.

Q. Did you make up a detail of patients from the different wards and take them out?

A. Yes, sir; there would be a man from each ward and from some wards there would be two or three go.

Q. Dr. Gray did not have any regular times for coming on to the wards?

A. No, sir; I don't think he had but I cannot say about that?

Q. You did see him occasionally on the wards?

A. Yes, sir; frequently.

Q. Did he come on to the wards on the occasion of the visit to the asylum of the board of managers?

A. I see him go through with nobody but himself sometimes; none of the managers with him, nobody but himself.

Q. Would he be there on the wards as often as once in three or four months?

A. I can't answer that question.

Q. How often do the managers of the institution go through the wards of the asylum ?

A. They used to go through here when they came and sometimes they would not ; that was at their meetings.

Q. What meetings do you refer to ?

A. When they had their meetings here for business.

Q. How often in the year do they meet here for business ?

A. I cannot tell you that.

Q. Would there be one of the managers or more than one ?

A. The whole board of them sir ; four or five together.

Q. During the two years that you were on the wards, do you think they were in there as often as twice in each year ?

A. Yes, sir ; I think they were.

Q. Do you think they were there any oftener ?

A. I could not say how many times they would be there.

Q. Do you think they were there more than once in a year ?

A. I would not swear how often ; because a man that is doing his work, why he don't have much time to pay attention to managers going through ; he is doing his work and he don't look for them.

Q. Do you know the board of managers by sight ?

A. Some I do and some I do not ; I know Mr. Anderson, but he is about the only man I do know ; I was taking care of his brother George B. Anderson, and that is all I know about him ; he was in here.

Q. What is the difference between the pauper patient and a pay patient ?

A. In what way do you mean ?

Q. In any way ?

A. Not any that we know about.

Q. You never notice any difference ?

A. No, sir.

Q. The pauper patients and pay patients receive the same food, do they ?

A. Yes, sir ; the same food and the same table ; I don't know much about that.

Q. Could you tell the difference between the patients ; which were pay patients or otherwise ?

A. No, sir ; sometimes we would hear that such and such a man was pay patient, and that such a man was county patient.

Q. You could only tell from what you heard ?

A. That is all.

Q. Do you know how much the pay patients were paying ?

A. No, sir ; I don't know any thing about that.

Q. When did you hear or learn of Mr. Hughe's being injured ?

A. When I returned, Saturday night.

Q. Who told you about it ?

A. I heard it in the ward.

Q. Do you recollect who told you ?

A. Yes, sir ; the attendants on the fourth ward.

Q. What are their names?

A. I believe it was Mr. Brown and Mr. Weir; I cannot remember which; I was speaking to them all about the occurrence.

Q. Then you did not learn of it from Mr. Brown or Mr. Weir first?

A. I learned there was an accident before I saw them; the doctor was the first one that told me of the accident, when I came in to receive orders.

Q. Which doctor?

A. Dr. Pilgrim; he told me that Mr. Hughes had happened an accident.

Q. That was the manner that Dr. Pilgrim expressed it?

A. Yes, sir.

Q. Did he tell you how serious an accident it was?

A. Yes, sir; he did; he said he had his jaw fractured, or some thing like that.

Q. What did he say about his ribs?

A. He said his ribs were hurted bad.

Q. Broken?

A. He said the ribs were fractured bad.

Q. Did he say that he thought that he was not going to live?

A. He did not; a physician don't say any thing like that to me.

Q. From whom did you first learn that he would probably die?

A. I didn't hear anybody say any such thing at all.

Q. Until after he was dead?

A. No, sir.

Q. You didn't hear there was any danger of his dying until he was dead?

A. Well, I thought myself that he looked poorly.

Q. Was the fact of his having been hurt on the ward a matter of general talk in the asylum?

A. It was talked among the attendants around in the ward; they talked about it several times.

Q. Did they say it was any thing very serious?

A. That I could not tell.

Q. Did they think there was any thing wrong about his being hurt on the ward

A. I can't say.

Q. Did they talk with you?

A. They talked and told how that they were sorry for the man's getting hurted.

Q. Did you hear anybody blame the attendants?

A. No, sir.

Q. Did anybody speak as if it were the attendants' fault?

A. No, sir; not as I heard; I didn't hear anybody say any such thing.

Q. Didn't they feel sorry for the attendants?

A. Yes, sir; sorry for the attendants as well as for him.

Q. Because they had got into trouble?

A. Yes, sir; I heard some of them said they was sorry for the boys getting into trouble.

Q. Who did they seem most sorry for — Mr. Hughes or the boys?

A. More for Mr. Hughes than they was for the boys.

Q. You heard them speak of being more sorry for Mr. Hughes than they were for the boys?

A. They were sorry for Mr. Hughes and sorry for the boys, that the thing had occurred.

Q. You did not hear anybody blame the boys?

A. I could not say that I ever did.

Q. Did you have any talk with Dr. Pilgrim at any time, excepting the first night, about Mr. Hughes being injured, or about his injuries?

A. I might say I did not.

Q. Did you talk at any time with Dr. Backus?

A. I did not; I had nothing to do with the man at all; they did not give me any orders about it because there was a man sitting up there with him; Dr. Pilgrim told me the first night about the accident occurring.

Q. Did he give you any orders in regard to Mr. Hughes the first night?

A. No, sir.

Q. He merely mentioned the fact that there had been an injury?

A. Yes, sir.

Q. Tell me every thing Dr. Pilgrim said about it?

A. I have told you; I cannot tell you any more unless I told you what wasn't so.

Q. You have told all that he said; did he tell you what ward Mr. Hughes was hurt on?

A. Yes, sir; he told me on the fourth ward.

Q. Did he say who had hurt him?

A. He did not, because they could not find out then.

Q. Did he say he could not find out?

A. Yes, sir.

Q. Did he state that he had tried to find out the cause?

A. At that time he did not know how it occurred.

Q. Did he say he did not know?

A. I don't know; when I came in Dr. Pilgrim told me there was an accident; he told me Mr. Hughes was hurt, and that he was sorry for it.

Q. You think that was all he said?

A. Yes, sir.

Q. Did he not tell you that it was on the fourth ward?

A. Yes, sir; I said sir, didn't I?

Q. Now start in and repeat all he said.

A. I have started and I have told you all I know about it, and what he told me.

Q. Now, tell me over again and say what you said, and give me the entire conversation that passed between you and Dr. Pilgrim, about Mr. Hughes getting hurt?

A. Dr. Pilgrim told me that Mr. Hughes had happened an accident on the fourth ward.

Q. What did you say?

A. I stated.

Q. Didn't he tell you where he was hurt?

A. He told me about it; and that is that his jaw was fractured and ribs was fractured and hurted bad.

Q. What did you say?

A. I didn't say any thing, only that I was sorry for it happening as same as any of the rest would be.

Q. What did he say — any more than that?

A. No, sir.

Q. Didn't he say he was sorry it happened?

A. Yes, sir; he was sorry it happened, too.

Q. Did he tell you then that he did not know how it happened?

A. I don't know; I can't say.

Q. Was there any thing said about your speaking about the fact of there having been an accident and about your not telling it outside the institution that there had been an accident?

A. No, sir.

Q. Didn't he say any thing about that — that you had better not speak about it outside the institution?

A. No, sir; I see that in the paper.

Q. Did you see it in the paper before you came to the asylum that night?

A. No, sir.

Q. There was nothing in the newspapers about Mr. Hughes being injured until several days after that, was there?

A. I can't say; I don't know.

Q. Didn't he tell you that it was not best to speak about it then until they saw how serious the accident was going to be, or any thing of that kind?

A. Not a solitary word; no, sir.

Q. Is there a rule or regulation in the asylum that prohibits your speaking outside of any thing that happens in the asylum?

A. I never heard of any such rule.

Q. Never heard of any such thing as that?

A. No, sir.

Q. Are not you and the other attendants cautioned about talking outside of what happens in the asylum?

A. We are cautioned nothing of the kind; what sort of a man would it be that would do that? Do you think I would go and talk about what goes on here? You would not go outside and tell peo-

ple what happens in the Legislature, would you? Of course a man wouldn't do any such thing as that any way.

Q. Is it not understood to be a rule that the attendants shall not talk about what happens in the asylum outside on the streets?

A. No, sir.

Q. Do they caution you about not mentioning the names of patients who are in the institution.

A. No, sir.

Q. Then you are at perfect liberty to go out and tell what is going on in the institution and what patients are here?

A. What sort of a man would it be that would go out and talk about what goes on?

Q. And it is left to the individual choice of any man whether he shall tell outside what he sees in the institution, and who is here and all about it?

A. No, sir; I don't know.

Q. You never heard that matter spoken of by anybody?

A. No, sir.

Q. When visitors are going through the asylum during the daytime you are permitted to, and there is no rule forbidding you to mention the names of patients to them?

A. No, sir.

Q. No such rule in the institution?

A. No, sir; as far as I know.

Q. And as far as you know you are at liberty to mention the names of patients?

A. I can't say about that.

Q. Do you know of any rule that prevents your mentioning the names of patients to visitors?

A. No, sir.

Q. With regard to this injury to Mr. Hughes — do you think you were at liberty, if you chose to, to make it known on the street that a man had his jaw and rib fractured on the fourth ward?

A. I don't know; I could not say.

Q. Do you think it would have displeased Dr. Gray and the other officials of the asylum if you had done so?

A. That is a thing I cannot, because I don't know.

Q. You would not have done it?

A. I don't think I would have; but I don't know whether it would displease the physicians or not.

Q. Was there any thing said to you about what you should say in answer to these questions?

A. No, sir; not one solitary word.

Q. Have you had any conversation with any of the members of the institution in regard to the investigation?

A. No, sir.

Q. When did you first know that you were likely to be subpœnaed?

A. I did not know any thing about it until I was subpœnaed.

Q. Do you recollect who told you that there was to be an investigation?

A. I don't know; it was in the paper; they said there was going to be an investigation.

Q. Have you not heard anybody interested?

A. No, sir.

Q. Have not the attendants spoken about it among themselves?

A. They knew about as much about it as I did; it was in the paper that a committee was coming from Albany to make the investigation.

Q. Have you heard any of the doctors or the steward speak about it?

A. No, sir.

Q. When did Mr. Hughes die — what time in the day?

A. I think it was in the evening; I was in the asylum at the time and I helped to carry him out to the dead-house.

Q. Have you ever read the printed rules hanging on the walls, and the rule contained therein about not giving visitors the names of any patients?

A. I don't know that I have.

Q. You have sworn that you have never heard of any such rule?

A. And I never did.

By Mr. Olin:

Q. Were you examined before the coroner's jury?

A. Yes, sir.

Q. Have you been examined at any time by anybody else touching the management of the asylum?

A. No, sir.

By Mr. Haskell:

Q. You never here say any thing about what happened to Mr. Hughes, as to who was to blame?

A. No, sir.

Q. Have you handled any violent patients?

A. Yes, sir.

Q. Do you not think you could have quieted this man without injuring him?

A. Well, I have handled a good many violent patients, and I know how to handle pretty good, but I cannot say that I could have done it any better; I cannot exactly tell you how it was done, you know; I can handle a patient pretty good myself.

Q. Do you think it was necessary to strike that man in the face?

A. I don't think it was; I think it was very wrong to strike the man's face.

Q. Do you think there was any thing out of the way to hit him in the stomach?

A. Why of course it is not right to hit a man in the stomach; 1

would not like to get hit in the stomach myself, and I don't think you, the learned counsel, would like it yourself.

Q. Do you understand that one of the attendants struck him with his clenched fist?

A. I have seen it in the paper.

Q. Did you hear any criticism of their conduct?

A. I heard some of the boys criticise them.

Q. Did you hear Dr. Pilgrim say any thing about it?

A. No, sir.

Q. He stated that he was sorry for them, did he not?

A. Yes, sir; he said he was sorry about it, as I said to you.

Q. Did you ever see any unkind treatment of patients by either of those three attendants, Brown, Weir or Bills?

A. No, sir; because I never see those men in the daylight, it is only at night that I am there you know.

Alexander Barrisdale, sworn, testified as follows:

Examined by Mr. MORGAN:

Q. What is your age?

A. Forty-eight.

Q. Where do you reside?

A. Utica; in the asylum.

Q. Are you married?

A. No, sir.

Q. How long have you been an attendant in the asylum?

A. Nearly twenty years.

Q. When you first came here, what were your duties?

A. My duties was the same as any other attendants.

Q. You were an attendant?

A. Yes, sir.

Q. Upon what ward did you go when you first came here?

A. No. 4 at that time, we call it No. 2 now; that is it was No. 4 then, but No. 2 now; I came on to No. 2 in the first place.

Q. What are your duties now?

A. Supervisor; my duties is to pass the medicine, communicate with the doctors, and see that the patient is properly clothed; and to keep the attendants' time; see that the attendants remain at their duty in each ward, and remains in their proper place.

Q. How long have you been supervisor?

A. Since 1868.

Q. What time do you have to go upon duty in the morning?

A. I arise at the ringing of the bell in the morning — six o'clock.

Q. And what time are you released from your duty?

A. I can't say that I am released from duty at any time while I am in the institution, at all.

Q. There is a time when you are permitted to go to bed, is there not, when you may be said to be relieved from duty for the day?

A. Oh, yes, sir; nine o'clock; or ten o'clock, just as I think proper.

Q. When you retire, who takes your place?

A. The watchman.

Q. The night watchman?

A. Yes, sir.

Q. Is there a night watchman on each ward?

A. No, sir; there is not.

Q. How many night watchmen do they have?

A. There are three on the north side, Mr. Somers, Mr. Mulherrin and Mr. Ferris.

Q. Now, in the performance of your duty, you watch and keep an eye upon the attendants, do you not?

A. Yes, sir.

Q. And see that they perform their duty?

A. Yes sir; to see that they do it properly.

Q. Have you had any instances where you have found that attendants did not properly attend to their duty?

A. Yes, sir.

Q. Take it within the line to which your attention is called, what attendants have you had that did not properly attend to their duty?

A. I cannot state any now; in the last year with the exception of those three that the —

Q. You mean Weir, Brown and Bills?

A. Yes, sir.

Q. You do not remember any others at present that have been discharged for inefficiency, or intoxication, or any other reason?

A. I do not really remember any at this time.

Q. Have you had occasion to report any attendants to Dr. Gray, or to any of your superiors?

A. Yes, sir.

Q. Within the last year have you had such occasion?

A. I could not remember that I have had since the last year.

Q. Well, you speak of some case — what was the trouble that made it necessary to report that attendant to Dr. Gray?

A. There was one case for intoxication, but I do not remember how long it is ago.

Q. You reported that to Dr. Gray?

A. It was reported to the head officers.

Q. Who did you report to?

A. He was reported by the night watch in the first place.

Q. To you?

A. No, sir; I believe he reported to Dr. Jocelyn, and he was discharged; he was under my supervision at that time.

Q. Do you know of any case of an attendants' being off from duty without permission — away from the asylum, without permission?

A. Yes, sir.

Q. What was done in that case?

A. That calls to my mind an attendant that was discharged for going out without permission; his name was John Sage.

Q. When was that?

A. This present winter.

Q. Was he discharged?

A. Yes, sir.

Q. Do you know of any case where men have violated the rules, when they have been excused from that violation, and continued in the service of the institution?

A. Yes, sir; I remember such cases, but I cannot repeat who they were.

Q. Do you know what the offense was?

A. No, sir.

Q. Do you know that there have been cases where men have violated the rules and been returned?

A. Yes, sir; it was excused by explaining the matter.

Q. Can you give any instance?

A. I cannot.

Q. Does it frequently occur that attendants have difficulty with the patients?

A. The attendants have had difficulty on the fourth ward with the patients struggling with them, etc.

Q. Do you know of any instance where the patient has received any injury of any kind — an injury through a struggle with an attendant, for instance?

A. No, sir.

Q. Do you know of any case where a patient has received an injury from an attendant other than this Hughes case?

A. I know one case.

Q. What one was that?

A. That was some years ago.

Q. How long?

A. A good many years ago.

Q. What was that?

A. An attendant struck a patient on the arm with a club.

Q. What was the result of that?

A. He was discharged.

Q. Have you known of any case where a patient was injured by an attendant within the last five years?

A. No, sir.

Q. Not any?

A. No, sir.

Q. None ever came to your knowledge?

A. No, sir.

Q. How were the men Weir, Bills and Brown as to their efficiency as attendants prior to this Hughes matter?

A. I looked on the three attendants as very good men, for any thing I ever see.

Q. How were they as to temper?

A. I never see either of the three men — in the first place, I wish to say that they have only been under my supervision since the middle of June last; I never see either of the men what I could say, "out of temper," when they injured a patient.

Q. Have you ever known of their having any difficulty with any patient but Mr. Hughes?

A. No, sir; not any; only this — they may have some scuffle — some trouble with a patient; scuffle or struggle, but no injury.

Q. No injury?

A. No, sir.

Q. Did you ever know of either one of them striking a patient before Hughes?

A. No, sir.

Q. Where were you at the time of the struggle between Hughes and Brown and Weir?

A. On the first ward, I was.

Q. How far is that from the fourth ward?

A. There is only two other wards between.

Q. Who was the supervisor of the fourth ward?

A. I am, and I was at that time.

Q. Do you pass from one ward to another?

A. Yes, sir.

Q. And you were away from the fourth ward when this occurred; now what was the first notice you had of any difficulty with Mr. Hughes?

A. The first notice I had was that I knew a patient had — Mr Weir came and reported him to me that he had been violent and very excited.

Q. What did you do?

A. I learned that Dr. Backus was on the wards making his rounds, and I found him on the twelfth ward, and reported the case to him; and I went right down to the fourth ward.

Q. When you got there what did you find?

A. I found Mr. Hughes sitting in a chair with a belt around him.

Q. That is, a leather belt?

A. Yes, sir.

Q. Was he strapped to the chair?

A. Yes.

Q. When you and Dr. Backus got there what did you do?

A. Dr. Backus went and spoke to him, and I believe he seen blood on his lips, or somewhere round him, and so he examined his mouth; he called my attention to his jaws, that it was broke.

Q. Describe the jaw, will you, by putting your hand to your jaw; describe the manner in which it was broken?

A. It was broken pretty near the center, a little to the right of the center; just above here (indicating).

Q. A complete fracture of the jaw?

A. It seemed to be loose when Dr. Backus called my attention to it.

Q. So that it would separate?

A. I could not say as for that, I know Dr. Backus called my attention to it.

Q. Describe all that was done when you and Dr. Backus found him?

A. When we went down in the first place we found the strap around him, and Dr. Backus examined the jaw, and he returned to the office, here, I presume, to report to Dr. Gray, or some of the officers; and I returned to number one, and went into my room for a few minutes.

Q. Who did you leave in charge of Mr. Hughes at the time you went away, as you have stated?

A. Mr. Weir and Mr. Brown, they were on the ward there at the time.

Q. What had become of Mr. Bills?

A. He was in the dining-room then, preparing dinner.

Q. What was the next you said, in reference to Mr. Hughes?

A. A short time afterward Doctors Pilgrim, Brush and Backus returned to the fourth ward; and I believe it was with some note-paper, or some mail, I don't remember which, that called me there, but I followed them down and when I entered the ward I see Dr. Brush and the other doctors examining him; they were taking him off of the chair, and taking him into the attendants' room; and that is the last I saw of Mr. Hughes.

Q. You saw no more of him?

A. No, sir.

Q. Was there any thing said there by any one, in the way of inquiry as to how it was done, in your presence, I mean?

A. Dr. Backus asked how it was done and some of them made reply that they did not know, either Mr. Brown or Mr. Weir, I don't remember which, I could not say which it was.

Q. Any thing further in the way of inquiry?

A. I did not hear any further inquiry.

Q. Did you make any note or memorandum in a book in reference to that case of Mr Hughes?

A. Yes, sir; I did make an entry of it.

Q. You have a day-book, or memoranda-book?

A. Yes, sir.

Q. In which you make memoranda of all such cases and cases of inquiry?

A. Yes, sir.

Q. What memorandum did you make of this case?

A. I made a memorandum that Mr. Hughes was injured in the face and side.

Q. Did you state who it was done by?

A. No, sir.

Q. Did you see Mr. Hughes after he was taken into the attendants' room, and before his death?

A. I did not; I did not see him after he was taken into the attandants' room.

Q. Your duties were such as to call you there frequently, were they not?

A. Yes, sir.

Q. On that ward?

A. Yes, sir.

Q. Was there any further inquiry made by Dr. Backus as to how that was done, except simply to inquire as to how it was done, and they said they did not know? Did you hear any further inquiry?

A. I did not hear any further inquiry, but I expect he did make further inquiry.

Q. Did you hear the patients there state how it was done?

A. No, sir.

Q. There were, on that ward, patients that were sufficiently sane to give a description of it, were there not?

A. No, sir; I think not.

Q. Whom did you learn, from the conversation about the matter, whom did you learn was there present when it was done other than patients?

A. Mr. Weir; I learned from Mr. Weir that him and Mr. Brown was there; and Mr. Bills brought Mr. Hughes to the part of the ward where they were, and left him in their charge.

Q. Now, Mr. Bills brought him from ward nine to ward four, did he not?

A. No, sir.

Q. Who did bring him from ward nine to ward four?

A. I could not say; I believe it was Supervisor Jones; the supervisors — it is them that removes patients from one ward to another.

Q. He remained there in the attendants' room, and was removed to ward eight afterward?

A. Yes, sir.

Q. Did you see him on ward eight?

A. No, sir.

Q. Your duties brought you to ward eight?

A. No, sir; they did not.

Q. Who was supervisor of ward eight?

A. Mr. Jones.

By Mr. Haskell:

Q. Were you notified when Mr. Hughes was brought on to your ward?

A. Not right away, no, sir; I was not notified right off.

Q. Is it not one of the rules of the institution that when a patient is transferred from one ward to another, that the supervisor of the ward should be notified?

A. As a rule it is, but they may be on the ward a little time before I am notified — Mr. Weir notified me.

Q. How long after he was brought there, were you notified of the fact?

A. I cannot exactly say.

Q. Was it not Supervisor Jones' duty to notify you that he had brought him there to your ward?

A. No, sir.

Q. Whose duty was it to notify you?

A. It was the attendant's duty.

Q. On the ward where the patient was brought?

A. Yes, sir; but they don't do it at all times; sometimes a patient is brought on a ward and the attendant is not allowed to leave the wards without there is plenty of help there; and so a patient may be brought on to the ward and I not notified at the time.

Q. Were you notified that he was on the ward before you were notified that he was noisy?

A. No, sir.

Q. That was the first notification you got?

A. Yes, sir.

Q. Then you got Dr. Backus, and you went with him on to ward number four, and Dr. Backus discovered the fracture?

A. Yes, sir.

Q. Was there any blood on the floor?

A. I did not notice any.

Q. All that you noticed was a little blood round Mr. Hughes' mouth?

A. Yes, sir.

Q. And why did you not stay there until Dr. Backus came back?

A. I did not think it was necessary; I am not supposed to stay on those wards; I went down and done my duty, and returned to my ward — number one ward; that is where I am supposed to remain.

Q. What was your duty at ward four; simply to take the doctor there?

A. Yes, sir.

Q. And it was not your duty to look after a patient that was injured?

A. Yes, it was my duty to look after a patient that was injured.

Q. Did you not think that Mr. Hughes was sufficiently injured, so that you should look after him?

A. I don't see what I could do for him as the doctor was there to see him and knew of his condition.

Q. But the doctor left him immediately?

A. Him and I left at one time.

Q. You did not think there was any thing in that injury that required you to stay there and look after the patient?

A. I did not think there was; it was in the hands of the doctor.

Q. The doctor had left, you say?

A. Yes, sir.

Q. You went to ward one and stayed there until you was called again?

A. No, sir; I came to number four again with some note paper, writing paper; I said that Dr. Brush, and Dr. Pilgrim and Dr.

Backus came to the office and went to number four ward; I believe it was some note paper or mail that I went with, I said.

Q. Did you go to number four because the doctor went back?

A. No, sir; I went on business.

Q. So that you would have gone back any way, with the note-paper, whether the doctors had come back or not?

A. Yes, sir.

Q. You simply went there to carry something, and not on Mr. Hughes' account?

A. Yes, sir; I went there to take something or other.

Q. And not on Mr. Hughes' account?

A. No, sir; not on his account.

Q. Then you went back that once?

A. Yes, sir.

Q. When did you make a minute on your book that you speak about; your memorandum book?

A. It was shortly after; I can't exactly say now when it was, but I know it was some time after.

Q. Several days after?

A. No, sir; I can't say whether it was that day or the next, but I believe the next day.

Q. Do not your rules require that you should make your entries the same day, immediately after seeing any such occurrence?

A. Yes, sir; sometimes I do, and sometimes I do not.

Q. What is the rule in that respect, I ask you?

A. The rules in that respect is to for to make them when the injury is done.

Q. Make them immediately?

A. Yes, sir.

Q. When did you learn that Mr. Hughes' ribs were broken?

A. I learned it from another attendant; I learned it from Dr. Backus, in the first place; he told me of it in the afternoon of the same day.

Q. How long after the injury?

A. I don't remember the hour that he told me; it was when he was going to make his rounds again.

Q. You had so little interest in the injury that you did not take any pains to find out yourself how serious the injuries were?

A. No, sir; Dr. Backus told me.

Q. And did Dr. Backus tell you how many ribs were broken:

A. He told me there was two or three.

Q. Did not he tell you there was more than that?

A. No, sir.

Q. As a fact, were there not more broken?

A. I heard so since, by what I read.

Q. Nobody ever told you so?

A. No, sir.

Q. You have had no talk with the doctors about the case since?

A. Yes, sir.

Q. When?
A. I have spoken to Dr. Backus about it, since then.
Q. Is he the only one?
A. I believe I have spoken to Dr. Pilgrim about it?
Q. When?
A. I cannot say when it was.
Q. How many times should you say?
A. At the time, I was speaking to both of them at once; I made inquiries about Mr. Hughes after he went off from under my charge.
Q. When did you make inquiries about him?
A. While he was sick and before he died.
Q. Of whom did you make inquiries?
A. Dr. Backus and Dr. Pilgrim.
Q. Both of them?
A. Yes, sir.
Q. Were they together when you made inquiries?
A. Yes, sir.
Q. When was he removed to ward eight?
A. Right away after the injury; right when he was taken into the attendants' room.
Q. Who removed him?
A. Dr. Brush and Dr. Pilgrim.
Q. Who told you he had been removed to ward eight?
A. Mr. Weir; it was when I returned to number four that he told me.
Q. When did you go back to number four?
A. I can't say what length of time it was.
Q. Sometime during the afternoon?
A. It was sooner than that; it was a short time after he was removed I learned it.
Q. You went back to ward four, and they told you he had been removed, and that was a short time after his removal?
A. Yes.
Q. You say you did not see Mr. Hughes again at all?
A. No, sir.
Q. Can you give the exact language of your entry on your book?
A. I cannot from recollection?
Q. You can produce the book without much trouble?
A. Yes, sir; I can produce it.
Q. What inquiries did you make in regard to how the injury occurred?
A. I made inquiries of Mr. Weir and Mr. Brown and several patients, and of Mr. Weir.
Q. When did you make these inquiries?
A. Right away after it happened.
Q. The same day?
A. Yes, sir.

Q. What inquiries did you make; state what you said and what they said?

A. I asked Mr. Weir how it occurred; he said it did not occur when he was present on the ward, he said it must — he says: "it must have occurred after I left the ward to report to you."

Q. Is that all you said to him?

A. That is all at that time.

Q. Now what did you say to the others?

A. I said the same thing; I asked Mr. Brown how it occurred, and he told me he did not know how it occurred; I asked if he had had a struggle, and I asked Weir the same, if he had had a struggle, and he said yes.

Q. And that is all the inquiries you made, is it?

A. That he had to hold him in the chair, that he was so excitable and violent.

Q. You have stated all the questions you asked and all the answers you received?

A. All that I remember of just now; I asked several patients if they seen any thing of it.

Q. Was there any thing else that you said to the attendants?

A. I inqnired of Mr. Brown about that afterwards.

Q. I mean at this time?

A. I asked him at that time how it occurred, and he said he did not know; he said he had a struggle with the man and had to hold him in the chair, after Weir came to me to report; he said —— I asked him if he knew how it was done, he said no; he told me he did not; the next day after that or the second or third day after that I inquired of him again; he said he would come to the conclusion that he would change the story; Mr. Brown said this; he said he was sorry he did not make a true statement in the first place, or, at least, make that second statement that he did not make in the first place; I asked him if he knew how it occurred, again, and he said he thought the jaw was fractured on the ward, but he could not tell how the ribs were hurt.

Q. Is that all the talk you had with him on that occasion?

A. That is all that I remember; there might have been some more words to that effect, but I cannot recollect them.

Q. You have given, in substance, all that occurred?

A. Yes, sir.

Q. And that was with Brown?

A. Yes, sir.

Q. You did not ask the other any more questions on the first day?

A. On the first day?

Q. You say you questioned all three on the first day, and then two or three days afterwards you questioned Brown again?

A. Yes, sir.

Q. Did you question the others again?

A. Yes, sir.

Q. At the same time as you questioned Brown?

A. I can't say as it was the same time as Brown, but I questioned Bills; I asked him if he had any trouble with him; he said he had; he says it was done in the ward, I believe, that he sat him down; then he commenced kicking on the door; that he then sat him in the chair and held him there a while and left him, and he went round kicking the doors again, so he took him again and sat him in the chair; he resisted then and he kind of slid down on the floor; that is what Bills said; then one of the patients came and assisted to hold him.

Q. After he slid him down on the floor?

A. Yes, sir; then he brought him up to the part of the ward where Mr. Weir and Mr. Brown was, and left him in their charge, and went into the dining-room to prepare dinner; I talked to Weir several times about it, but never could learn any thing more about it.

Q. That is, you never could learn any thing from Mr. Weir?

A. No, sir, not about how it occurred.

Q This was the second statement from Brown and Bills—was it made on the second day?

A. No, sir; there was one statement made; Brown was the only man that made a second statement.

Q. This talk then, with Bills, was the first conversation?

A. Yes, sir.

Q. And Brown was the only one of the attendants who made a second statement?

A. Yes, sir.

Q. How long after the date of the accident was it that Brown made this second statement?

A. In regard to that, I can't say positively; I believe it was the second or third day, but I may be mistaken.

Q. It was before Mr. Hughes died?

A. Yes, sir.

Q. And it was within two or three days; did you make any minute in your memorandum book of what Brown said to you?

A. No, sir.

Q. Did you report what he said to you to anybody?

A. I told the doctor.

Q. Which one?

A. I believe it was Dr. Backus; he told me he made the same statement to the doctor, and I know he did.

Q. Did you hear it?

A. No, sir.

Q. Then how do you know it?

A. In regard to that? In regard to changing his statement?

Q. Yes, how do you know it?

A. He told Mr. Weir, and Mr. Weir told me.

Q. Do you know it any other way than by hearsay? Did Dr. Backus tell you he made a second statement to him?

A. No, sir, he did not.

Q. Did Mr. Brown tell you he had made the same statement to the doctor?

A. He told me he was going to make the same statement to the doctor.

Q. Now, did you report to any of the doctors what Mr. Brown had told you?

A. I don't remember.

Q. If you did not, why did you not?

A. I may have.

Q. You have sworn that you told Dr. Backus, now did you tell him, or do you want to take that back?

A. I can't say in regard to that officer.

Q. Did you tell Dr. Pilgrim?

A. I don't think I did.

Q. Did you tell Dr. Gray?

A. No, sir.

Q. If you told anyone it was Dr. Backus?

A. Yes, sir.

Q. And you don't know whether you did or not?

A. I am not certain.

Q. Why did you not report what Mr. Brown had said to Dr. Gray, himself?

A. I usually report to the other officers.

Q. Why did you not then report to Dr. Pilgrim?

A. Mr. Brown told me he had reported it.

Q. Did he tell you he had reported it himself?

A. In regard to that I cannot state.

Q. Don't you know what you are talking about?

A. Yes, I am talking about this Mr. Hughes, and the injury.

Q. And that is all you know about it, and of what you are doing?

A. Yes, sir.

Q. Do you not recollect plainly and distinctly what occurred during the week?

A. No, sir; I don't recollect every thing that occurred that week.

Q. Do you not recollect what you told me that occurred?

A. Yes, sir.

Q. Or are you not clear about any thing you have testified to?

A. I am clear enough, as far as that goes.

Q. Is your memory very poor?

A. I can't say that it is.

Q. Did you ever report to Dr. Backus or Dr. Pilgrim or Dr. Gray what took place in regard to what Mr. Bills told you, about sliding this man down on to the floor and having had trouble with him?

A. Yes, sir.

Q. To whom did you report that?

A. To Dr. Backus.

Q. When?

A. I cannot state.

Q. You cannot tell when?

A. After I was told; after he told me.

Q. That was the same day of the accident?

A. Yes, sir, and afterward.

Q. When afterwards. How soon afterwards was it?

A. It was the same day afterwards, I presume; I don't really know; I can't tell.

Q. So that you told Dr. Backus the same day that Mr. Bills had told you of his struggle with Mr. Hughes?

A. Yes, sir.

Q. Now, don't you recollect whether you told Dr. Backus about what Brown told you about his struggle with Hughes, and that Brown wanted to change his story?

A. I believe I told Dr. Backus right along after Brown told me, that he was going to change his story.

Q. Do you know whether you did or not?

A. I am certain about it.

Q. You swear now that you did, do you?

A. If I have to state either one way or the other.

Q. You don't have to state either way if you cannot; we do not want you to state any thing that is false; but be pretty certain about this thing — it happened only three weeks ago. Is it a matter of so little consequence to you or of so little moment, that you cannot tell what reports you made in regard to it?

A. No, sir.

Q. Where is your memorandum book?

A. In the office; the sergeant can get it.

[Book produced.]

Q. Let me see the minutes you made in regard to the Hughes' case; read what you have in your book?

A. The entry is: "E. D. Hughes, in a struggle, got injured in the face and side, on the fourth ward, January 26th."

Q. Is that all there is said about it?

A. Yes, sir.

Q. Is that all the entry you made at all in regard to that?

A. Yes, sir; that is all.

Q. At any time, is that all the entry that was made?

A. Yes, sir; that is all; the doctors knew all the circumstances; I just merely stated there for to show that it occurred.

Q. Did you think that was a fair statement of the occurrence?

A. It shows that he was injured.

Q. Did you think it was a fair statement of the occurrence; whether you made that as a fair statement of the injury to Hughes?

A. I thought it was a fair statement.

Q. Do you think now that it was a fair statement?

A. I think so.

Q. And is that a fair sample of the way that you set down transactions that occurred in the wards over which you were supervisor?

A. Yes, sir.

Q. Now, you have given me every thing that you did in regard to the matter of Mr. Hughes' injury?

A. Yes, sir.

Q. And all of the investigations that you made in regard to how he was hurt, and all the reports that you made in regard to the same, have you given?

A. As far as I can remember; yes, sir.

Q. The entry was made in this book. What is done with this book when it is full of entries. Do you make any written reports made up from this book?

A. No, sir; I do not.

Q. Is this book a report in itself?

A. Yes, sir.

Q. After making entries in the book, do you hand the book in to the authorities of the asylum?

A. I hand it in at different times; no full report of it is made in the book, but they are all reported to the doctor in all these reports.

Q. You considered that what you wrote in regard to Mr. Hughes, was your report in regard to his case?

A. Yes, sir; of course I might have made it out more full; I had no reason for not doing so.

Q. Why were these men not discharged from the institution immediately upon the occurring of this injury?

A. I can't say why they were not.

Q. Why were they ever discharged?

A. I can't say why they were discharged.

By Mr. Rice:

Q. Did you have the power to discharge?

A. No, sir; I had no power to do that.

By Mr. Haskell, (resuming):

Q. Did you have any thing to do with their discharge?

A. No, sir; not any thing.

Q. Did you recommend their discharge?

Q. That is no part of your duties?

A. It is part of my duties to report if an attendant injures a patient; it is my duty to report any such case; to report what is done, in this book, that is the report that is made of these cases, and the doctors are also informed, of course; I told the doctors of it; of course I didn't know until after it was done, and then I made a report there.

Q. And that is your report in regard to what took place — that entry in your book?

A. Yes, sir.

Q. Then you had several conversations with Dr. Backus?

A. Yes, sir.

Q. You never had any talk with Dr. Gray upon the subject?

A. No, sir.

Q. Did you with Dr. Pilgrim?

A. I inquired of him how Mr. Hughes was getting along.

Q. Simply to inquire in regard to his condition?

A. Yes, sir; and I talked with Dr. Backus as to how it occurred, etc.

Q. When did you last have a talk with Dr. Backus about this affair?

A. I cannot state when it was.

Q. Have you talked with him about it since Mr. Hughes died — with Dr. Backus, I mean?

A. I don't think I have.

Q. Or with Dr. Pilgrim or Dr. Gray?

A. No, sir.

Q. When did you know any thing about these men being discharged — Weir, Brown and Bills?

A. I did not know any thing about their being discharged until they were discharged; I was out that evening when they were discharged.

Q. Were you informed they were to be discharged?

A. No, sir.

Q. You did not know until after they were discharged?

A. No, sir.

Q. How soon after they were discharged did you find out that they were discharged?

A. I was out that evening when Mr. Weir and Brown and Bills were discharged; I was down town, and when I returned that night I learned they were discharged.

Q. Who told you?

A. The attendant on number one, that was the first I learned of it.

Q. Have you had any talk with Dr. Gray, or Dr. Brush, Dr. Pilgrim, or Dr. Backus about these men being discharged, since they were discharged?

A. Not that I remember of.

Q. Would you swear that you did not?

A. I cannot swear as to that.

Q. You cannot swear either way?

A. No, sir; I cannot.

Q. It is simply because you do not remember?

A. No, sir; I do not remember.

Q. Have you had any talk with any of these men — any of the authorities of the institution in regard to this investigation.

A. Yes, sir.

Q. Who, of the authorities of the institution, have you talked with in regard to this investigation?

A. I spoke to Dr. Backus and Dr. Pilgrim; both of them I believe.

Q. How recently have you spoken to them about the matter.

A. Since we heard of it in the papers that there was going to be an investigation.

Q. Do you recollect what was said upon the occasion of your so talking about the matter?

A. Nothing more than I asked the question it there was going to be an investigation, and some words to that effect; just merely simply talked about the investigation; that it was going to be.

Q. How long before this injury that Mr. Hughes received had there been any person who had received an injury in any of the wards over which you have been supervisor; how long before Mr. Hughes, injury was it that anybody else had been injured in any of the wards over which you were supervisor?

A. That case I spoke about; the patient that was injured in the arm; that is a great many years ago.

Q. How many years ago was that?

A. I cannot state.

Q. Five years ago?

A. It was more than five years ago.

Q. Can you give us his name?

A. I believe his name was Jackson.

Q. Where was he from; what has become of him?

A. I don't know.

Q. Was he discharged from the institution?

A. Yes, sir.

Q. You don't know whether it was five years ago or not?

A. It was more than that.

Q. Was it ten years ago?

A. More than ten years ago, I guess.

Q. Fifteen years ago?

A. I can't say how much longer it was than ten years ago.

Q. And from the time that occurred down to the time that Mr. Hughes was injured, nobody had received any kind of injury on any of these wards; do you want to swear to that?

Chairman Howe — That is, within your recollection, of course?

A. All the injuries that have been received in this time have been reported to the officers.

Q. That is not an answer to the question I put. You have sworn, by im dication, that no injury has occurred since this man was hurt on the arm, over ten years ago, until the present time, until the case of Mr. Hughes. Now, I ask you whether you are willing to positively swear to that fact?

A. That there was none other from that?

Q. Yes; from that time, ten years ago?

A. Well, I cannot positively swear to that.

Examined by the Chairman:

Q. Do you mean to say that you are not aware of any injuries suffered by patients, during that time, within your recollection?

A. Yes, sir; I remember injuries.

Q. Can you remember any other case of a person being injured

since the time of this Jackson case, down to the time of Mr. Hughes' case?

A. Yes, sir.

Q. You can remember cases?

A. Yes, sir.

Q. Can you name any?

A. Yes, sir:

Q. Just give us the names of such as you can recollect?

A. I remember of one man being injured.

Q. What was his name?

A. His name was Mr. Heath.

Q. How was he injured?

A. His ribs were fractured.

Q. About what time did that occur?

A. I cannot tell you the year; it was several years ago — eight or ten years ago.

Q. Were they injured by a patient or an attendant?

A. By an attendant.

Q. What was the attendant's name?

A. The attendant's ame was Reece.

Q. What was done with the attendant?

A. He cleared right out.

Q. What became of the patient?

A. He died.

Q. Was there an inquest?

A. No, sir.

Q. Was there any notification given by the authorities of the institution to the civil authorities?

A. I could not say.

Q. Was the coroner notified?

A. No, sir; not that I remember of.

Q. Do you think he was?

A. I do not think he was.

Q. Can you recall the case of any other patient that was injured between those two patients mentioned?

A. I do not remember of any other.

Q. Do you mean that you do not know of any injuries whatever, received by patients, except those you have named?

A. Not that I remember of.

Q. Do not patients sometimes have black eyes or bruised faces, etc.?

A. Yes, sir.

Q. I am asking now about those injuries; do you frequently see patients around here with black eyes?

A. Yes, sir.

Q. Or bruised faces?

A. Yes, sir; sometimes.

Q Not an unusual occurrence, is it?

A. Not on some of the wards.

Q. How are those injuries caused?

A. By blows.

Q. Given by whom?

A. From one patient to another.

Q. How do you know that they are not caused by blows from the attendants?

A. I cannot find out that they are.

Q. But the fact exists that you see such cases, and that it is not an unusual occurrence to see patients with black eyes, or bruised heads?

A. No, sir; it is not unusual.

Q. I will now read some of these entries on this memorandum book, and ask you some questions about them; now here is a case-book, containing entries of cases for several years; I will commence about two years back and put those cases in. I will begin with the 1st January 1882. [reading] "Jan. 10th, 1882, L. R——, black eye, was hit by E. C——, on the left eye, no apparent cause, witnessed by attendant D. E. Torpey."

Q. Is that in your handwriting?

A. No, sir; it is not.

Q. Whose handwriting is it?

A. It is the handwriting of the supervisor who had charge of the department before I had it.

Q. Who was he?

A. John Adams.

Q. That is his handwriting?

A. Yes, sir.

Q. The next entry is: "Jan. 17th, fourth ward, J. C——, left eye black and slight scratch on face, under the other eye; was hit by W. A ——; attendant D. E. Torpey witnessed the trouble, and thought Mr. W.—— was most to blame. Reported by attendant D. E. Torpey." Is that in the same supervisor's writing?

A. Yes, sir.

Q. Do you know this to be his handwriting in this book?

A. Yes, sir; I believe it is.

"Jan. 21st, 1882, J. B——, cut over the left eye, about an inch long; attendant F. C. Smith, went to feed him, he grabbed hold of Mr. Smith, and swung him around a few times, and they both fell; W. B——, struck his forehead against a chair when they fell. Witnessed by attendant A. G. Wier."

Q. January 22, 1882, is that in the handwriting of the same supervisor?

A. Yes, sir.

Q. All this down to February 10, 1882; all those are in the same supervisor's handwriting?

A. Yes, sir.

"Fourth ward, January 22, 1882. E. W. C——, both eyes black, caused by butting his forehead against the wall and the floor, night and day time; witnessed by attendants D. E. Torpey and A. G. Weir.

"Fourth ward, January 22, 1882. E. T. M—— black eye, he

had a scuffle with and threw Mr. B—— down, and in some way received a black eye; reported by attendant D. E. Torpey.

"Fourth ward, January 26, 1882. F. M—— scratch on right side of forehead, it was done in the night; it was thought by the attendant that he fell out of bed; he would not state how it happened; reported by attendant D. E. Torpey."

"February 2. H. L. Baxter, black eye, was hit by E. Clark; no apparent cause; witnessed by attendant D. E. Torpey."

Q. Was this Mr. Clark a patient or an attendant?

A. I could not state as to that.

Q. Do you remember an attendant of that name about two years ago?

A. No, sir; I do not.

"Fourth ward, February 4, 1882. W. C —— black eye, was hit by L. McF——; no apparent cause; witnessed by attendant D. E. Torpey; he told Mr. McF—— that it was wrong to strike a man in that way and then he pitched into Mr. Torpey.

Q. Whose handwriting is this, under the date of February 10?

A. I do not know in whose handwriting it is.

Q. That is an entry by the supervisor?

A. Yes, sir.

"First ward, February 10, 1882. J. P—— got two scratches on the hand from slipping on the steps while carrying out swill pail, steps being icy; witnessed by attendant C. Roach."

"Fourth ward, February 14, 1882. D. R. P—— got a black eye from a blow by J. A——; he said P—— was blowing something at him; witnessed by D. E. Torpey, attendant."

Q. Who is A——, a patient or an attendant?

A. A patient.

"Fifth ward, February 20, 1882. L. P. J——, slight cut over the left eye; had a fit and fell on dust-pan; witnessed by attendant J. C. McGucken."

"Third ward, March, 1882. E. B—— was kicked by a steer at slaughter-house, on left knee; injury very slight; witnessed by attendant H. E. Jones."

"Fourth ward, April 6, 1882. C. S—— received a blow on the nose from M. C——; Mr. C—— was sitting on a bench in the yard when S—— came up to him and kicked him; Mr. C—— then struck him on the nose; witnessed by attendant E. A. Williams."

Q. Whose handwriting is this, April 6th?

A. It must have been one of the supervisors.

Q. And you believe it to be?

A. Yes, sir.

Q. Do you know who was supervisor a year ago in ward four?

A. Mr. Dillon.

"Fourth ward, April 14, 1882. M. L——, black eye by coming in contract with a chair; witnessed by attendant, D. Linn."

"Fourth ward, April 27, 1882. W. B—— had a fight with J. F——; A. G. Weir, attendant, went to part them; B—— then

pitched on to Weir, and in the scuffle got his left ear hurt, also the right thumb."

"Fourth ward, June 6, 1882. T. McR——, black eye; was struck by H. C——; Mr. McR—— was talking very loud; C—— thought he was talking about him, and went up to him and struck him over the right eye; witnessed by attendant, A. G. Weir."

Q. Who was C——; a patient?

A. Yes, sir.

"Fourth ward, September 23, 1882. E. D. C——, small cut over the left eye; eye a little black; he kicked at Mr. Linn, attendant, lost his balance and fell down, and in going down struck his eye against casing on the wall; witnessed by attendant, A. G. Weir."

"Fourth ward, October 4, 1882. C. S——, upper lip slightly cut; received a blow from H. R——; no apparent cause; witnessed by attendant, W. Williams."

"Fifth ward, October 20, 1882. R. D. G ——, attendant, received a cut on the head, was struck by T. A —— with a stone, he thought Mr. G—— was poisoning him; witnessed by attendant, Mr. Sharkamer.

"Fourth ward, October 31, 1882. F. A ——, cut on top of the head, he tried to knock his brains out in the fifth hall yard; witnessed by attendant, D. Linn.

"Fourth ward, November 15, 1882. J. R. J ——, attacked attendant Barnes with a stick, in the yard, and in the scuffle that followed, Mr. S —— got a very slight cut on the nose; reported by attendant Weir.

"Fourth ward, December 2, 1882. J. J ——, black eye, was was struck by E. P——, no apparent cause; reported by attendant A. G. Weir."

Q. What is Mr. P——, a patient?

A. Yes, sir.

"Second ward, December 12, 1882. S. E—— was kicked by a cow at the barn, injured very slightly; witnessed by attendant, W. Pritchard.

"Fourth ward, February 3, 1883. D. McG——, black eye, was struck by P. C——, he followed C—— about the ward, and tried several times to strike him; C——, tired of it at last, struck him in the eye; reported by attendant, A. G. Weir."

"Fourth ward, February 3, 1883. E. D. C——, black eye, was struck while in the water closet by B. W——; W—— said that C—— stuck his chamber in his, W—— hands; reported by attendant A. G. Weir.

"Fourth ward, March 7, 1883. F—— L——, slight cut over left eye, was struck by Mr. S—— because he kicked him; reported by A. G. Weir.

"Fourth ward, 21st ——, 1883. W. F——, black eye, was struck by J—— E——, no apparent cause; reported by attendant A. G. Weir.

"Fourth ward, March 29, 1883. T. S—— had a fit while in the dining-room; he was laid on the floor by the attendants, and when he fell in the fit got his left shoulder against the heater and slightly burned it; reported by A. G. Weir

"Fifth ward, March 30, 1883. E. G. R—— cut his throat on both sides about one o'clock in the morning; he was discovered by night watchman Somers and John Ferris; they discovered that the floor where he lay was covered with blood; it was done with glass that he got while in the yard; the wound on the right side was about three inches long, and the one on the left about two and a half inches long; reported by the night watch."

Q. Was any notification of that given to the coroner?

A. I could not say about that.

Q. Do you remember this case of Roberts?

A. No, sir.

"Third ward, March 31, 1883. E. McV —— tried to cut his throat in the slaughter house: he was standing there, and got up and went and stood by the looking-glass; he was asked by Mr. Gallagher what he was doing; he said he was cutting the hair on his neck; just then Mr. Hoagland saw the blood running down his neck; he took the knife away from him, and put him out of the slaughter house; he resisted and tried to get back in again and finish the job; he inflicted a slight wound on the side of his neck; he was brought in and all the circumstances reported by the butcher, N. R. Jones."

Q. Are patients allowed to go to the slaughter house?

A. Yes, sir, sometimes; as a rule there are always some of them around; they assist in it; the principal work in the slaughter house is done by the butcher, and he is assisted by the patients.

"Fourth ward, April 9, 1883. O. B ——, black eye; was struck on the nose by J —— J —— because he (B.) pitched into J —— for a fight; reported by attendant, A. G. Weir.

"Fourth ward, April 17, 1883. John S —— left shoulder slightly injured; was attacked and thrown down by another patient; cause of difficulty not known; reported by attendant A. G. Weir.

"Fourth ward, May 17, 1883. J—— S—— had rib fractured by P—— C——; S—— threw two cups of hot water in C——'s face, and told C—— he was going to kill him; C—— thought he ought to be chastised for using the words, "kill him;" C—— threw him on the floor and fell with his knees on S——'s side and stomach, fracturing his rib; reported by attendant, A. G. Weir."

Q. Were both of these men patients?

A. Yes, sir; I do not know the circumstances of the matter.

By Mr. Rice:

Q. Is the entry in your hand-writing?

A. No, sir.

"Fourth ward, May 17, 1883. P—— C—— was sitting in the ward;

J. F—— approached C—— and struck him; they cleared for a fight, C—— getting in the first blow on F——'s nose, breaking the skin a little; they were separated by attendants Jones and R. Quinn; reported by A. G. Weir, attendant.

"Fourth ward, May 23, 1883. F—— S——, small cut over the left eye, and eye a little black, he was found lying on the floor in a fit by the attendant, with a cloth, or a piece of sheet around his neck for the purpose of hanging himself as was supposed; received the injury to his eye when he fell in the fit; reported by attendant A. G. Weir.

"Fourth ward, May 26, 1883. G. W. B——, black eye; he was sitting in a chair, partly asleep; C. H. P—— went up to him and struck him in the eye; no apparent cause; reported by attendant A. G. Weir.

"Fifth ward, May 26, 1883. J. F——, slight scratch on left side of face; C. W—— was assisting him to a chair in the ward when they both fell to the ground and Mr. F—— got his face scratched; reported by attendant O. Ladd.

"Second ward, May 30. W. D——, black eye and skin broken on the bridge of the nose; was standing in his room at eight P. M., leaning on the bureau; he went to go out on to the ward and fell into a fit, striking his nose and eye on the bed-post; reported by attendant W. C. M——."

Q. What now follows is in your handwriting, after this?

A. Yes, sir.

"July 12, 1883, Fifth ward. M. McG——, while out in the yard attempted to walk about, when he accidentally fell and struck his cheek bone against the gravel walk which caused quite a bruise, and his eye to be somewhat black; reported by attendant O. Ladd.

"Fourth ward, August 1. L. T—— was sitting on a chair; C. H—— was talking to and bothering him; the former shoved him down and in falling he accidentally struck the bridge of his nose on the chair and gave himself a severe cut; witnessed by W. L—— and reported by attendant A. G. Weir.

"Fifth ward, ——— T. G—— fell on the bed and gave himself quite a bruise on the hip-bone, and also fell in the yard and bruised the back part of his thigh; witnessed by attendant E. C. Judson.

Fourth ward, August 6. D. R. P—— wanted to go out on the highway, he attacked attendant A. G. Weir; in the struggle the latter got a bruise on the temple which caused his eye to be black; reported by attendant A. G. Weir."

WITNESS—Excuse me, I think that is an error.

Q. Do you remember whether P—— got a black eye at that time?

A. No, sir.

Q. Did you see Weir with a black eye about that time?

A. Not to my knowledge.

Q. Do you think the entry is correct?

A. The word does not seem to be, but I think it is.

Q. You may have made a blunder in using the word "former" instead of the word "latter?"

A. Yes sir, I may have made that mistake.

Q. And it may have been that P—— got the black eye instead of Weir?

A. Yes sir, but it is so long ago I could not state.

"September 30, fifth ward. G. C. C——, without any provocation struck T. K—— and gave him a black eye; reported by the latter."

Q. Who was K——, a patient?

A. Yes, sir.

Q. They were both patients?

A. Yes, sir.

"October 2, fourth ward. S. K—— became excited in his room and was swinging the chamber pot round, and also struck himself with it above the knee, which caused a very severe bruise; reported by attendant A. G. Weir."

Q. Do you recollect this transaction?

A. Yes, sir, I remember that.

Q. Did you know any thing about it except what Mr. Weir told you?

A. No, sir, only what the attendant told me.

"October 24, fifth ward. G. C. C——, without any provocation, pushed E. W—— down in the chair and gave him quite a bruise on the cheek bone; reported by attendant O. Ladd.

"October 25, fourth ward. E. P——, without any provocation, struck E. McE——; the latter returned the blow, giving him a slight cut on the nose; witnessed by attendant A. G. Weir.

"October 27, Fifth ward. G. C. C——, without any known cause, attacked V. F. M——, and scratched both sides of his face and ears; witnessed by attendant, E. C. Judson."

Q. Is E. C. Judson an attendant at the asylum now?

A. No, sir.

Q. Do you remember why he left, for what cause?

A. He put in his notice.

Q. And left voluntarily?

A. Yes, sir.

Q. Do you know why he put in his notice and left the institution?

A. No, sir; I could not tell you why he left; nothing more than that he did not want to stay any longer.

Q. Have you any belief or supposition as to the cause of his leaving the institution?

A. No, sir.

Q. Was it on account of any difficulty with any patient that he left, that you know of?

A. No, sir; I do not know that it was that was the reason that he left; I could not say why it was.

Q. Were there any complaints made against him?

A. No, sir; not that I remember of.

"November 4, fourth ward. B. McL—— set C. D. K—— at work and attacked him; attendant W. H—— went to separate them, when McL—— attacked him, and in the struggle both fell, H—— spraining his knee; reported by attendant J. Brown.

"November 5, fourth ward, J. R —— came out of the covered bed this morning with a bruise; I could not find out by him or the attendant how he got it.

Q. You do not give the name of the attendant that witnessed that; do you recall that incident?

A. No, sir; I can't say that I do recall that instance.

Q. You do not give the name of the witness?

A. No, sir.

Q. Who was the attendant?

A. Well, Mr. Weir, and Mr. Brown, and Mr. Bills; they were on that ward at that time; they were the attendants on that ward then.

Q. Brown, Bills and Weir were attendants on the ward at that time?

A. Yes, sir.

"November 29, fourth ward. D. R. P ——, while at dinner-table, became excited, came up and struck attendant Bills a severe blow in the neck, and threw his arms around his neck and tried to choke him; in the struggle both fell to the floor face downward; attendant A. G. Weir went to Mr. Bills' assistance, when patient E. N. W ——, with a table knife in his hand, threatened to assist P ——; when the attendant got quite restored and Mr. P —— up off the floor, it was found that his face was bruised, which he received in falling, from which cause his two eyes became black; reported by attendants A. G. Weir and F. Bills.

"December 17, fifth ward. E. F —— accidentally fell down the stairway while going from the ward to the day room and gave himself a slight cut on the cheek-bone and eye-brow, from which cause his eye became black; witnessed by patient J. B ——, and attendant E. C. Judson.

Q. Is attendant E. C. Judson in the asylum now?

A. No, sir, he is the only one you asked me about and I told you he had left; he is not in the asylum now.

"December 26, fourth ward, W. L. P —— struck J. R —— and gave him a black eye because he spat in his face; witnessed by attendant J. Brown."

"December 31, 1883, fifth ward, P. W —— came out of the covered bed this morning with his left arm having a very bruised appearance between the shoulder and elbow; could not find out how, or by what means he injured himself; reported by attendant O. Ladd."

"January 1, 1884, fifth ward, E. W —— came out of the covered bed this morning with a black eye I could not find out how he got it; reported by attendant O. Ladd."

"January 2, 1884, fifth ward attendant J. Linn left a cup of rice and milk on the table in the day room while he was engaged in feeding another patient; E. W. —— attempted to get the food, but stumbled and fell against the table, and fell and gave himself a bruised eye; reported by attendant J. Linn.

"January 28, fourth ward. E. D. Hughes' in a struggle got injured in the face and side."

"January 31, fourth ward. E. D. C—— came out of his room this morning with a bruise on the right side of the head between the eye and the ear, he has a habit of bruising himself."

Q. You do not give the name of the attendant in this case. Who was the attendant? This was only two weeks ago that this circumstance occurred?

A. Yes, sir.

Q. Is that in your handwriting, that entry?

A. Yes, sir.

Q. How do you know that he has such a habit?

A. He strikes himself.

Q. How often does it occur?

A. I cannot state how often it occurs.

Q. How do you know he came out this morning in this condition? Did you see him?

A. I see him that forenoon, but I did not see him come out of his room.

Q. How did you know then? Did you make this entry then in consequence of seeing him that forenoon?

A. Yes, sir.

Q. How do you know that he came out of his room in the morning in that condition, if you did not see him at the time he came out of his room?

A. I was told by Mr. Brown about it.

Q. How does it happen then that you have not put the name of Brown down here on the book?

A. I cannot say.

Q. You believe him to be the attendant from whom you got the information?

A. Yes, sir.

Q. This matter was five days after the accident to Mr. Hughes?

A. Yes, sir.

Q. Was Mr. Brown still there then?

A. Yes, sir; I believe so.

Q. When was this Hughes entry made?

A. I could not state when I did make it.

Q. Do you think it was on the same day that it occurred that you made that entry?

A. Yes, sir; I believe it was.

Q. Did you not state a short time ago that it was not made until the day after?

A. I don't remember that.

Q. And your present recollection is that it was made on the same day, is it?

A. I can't state in regard to that; it was either that same day or the day after, I can't tell which.

Q. What is your custom as to making those entries?

A. My custom is, if a patient receives an injury, or a cut, or any thing in that way — I make it when I can see what it is, but at other times a patient gets a bruise or a blow and I don't know what is going to come of it, what it will come to.

Q. You wait to see if the eye gets black, is that it?

A. Yes, sir; I put the date often down there, and then let it remain and see if the eye is black, or if it is one or both eyes.

Q. Then you do not mention the injury unless it is going to be visible?

A. It is entered like that.

Q. Suppose you see a man struck in the eye, would you put it down until you knew whether it was going to turn black or not?

A. No, sir; it is always reported to the doctor, if one man strikes another; but if there is no injury, I do not know it.

By Mr. Haskell:

Q. Then you only report those injuries that are visible — you enter only those in your book?

A. Yes, sir.

Q. So that if it were an injury that you could not perceive by just looking at the patient, you would not put it down?

A. Oh, yes, sir; here is one of a man bruised on the arm, and another on the limbs that was read.

By Mr. Rice:

Q. You want to understand the question; it is this — if a man receives an injury which is not likely to become visible, would you put it down in that book?

A. Yes, sir.

Q. Did you not just say that you would wait and see if the eye got black first before you entered it; suppose you see a man strike another in the eye, would you put that down in your book unless the eye should become discolored, or the skin be broken?

A. No, sir.

Q. Why would you not put it down?

A. For the reason that we are not supposed to have any thing on the book only what we call an injury.

Q. It would be an injury just the same, would it not?

A. A black eye, or a cut, or something, would be.

Q. Something that will show and be seen, that is your idea?

A. Yes, sir.

By the CHAIRMAN (resuming):

Q. Now with regard to the entry of the injury to Mr. Hughes; there does not appear the name of any attendant who witnessed it; how did you get this information from which to make the entry?

A. I got it from the attendants and the doctor, and what I seen myself.

Q. What attendants?

A. Mr. Brown, and Mr. Weir, and Mr. Bills, they are the only ones that had any thing to do with the matter.

Q. This entry under date of January 31st, E. D. C——, I believe you informed us that the attendant's name was Brown?

A. Yes, sir.

Q. "February 10, fourth ward. Patient D. R——is not allowed to use a knife in the dinner-room, when he entered to-day, he took a knife belonging to another patient and refused to give it up, and struck attendant Bills with his fist behind the ear; the attendant had to force him out of the room, when taking him through the door he accidentlaly struck his eye-brow and gave himself a slight cut; reported by attendants J. R. Jones and Frank Bills.

"Feb. 12, fourth ward. This afternoon J. M—— was mopping the floor; patient M. E—— came up behind him and struck him on the head and also kicked him in the side, the former turned on him and struck him in the left eye and temple, which caused his eye to be black. Witnessed by attendant J. M. Jones, and reported by attendant J. R. Jones."

Q. Are there two men of that name (Jones) in the asylum?

A. Yes, sir.

"February 14, 1884, fourth ward. Patient E. B —— was in the bath-room washing the chamber pots, patient McE —— went in and tried to stop him from work, but the former refused when the latter struck him over the left eye and gave him a slight cut. Attendant J. R. Jones separated them."

"February 14, fourth ward. This morning patient D. R —— was making his bed, patient R —— went into his room and asked R —— to kiss him, the latter turned on him and struck him on the cheek bone and raised quite a lump, from which cause the corner of his eye became slightly discolored. Separated by attendant J. R. Jones."

Q. Now, have the repeated occurrence in that list of black eyes, mostly the left eye, reported by A. G. Weir ever caused you to suspect that possibly Mr. A. G. Weir might have inflicted the injuries on the patients himself?

A. I might suspect, but I could not state any thing more than that.

Q. Did you ever suspect Weir of inflicting those injuries upon the patients?

A. No, sir, I could not say that I had.

Q. Do you not now, after hearing that read, and hearing the

cases one after another in this way, think it not improbable that Mr. A. G. Weir might have inflicted those injuries?

A. It might be probable.

Q. What is your present impression about it?

A. My impression is at present that it might be probable.

Q. You do think it may be probable that Weir had struck patients, and himself inflicted these injuries?

A. Yes, sir; but I do not think he did, though it might be probable.

Q. It might be probable but you do not think he did? What do you mean by those contradictory statements?

A. I never suspected him—Mr. Weir—to speak it in this way, I don't think he could have.

Mr. MORGAN — Do you mean "probably," or do you mean "possibly,"—you used the word "probably?"

A. It may be possible, that is what I mean.

By Mr. HASKELL:

Q. You say that you never suspected; do you not now, in the light of what has turned out to be true in the Hughes case, do you not now suspect that more or less of these injuries reported by Mr. Weir were really inflicted by himself?

A. In regard to that I would rather not answer it, for the fact that I don't know.

Mr. RICE — I do not think that is a fair question to ask him.

Q. Did you ever take any pains in order to verify those reports, to make inquiries of any kind as to whether the reports thus made to you were true or false?

A. Yes, sir.

Q. State what inquiries you made?

A. When he made these reports, I would ask him.

Q. Ask Mr. Weir?

A. Yes, sir; and ask the patient, too.

Q. Did you always ask the patient?

A. Not at all times, but I often would inquire of the patient.

Q. How many times did you ask a patient?

A. I could not say.

Q Will you swear you ever did it twice?

A. Yes, sir.

Q. Three times?

A. I can't swear.

Q. Can you swear which of the times it was that you made these inquiries — that is, in which of the cases that have been read to you?

A. No, sir.

Q. You could not tell even which of the times it was, to verify the report made to you by Weir, Bills, or Brown?

A. No, sir.

Q. Which of the times was it you inquired of the patients, can you say?

A. No, sir; I could not state which of the times it was now; I do not remember which of the times.

By Mr. MORGAN:

Q. Can you give us any reason why it is that Weir has reported more cases of injury than all the rest put together, that you have got entered there?

A. For the reason that he has charge of that ward.

Q. Of the bad ward?

A. Yes, sir.

By Mr. RICE:

Q. When he reported to you the fact that one of the patients had struck another, did you then make any inquiry of the patient to find out whether he had told the truth or not?

A. Sometimes I did.

Q. Did you ever find them — the patients — denying the fact?

A. Yes, sir.

Q. What did you do then?

A. Did not do any thing.

Q. Did you not make any further investigation?

A. No, sir.

By the CHAIRMAN:

Q. Did they ever tell you that Weir had done it?

A. I don't think so.

Q. Have you ever been informed that Weir struck a patient?

A. No, sir, I don't think I ever was.

Q. Were you ever so informed?

A. Not that I remember since last June.

By Mr. MORGAN:

Q. What was that case?

A. That is since Mr. Weir has been under my supervision that any patient had ever told me that Weir had struck him.

Q. Do you think it is reasonable for you to say to this committee that you cannot remember any time that a patient has charged Weir with striking him?

A. I don't remember that a patient ever did. I don't believe he ever did; do you put the question to me, do I believe he ever did or not, what is it?

By Mr. RICE:

Q. The question is this: Has there been an instance since you were supervisor in this institution that Mr. Weir has been charged

with striking a patient; has that charge ever been made against him since you have been supervisor, that Weir has ever struck a patient; that is, since last June?

A. No, sir.

Q. No such charge has been made?

A. Only Mr. Brown he told me that he had struck Hughes, that Weir had.

Q. With the exception of the Hughes case, I mean. Now I ask you if it were reported to you that one patient had struck another, whether you made any inquiries of the patient who was charged with doing the striking?

A. At times I did.

Q. And when you made such inquiries did the patient who was so charged ever deny the striking?

A. Yes, sir; sometimes.

Q. Did those men admit it or deny it?

A. I never asked a patient yet that they told me that Mr. Weir struck them.

Q. I did not ask you that: answer the question I put. When you asked those men concerning the fact — as to whether they had or not struck a patient, as reported by Weir, did they admit or deny it?

A. Most of them on that ward is so much disturbed

Q. Answer that question? (Question repeated to witness.)

A. They did not admit it.

Q. Did they ever charge any one else with having done it — that is, with having struck the blow, that they were charged with having struck?

A. No, sir.

Q. Simply made a denial of it?

A. Yes, sir; simply would not give any satisfaction.

By the CHAIRMAN:

Q. Now here is an instance: January 1, 1884, E. W—— came out of covered bed with a black eye; could not find out how he got it; reported by attendant, O. Ladd; what efforts did you make to find out how he got the black eye?

A. I inquired of attendant Ladd.

Q. What did he tell you?

A. He did not know how the patient got hurt.

Q. You simply found him that way under the bed?

A. Yes, sir.

Q. There have been several occurrences reported of injuries received like that one by patients coming out of the covered bed?

A. Yes, sir.

Q. Is it an ordinary occurrence reported for patients getting out of that bed with bruises upon them?

A. Yes, sir; once in a while.

Q. Do you think it possible that those injuries were caused by the patients themselves?

A. Yes, sir; sometimes they injure themselves.

By Mr. HASKELL:

Q. Do you recollect the evidence given before the coroner's jury; were you present during that examination?

A. I was present only while he was giving his evi ence.

Q. Do you recollect of then hearing, or of reading in the newspapers, the evidence of either Mr. Weir, Mr. Bills or Mr. Brown, where they testified that on the fourth ward they were in the habit of, and it was necessary, to strike and slap the patients in order to keep them quiet and make them behave?

A. Yes, sir, I remember that; there was some such testimony as that.

Q. Do you remember which one of them swore to that?

A. I believe it was Mr. Bills.

The book from which the foregoing reports have been read is marked "Record of Injuries, First Department, North." The first page has this entry upon it: An entry of directions as to making reports:

First—The date of occurrence.

Second—Name of person, specify which, attendant or patient, injured.

Third—Character of injury.

Fourth—By whom inflicted.

Fifth—The cause and manner.

Sixth—By whom witnessed. Specify whether patient or attendant.

Q. What do you think of that evidence of Mr. Bills before the coroner's jury that I called your attention to; were you surprised at it?

A. No, sir, I can't say that I was.

Adjourned until 9 o'clock, A. M., February 23.

BAGGS' HOTEL, UTICA,
SATURDAY, *February* 23, 9 A. M.

The committee met, pursuant to adjournment, in room 48.

Present — Messrs. HOWE, Chairman, HASKELL, OLIN, RICE and BROWN.

Examination of *Mr. Barrisdale* resumed:

By the CHAIRMAN:

Q. I show you what is called the injury book for the third department, north. Is that book and the entries contained therein in your writing?

A. Yes, sir. The entries commenced January 1, 1882.

Q. The first entry is: "January 3, 1882, eleventh ward. W. F. W—— fell down, etc., and gave himself a bruised eye, and also two scratches, one under the eye, and one of the nose; reported by attendant O. Ladd."

"January 15, tenth ward. J. A. C—— and J. C—— quarreled, etc.; C—— struck C—— a severe blow on the nose, which caused the blood to flow freely, and his nose to have a bruised appearance; also black under both eyes; witnessed by attendant J. D. Ferris."

Q. Is Mr. Ferris there still?

A. Yes, sir, he is one of the night watch. "February 1st, tenth ward. A. H—— came out of the dormitory this morning with a black eye; he got up some time through the night, and without any provocation choked R. C——, etc."

Q. Why did you not give the names of the attendants who witnessed this, as is required by your rules?

A. That happened through the night.

Q. Was there no attendant to witness it?

A. No, sir; it was in the dormitory where several patients occupied through the night; I guess there are eight or ten beds there.

Q. "February 6th, twelfth ward. T. I—— struck R. B——and gave him a black eye because he spat at him; reported by attendant R. Burke." Is Burke an attendant in the asylum now?

A. No, sir.

Q. "February 6th; twelfth ward; T. I—— was walking on the ward; H. M. N—— came behind him and struck him on the head; I—— returned the blow on the nose, which caused his nose to have a bruised appearance," etc. That is not witnessed by any attendant; was it done in your presence?

A. No, sir; it must have been reported by a patient.

Q. How could such an affair have happened without an attendant witnessing it?

A. I could not tell you.

Q. The next entry is under date Feb. 23, and was witnessed by attendant J. Farrelly. Is Farrelly an attendant there now?

A. No, sir; he is not there now.

Q. Do you know what he left for?

A. No, sir; I don't know.

Q. Do you know when he left?

A. I do not remember when he left.

Q. Has he been away some time?

A. I believe he has.

Q. How long do you suppose he has been away from the institution?

A. I could not state in regard to the time.

Q. The next entry, "dated April 26th, eleventh ward. Witnessed by attendant McLaughlin." Is he at the asylum now?

A. No, sir; he is not.

Q. "June 7th, twelfth ward. G. D. K.——. The day that he was admitted to the asylum, when he was taking a bath the attendants discovered bruised spots on his body, one large spot on the right side of the chest, one on the back part of the left hip, not so large as the former; the small of the back was also discolored; witnessed by attendants J. W. Sage and Alex. Barrisdale." Do you recollect that case?

A. Yes, sir.

Q. What did those spots or bruises look like?

A. It seemed as if he had got hurt or bruised; I remember that he had quite a large bruise on the chest.

Q. What did the patient say about it?

A. I do not remember what statement he did make.

Q. What impression did it make upon your mind as to how it had happened?

A. I should say that he must have been roughly handled.

Q. Did he make any complaint to you?

A. I do not remember that he did make any complaint.

Q. Did you make any inquiry as to how he was roughly handled, or by whom?

A. I can't say as I did; I really do not remember as I did.

Q. If you had made any particular inquiry you would be likely to have remembered it, would you not?

A. I might.

Q. If you had inquired and had found that it had been done by an attendant, you would have remembered it, would you not, if he was injured?

A. Yes, sir, I think I should; but it is rather a long time to remember.

Q. If you had inquired and had found out that the injury had been inflicted by a patient, do you think you would have remembered it?

A. I think if he had made any statement to me in regard to how it had happened, I think I should have remembered it.

Q. After the affair was entered in this book and presented at the office, was any further investigation made as to the cause?

A. No, sir; not that I remember of.

Q. "July 23d, tenth ward. J. G. F—— fell out of bed, etc.; witnessed by attendant Thomas J. Isdaile." Did you witness his falling out of bed?

A. No, sir; we heard him after he fell out, and then we went and put him in bed again.

Q. Did this occur in the night?

A. Yes, sir; in the middle of the night; I don't remember the time.

Q. In this entry, dated "July 24th, M. L——, twelfth ward, etc., there is a reference to the 'muff'"; what is meant by the muff?

A. It is a sort of leather concern into which the two hands are put in this form, [indicating] so that they cannot be drawn out.

Q. The hands are put in something after the style of a lady's muff?

A. Yes, sir; after that style; there are two bands about the wrist and the muff is fastened to the bands by a staple; then there are two holes in the muff, and the strap goes through there, and it is so arranged that the hands can't be pulled out of the muff.

Q. "1882, Aug. 10th, tenth ward. H. R —— struck E. S —— and gave him a slight cut on the nose; the former accused the latter, etc., etc." There is no witness to that; was it done in your presence?

A. No, sir; it was reported by the patient who owned the book referred to; I remember the circumstance.

Q. Is the entry in your handwriting?

A. Yes, sir.

Q. Why did you not give the name of the witness?

A. Because as I say the patient informed me himself, and I had to take his word for it; no attendant happened to witness it.

Q. "Nov. 7, tenth ward. D. J —— sometime through the night, etc., etc." This entry is not witnessed; can you explain how that is?

A. It was done in the dormitory.

Q. And the information was given to you by whom?

A. By the patient.

Q. "March 16, tenth ward. L. S —— was sitting quietly on a chair; J. H —— without any cause or provocation struck him and gave him a slight cut on the nose; witnessed by attendant A. Barrisdale." You witnessed that?

A. Yes, sir.

Q. Was J—— H —— a violent man?

A. Yes, sir, at times.

Q. Is he still a patient in the asylum?

A. Yes, sir.

Q. In what ward is he now?

A. No. 4 ward.

Q. What class of patients is that ward for?

A. The violent class as a rule.

Q. Will you swear that you did not strike that patient on that occasion yourself?

A. Yes, sir; I can swear I never struck J —— H —— in my life.

Q. Will you swear you never struck patient S ——?

A. Yes, sir; I will swear that I never did.

Q. And that you did not strike him on this occasion?

A. No, sir, I did not; I will swear that.

Q. Did you interfere to separate them?

A. Yes, sir, certainly; at any time when attendants see patients quarreling, they interfere to prevent them and separate them.

Q. Do you remember this occasion?

A. No, sir; I do not remember this particular occasion.

Q. I call your attention to this entry, "April 9th, tenth ward. T. E ——was helping the attendants to sweep, etc., etc., witnessed by attendants J. Brady and A. Barrisdale." Will you swear that neither of your attendants struck the patient on that occasion?

A. Yes, sir, I will swear that we did not.

Q. Do you remember that occurrence?

A. Yes, sir, I do remember that.

A. And this statement is literally true; you swear to that?

A. Yes, sir; literally true.

Q. "June 8th, eleventh ward. J. E. C. —— was sitting with his back against a tree in the yard, etc., etc." This is not witnessed by any attendant; can you account for that?

A. I cannot account for it.

Q. Did it occur under your own notice?

A. No, sir, it did not.

Q. When such reports come on, as they occasionally do, and, in violation of the rule requiring the attendant witnessing the affair to be named, is there any inquiry made from the office as to the occurrence?

A. It is generally reported to the officer when he comes on to the ward.

Q Which officer?

A. The doctor, and he may make inquiry.

Q. Do you first show these reports to the doctor when he comes to see you, or do you send the book down to the office with the report in it?

A. Generally tell him when he comes on to the ward.

Q. And then show him the book?

A. If he asks for the book we present it to him.

Q. But sometimes you merely tell without showing the book, do you?

A. Yes, sir, sometimes.

Q. In that case the first notice that the authorities in the asylum have of the occurrence (except the doctor, to whom you say you report verbally) is received when the book is delivered in the office?

A. Yes, sir.

Q. Have you ever had any inquiries made from the office as to why the name of the attendant witnessing the affair is not given?

A. Not that I remember of.

Q. Are any of these cases ever investigated that you report; is any thing done in the matter except this report that you make yourself?

A. No, sir, I cannot say that they are.

Q. When this report is made in the book that ends the matter; is that it?

A. Yes, sir; when it is reported to the doctor when he comes on to the ward perhaps he may investigate it some.

Q. But if it is not reported to him then no further inquiry is made?

A. No, sir, nothing further.

Q. Do you say it is not always reported to him?

A. I believe it is always reported to him.

Q. And it is always entered in the book?

A. Yes, sir; I always enter an accident that is reported to me, or that I find out on the wards; I always enter it on the book.

Q. You said a while ago that sometimes you did not report to the doctor, but merely entered it in the book in compliance with the rule, and send the book to the office?

A. I do not send the book to the office at all times.

Q. Do you keep it in your room?

A. Yes, sir.

Q. How often does the book go to the office?

A. I cannot state how often it does go.

Q. Does it go as often as once a month?

A. No, sir.

Q. But they see it occasionally during the year; do they?

A. Yes, sir.

Q. What causes them to see it then; do you offer it to them voluntarily, or do they send for it?

A. I offer it to them voluntarily.

Q. That is to say, they never send —

A. (Interrupting.) Excuse me; I made a mistake there; they send for it from the doctor's office at stated times and look it over, as I believe they make a copy of this.

Q. You say it does not go to the office as much as once a month?

A. No, sir; I don't think it does.

Q. Does it go as often as once in three months?

A. Yes, sir; I think it does.

Q. Then do you consider that the stated time is once in three months?

A. Yes, sir, I think it does; but I cannot state positively in regard to the stated time.

Q. Are you willing to say it is three or four times a year?

A. Yes, sir; it is that any how, and it may be more.

Q. Is it as much as six times a year?

A. I cannot state.

Q. I now ask you the question, whether you make a practice of

calling the attention of the doctor to every entry in this book, or only to such entries as he may himself inquire about?

A. That is all.

Q. So that, if the doctor makes no inquiry as to the appearance of a patient, the entry which you are required to make in the book is the only information which you give to the superintendent concerning the injury?

A. Such injuries as is reported in the morning by the attendants when the doctor comes through on the wards, all those entries of injuries on the book is reported to him; the attendant on the ward makes a report, and I make a note of it in that book.

Q. But you said just now that whenever the doctor inquired as to the cause of an injury — a bruise on the face, or a cut, for instance, or a black eye — that no special report was made to the doctor?

A. On the ward there is, but I do not show that book to him then, in regard to it.

Q. How do you communicate —

A. (Interrupting.) I am supposed to make a note of those things, they and are reported to him; the attendants are supposed to report all such accidents, and if the doctor comes through the wards and sees them, then he inquires after them and finds out how it occurred.

Q. And they are reported verbally to him — the doctor?

A. Yes, sir, in that case verbally reported.

Q. And the book is not necessarily shown?

A. Not in that case; of course, whenever they call for the book to the office, they see all these cases; and, if the doctor sees any bruise, or any thing, in the ward, he will ask if I made a note of such things.

Q. Suppose he does not notice the bruise; is it an invariable custom to call the doctor to the bruised patients?

A. Yes, sir.

Q. By whom is he called?

A. By the attendants.

Q. I understand you to say that your information as to most of these accidents is derived from the attendants?

A. Yes, sir.

Q. And you enter such information in this book?

A. Yes, sir.

Q. And that you do not show those books to the doctor, except at such times as they may happen to be called for?

A. No, sir.

Q. And that the doctors receive most of their information as to these injuries to patients by the personal report of the attendants?

A. Yes, sir, and then he inquires after it in the ward as to how it occurred.

Q. As a matter of fact, how often do the doctors ask to see these books, in addition to the verbal reports that they receive?

A. Three or four times a year, may be more.
Q. I now speak of the doctors who attend on the wards?
A. Yes, sir.
Q. You say they ask for the books two or three times a year?
A. They send for the books to the office.
Q. Do you mean that they do not ask you for it personally for examination in the wards from time to time?
A. I cannot say that they do.
[The reading of items from the injury-books was then resumed—see same at the end of the testimony of this witness.]
Q. "June 9th, eleventh ward, Dr. N —— come out of dormitory, etc., etc." Was Dr. N ——a patient?
A. Yes, sir.
Q. Where is he now?
A. I cannot say.
Q. Is he in the asylum?
A. No, sir.
Q. Are these entries in your handwriting (handing book to witness)?
A. No, sir; my writting ends there, with the date of June 9, 1883.
Q. On to what ward did you then go?
A. The first ward, first department.
Q. Do you know in whose handwriting that which follows is?
A. I believe it is in the handwriting of Mr. Fred. Smith; he is a supervisor.
[Reading of entries from injury book continued, q. v.]

By Mr. Haskell:

Q. Who was the supervisor in the first department before you went there?
A. Mr. Dillon.
Q. Is he in the institution now?
A. No, sir.
Q. How long was he supervisor of that department?
A. I could not state; I believe for over a year.
Q. And who previous to him?
A. Mr. Evans.
Q. Is Evans in the institution now?
A. No, sir.
Q. Do you know how long he was there?
A. Yes, sir, he was in the institution six or eight years.
Q. And supervisor of that department all the while?
A. No, sir.
Q. Who before Evans was supervisor of the department?
A. I do not remember who it was before Evans, but I believe it was Mr Jones.
Q. Do you know who R. R. Morris was?

A. I remember such a man in the institution.
Q. Was he an attendant on the fourth ward?
A. Yes, sir, for a time—a short time I believe.
Q. And do you know where he now lives, or any thing about him?
A. I think he lives in Paris, in this county.

By Mr. MORGAN:

Q. I see that in the report of accidents in these books, you do not go on and state what the result or outcome of the accident is; that is, as to whether it terminates seriously or fatally?

A. I cannot say that there is; I believe those little things that you have had here in the books come out all right in a short time.

Q. Suppose a man gets a rib broken, how do you report progress in such a case as that?

A. I have no rule; I do not know any rule; I presume the doctor keeps notes of such things as that.

Q. Now, let me ask you, as a supervisor of that institution, if it would not be advisable for you to investigate more thoroughly the cause of these injuries?

A. I think it would be; but when such things are reported to the doctor, and he knows of it, I generally leave such things to him after that.

Q. If the affair is not seen by you personally (and very many of these instances were not witnessed by you), such matters are reported to you by the attendants, are they not?

A. Yes, sir.

Q. Do you not think it would be highly advisable for you then to go and inquire of the patients and others who saw it, and ascertain whether the attendant is truthful in his report?

A. I do so sometimes.

Q. Would it not be advisable in all cases, or in nearly all cases?

A. It might be.

Q. If an attendant should injure a patient and report to you that it was done by another patient, why, you would take that as so without investigating to see whether it was true or not?

A. No, sir, I should go to the patient in that case.

Q. How would you know?

A. It would have to depend upon what the patient said, of course.

Q. The attendants report to you and you put that report down in the book as you have here, and it does not seem as though you investigated the matter very much; now nearly all of these accidents occur in the presence of patients upon whom you could place considerable reliance, do they not?

A. A good many of them occur in the presence, and a great many more of them occurs with patients that we cannot place any reliance on.

Q. But a good many of them do occur in the presence of patients upon whom you could place reliance?

A. Yes, sir.

Q. Do you know a man by the name of W. B——?
A. Yes.
Q. From H. V——?
A. Yes.
Q. What he would tell you in relation to an accident you could rely upon, could you not?
A. I think so at the present time; yes, sir.
Q. And there are many others that you could think of that you could talk with and they would give you a truthful account, would they not?
A. On the first ward that Mr. B—— is on at present.
Q. Well, is it not so on nearly every ward?
A. Some wards they would, and on other wards you could not depend on them.
Q. But, in your judgment, it would be advisable to make an investigation as to any accident reported by an attendant in cases where you have only the attendant's word, would it not?
A. Yes, sir.

By Mr. Haskell:

Q. I call Mr. Barrisdale's attention to an entry in the records of the first department, under date of February 24, 1883: How comes that entry in the book to be pasted in?
A. It was neglected to be put in? And the supervisor must have made it at the time.
Q. Is it in your handwriting?
A. No, sir.
Q. In whose handwriting is it?
A. Mr. Dillon's, I think.
Q. Is he in the institution now?
A. Yes, sir.
Q. The last regular entry in your book is under date of February 3d?
A. Yes.
Q. And the next one on the page is dated March 7?
A. Yes, sir.
Q. So that this entry bearing date as February 4, where it is pasted in, must have happened on the 7th day of March?
A. After the 4th, yes, sir; after the 7th of March? This entry is pasted in, it must have been made March 7, 1883.

By the Chairman:

Q. How often does Dr. Gray come through the wards?
A. I cannot say really how often he does come.
Q. About how often have you seen him going through the wards during the last two years?
A. I have seen him some weeks twice, then I would not for sometime again.

Q. For a month?
A. Yes, sir.
Q. Or more?
A. More than a month.
Q. State how frequent his inspection of the wards has been in previous years?
A. It was about the same, as near as I can remember.
Q. And he comes as often now as he ever did, as near as you can remember?
A. In regard to that I cannot state truthfully, because I do not keep any record much, but the same, I should think; I may be mistaken eitherwise.
Q. Have you noticed any difference in that respect as to the frequency of his visits in the wards within the last two years, and previously?
A. I can't state as to that.
Q. You cannot state that you have noticed any difference, do you mean?
A. Yes, sir, I can't state.

By Mr. MORGAN:

Q. How long have you been there at the asylum?
A. Pretty nearly twenty years.
Q. Upon whose recommend did you get your position?
A. From the superintendent of the Toronto asylum.
Q. Who is the physician in charge of your department?
A. Dr. Backus at present, and Dr. Pilgrim.
Q. How often does Dr. Pilgrim visit those wards over which you are the supervisor?
A. Either one or the other visits twice a day, in the forenoon and in the afternoon.
Q. What is the custom where a patient is badly disturbed and you think he needs medicine; now what is done in reference to that?
A. If the patient is badly disturbed and violent I report him to the doctor; at times they will send the medicine and at times they will order a restraint.
Q. When cases of that kind occur does the physician belonging to the ward come in person, or does he send medicine?
A. He sends medicine very often.
Q. By you?
A. Yes, sir.
Q. And you administer it?
A. Yes, sir.
Q. From your experience in that asylum do you not think it would be more advisable for the physician to come and see the patient himself?
A. Yes, sir, I do, but I don't see as he could do him any good.
Q. What medicine would they send to a patient that was badly disturbed and violent?

A. I cannot state what medicine they would send.

Q. One patient would require one sized dose of medicine, or prescription, and another a different one, would he not?

A. Yes, sir; I should think so.

Q. A stout, strong man would require a larger prescription or dose, would he not?

A. I should think so.

Q. While a weak, feeble man would take less. Would it not be better for the physician to come and see this man and examine him, and he himself administer the medicine?

A. They are well acquainted with all of those patients, and visit them twice a day, and there is none of those patients but what they understand their condition?

By Mr. RICE:

Q. The doctor is acquainted with the case of each one?

A. Yes, sir.

Q. Now, suppose a new patient comes in, and he becomes disturbed; what do they do?

A. Generally they give him medicine or order a restraint.

Q. They send it, do they not?

A. Yes, sir.

Q. They do not come themselves very often with it?

A. No, sir.

Q. Take the case of Mr. Hughes; he came in on the 25th of January, and that night medicine was sent to him because he was disturbed?

A. Yes, sir.

Q. Do you think that the physician in charge there had become sufficiently acquainted with Mr. Hughes and his case and situation so as to have rendered it unnecessary to have visited him personally while he was in that disturbed state?

A. I would think so, for this reason: He seen him the night before and the day before, and he was merely reported noisy, and he sent him some quieting medicine.

Q. Do you not think it would have been better for the physician to have gone and seen him, being a new patient?

A. It might; I do not mean to say it would not.

Q. And that occurs very frequently; when a patient just brought into the asylum he received the same attention in reference to giving medicine as one that has been there so long that the physician has become familiar with him and his case?

A. I presume so, in regard to medicine.

Q. I am asking you as an expert, having been there twenty years; In your judgment would it not be more advisable for the physician to come and see a patient who has just been admitted, and thus become familiar with their case when there is a disturbance?

A. In regard to the patient I do not see as it would, as I said be-

fore, but it might be more satisfactory to their friends or any one making inquiries.

Q. But not more satisfactory to the friends of the institution?

A. When the patient is noisy and disturbed, if he is not sick, often a patient will become excited, I will go and explain it to the doctor and he will send him some quieting medicine, or otherwise order him restrained.

By the CHAIRMAN:

Q. As to the paying patients and the pauper patients; do you know who are pay patients and who are pauper patients after they have been there for a time?

A. No, sir; not as a rule, I do not; there are pay patients there I do not know.

Q. Are they treated precisely alike?

A. Yes, sir.

Q. How do you find out that any of them are pay patients?

A. Sometimes I find out from the clerk, and from what I see.

Q. And by similar you mean that they dine at the same table and get the same fare?

A. Some of them pay for something extra and it is furnished them, or sent by their friends.

Q. Is it furnished at the table where they dine with the rest of the patients?

A. Yes, sir.

Q. And so far as your observation extends, that is the only difference between the pay patients and the pauper patients?

A. Yes, sir.

By Mr. RICE:

Q. There is a difference in the price paid by the pay patients; some pay more than the others?

A. Yes, sir.

Q. Some paying as high as $10, and some as low as $4?

A. I cannot say in regard to that.

Q. There is a difference?

A. Yes, sir.

Q. What is the difference in treatment where one is required to pay more money than another?

A. I cannot state in regard to that; I never inquired into that, whether a man was a pay patient or a county patient.

Q. Is it not true that some patients receive different treatment — and better treatment — from other ones?

A. No, sir; I cannot say that there are.

Q. Do they get more care and attention in one respect than in another?

A. I do not know that there is, unless they have a private attendant; there are so many patients on the ward, and so many attendants,

and we attendants are not supposed to pay more attention to one than another.

Q. Do you mean to say that all the patients are fed at the same table?

A. Yes, sir.

Q. No distinction?

A. No, sir.

Q. Is there any distinction at the table?

A. No, sir; I cannot say that there is; not in the way of food.

Q. As to the quality and quantity of the food is there any difference?

A. No, sir.

By Mr. MORGAN:

Q. Do you remember D. J. M —— being there?

A. No, sir; I believe I have heard the name, but I never knew the gentleman.

Q. You had no acquaintance with him?

A. No, sir.

Q. Are there any instruction in the asylum to the attendants as to keeping private the things that occur?

A. No, sir.

Q. So that you are at liberty to speak outside whatever things happens inside of the asylum?

A. Yes, sir; there are rule books that state that we are not to do so, I believe.

Q. You think the rule books state so?

A. Yes, sir.

Q. State what the rule is as you understand it?

A. Not to talk outside of what occurs inside?

Q. Are those rule books printed?

A. Yes, sir.

Q. How is it in regard to visitors who come to the asylum? Are you permitted to give them the names of any of the patients in the asylum?

A. It is not a rule, I think.

Q. Would you, if a visitor should ask you the name of any patient inside, would you or would you not give his name to the visitor?

A. I believe I would give his name.

Q. If you were told that it was a rule of the institution that attendants are forbidden to mention the names of patients, would you be surprised to know that that was a rule of the institution?

A. I have heard that there is; I think that it is a rule that a person showing a visitor through the asylum are not supposed to point out or mention the names or persons to those strangers.

Q. You have just said that if a visitor asked you the name of a patient that you would not hesitate to give it?

A. Well, I do not think I would.

Q. What is your opinion of there being an excess of visitors there, more than is good for the patients?

A. In regard to that I cannot state.

Q. Do visitors more or less disturb the patients?

A. Yes, sir.

Q. Frequently people go who have friends there, and they bring four or five, or six others with them, and they are shown through?

A. They are all brought through the wards.

Q. Many of them coming out of mere curiosity, and not to see their friends?

John W. Jones, sworn and examined, testified as follows:

By the CHAIRMAN:

Q. State your residence?

A. The State Lunatic Asylum; my home is in this city, Utica.

Q. How old are you?

A. Forty-eight.

Q. How long have you been employed in the insane asylum?

A. Twenty years.

Q. What is your present position in the asylum?

A. Supervisor.

Q. Connected with what wards?

A. Six, seven, eight and nine.

Q. How long have you held that position?

A. Eighteen years.

Q. What position did you previously hold?

A. Ordinary attendant.

Q. What is your present compensation?

A. Forty dollars a month; I have received that for eighteen years; I board at the institution, but I go home nights after the patients retire.

Q. What are your duties?

A. In addition to looking after the attendants, I have the general supervision and charge of the departments, to carry medicine to the patients, to see to their wants, clothing, and any thing that may happen to the patients, and report the same to the doctor.

Q. Do your duties extend throughout the day and night?

A. Throughout the day only; I go home at night.

Q. Who then assumes your duties as supervisor during the night?

A. They have a night watchman and he does it.

Q. How often does Dr. Gray visit your ward?

A. That I could not exactly tell you; it is at a regular time; if a patient is sick, I have seen him there as many times as three; that is three times in one day when a patient is seriously sick.

Q. How often does he go through the wards on inspection?

A. I do not know as he has any specified time.

Q. Does he come through at regular intervals?

A. He comes unexpectedly; sometimes he comes when we do not know about it; in fact, we never know when he will go through except at regular times.

Q. How frequently will you swear that he goes through the wards?

A. I could not swear as to how often.

Q. Does he go through as often as once a month?

A. I should say that he goes through oftener than that, taking it all the year around.

Q. Through each ward?

A. I don't know as to each ward; I only know about my own department.

Q. You think he comes oftener than once a month?

A. Yes, sir, I think he does, taking it all the year around on the average.

Q. How much oftener should you say?

A. I could not say, as I did not keep any record of it; but by thinking it over, I could swear that he goes on an average more than once a month.

Q. How often do the other physicians go through your wards?

A. They come twice every day, and often more; forenoon and afternoon every day, taking it the year round.

Q. Do you know what their habit is at night?

A. What, the doctors?

Q Yes.

A. No, sir; I don't know any thing about that.

Q. I mean as to visiting the patients at night?

A. I have heard very often that they have been called up in the night by the night watchman; when a patient is sick, I would hear it the next morning; I would only know that from what I have heard; not personally; sometimes a patient will tell me that the doctor has been to see him during the night.

Q. What are your instructions as to conversing about the affairs of the asylum to outsiders?

A. I have not had any instructions about that.

Q. Are there any rules in the asylum about that subject?

A. There is a rule book which says, I believe, they should not tell about patients to people outside?

Q. Does that refer to the ordinary affairs of the institution?

A. It refers merely to the patient's condition.

Q. Then there is no restriction upon you as to conversing with outsiders upon the affairs of the institution?

A. No, sir; not by any officer.

Q. How about conversing with visitors who are in the institution?

A. I try to answer all the questions they ask.

Q. Do they ever ask you the names of the patients?

A. Hardly ever.

Q. When they do ask you the names of the patients, do you frequently give them the names?

A. Sometimes I tell them and sometimes I don't.

Q. But when you know them you are willing to tell the names of the patients?

A. Yes, sir, I should be willing to tell the names.

Q. Are you aware of any rule of the institution forbidding you to give the names of the patients?

A. I don't think there is.

[Record book of injuries, second department, north, shown to the witness and the entries therein identified as being in his handwriting.]

Q. It appears by the entries here that most of the injuries are received about the face and head and eyes, and that most of the injuries are received by the patients?

A. Yes, sir, most of them are on the face and eyes.

Q. And do not the patients frequently have black eyes?

A. Not very frequently.

Q. Is it an unusual thing for a patient to have a black eye?

A. It is very rare that we have it; I think you will find it so by examining the record in that book; it occurs sometimes.

Q. Does that apply to all your wards?

A. Yes, under my supervision.

Q. Do you ever go into any of the other wards?

A. None out of my department.

Q. You do occasionally?

A. If I should remove a patient from my own ward I do; otherwise I do not.

Q. What is the character of the patients in your wards?

A. The ward that I remain on is the sixth ward; we have a variety, I should call it.

Q. Are they violent or quiet?

A. Quiet.

Q. So that there are not many injuries inflicted by the patients in your ward upon each other?

A. Hardly ever on that ward.

Q. I call your attention to this entry: "July 5, eighth ward, S. P. O—— hurt his right eye during the night in the covered bed; bruised and a small cut;" does it occasionally happen that patients come out of the covered beds with bruises or injuries on their bodies?

A. Not very often.

Q. How do you account for those injuries received?

A. In the covered bed, sometimes the patient is so wild that he jumps and throws himself about, which, if he was not in that bed, he would be on the floor, and he would suffer undoubtedly.

Q. It is possible for a violent patient to bruise and injure himself in the covered bed?

A. Very often.

Q. Here is an entry: "July 13, 1882, Mr. M——, eighth ward, eye

bruised by T. C. Williams, attendant; while putting him to bed he resisted;" is that attendant here now?

A. No, sir; he was discharged.

Q. What was he discharged for?

A. I forget what he was discharged for.

Q. I call your attention to another entry bearing date May 7, 1882, relating to an attack upon patient G. F. B—— by D. R. P——; this patient, G. F. B——, died from the effects of that injury, did he not?

A. Yes, sir; he died that morning.

Q. Was the coroner notified?

A. Yes, sir; the coroner came up on the ward and investigated the matter.

Q. Did he call a jury?

A. No, sir, not to my knowledge.

Q. If a jury had been called would you have remembered it?

A. If he had called a jury I should have known it.

Q. What did the coroner do?

A. He called the attendants and questioned each one.

Q. Then did he make a report?

A. To whom?

Q. To any one?

A. I don't know whether he did or not; the son of the patient that was killed was up there with the coroner.

Q. What became of the patient P—— after that?

A. He was removed to the fourth ward, where he is now.

Q. Do you know any thing about his condition now?

A. No, sir, I do not; I don't think I have seen him more than three times since that.

Q. Please look at this entry in your book bearing date "April 1, eighth ward; patient J. F—— fell on the floor and broke his collar bone." Do you remember that incident?

A. Yes, sir.

Q. Who was the attendant?

A. E. J. Bellinger.

Q. And he informed you that the patient fell and broke his collar bone?

A. Yes, sir.

Q. Then did you notify any physician?

A. I did.

Q. Whom did you notify?

A. Dr. Josselyn.

Q. What did he do?

A. He and another physician went up; and I think they had plaster of Paris, or something to set it with.

Q. Was there any inquiry made by Dr. Josselyn as to the cause of the injury?

A. Yes, sir.

Q. Of whom did he inquire?

A. The attendant Bellinger.

Q. Did he inquire of any of the patients?

A. I don't know, doctor, I was not there when he did it.

Q. Then you don't know of your own knowledge whether he made any such inquiry or not?

A. Of the patient, I do not.

Q. But you do know that he inquired of the attendant?

A. I heard him ask Bellinger how it was that it happened, and he said that he fell at the dining-room door on his side, and broke it.

Q. Do accidents often happen in going in and out of the dining-room?

A. Not very often; not oftener than any other place.

Q. But they do happen occasionally?

A. Yes, sir; a paralytic patient, who is not very sound on his feet, sometimes falls down.

Q. Look at this entry: "January 26, 1884. E. D. Hughes struck E. P. D——, etc., etc. Witnessed by attendant J. M. Jones, and W. Mahoney, patient; removed to fourth ward." Were you present on this occurrence?

A. No, sir; that was done before it was reported to me; I went over as soon as it was reported, and saw the condition of the man, and then I went and reported to the doctor.

Q. What time of day was this?

A. Half-past ten in the morning.

Q. Where was he then removed?

A. He was taken to the fourth ward.

Q. Was that the morning he suffered the injuries from which he died?

A. Yes, sir.

Q. Who took him to the fourth ward?

A. I did.

Q. What was his condition at the time you took him to the fourth ward; was he very violent?

A. Yes, sir; he was spitting and trying to bite.

Q. Was he a powerful man, or otherwise?

A. Yes, sir; quite a large man; I should think he would weigh 175 pounds.

Q. Did he appear to be in good health?

A. Physically, he appeared to be in good health.

By Mr. Haskell:

Q. What statements or direction did you give to the attendants on the fourth ward?

A. I told them that the doctor had ordered Mr. Hughes down there; I told Mr. Weir that, and for him to take care of him and that he was very violent. I then left and went to my own department.

Q. When was he put on to the ninth ward?

A. A quarter past one on the afternoon of the 25th of January.

Q. How was he that afternoon?

A. He was incoherent in his speech.
Q. Was he violent then?
A. No, sir, he was not violent then.
Q. Do you understand Welsh?
A. Yes, sir, somewhat.
Q. Could you understand what he said?
A. Yes, sir, some of it; I used to live in Morrisville and I knew Mr. Hughes before he came there to the asylum.
Q. When he arrived at the institution he was brought directly to your ward?
A. Yes, sir.
Q. Did he take his meals up there or go down to them?
A. He took his meals on the ninth ward.
Q. Did he become excited or violent before you left that evening?
A. No, sir.
Q. Did the doctors visit him in your presence that afternoon?
A. Not in my presence.
Q. Do you know whether the doctor visited him that afternoon?
A. He had been through that afternoon.
Q. Which doctor?
A. Dr. Backus; he had been through that department that afternoon.
Q. When did you last see Mr. Hughes that evening, before leaving the department?
A. About five minutes to eight.
Q. Was his condition then the same as stated?
A. It was as it had been during the afternoon; he was very talkative and incoherent.
Q. Do you know whether any medicine had been given to him before you left?
A. No, sir, there was not; I did not take any medicine to him that evening.
Q. If any medicine had been given to him while you were on duty, it would have been given by you?
A. Yes, sir, or I should have known it.
Q. So that no medicine was given to him before eight o'clock?
A. No, sir.
Q. Do you know whether he slept in the ward that night or not?
A. No, sir, only by hearsay.
Q. You believe he slept in that ward that night?
A. Yes, sir, because he was there in the morning.
Q. Was any report made to you the next morning of his condition during the night?
A. Yes, sir; that he was excited, was put in the covered bed about one o'clock that morning.
Q. Who made that report to you?
A. Mr. Orendorf.
Q. Is he an attendant?
A. Yes, sir; he is the man in charge of the ninth ward.

Q. What was the condition of Mr. Hughes the next morning?

A. The next morning he was throwing his clothes about the ward.

Q. When you first saw him?

A. Yes, sir.

Q. Was he dressed when you saw him?

A. He had his pants on, and his coat and vest was at the other end of the ward; I went and talked with him and tried to get him to put them on; that was about seven o'clock, or ten minutes past.

Q. Did he have any breakfast that morning?

A. Yes, sir, he had breakfast in the ninth ward.

Q. He did not go down to the dining-room?

A. I would not be positive about that; I asked the attendant if he had had his breakfast, and he said yes; there is a dining-room on each ward.

Q. After that time, at what time was it he was taken to the other ward?

A. The attendant reported at half-past ten that Mr. Hughes was very violent, and has been striking several patients; I went to see him and he was talking something in Welsh; I talked with him and wanted to sit down; then I told the attendants to sit there with him on each side of him until I went to the doctor; I went and saw Dr. Backus.

Q. What did you tell the doctor?

A. Just what Mr. Hughes had been doing.

Q. What did he tell you?

A. To remove him to the fourth ward.

Q. The doctor did not come to see him at that time?

A. Not at that time.

Q. Had the doctor seen him that morning?

A. No, sir, I think he had not, that morning, not to my knowledge; I took Mr. Hughes down, I had two attendants walking on each side, I told Mr. Weir of the doctor's orders to take Mr. Hughes down there, and I told him he was very violent on the ninth ward.

Q. Were you here when Mr. Hughes was here before?

A. Yes, sir.

Q. Was he under your care?

A. Yes, sir.

Q. How much time was he here before — that is, how much time in your ward?

A. I think about six weeks; he was here about three months; in all about that time.

Q. Were you on the same ward then as you are now?

A. Yes, sir; it was the sixth ward at that time.

Q. Was he put with you when he first came there?

A. No, sir.

Q. Where was he put when he first came to the institution?

A. That I do not know; I could not tell you.

Q. You do not know what part of the institution he was put in?

A. I do not know; he came from some other ward on to the sixth ward.

Q. Do you know whether he came from the fourth ward?

A. I do not know as to that.

Q. What was the occasion of his being removed to your ward?

A. His condition was better, and he had improved.

Q. Was he discharged from your ward?

A. No, sir; he was discharged from the first ward.

Q. Did you know of him being injured on the fourth ward when he was here before?

A. I never heard of it.

Q. You don't know whether he was put there on the fourth ward when he first came or not?

A. I could not tell.

Q. Did you know that when he was here the first time that he was here as a pay patient?

A. No, sir; I had no means of knowing that; I heard afterward — his son told me afterward that he was here as a pay patient; when he was here this time, I don't know about that.

Q. Did you know this time that he was here as a pauper patient?

A. No, sir, I did not; I have no means of knowing about that; his son told me that he was with him — that he brought him.

Q. And that the county sent him this time?

A. Yes, sir; I did not hear it from any of the officials of the asylum, except what information the son told me, because we have no occasion to know any thing of that kind.

Q. Do you not know which are which?

A. No, sir.

Q. That is, you do not know which are pauper patients and which are pay patients?

A. No, sir, only by accident like that.

Q. Do they all receive the same treatment?

A. I can see nothing different in the treatment of them, except when they are sick.

Q. What is the difference then?

A. I mean that is the only difference in the treatment of the patient, that is when they are sick.

Q. Suppose some of the pay patients are charged $10, $17 and even $25 per week, do they receive any different treatment here from the pauper patients at $4 a week?

A. I don't know any difference except the doctor orders them different diet; the diet list is made out once a week.

Q. For the different patients?

A. Yes, sir.

Q. So that each patient receives special food?

A. Yes, by order of the doctor.

Q. Whether they are sick or well?

A. Yes, sir — they are all supposed to be sick, but I mean sick in bed; there is that distinction made of course.

Q. But they are each fed with what the doctor orders them to oe fed on and are not all fed the same thing?

A. No, sir.

Q. And once a week the doctor gives you a list, you say?

A. I make out a list and take it down for his approval, and then I take it to the kitchen.

Q. And he makes any changes in the food if he thinks proper?

A. I put it down on the list, and if he sees proper to change it — if a man is down for egg and toast, and he wanted to put him on beef tea, he will change it in that way.

Q. And in that way each patient in the asylum is fed in such a way as the doctor prescribes, for the week?

A. Not for the whole of the patients, I am speaking of the extra diet list which is presented once a week.

Q. How do you make up the extra diet list, and who is it made up for?

A. For those that are sick, and them that have asked the doctor during the week when the doctor goes through; sometimes a patient wants such and such an article for dinner, and that list goes to the kitchen; I keep that list and then on Saturday I take the list down stairs, and, if the doctor desires to continue it, he signs it, if not, he crosses it off and that ends it; in the course of the week there may be twenty or thirty of these small little orders that go into the kitchen.

Q. And you do not send any order into the kitchen unless it is first approved by the doctor?

A. No, sir; there is nothing ordered for the patients except through the doctor, except the general diet of the house which we are all having.

By the CHAIRMAN:

Q. What do you do with this injury book in which you make these entries?

A. The doctors call for it sometimes, to see it.

Q. How often do you send the book to the office?

A. We never send it unless they call for it; sometimes once a week, or once a month; at irregular times; whenever they call for it, I take it down to them.

Q. It is called for at irregular times you say; once a week, and sometimes not once a week?

A. Yes, sir.

Q. How many times is it called for in the year, to the best of your recollection?

A. I really could not tell; perhaps forty times; I could not possibly tell.

Q. As a general thing, where is the book kept?

A. In my room; sometimes, if the doctor whistles up for the in-

jury book, I take it down; perhaps I get it back that day, or the next morning.

Q. What inquiries are made by the doctors as to the entries on those books?

A. When he comes through the ward he inquires of the attendant as to any injury that is done, if they know any thing about it; in some cases they are injured during the night, and nobody knows about that, only we ask some patient intelligent enough to tell about it.

Q. How do the doctors know about any of the injuries unless they see this book?

A. They know it when they come through; every time it is told by the attendants, and we have to tell them every change in the patients when they come through.

Q. So that it is not necessary for the doctors to see that book to know about the injuries?

A. No, sir; they would know before that.

Q. Do they inform themselves of it by observing the patients?

A. Their attention is called to it by the attendants on the wards.

Q. Do the doctors ever question the attendants as to whether they — the attendants — ever inflict injuries upon the patients?

A. They very often ask me, and they ask the attendants under my charge if they are kind to the patients.

Q. What do you answer?

A. I tell them just as it is; and if they are not, I report it if they do not ask it.

Q. Have you ever reported the names of any attendants that have been unkind to the patients?

A. Yes, sir.

Q. Can you name any attendants that you have so reported?

A. I do not think a case has happened now for a good many years; but I have known one to be discharged for unkindness to patients.

Q. How long was that ago?

A. That was fifteen years ago.

Q. And since then you do not know of a case where an attendant has been unkind to a patient?

A. Not so unkind that I considered it a necessity of reporting it; if I see them taking hold of a patient roughly, then I think I should tell them to desist that, or I should report them.

Q. Have you ever known a case where an attendant has been intoxicated that you know of?

A. Not that I know of; not in my department; I never heard of any such cases.

Q. Or in any of the other departments?

A. No, sir.

Q. You never saw one in your department?

A. I do not recollect one in my department.

Q. You never saw an attendant under the influence of liquor?

A. No, sir; not in my department; but I have heard of some in some other departments, although I never saw them myself.

Q. And you have never reported an attendant for improper treatment of a patient, within the last fifteen years?

A. I do not believe that I have.

Q. Have you ever suspected that the black eyes and other injuries inflicted on patients might have been done by the attendants, and not by the other patients as reported?

A. I always make a full investigation of it; asking those patients intelligent enough to tell me any thing about it.

Q. Do the patients ever say the attendants have inflicted the blow?

A. I have heard patients say that they had been abused when I knew the fact to be otherwise.

Q. How did you know it to be otherwise; is it by being present?

A. I have known of it that more than one has told me; they say that they have been abused, when I have known for a positive fact that it was not so.

Q. Have patients ever told you that they have been struck by attendants?

A. Yes, sir.

Q. And you say that you have disbelieved it?

A. After I have made an investigation I could not find any thing to prove it.

Q. So that every case of injury to patients, or bruises received by them, you attribute to accident or to injuries inflicted by other patients?

A. Yes, sir; I have made thorough investigations; they are all entered in the book.

Q. What is the character of the attendants generally in the institution; are they respectable men?

A. I do not know as I can hardly answer that question.

Q. How long do the attendants average in their stay at the asylum?

A. That I could not answer, sir; they have not stayed as long the last two or three years as they usually did.

Q. Have there been frequent changes during the last two or three years?

A. Yes, sir, a great many have left during the last two or three years.

Q. How do you account for that change?

A. A large quantity consider the wages was not sufficient.

Q. What is your opinion on that subject?

A. (Continued.) And a great many of them leaves on account of the long hours; that is another cause, and the little time that we get out to ourselves; we only get two evenings a week, and a half a day once a month, and one Sunday once a month.

Q. About what do the hours of labor average for the day?

A. Fifteen or sixteen hours a day.

Q. What do the wages average?

A. The highest is twenty-eight dollars a month, so I have heard.

Q. And the board, washing and lodging?
A. Yes, sir.

By Mr. RICE:

Q. Do the attendants ever carry any weapons or implements to defend themselves against the patients?
A. I never heard of any such thing.
Q. You never heard of any such thing as their having any thing for self-protection?
A. Nothing whatever that I ever heard of.

By the CHAIRMAN:

Q. What is your opinion about the rate of wages paid, as to its being sufficient?
A. I think you can get different qualities of men, like any thing else; you could get men there for $15; but I do not believe you can get the best class of men for even the wages they pay here; most of them that leave here get better wages elsewhere; of course that is an inducement for them to leave.
Q. Do they go to other asylums?
A. There have been some; they get more liberties in other asylums than they do here.
Q. Do you know whether they get higher wages in other asylums than they get here?
A. I do not.
Q. What asylum did you serve in, if any, before you came here?
A. I did not serve in any asylum before this.
Q. Have you any statement to make in regard to this asylum?
A. No, sir, not that I can think of.
Q. Can you recommend any changes that might be made which would improve things in this institution?
A. Nothing, only what I told you in regard to the attendants; I think they are overworked; I have as much reason to know that as anybody, for I have been here for twenty years; a man cannot be bright and cheerful all the time when he is confined here like a patient all the time.
Q. Are the doctors all as attentive and obliging as they ought to be?
A. As far as I can see they are; I could not find any fault as to that; if there is the least the matter with a patient, they are immediately here to see them when it is reported to them.
Q. Does Dr. Gray give all his attention to the asylum as far you know?
A. I could not tell any thing about that.
Q. You merely know of Dr. Gray's relations to the institution by his appearance in your ward from time to time?
A. I see him occasionally going through the department.
Q. And you have stated that he appears at irregular intervals, from a week to a month apart?

A. Yes, sir; and in case of serious sickness of a patient I have known him to be three times in one day to see him.

Q. Have you known him to be there to visit patients more frequently within the last few years?

A. I don't know that there has been any change in regard to that.

Q. Do you recollect any cases within the last few years where he has visited a patient?

A. Yes, sir, he has been to see Mr. Hughes; he was there to see him three times.

Q. That is, when a patient was very sick he was up there to see him?

A. Yes, sir.

By Mr. Haskell:

Q. Did you see Mr. Hughes after he was hurt?

A. Yes, sir, I was with him at the time; he came upon the eighth ward after he had received his injuries, and he was there until he died.

Q. What did Mr. Hughes tell you about how he got hurt?

A. I could not get any thing out of him that I could understand much; he said he had had a big fight with somebody, I could not get any names; he said he got into a fight with a lot of men, but I could not get any names from him.

Q. Did you give your personal attention to taking care of Mr. Hughes until he died?

A. Not entirely; I used to see him as many as a dozen times in the day.

Q. You don't know that any investigation was made to ascertain the cause of his injuries?

A. No, sir, I do not, only by hearsay.

Q. What investigation did you hear was made?

A. I heard that the doctors asked the attendants how it happened; I heard that myself.

Q. Did you have any talk with the doctors as to how it happened?

A. No, sir; I heard Dr. Gray talking with Mr. Hughes about it, trying to find out how it happened.

Q. Did Mr. Hughes reply in any definite manner?

A. No, sir.

Q. Do you see the managers of the institution occasionally in the asylum visiting?

A. Yes, sir.

Q. Who of the managers have you seen there?

A. I have seen Senator Campbell there more than any one else.

Q. Can you name any other managers that you have seen there occasionally?

A. I have seen Mr. Lawrence.

Q. Any one else?

A. Well, I am not acquainted with them much, but these two I

have known for a good many years; Mr. Campbell is up there about once a week.

Q. Does he go through all the wards?

A. Not all the wards that I know of, but I see him up there about once a week, if not oftener.

Q. Where do you see him?

A. In the center, sometimes, coming in there, and I have known him to come up on our ward to see some of the patients.

Q. How often did you see him — Senator Campbell — on your ward?

A. I don't know exactly as to the number of times in a year.

Q. Once or twice a year?

A. Yes, sir; oftener than that; certainly as much as six or seven times a year.

Q. Ever since he was connected with the institution?

A. Yes, sir.

Q. Can you say that you have seen the other managers there as often as that?

A. Not as often as Senator Campbell, and some of them come, but I don't know them all.

Q. So they may have been there without you knowing it?

A. Yes, sir, without my knowing that they were managers.

Q. Do they ever make any inspection of the institution together or in company as a board, so far as you know?

A. I believe they meet there once in every three months, they go through all the wards and look into the place and talk with the patients.

Q. But you are not aware of any such visitation at other times by the board?

A. No, sir.

Q. Or by a committee of the board?

A. They might have been and me not know it; I have heard sometimes when men went through the wards that one of them was a manager, but that is all I know; I am not acquainted with them.

Mr. Haskell — I desire to call attention to four entries from the injury book. "First department, north," as follows:

Fourth ward, July 17, '78. E. D. Hughes was very violent this morning while the attendants were bathing and dressing him, his nose was hurt a little, they did not know how it happened. Reported by attendant R. R. Morris.

Fourth ward, December 31, 1877. J. A. J—— hurt his forehead last night while in a covered bed, it caused a black eye. Reported by attendant J. E. Roberts.

Fourth ward, August 7, 1878. J. E—— bruised his forehead and knee quite badly last night in a covered bed; removed to eleventh ward to day. Reported by attendant R. R. Morris.

Fourth ward, November 6, 1878. H. B—— black eye and bruised

his leg a little in a covered bed last night, tries to injure himself al, he can, also refuses food and medicine. Reported by attendant C W. Travis.

The three books read to witnesses, Barrisdale and Jones, and used in connection with their testimony were marked, respectively, exhibits No. 4, 5, and 6, J. H. M. The following is a transcript of the contents of said books. On the first page of each book are the following instructions:

Give in each report the following facts:

1. Date of occurrence.
2. Name of person [specify which patient or attendant] injured.
3. Character of injury.
4. By whom inflicted.
5. Cause and manner.
6. By whom witnessed [specify whether patient or attendant].

First ward, December 19, 1876. H. W——had a fit; was standing in his room sewing on a button; he fell striking his face on the windowsill; the right eye puffed up instantly; nose bled a little. Reported by attendant J. Evan.

Fourth ward, May 7, 1877. T. L. S—— struck attendant Rickard in the face; cut him under the eye. Attendant Rickard was feeding the patient. Reported by attendant Rickard, J. E.

Fourth ward, May 20, 1877. While the attendants were putting the patients to bed, J. L—— and D. W—— commenced fighting in the back hall. Mr. L—— got Mr. W—— down and kicked him, breaking one of his ribs. Cause, he said Mr. W—— kept him awake the night previous. Reported by attendants R. McCormic and Rickard, J. E.

Fourth ward, June 8, 1877. T. L. S—— struck at attendant McCormic while going to dining-room. He lost his balance and fell, striking his (T. L. S——'s) head against the door. This caused a black eye. Witnessed by attendant McCormic.

Fourth ward, June 25, 1877. F. W. K—— struck S. S—— on the eye and blacked it. No cause could be ascertained. Witnessed by attendant Roberts, J. E.

Fourth ward, July 6, 1877. J. E. St. J—— had a fit, fell on the floor, struck his face, caused a black eye. Witnessed by attendants Roberts and McCormic.

Second ward, August 4, 1877. B. F. P—— scalded his hand severely by letting hot water run on it; said he wished to see whether he could endure the heat of hell. Reported by attendant Davis, D. K.

Fourth ward, October 3, 1877. J. E—— struck J. A. J—— on the head with a tin cup; cut his head a little; no apparent cause. Reported by attendant Roberts.

Fourth ward, December 31, 1877. J. A. J—— hurt his forehead last night while in a covered bed; it caused a black eye. Reported by attendant J. E. Roberts.

Third ward, January 1, 1878. Mr. M. C—— kicked at D. R- — and hit a chair ; hurt his big toe a little, cause D. R—— plagued him. Reported by attendant J. Rickard.

First ward, January 5, 1878. H. L. L—— while helping to carry a show-case to the shop, he accidentally struck his face against the corner of it, and caused a black eye. Witnessed by attendant J. Evans.

Fourth ward, January 15. C. M. W—— struck J. A. J—— on the nose ; it bled very freely ; nose and eye somewhat black ; no cause could be ascertained for the act. Witnessed by attendant J. E. Roberts.

Fourth ward, February 20, 1878. M. N. B—— received a black eye by R. P——'s striking him with the back of his hand across the nose ; cause, Mr. B—— took some meat off Mr. P——'s plate. Witnessed by patients Mr. T—— and Mr. W——.

Fourth ward, April 13, 1878. J. E——, a black eye ; R. B—— struck him with his fist ; cause, Mr. E—— plagued him. Reported by attendant J. E. Roberts.

Fourth ward, May 6, 1878. T. L. S—— attacked attendant T. Williams, and was thrown, striking his nose on the floor ; nose cut a little. Reported by attendant T. Williams.

Fourth ward, May 7, 1878. J. E—— fell off the steps when going out in the yard, scratched his face and nose somewhat. Reported by attendant C. W. Travis.

Fourth ward, June 12, 1877. W. G——, black eye. Attendant R. R. Morris was opening a door, Mr. G. was on the other side of the door and was hit in the face by the door. Reported by attendant R. R. Morris.

Fourth ward, June 20. W. R. L. M——, black eye; struck by G. W. D.; cause, Mr. M—— plagued him. Reported by attendant R. R. Morris.

Fourth ward, June 23, 1878. W. L. M—— attacked attendant R. R. Morris and was thrown, hurting his nose a little. Witnessed by attendant R. R. Morris.

Fourth ward, June 27, 1878. W. R. L. M—— was hit on forehead — black eye — by J. W. S—— without any apparent cause. Witnessed by attendant R. R. Morris.

Fourth ward, July 16, 1878. W. L. M——. Mr. M. hit his head on the arm of a chair, caused a black and blue spot on forehead ; would not say why he did so. Reported by attendant R. R. Morris.

Fourth ward, July 17, 1878. C. D. H—— was very violent this morning while the attendants were bathing and dressing him; his nose was hurt a little, they did not know how it happened. Reported by attendant R. R. Morris.

Fourth ward, July 29. L. M——. Mr. M—— was asked to go to dinner ; said he would not eat ; rushed into water-closet, broke two lights of glass with his hand, scratched his hand a little. Witnessed by J. F. Michael, attendant.

Fourth ward, August 7, 1878. J. E—— bruised forehead and knee quite badly last night in covered bed. Removed to eleventh ward to-day. Reported by attendant R. R. Morris.

Fourth ward, August 22, 1878. R. W. S—— broke twenty-four panes of glass with his hands; cut one and scratched the other hand pretty bad; he was trying to break out. Reported by attendant C. W. Travis.

Fifth ward, August 27. A. H. B—— was struck on face with a shovel by A. S. F——; cause, Mr. B—— asked him forthe shovel; slight scratch on face. Witnessed by patients W. A——and F. W——

Fourth ward, September 7, 1878. D. C. M—— black eye; H. H. M—— struck him; no apparent cause. Reported by attendant R. R. Morris.

Fourth ward, September 30, 1878. W. G—— struck himself on forehead with a small stone while in the yard; caused a slight bruise. Witnessed by attendant W. R. Jones.

Fourth ward, October 10, '78. J. C. C—— tried to get the keys away from J. P—— in the yard, and also wrenched attendant W. R. Jones' hand. Witnessed by attendant R. R. Morris.

Fourth ward, October 16, 1878. T. L. S—— struck on forehead by W. McB——; slight cut over left eye; no cause could be ascertained. Reported by attendant R. R. Morris.

First ward, October 26, '78. G. B. H—— was bitten by a dog on little finger; cause, he vexed the dog. Witnessed by patient C. H. L——.

Fourth ward, November 4, '78. H. H. M—— was struck on the eye by W. H. S——; said Mr. M—— had hit him, but he had not; Mr. M—— has a black eye. Witnessed by attendant R. R. Morris.

Fourth ward, November 4, '78. J. B—— attacked the attendants when they went to give him his medicine; he hit attendant C. W. Travis and J. Evans on the face, and in putting patient to bed, he must have struck his face on the bedstead; had a little black spot under one eye next morning. Witnessed by attendants J. Evans, C. W. Travis and J. F. McMichael.

Fourth ward, November 5. G. H. P——, black eye; was hit by J. G. W——; cause Mr. P—— was undressed in water-closet. Reported by attendant C. W. Travis.

Fourth ward, November 6, '78. H. B—— black eye and bruised his leg a little in covered bed last night; tries to injure himself all he can, also refuses food and medicine. Reported by attendant C. W. Travis.

Fourth ward, November 6. W. McB——, black eye; was struck on the eye with a slipper by J. B——; cause, Mr. McB—— bothered him. Reported by attendant C. W. Travis.

Fifth ward, November 15, '78. A. T——, a black eye; caused by J. S. P—— throwing an inkstand, they had a few words, but had apparently gotten over it. Mr. P—— was writing; Mr. T—— happened to walk past him, he, P——, up with the inkstand, threw

it hitting Mr. T—— over the left eye. Mr. P—— said he though Mr. T—— was going to kill him. Reported by attendant R. R Pugh.

Third ward, November 27, 1878. J. L. D—— accidentally cut the end of his left thumb off while at work in the slaughter-house. Reported by H. E. Jones, butcher.

Fourth ward, December 28, 1878. H. F——, black eye; was hit by J. E. W——; no apparent cause. Witnessed by attendant W. R. Jones.

Fourth ward, January 4, 1879. W. H. S—— accidentally broke his right knee cap in making a charge on attendant W. R. Jones, for keys. Witnesses, patients J. G. W—— and H. H. M——.

Fourth ward, January 12, 1879. G. H. P——was hit by H. F——on the eye, lid cut a little; no cause could be ascertained. Reported by attendant G. E. Philo.

Fourth ward, January 19, 1879. J. G. W——, black eye; received a blow over the left eye from J. C. C——, said Mr. W—— insulted him. Reported by attendant G. E. Philo.

Fourth ward, January 24. Attendant J. F. McMichael was struck on the eye by M. M ——while the attendants were trying to put him in a chair. Witnessed by attendant G. E. Philo.

Fourth ward, March 12, 1879. F. C. B——, black eye; accidentally hurt it in a scuffle with attendants. Witnessed by attendants G. E. Philo, C. W. Travis, W. R. Jones.

Second ward, May 11, 1879. C. L. H—— tried to commit suicide by cutting his throat with a razor that he dodged into attendants room and got, while attendant H. A. Jones was asleep in the room. Reported by attendant D. R. Davis.

Fourth ward, June 15, 1879. S. B—— bruised his cheek against the door casing while in a scuffle with attendants G. E. Philo and W. R. Jones.

Fourth ward, September 1, 1879. A. K. C—— received a black eye in the yard from Mr. B——. Witnessed by attendant W. R. Jones.

Fourth ward, September 15, 1879. A. S—— bruised his cheek while bathing. Witnessed by attendants G. E. Philo and J. Philo.

Fourth ward, October 11, 1879. F. J—— received a black eye from M. C—— without apparent cause. Witnessed by attendant John Philo.

First ward, October 21. W. O. B——, black eye; accidentally hit with ball while playing. Witnessed by attendant R. H. Jones.

Fourth ward, November 16, 1879. B. D——, black eye; received while pounding around in his room last night. Reported by attendant G. E. Philo.

Fourth ward, November 22, 1879. A. K. C——, black eye; received a severe blow from Mr. McG——. Cause, Mr. C—— happened to touch him. Witnessed by attendant Richard H. Jones.

Fourth ward, November 28. F. W. F——, black eye; received

a blow from Mr. C——; said he thought he was told to hit him. Witnessed by attendants John Philo and Richard H. Jones.

Fifth ward, December 12, 1879. A. T. McL——, black eye; V. W. C—— hit him with his elbow. Cause, Mr. McL—— was looking over his shoulder at a letter he was reading. Witnessed by patients P. D——, A. T——, M. K——.

Third ward, December 3. B. F. P——, slight bruise on his head. Cause, kicked by a cow while milking. Witnessed by butcher, H. C. Jones.

Fourth ward, December 7, 1879. F. B. H——, black eye, received while the attendants were trying to get him to bed; he tried to get out of the room, striking his face against the door-casing. Witnessed by attendants G. E. Philo and J. Philo.

Fourth ward, December 16, 1879. F. J——, slight bruise on his head; cause, hit his head against a door while passing through, in a disturbed state. Reported by attendant G. E. Philo.

Fourth ward, December 21, 1879. B. D——, a small gash on his head; was thrown by S. C——, striking his head against a chair; no apparent cause. Witnessed by attendant G. E. Philo.

Fifth ward, January 19, 1880. A. T. McL—— sprained his leg below the right knee; he was fooling with J. G——; he stepped back and fell down; no one to blame. Witnessed by attendant R. R. Pugh.

Fourth ward, January 24, 1880. E. C——, slight bruise on the left side of his nose while in a scuffle with attendant G. E. Philo, taking him from the dining-room. Witnessed by attendant J. Philo.

Third ward, February 1, 1880. P. S—— had his little finger of the left hand broken; he was standing with his hand on the casing of the cow stable door; the wind blew the door shut on his hand; he supposed he had fastened the door open. Witnessed by Wm. Prichard.

Third ward, February 12, 1880. C. B. G—— had three fingers of the left hand sawed a little with buzz saw, accidentally, while he was using the saw. Reported by attendant J. Rickard.

Fourth ward, February 14. E. C—— bit the second finger of the right hand; made it pretty sore; said he wanted to suffer for his friends. Reported by attendant D. E. Torpy.

Second ward, February 16, 1880. W. H——, black eye. He had a fit this morning; fell, striking his face on the floor. Witnessed by W. H. H—— and W. C. H——, patients.

Fourth ward, March 5. E. C——, black eye; hit himself several times with his fist on face and forehead. Said he thought he ought to be pounded. Reported by attendant D. E. Torpy.

Fourth ward, March 22, 1880. E. P——, black eye. Was struck by E. C——; cause, Mr. P—— bothered him. Witnessed by attendants D. E. Torpy and Jno. Philo.

Fourth ward, March 26. J. B——, black eye. Received while in his room last night; he said he fell out of bed. Reported by attendant D. E. Torpy.

Fourth ward, April 10, 1880. J. B——, slight scratch on forehead, while in yard, could not ascertain how it happened. Reported by attendant D. E. Torpy.

Fourth ward, May 2, 1880. E. P——, black eye; had a scuffle with J. B——, and before the attendants could intercede Mr. P—— had received the black eye. He began the trouble. Witnessed by attendants J. Philo and Richard H. Jones.

Fourth ward, May 2. J. T ——, black eye; cause unknown. Reported by attendant D. E. Torpy.

Fourth ward, May 14, 1880. J. S. P——, black eyes, received while fighting with E. P—— in the yard. Reported by attendant D. E. Torpy.

Fourth ward, May 26, 1880. D. B——, small cut over right eye; was kicked by Mr. McG—— while in the yard; no apparent cause. Witnessed by attendant Richard H. Jones.

Fourth ward, June 6, 1880. J. S. B—— received a small cut on face by being pushed over a chair by G. A. P——; no apparent cause. Witnessed by attendant Jno. Philo.

Fourth ward, June 8, 1880. M. McG——, in stooping to pick up a paper at dinner table, struck his head and received cut over left eye. Witnessed by attendant Richard H. Jones.

Fourth ward, June 9, 1880. L. M——. Nose broken and eye blacked; was struck by G. A. P——; no cause could be ascertained. Witnessed by attendant John Philo.

Fourth ward, June 10, 1880. D. B——, black eye, was struck by M. McG——; said he hit him because he picked up a spittoon. Witnessed by J. Philo.

Fourth ward, June 13, 1880. P. R. T——, small cut on foot; stepped on a nail while getting into bed. Witnessed by attendant J. Philo.

Fifth ward, July 22. E. D——, hip sprained; was pushed down stairs by D. C. M——; he said he thought it was somebody else. Witnessed by attendant R. R. Pugh.

Third ward, August 14, 1880. P. G——, black eye; caused by being hit accidentally by G. D——'s foot while he was caught accidentally on a shaft in the fan-room. Witnessed by attendant H. R. Hughes.

Fourth ward, August 16. J. S. P——, while in the yard, received a slight cut by E. P—— thrusting a stick into the corner of his eye Witnessed by attendant D. E. Torpy.

Fourth ward, August 16, 1880. J. B—— and E. C—— got into a quarrel, and Mr. B—— got his eyes blackened and face scratched before attendant could stop them; Mr. B—— started the fuss. Witnessed by attendant Jno. Philo.

August 23, 1880. E. C——, patient on the fourth ward, attempted to run away while out in the garden to work; attendants Homer A. Jones, Daniel Torphy, Richard H. Jones and W. H. Bennett gave chase; Homer was the first to overtake him, and in the scuffle

which followed, C—— chawed off the end of the second finger of attendant Homer's right hand.

Fourth ward, October 13. P. L—— received a black eye by being pushed down on the walk by S. V. M—— while in the yard; no apparent cause. Witnessed by patient Mr. I——.

Fifth ward, November 1, 1880. S. B. K—— sprained his left hip by falling, while blacking his boots in bath-room; he was found lying on the floor by attendant T. E. Morris.

Fourth ward, November 8, 1880. J. D——, left ankle bruised while in the yard; could not ascertain the cause. Reported by attendant C. W. Travis.

Fourth ward, November 21, 1880. B. McL——, right wrist injured by C. W. Travis, attendant; by resisting while being dressed. Reported by attendant D. E. Torpy.

Fourth ward, November 24. J. S—— received scratch on nose by J. B——; cause Mr. S—— pushed him. Witnessed by attendant R. H. Jones.

Fifth ward, November 26, 1880. S. B. K—— got up, walked a few steps from bed, fell, striking on his lame hip. Witnessed by attendant R. R. Pugh.

Fifth ward, December 13, 1880. S. M—— slight scratch on nose while in bed; was hit by G. H——; cause, Mr. M—— talked. Reported by attendant R. R. Pugh.

Fifth ward, December 26, '80. M. W——, bruise on forehead, left side; was up in the night, took straw out of the tick and was fussing all around the room; must have fell down or hit his head against the bedstead. Reported by attendant R. R. Pugh.

Third ward, January 4, '81. M. F. M—— cut left forefinger accidentally while at work in the slaughter-house. Witnessed by H. E. Jones.

Third ward, January 12, '81. M. F. M—— cut second finger on right hand a little while at work in the slaughter-house. Reported by H. E. Jones.

Fourth ward, January 14, '81. E. L——, black eye; was hit by H. H. M——; cause Mr. L—— steped up near Mr. M—— while he was talking with another patient. Witnessed by attendant D. E. Torpy.

Fourth ward, January 14, '81. H. H. M—— struck R. H. Jones, attendant, a very severe blow over the right eye; it puffed up and was discolored. Mr. M—— said he thought he hit some one else. Reported by attendant R. H. Jones.

Second ward, February 12, '81. A. W——, left arm injured by the crank flying back and hitting him on the arm while he was at work at the waiter. Reported by attendant H. A. Jones.

Fourth ward, February 13. R. B—— received a blow under the left eye, the skin was cut; he was talking with Mr. McG—— and Mr. McG—— became excited and hit him. Witnessed by attendant D. E. Torpy.

Fourth ward, February 14, 1881. T. B——, left ear hurt a little, could not find out how it happened. Reported by attendant D. E. Torpy.

Fourth ward, March 23, 1881. H. N——, slight bruise over left eye; it happened in the night, he could not tell how he done it. Reported by attendant D. E. Torpy.

Fourth ward, April 15, 1881. C. F. W——, black eye; he made an attack on Mr. M——; Mr. M—— struck him in self defense. Witnessed by attendant F. C. Smith.

Fourth ward, March 27, 1881. E. J. R——, slight injury to penis; he was kicking spittoon around the ward. Attendant F. C. Smith asked him to stop it; said he would not; Mr. Smith put him in a chair and in the scuffle Mr. R—— struck the arm of the chair. Witnessed by attendant R. D. Griffith.

Fourth ward, April 8, 1881. W. H. C——, cut on back of head about an inch long, was hit by A. P. C—— as they were coming out of the bath-room, with a tin wash dish. Mr. C—— said he was annoyed by Mr. C——, and that he was trying to get his tobacco. Mr. Torpy was near the bath-room door, did not hear any talking. The striking was witnessed by attendant D. C. Torpy.

Fourth ward, April 9, 1881. J. F——, black eye; was hit in the night with a rubber chamber by J. B. E——; cause, Mr. F—— was fussing around the room and getting under the beds. Reported by attendant D. E. Torpy.

Fourth ward, April 26, 1881. T. L. S——, slight bruise on right cheek; was hit with a small stone thrown by F. L—— from sixth ward while in the yard; no apparent cause. Witnessed by attendant J. J. Ellis.

Fourth ward, April 30. T. W. B—— black eye; he had a scuffle with Mr. S—— from the eighth ward while in the yard. Reported by attendant D. E. Torpy.

Fourth ward, May 2, 1881. A. W—— cut right hand a little by breaking three lights of glass in day room; said he wanted to break out. Reported by attendant D. E. Torpy.

Fourth ward, May 11, 1881. T. W. B——, slight cut over right eye; cause, he would not stay in bed; was up around the room and pounding on the door; W. A. M—— hit him with his fist. Witnessed by patient H. H. P——.

Fourth ward, May 22. H. S. J——, slight cut on the right hand caused by his breaking two lights of glass; said he tried to break out to see his wife. Reported by D. E. Torpy.

1881, May 24. Fourth ward. J. W. B——, cut on head; was hit with a chamber by J. B. E——; cause, Mr. B—— would not let him sleep, and tried to pull him out of bed. Witnessed by Mr. B——. Reported by attendant D. E. Torpy.

Fifth ward, May 24. S. B. K—— sprained left wrist; caused by falling. Witnessed by attendant R. R. Pugh.

Fourth ward, June 7. J. F—— fell out of bed last night; cut a slight gash over left eye. Reported by D. E. Torpy.

Fourth ward, June 11, 1881. F. M——, black eye; was hit on the left eye while in the yard; could not ascertain who hit him, but it was supposed to be C. F. W——. Reported by attendant D. E. Torpy.

Fifth ward, June 16. N. Y—— had a fit last night; fell out of bed; cut a small gash on top of his head, and received a bruise on the left side of chest, and a bruise on cheek and chin. Reported by attendant R. R. Pugh.

Fourth ward, June 30, 1881. J. F——, black eye; he was found on the floor in the water-closet by attendant F. C. Smith. It was thought by the attendants that he had a fit and fell on the floor, striking on the right side of face. Reported by attendant D. E. Torpy.

Fourth ward, July 14. Attendant R. R. Evans, black eye; was hit by W. D——; cause, Mr. Evans asked him to get up off the damp grass; he jumped up and hit him twice. Reported by attendant R. R. Evans.

Fourth ward, July 16. P. S——, slight scratch on left side of nose; he pitched on to attendant T. C. Smith and tried to take the mop away from Mr. Smith in the scuffle; he got scratched. Reported and witnessed by attendant D. E. Torpy.

Fifth ward, July 25. B. S——, left hip bruised; got off bed last night, walked a few steps and fell, striking on left side. Reported by attendant R. R. Pugh.

Fourth ward, July 26. P. S——, cut over the right eye; he hit E. C——; then Mr. C—— knocked him down and kicked him over the eye. Witnessed by attendant C. W. Travis.

Fourth ward, July 30. A. W——, slight cut over right eye; Mr. E. C—— struck at him; he dodged and hit window casing. Witnessed by attendant D. E. Torpy.

Fourth ward, August 13, 1881. P. S——, left ear bruised; he attacked attendant T. C. Smith; in the struggle he hit his ear against a door casing; the last part of the struggle was witnessed by attendant D. E. Torpy.

First ward, August 16, 1881. J. A——, while trying a new trick on the horizontal bar; he fell on his face, knocked the skin off a little right side of face and forehead and left hand. Reported by Mr. A——.

Fourth ward, August 19, 1881. L. L—— hurt his right elbow somewhat last night. Reported by attendant C. W. Travis.

Fourth ward, August 20, 1881. T. McK——left ear cut a little; was hit by E. C——; cause, he kicked at Mr. C——. Witnessed by attendant F. C. Smith.

Fourth ward, August 30, 1881. T. McK——, right eye cut and abrasion of the skin on nose; struck by C. D——; witnessed by E. L——; three patients; (no cause for the act.)

Fourth ward, August 31, 1881. L. L——kicked in right ear by C. D——; ear cut quite bad; no cause for the act. Witnessed by L——; all three are patients.

Fourth ward, September 1, 1881. O. F——, kicked and broke the skin under chin; also kicked on left cheek of C. D——; no cause for the act. Witnessed by attendant T. L. Morris.

Fourth ward, September 4, 1881. J. T. T——, right eye black and slight cut over it; was hit by E. C—— while in the yard; Mr. C—— said that he was hit first, but Mr. T—— said not. Reported by attendant D. Torpy.

Fourth ward, September 12, 1881. O. F——, lip cut and chin scratched; was hit and kicked by E. C—— while in the yard; no apparent cause. Witnessed by attendant R. D. Griffiths.

Fourth ward, September 12, 1881. E. L——, small cut on the head; was knocked down while in the yard by E. C——; no apparent cause. R. D. Griffiths.

Fourth ward, September 19, 1881. P. M——, black eye; he was hit by somebody, but would not tell who it was; thought by the attendants that E. C—— hit him. Reported by attendant D. E. Torpy.

Fourth ward, September 25, 1881. E. H——, nose hurt and a black eye; was hit by M. L—— last night; F. M—— was in the room with them; Mr. L—— said he did not do it, but he is in the habit of striking; Mr. M—— is not in the habit of striking. Reported by attendant D. E. Torpy.

Fourth ward, October 20, 1881. C. B. L——, slight cut on head; O. F—— hit him with a bowl while washing dishes this noon; no apparent cause. Witnessed by attendant A. G. Wier.

Fourth ward, October 24, '81. A. L. R——, slight cut on head. L. R—— had a fit in the yard, when he got up he threw a stone at A. G. Wier; he dodged and it hit Mr. R——. Reported by attendant A. G. Wier.

First ward, November 5, 1881. J. K——, slight bruise on left leg below the knee; it happened while helping to unload some boxes for the clerk. Reported and witnessed by O. W. A——, patient, and H. E. G——, patient.

Third ward, November 14, '81. G. H—— cut a small piece of flesh off left forefinger while helping to butcher hogs. Reported by H. E. Jones, butcher.

Fourth ward, December 12, '81. T. L. S——, left eye black; was hit by H. R. B——; no apparent cause; said he hit him in self-defense. Reported by attendant D. E. Torpy.

Fourth ward, December 12, '81. A. W——, black eye; was hit by H. R. B——; Mr. W—— has a habit of swinging his arm; Dr. B—— said he thought that he was going to be hit. Witnessed by attendant D. E. Torpy.

Fourth ward, December 12, 1881. L. L—— scratch on face: was hit by W. A. M——; no cause could be ascertained. Witnessed by attendant D. E. Torpy.

Fourth ward. M. L—— knocked a cup of rice and milk out of attendant D. E. Torpy's hand and spilt it on the floor, then he jnmped out of bed, slipped and fell, striking his left side against the

covered bed, that caused a slight abrasion of the skin on the left side. Witnessed by attendant D. E. Torpy.

Fourth ward, January 10, 1882. L. R——, black eye; was hit by E. C—— on the left eye; no apparent cause. Witnessed by attendant D. E. Torpy.

Fourth ward, January 17. J. C——, left eye black and slight scratch on face under the other eye; was hit twice by W. A. M——. Attendant D. E. Torpy witnessed the trouble and thought Mr. C—— was most to blame. Reported by attendant D. E. Torpy.

Fourth ward, January 21, 1882. J. P——, cut over left eye about an inch long; attendant F. C. Smith went to feed him, he grabbed hold of Mr. Smith and swung him around a few times and they both fell; Mr. P—— struck his forehead against a chair when they fell. Witnessed by attendant A. G. Wier.

Fourth ward, January 22, 1882. E. C——, both eyes black; caused by butting his forehead against the wall and the floor at night and day time. Witnessed by the attendants D. E. Torpy and A. G. Wier.

Fourth ward, January 22, 1882. E. T. M——, black eye; he had a scuffle with and threw Mr. B—— down, and in some way received a black eye. Reported by attendant D. E. Torpy.

Fourth ward, January 26, '82. F. M——, scratch on right side of forehead; it was done in the night; it was thought by the attendants that he fell out of bed; he would not tell how it happened. Reported by attendant D. E. Torpy.

Fourth ward, February 2, '82. H. L. B——, black eye; was hit by E. C—— ; no apparent cause. Witnessed by attendant D. E. Torpy.

Fourth ward, February 4, '82. W. C——, black eye; was hit by L. McF—— ; no apparent cause. Witnessed by attendant D. E. Torpy; he told Mr. McF—— that it was wrong to strike a man in that way; at that he pitched into Mr. Torpy.

First ward, February 10, '82. J. P—— got two scratches on hand from slipping on the steps while carrying out swill-pail, the steps being icy. Witnessed by attendant C. Roche.

Fourth ward, February 14, 1882. D. R. P—— got a black eye from a blow by J. H——, who said Mr. P—— was blowing something on him. Witnessed by D. E. Torpy, attendant.

Fifth ward, February 20, 1882. L. P. J——, slight cut over left eye. Had a fit and fell on the dust-pan. Reported by attendant J. C. McGucken.

Third ward, March 3, 1882. E. B—— was kicked by a steer at slaughter-house on left knee. Injury very slight. Attendant H. E. Jones.

Fourth ward, April 6, 1882. C. S—— received a blow on nose from M. C——. Mr. C—— was sitting on a bench in the yard when S—— came up to him and kicked at him. Mr. C—— then struck him on the nose. Witnessed by attendant E. A. Williams.

Fourth ward, April 14, 1882. M. L——, black eye by coming in contact with chair. witnessed by attendant D. Lynn.

Fourth ward, April 27, 1882. W. B—— had a fight with J. F— ; A. G. Wier, attendant, went to part them ; B—— then pitched into Wier and in the scuffle got his left ear hurt ; also the right thumb.

Fourth ward, June 6, 1882. F. McR——, black eye, was struck by H. C——. Mr. McR—— was talking very loud. C—— thought he was talking about him and went up to him and struck him over the right eye and on the left side. Witnessed by attendant A. G. Wier.

Fourth ward, September 23, 1882. E. D. C——, small cut over left eye ; eye a little black ; he kicked at Mr. Lynn, the attendant, lost his balance, fell down, and in going down struck his eye against the casing on the wall. Witnessed by attendant A. G. Wier.

Fourth ward, October 4, 1882. C. S——, upper lip slightly cut. Received a blow from H. R— ; no apparent cause. Witnessed by attendant W. Williams.

Fifth ward, October 20, 1882. R. D. Griffiths, attendant, received cut on the head ; was struck by T. A—— with a stone ; he thought Mr. G—— was poisoning him. Witnessed by attendant Mr. Sharhamer.

Fourth ward, October 31, 1882. T. A——, cut on top of head ; he tried to knock his brains out against the building in the fifth hall yard. Witnessed by attendant D. Lynn.

Fourth ward, November 15, 1882. J. R. J—— attacked attendant Barnes with a stick, in the yard ; and in the scuffle that followed Mr. J—— got a very slight cut on the nose. Reported by attendant Wier.

Fourth ward, December 2, 1882. J. J——, black eye ; was struck by E. P— ; no apparent cause. Reported by attendant A. G. Wier.

Second ward, December 12, 1882. S. E—— was kicked by cow at barn, in breast ; breast injured very slightly. Witnessed by attendant W. Prichard.

Fourth ward, February 3, 1883, E. D. C——, black eye ; was struck while in the water-closet, by B. W——. W—— said C—— stuck his chamber under his, W——'s, nose. Reportedb y attendant A. G. Wier.

Fourth ward, February 4, 1883. D. M. G——, black eye ; was struck by P. C— ; he followed C—— about the ward and tried several times to strike him. C—— tired of it at last and struck him in the eye. Reported by attendant A. G. Wier.

Fourth ward, March 7, 1883. M. L——, slight cut over left eye ; was struck by M. M—— because he kicked him. Reported by attendant A. G. Wier.

Fourth ward, March 21, 1883. W. F——, black eye ; was struck by J. J— ; no apparent cause. Reported by attendant A. G. Wier.

Fourth ward, March 29, 1883. T. S—— had a fit while in the

dining-room; he was laid on the floor by the attendants, and while working in the fit, he got his left shoulder against the heater and slightly burned it. Reported by attendant A. G. Wier.

Fifth ward, March 30, 1883. E. J. R—— cut his throat on both sides about 1 o'clock in the morning; he was discovered by the night-watch, John Sommers and John Ferriss; when discovered, the floor where he lay was covered with blood; it was done with glass that he got while in the yard; the wound on the right side was about three inches long; the one on the left, about two and a half inches long. Reported by night-watch.

Third ward, March 31, 1883. E. McA—— tried to cut his throat in the slaughter-house; he was asleep on a chair; got up and went and stood before the looking-glass; he was asked by Mr. G—— what he was doing; he said he was cutting the hair on his neck; just then Mr. H—— saw the blood running down his neck; they took the knife away from him and put him out of the slaughter-house; he resisted, and tried to get back in again to finish the job; he inflicted a slight wound on the right side of his neck; he was brought in and the circumstances reported by the butcher, H. R. Jones.

Fourth ward, April 9, 1883. O. B——, black eye; was struck on the nose by J. J——, because he, B——, pitched into J—— for a fight. Reported by attendant A. G. Wier.

Fourth ward, May 17, 1883. J. S——, left hip silghtly injured; was attacked and thrown down by Mr. J——; cause of difficulty not known. Reported by attendant A. G. Wier.

Fourth ward, May 17, 1883. J. S—— had rib fractured by P. C——; S—— threw two cups of hot water in C——'s face, and told C—— he was going to kill him; C—— thought he ought to be chastised for using the words, "kill him"; C—— threw him on the floor; fell with his kees on Mr. S——'s side and stomach, fracturing his rib. Reported by attendant A. G. Wier.

Fourth ward, May 17, 1883. P. C—— was sitting on the ward; J. F—— approached C—— and struck him; they squared for a fight, C—— getting in the first blow on F——'s nose, breaking the skin a little; they were separated by attendants Jones, J. R., and Quine, G. Reported by A. G. Weir, attendant.

Fourth ward, May 23, 1883. T. S——, small cut over left eye; eye a little black; he was found lying on the floor in a fit by the attendants with a cloth (a piece of a sheet) round his neck for the purpose of hanging himself, as they supposed; received the injury to his eye when he fell in the fit. Reported by A. G. Weir, attendant.

Fourth ward, May 26, 1883. G. W. B——, black eye; he was sitting in a chair partly asleep; C. H. P—— went up to him and struck him in the eye; no apparent cause. Reported by attendant A. G. Wier.

Fifth ward, May 26, 1883. J. F——, slight scratch on left side of face; C. G—— was assisting him to a chair in the yard; they

both fell to the ground, Mr. F—— getting his face scratched. Reported by attendant O. Ladd.

Second ward, May 30. N. D. W——, black eye and skin broken on bridge of the nose ; was standing in his room at 8 P. M., leaning on the bureau ; he went to go out on the ward and fell in a fit, striking his nose and eye on the bed-post. Reported by attendant W. C. Mansfield.

July 12, fifth ward. M. McG——, while out in the yard, attempted to walk about, when he accidentally fell and struck his cheek bone against the gravel walk, which caused quite a bruise, and his eye to be somewhat black. Reported by attendant O. Ladd.

August 1, fourth ward. L. T—— was sitting on a chair; C. H—— was talking to and bothering him ; the former shoved him down ; in falling he accidentally struck the bridge of his nose on the chair and gave himself a severe cut. Witnessed by Mr. P—— and reported by attendant A. G. Wier.

August 2, fifth ward. T. G—— fell out of bed and gave himself quite a bruise on the hip bone, and also fell in the yard and bruised the back part of his thigh. Witnessed by attendant E. C. Judson.

August 6, fourth ward. D. R. P—— wanted to go out on the highway ; he attacked attendant A. G. Wier ; in the struggle the latter got a bruise on the temple which caused his eye to be black. Reported by attendant A. G. Wier.

September 30, fifth ward. G. C. C—— without any provocation struck T. R—— and gave him a black eye. Reported by the latter.

October 2, fourth ward. S. K—— became excited in his room and was swinging the chamber-pot around, and also struck himself with it above the knee which caused a very severe bruise. Reported by attendant A. G. Wier.

October 24, fifth ward. G. C. C——, without any provocation, pushed E. W—— down in the chair and gave him quite a bruise on the cheek bone. Reported by attendant O. Ladd.

October 25, fourth ward. E. P——, without any provocation, struck E. McA—— ; the latter returned the blow and gave him a slight cut on the nose. Witnessed by attendant A. G. Wier.

October 27, fifth ward. G. E. C——, without any known cause, attacked V. P. M—— and scratched both sides of his face and ears. Witnessed by attendant E. C. Judson.

November 4, fourth ward. B. McL—— said C. D. K—— had, or was taking his brains, and attacked him. Attendant W. Hoffman went to separate them, when McL—— attacked him ; in the struggle both fell, Hoffman spraining his knee. Reported by attendant J. Brown.

November 5, fourth ward. J. R—— came out of the covered bed this morning with a bruised eye. Could not find out by him or the attendant how he got it.

November 29, fourth ward. D. R. P——, while at the dinner table, became excited, jumped up and struck attendant F. Bills a

severe blow in the neck; and threw his arm around his neck and tried to choke him. In the struggle both fell to the floor, face downward. Attendant A. G. Wier went to Mr. Bills' assistance; then patient E. N. W——, with a table knife in his hand, threatened to assist B——. When the attendant got quiet restored, and Mr. P—— up from the floor, it was found that his face was bruised; which he received in falling; from which cause his two eyes became black. Reported by attendants A. G. Wier and F. Bills.

December 17, fifth ward. E. W—— accidentally fell down the stairway, while going from the ward to the day-room, and gave himself a slight cut on the cheek bone and eye-brows, from which cause his eyes became black. Witnessed by patient B—— and attendant E. C. Johnson.

December 26, fourth ward. W. L. P—— struck J. R——, and gave him a black eye, because he spat in his face. Witnessed by attendant J. Brown.

1883, December 31, fifth ward. P. W—— come out of the covered bed this morning with his left arm having a very bruised appearance between the sholder and elbow; could not find out how or by what means he injured himself. Reported by attendant O. Ladd.

1884, January 1, fifth ward. E. W—— came out of the covered bed this morning with a black eye; could not find out how he got it. Reported by attendant O. Ladd.

1884, January 2, fifth ward. Attendant J. Lynn left a cup of rice and milk on the table in the day-room while he was engaged feeding another patient. E. W—— attempted to get the food; he stumbled and fell against the table and gave himself a bruised eye. Reported by attendant J. Lynn.

January 26, fourth ward. E. D. H—— in a struggle got injured in theface and side.

January 31, fourth ward. C. D. C—— came out of his room this morning with a bruise on the right side of the head between the eye and ear; he has a habit of bruising himself.

February 10, fourth ward. Patient D. R. P—— is not allowed the use of a knife in the dining-room. When he entered to-day he took a knife belonging to another patient and refused to give it up and struck attendant Bills with his fist behind the eyes; the attendant had to force him out of the dining-room. When taking him through the door he accidently struck his eye-brow against it and gave himself a slight cut. Reported by attendants J. R. Jones and Frank Bills.

February 12, fourth ward. This forenoon patient J. M—— was mopping the floor; patient McA—— came up behind him and struck him on the head, and also kicked him in the side. The former turned on him and struck him in the left eye and temple, which caused his eye to be black. Witnessed by attendant A. M. Jones, and reported by attendant J. R. Jones.

February 14, fourth ward. Patient C. B—— was in the bath-room washing the chamber-pots; patient M. A—— went in and tried to stop him from work; the former refused, when the latter struck him over the left eye and gave him a slight cut. Attendant J. R. Jones separated them.

February 14, fourth ward. This morning patient D. R—— was making his bed; patient W. R—— went into his room and asked R—— to kiss him; the latter turned on him and struck him on the cheek bone and raised quite a lump, from which cause the corner of his eye became slightly discolored. Separated by attendant J. R. Jones.

Contents of Injury Book, "Second Department, North"—Exhibit No. 5:

1876.

December 5. F. M——, black eye by A. S——; eighth ward. M—— pushing S——, and result as above. Witnessed by attendant Jno. Oldham.

December 7. A. J. S——, eighth ward. Black eye by J. T. M——. Mr. S—— pushing Mr. M—— out of privy, and Mr. M—— struck S——. Witnessed by attendant Wm. George.

1877.

January 9. M. W——, eighth ward. Small cut over right eye, while in a fit. Witnessed by attendant D. Torpy.

January 9. A. H. V——, eighth ward, fell in a fit at breakfast table; small cut on face.

January 9. J. S—— and D. McC——, eighth ward. While coming out of dining-room, S——struck McC——; both scratched each other's face a little. Were parted by J. Oldham and L. Johnson.

June 1. S. C. E—— struck H. M—— out in yard; blacked his eye. Both eighth ward.

July 22. J. G. T——, seventh ward, fell out of bed last night; bruised face.

August 25. R. W. H—— struck G. R. R—— on face without any provocation. W. H—— said the power caused him to do so. Witnessed by attendant R. H. Jones.

September 25. F. C. B——, black eye by J. B——. B—— pushed B——, and B—— struck him. Witnessed by attendant B. Humphrey.

October 17. J. G. T—— fell in flour and bruised face, and small cut on eyebrow. Witnessed by attendant D. P. Salisbury.

November 30. G. S. H——, eighth ward, struck his eye during night in covered bed, and bruised.

December 31. G. S. H—— struck F. M—— on forehead; bruised it a little. He said he didn't know why he struck him. Eighth ward. Witnessed by attendant B. Humphrey.

1878.

January 12. G. S. H——, eighth ward, struck S. B.—— at dinner with a tumbler; cut his head a little. Witnessed by the attendants. (G. H—— said that B—— had bothered him since he was three years old.)

February 12. P. M——, eighth ward, struck W. McB—— on left eye and bruised it considerable. M—— said that McB—— bothered him and called him bad names. Witnessed by D. Torpy, attendant.

February 11. S. M——, ninth ward, struck J. F—— on the eye, bruised it some. F——, said he talked plainer than M——, and M—— got provoked at that and struck him. Witnessed by attendant W. E. Morris.

April 22. W. L. M—— and F. S——, eighth ward, struck J. L——, bruised his eye and a small cut over the eye. Mr. L—— pushed Mr. S—— and both turned on L——. Witnessed by Jno. Oldham, attendant.

April 26. F. S—— scratched J. L——'s face; Mr. S—— couldn't give any reason for doing so. Witnessed by B. Humphrey, attendant, eighth ward.

August 17. T. H——, seventh ward, scratched J. J——'s face in water-closet. Mr. J—— said he hit T. H—— because he was in his way.

October 2. J. B——, eighth ward, struck J. K—— in the mouth, cut it some. K—— called B—— bad names, was the cause. Witnessed by B. Humphrey, attendant.

November 8. E. B. P—— struck W. G——; blacked his eye—no cause for it that any one could find out, eighth ward. Witnessed B. Humphrey, attendant.

1879.

April 12. H. D. H—— and J. S. P——, eigthth ward. Mr. P—— called H—— a thief; H—— struck P—— on face and bruised it. Witnessed by B. Humphrey, attendant.

April 30. A. B—— struck W. G—— on eye, cut a little and bruised. B—— said that G—— bothered him. Witnessed by B. Humphrey, attendant, eighth ward.

October 29. P. R. T—— struck J. S. P——, each claiming the other struck first; separated by D. Torpy, assistant, eighth ward.

November 3. W. S. H—— struck S. Johnson, assistant, and scratched his face; Mr. Johnson asked Mr. H—— to stop making noise; Mr. H—— struck him. Sixth ward.

1880.

March 8. W. L—— struck D. S—— in the eye, bruised it some;

cause could be ascertained for the act. Witnessed by D. P. Salisbury, attendant.

April 15. Mr. P——, patient on fourth ward, struck J. R—— on left eye and bruised it badly; couldn't find any cause for it. Witnessed by Jno. Oldham, attendant.

May 9. G. A. P—— threw J. B—— down on the floor; bruised his face some; couldn't find why Mr. P—— done it. Witnessed by B. Humphrey, attendant. Eighth ward.

May 27. M. McG—— struck I. J——, because Mr. J—— called him bad name; blacked right eye some. Witnessed by attendant T. C. Williams. Eighth ward.

May 31. C. F. D—— struck C. W—— and throwed him on the floor; couldn't give any reason for doing so; didn't hurt Mr. C—— hardly any. Witnessed by Wm. George, attendant. Sixth ward.

July 15. H. E—— struck P. L—— on head with chamber; cut it so doctor had to sew it; impossible to find out why he struck L——. Eighth ward, 6:30 A. M.

July 19. G. H. E—— struck I. J——; cut and bruised his right eye, without any cause or warning. Said he didn't know why he struck Mr. J——. Eighth ward.

September 10. H. H. M—— struck H. M. N—— with a tumbler; cut him some on back of head; while at dinner had some words about moving the chair. Mr. N—— called M—— some hard names. Witnessed by B. Humphrey, attendant. Eighth north ward.

October 18. C. C. M—— struck A. V—— on his head with a broom while sweeping the ward; cut him a little; Mr. M—— gives as a reason for striking V——, that he kept running in his way continually. Witnessed by John Philo, attendant. Eighth ward.

November. A. B—— struck J. K—— and bruised both eyes. Mr. B—— said Mr. K—— struck him first, because he, Mr. B——, took him from the dining-room door. Witnessed by D. B Salisbury, attendant.

1881.

January 9. T. B——, while attendant E. C. Williams was taking him to the dining-room for dinner, resisted and accidentally struck his head against the door and cut a small cut on left eye-brow. Eighth ward.

January 26. Sixth ward. M. McK —— struck D. S——; bruised his face while playing dominoes; D. S —— called M. McK —— foul names and irritated McK —— and he struck him.

February 7. W. T ——, seventh ward, accidentally fell in bath-room and bruised left eye; so he tells; no one saw him.

March 27. P. A. C ——, eighth ward, under the delusion that F. M —— was in his heels and body, struck him (M.) back of the head until his face came against the window casing; bruised and cut his eyebrows. Witnessed by attendant John Philo.

April 6. Eighth ward, J. McD —— took hold of C H

McD ——, refusing to let him go; C. H —— struck McD —— in the eye, bruised it a little. Witnessed T. C. Williams, attendant eighth ward.

April 8. Eighth ward, W. T—— struck L. M —— during the night in dormitory; bruised Mr. M ——'s eye.

April 25. Seventh ward, F. L—— struck E. R—— on the back of his head with a mop-handle; cut it badly.

May 30. E. J. R —— insisting on going through the door, and J. Philo attendant taking him from the door, both had hold of each other and fell; Mr. R —— got hurt in his ankle.

May 30. During last night in the dormitory in eighth ward, T. B—— and T. H—— had some quarreling; Mr. B., it seems, struck Mr. H ——, Mr. H —— scratched B ——'s face.

June 2. Seventh ward. H. F. S—— suddenly jumped through the window in dormitory door; cut his forehead, also his fingers, and a small cut on his back.

June 9. Seventh ward. D. D——, while out in the garden, attempted to commit suicide; he suddenly laid his head before the wagon, cut his left ear and bruised his face.

June 16. C. D—— kicked T. McK—— while out in the yard. Mr. D—— claims that McK—— hit him with a stone; bruised his body, also small cut on eyebrow.

June 24. F. L—— struck F. H—— in the face; small bruise; couldn't find out why Mr. L—— struck him. Eighth ward.

C. McL—— struck J. C—— during the night in the dormitory, seventh ward; cut his lip a little; couldn't find out why he, Mr. McL——, struck Mr. C——.

July 5. S. B. A—— hurt his right eye during the night in covered bed; bruised and a small cut.

July 25. Eighth ward. S. B. A—— found in the water-closet by attendant J. Philo, with a wound on his left ear. P. J. C—— and F. H——, two patients, were in the closet, and both denied having injured Mr. A——.

August 16. J. R. M——, sixth ward, fell off the seat in the yard and bruised his right eye; had a fit.

September 10. Eighth ward. C. D., without any cause or provocation, struck P. McC. and G. B. V.; bruised both patients' faces. Witnessed by John Philo, attendant.

September 15. Eighth ward. A. S. struck D. L. on face; bruised his eye; Mr. S. claims Mr. L. spit in his face. Witnessed by John Philo, attendant.

September 16. Seventh ward. T. B. fell on the stairs while going to the yard and bruised his face.

November 7. Seventh ward. J. V. P. Gardner fell out of bed during last night and bruised his face.

1882.

January 13. Eighth ward. M. McC., eye bruised by T. C. Williams, attendant, a. c., while putting him to bed, he resisting.

January 24. Sixth ward. A. S. and J. C. had a dispute about sweeping the floor; Mr. S. struck Mr. C.; C. struck back and bruised Mr. S.'s face; also bit his finger. Stopped by John Torpy, attendant.

March 1. C. O. G. struck W. P. M. in the face without any cause or provocation. Witnessed by John Philo, attendant.

March 6. Eighth ward. J. V. P. G. struck F. H. without any cause, and Mr. H. hit Mr. G., and he fell against the baseboard and cut his head; doctor put three stitches in it. Witnessed by John Philo, attendant.

April 1. Sixth ward. J. C. struck A. F. L. over the eye; small cut and bruise. There was no cause or provocation for Mr. C. to strike Mr. L. Stopped by John Torpey, attendant.

April 5. Seventh ward. D. M. tumbled and fell against casing of the door, cut his head on the front part. Dr. Russell put a stitch in. Witnessed, attendant Williams.

April 25. Eighth ward. A. L. R. fell in the yard from the bench and cut his nose.

May 7. D. R. P. broke a leg off the table in the ward and with the intention of striking Thomas E. Williams, attendant, struck G. F. B., a patient, four blows on the head. This occurred at 5:10 A. M., soon after rising. Thomas E. Williams, R. C. Jones and R. Chittenden, attendants, stopped D. K. P. as soon as possible.

May 31. Eighth ward. J. J. struck H. B. (in the dormitory) during the night; bruised his face.

June 27. C. D. C. fell in a fit in the yard; bruised side of face.

July 1. J. H. struck H. F. S., bruised his eye and side of face. Mr. H. claims that Mr. S. bothered him. It was done while they were in the water-closet.

July 16. Sixth ward. J. D. fell in a fit; small cut on left eye-brow and also on chin.

July 27. H. B., seventh ward, struck J. F., eighth ward, while passing through the ward, without any cause; bruised Mr. F.'s eye.

August 3. C. McL., seventh ward, while going into the dining-room, fell against the casing of the door and bruised his eye.

August 9. C. F. A., eighth ward, teased and called J. McC. harsh names, and McC. struck him on left eye; cut and bruised his face quite badly. Witnessed by D. J. Hughes, attendant.

September 4. M. McG., eighth ward. Attendant D. J. Hughes in going out of the dining-room accidentally went against M. McG., and he fell against the baseboard and cut his head.

September 4. F. B. D., eighth ward, fell in a fit; bruised his eye a little. Witnessed by D. J. Bellinger, attendant.

October 1. L. P. J., seventh ward, fell in a fit, and bruised his face. Witnessed by R. Chittenden, attendant.

October 14. M. McG., eighth ward, small bruise on eye; no one knows how he came by it, but supposed he fell.

October 16. R. A. R., eighth ward, small bruise on right eye.

Mr. Bellinger while cleaning bed-room was interrupted by Mr. R., who came into the room and tipped over a pail of water. Mr. Bellinger then assisted Mr. R. to the ward and seated him, when Mr. R. suddenly turned his head and struck against the arm of the chair.

1883.

January 9. J. R. struck A. S.; cut his lips a little; Mr. S. was teasing Mr. R. Witnessed by D. J. Bellinger, attendant eighth ward.

January 10. S. S. W., without any cause, struck W. O. on the head. Witnessed by J. W. Jones, attendant sixth ward.

January 16. J. J. D., seventh ward, fell out of bed during night while in a fit; cut on head and lip.

February 20. J. W., seventh ward, fell out of bed and bruised his face.

February 21. G. M., eighth ward. Attendant Bellinger seated him in a chair, and Mr. M. turned his head suddenly and against the arm of the chair; small cut on eye-brow.

March 15. E. W., admitted on ninth ward, had one large bruise on chest and several on sides and cut on face, also both ears bruised.

March 20. Mr. L. T., eighth ward, found this A. M. with a small cut on eye-brow; Mr. T. said he struck his head against the bed-post during the night.

April 1. J. F., eighth ward, fell on the floor and broke his collarbone. Witnessed by D. J. Bellinger, attendant.

April 16. A. L. pushed Mr. W. L. P.; both were washing themselves, in the morning; Mr. P. struck Mr. L. and bruised his forehead. They were separated by Mr. J. W. Barnes, attendant sixth ward.

May 2. A. J. M., ninth ward, struck the glass door on stairway and cut his hands (not seriously), under the delusion that he was fighting some one connected with the railroad company. Seen by attendant John B. Orendorf.

June 5. C. H. P., fourth ward, threw a stone and hit Mr. A. J. P., seventh ward, while out in the yard; cut on side of head.

July 4. J. McC. struck T. K. on the eye; bruised and small cut; out in the yard; Mr. K. asked for a chew of tobacco and swore at McC., was the cause of the trouble. Witnessed by Mr. Chittenden, attendant.

July 9. J. McC. struck T. K. while out in the yard; cut and bruised on forehead. McC. claims that Mr. K. called him bad names.

July 12. E. J. R., ninth ward, got his eye bruised during last night; cannot find out how he got it.

October 3. J. F. and L. M., ninth ward, called each other harsh names, and struck each other. Mr. F. received a black eye. Jno. Orendorf, attendant, separated them.

October 7. I. W. and P. McD., eighth ward, got in a scuffle on

the ward; Mr. W. struck Mr. McD.; Mr. McD. struck back and bruised Mr. W.'s right eye. Separated by attendant Wm. M. Jones.

November 25. While sweeping the seventh ward, L. S. W. attempted to strike F. P. with the broom; P. struck Mr. W. on right eye; bruised and cut a little under the eye. Separated by attendant T. E. Williams.

November 29. I. W. and D. L., eighth ward, while playing, L. hurt Mr. W. on the eye and bruised it.

1884.

January 26. Ninth ward. E. D. H. struck F. P. D., J. F. and F. H. without any cause or provocation, the latter with his slipper, and bruised his eye (2 eye). Witnessed by attendants J. M. Jones and M. Mahony. Patient removed to fourth ward.

January 30. Seventh ward. T M. struck G. S. W. on the eye; bruised it some; Mr. M. had no provocation or any reason why he struck Mr. W.; patient M. removed to ward twelve. Witnessed by attendant W. H. Sanford.

February 14. Eighth ward. C. L. struck S. H. while in the water-closet about 7:30 this evening; Mr. H. fell and got hurt in his hips. No one was present at the time.

Contents of book "Record of Injuries, Third Department — North" — being Exhibit No. 6. (Instructions on first page of book as in other books.)

1876.

December 2. Tenth ward. Attendant J. J. Alexander unlocked E. W.'s room door, then returned to make his own bed, the latter got up, followed and struck him on the head with his chamber pot, inflicting a slight wound which bled freely; cause, he thought the attendant thought he was dead, and told him to get up, and also that his room was full of spirits. Witnessed by attendant Geo. C. Smith.

December 7. Tenth ward. Attendant Geo. C. Smith was walking the ward; J. B. came up behind, without any apparent cause, and struck him a severe blow which caused him to have a black eye. Witnessed by attendant John Brady.

December 27. Twelfth ward. S. H. struck F. R. and gave him a black eye; cause, the latter was plaguing him. Witnessed by attendant T. F. Dillon.

December 27. Twelfth ward. B. B. struck L. G. E. a very severe blow in the stomach because he was in his way on the ward. Witnessed by attendant T. F. Dillon.

1877.

January 7. Twelfth ward. A. A. M. was standing up against the wall, M. R. struck him a slight blow which caused both his

eyes to be somewhat black ; would give no satisfactory account what he struck him for ; the latter was very much excited. Reported by attendantT. F. Dillon.

January 20. Tenth ward. J. Q. became excited and without any provocation pitched on attendant John Brady and dragged him into a room unknown to any one; in scuffling the room door became closed; the latter threw him down and accidentally cut his nose; they were both very much exhausted when heard by patient W. L. S. and attendant John Halpin.

February 13. Twelfth ward. D. L. some time through the night bumped B. with his head and blackened his eye slightly, and also scratched F. R. on the eye. Witnessed by patient L. G. E.

March 3. Twelfth ward. D. L. struck L. W. and gave him a black eye. Witnessed by attendant Thomas Humphrey.

March 10. Eleventh ward. P. O. C. struck H. W. S., an epileptic, and gave him a black eye; the latter struck and spit at him. Reported by attendant B. McLaughlin.

March 17. Eleventh ward. B. D., paretic, is so feeble that he fell down and received a severe cut on the head. Reported by attendant B. McLaughlin.

March 20. Twelfth ward. P. O. C. in self-defense struck W. D. a very severe blow on the upper lip and cut it open, over one-half an inch in length, the latter pitched on him and threatened to whip him. Reported by attendant B. McLaughlin.

April 21. Eleventh ward. C. E. P. struck J. T. and gave him a black eye without any apparent cause. Witnessed by attendant P. Coleman.

April 26. Twelfth ward. G. W. S. had a stone in his hand and struck D. L., which caused one side of his face to be very much swollen and eye quite black; the latter threatened him. Witnessed by attendant Thomas Humphrey.

May 14. Tenth ward. C. S. became excited without any cause, and told Dr. Renrick he was king of England. Struck A. B. a slight blow on the eyebrow, which caused his eye to be somewhat black. Witnessed by supervisor Barisdale.

May 31. Eleventh ward. M. R. threw D. M. down in the yard and cut his nose and forehead. Witnessed by attendant Philo.

June 1. Eleventh ward. J. T. struck P. O. C. in the chest, the latter returned the blow, which caused his nose to bleed freely and have a black eye. Witnessed by Alexander Barisdale.

July 9. Eleventh ward. P. G. T. and M. T. were sitting on the bench in yard, the latter kicked the former in the eye, which caused him to have a black eye.

July 10. Twelfth ward. E. R. was out in the yard ; F. K., an epileptic, struck him with a stone under the eye and cut him severely, which caused his eye to be black. Witnessed by attendant O. Adams.

July 19. Eleventh ward. M. T. struck D. M. and gave him a black eye.

August 5. Twelfth ward. D. L. struck I. S.; the latter returned the blow and gave him a black eye. Reported by attendant T. F. Dillon.

August 8. Twelfth ward. P. B. and I. S. got into a scuffle in the water-closet; the latter struck the former and gave him a very severe cut on the eyebrow. Witnessed by patient G. W. S.

September 17. Tenth ward. C. A. K. when admitted had black eye and a lame back; said he received those injuries in the county jail.

September 30. Eleventh ward. M. T struck J. T. on the mouth and cut his upper lip; said he heard a voice telling him to strike. M. T. told this to supervisor Alex. Barisdale.

October 5. Eleventh ward. H. M. is so feeble that he stumbled over a rocking chair and cut his nose. Witnessed by attendant B. McLaughlin.

October 25. Twelfth ward. Patient J. H. D. struck H. C. F. and gave him a black eye. Reported by attendant T. F. Dillon.

October 26. Twelfth ward. Patient J. H. D. became excited in the yard; J. L. Evans, attendant, was taking him on the ward; coming up stairs he attacked attendant E.; in the struggle both fell, the former accidentally striking his eye against the staircase, which cause it to be black.

1877.

November 19. Tenth ward. Patient A. C. H. (epileptic) struck W. W. W. a severe blow on the eyebrow and knocked him down on the floor without any apparent cause. Witnessed by attendant Geo. F. Davis.

December 18. Eleventh ward. Patient M. T., some time during the night, struck S. S. and gave him a black eye, because he opened the window in the dormitory opposite his bed. Witnessed by patient H. W. S.

December 28. Tenth ward. Patient J. M., without any provocation, struck attendant Geo. Davis on the nose, which caused blood to flow freely, and both his eyes to be somewhat black; would give no cause for striking him. Witnessed by patient A. F.

December 28. Tenth ward. Patient J. R., without any cause, slapped J. H. C. on the face; patient F. K. took J. H. C.'s part and struck J. R, which caused him to have a black eye; J. R. said he did not know he struck him, and said he must have been beside himself.

1878.

January 2. Twelfth ward. Patient J. S. struck D. W. and gave him a black eye; the former said the latter threatened to put a ball through him and also put a head on him. Witnessed by patient E. B.

January 29. Twelfth ward. Patient E. B. struck S. C. E. and

gave him a black eye because he was quarreling with E. M. Reported by attendant T. F. Dillon.

February 7. Tenth ward. Patient H. O. Struck C. A. R. on the eyebrow which caused his eye to be somewhat black. The former was tearing up papers. The latter tried to prevent him. Reported by attendant Geo. P. Davis.

March 25. Twelfth ward. Patient S. H. struck P. A. C. and gave him a black eye. Reported by attendant T. F. Dillon.

April 5. Tenth ward. Some time through the night in the dormitory, patient J. L. struch T. S. in the mouth, the latter struck the former with a chamber-pot and gave him a severe cut on the head. Reported by patient J. B. O. G.

May 14. Tenth ward. Last night in the dormitory F. P. was restless and distubing the other patients. Patient J. Cooper struck and gave him a black eye.

May 23. Twelfth ward. Patient J. M. struck F. S. and gave him a very black eye, because the latter threw the former's pocket handkerchief out of the window. Reported by attendant T. F. Dillon.

June 11. Tenth ward. Patient B. S. S. struck C. A. R. and gave him a black eye. The former was talking quite loud, the latter told him to shut up. Witnessed by patient W. T. C.

July 4. Twelfth ward. F. S. some time through the night in the covered bed bumped his head to such an extent that he gave himself several slight cuts on the head and eyebrow. Reported by attendant T. F. Dillon.

July 5, 1878. Eleventh ward. Patient Wm. McB. without any provocation struck N. F. W. a slight blow, which caused his eye to be black. Witnessed by attendant B. McLaughlin.

July 7. Tenth ward. F. D. became so helpless that he stumbled against the door-casing and gave himself a very black eye. Witnessed by attendant John Brady.

July 8. Twelfth ward. Patient F. L. was going to strike patient J. E. Attendant J. L. Evans prevented him. In a few minutes afterward the former without any warning struck the latter and gave him a black eye. Witnessed by attendant F. E. Near.

July 8. Eleventh ward. At 8:30 P. M., in the dormitory, patient A. M. got up and went to A. J.'s bed and struck him in the eye. The latter returned the blow on his nose, which caused blood to flow freely. They was having a rough and tumble fight when attendant B. McLaughlin heard and separated them.

July 10. Eleventh ward. Patient F. H. became so restless in the dormitory that he would not stay in bed and was disturbing the other patients; also trying to force open the door, when he slipped and fell, striking his eyebrow on the bed post, which caused him to have a black eye. Witnessed by patient G. T.

July 17. Twelfth ward. Patient S. H. without apparent cause struck F. S. and gave him a black eye. Reported by attendant T. F. Dillon.

July 18. Twelfth ward. Patient S. H., without any provoca-

tion, struck J. E. St. J. which caused his eye to be somewhat black. Reported by attendant T. F. Dillon.

July 20. In the yard, patient D. W. R. L. M., without any warning, came up behind D. D. and pushed him over on the gravel walk, and gave him a very severe cut on the eyebrow. Witnessed by attendant H. O. Jones.

July 27. In the yard, H. H. M. was sitting on the grass. J. E. G., without any cause, kicked him twice. The former got up and struck him above the eye and gave him a slight cut, which caused his eye to be somewhat black.

August 2. Twelfth ward. Patrick F. S. attacked P. M., the latter threw him down against the door-casing and gave him a slight cut on top of head. Reported by attendant T. F. Dillon.

August 10. Eleventh ward. In the dormitory at 11:30 P. M., J. T. became excited and struck T. R. on the forehead with his chamber-pot and gave him a severe cut, which caused him to lose a great deal of bood. Witnessed by patient P. G. T.

August 27. Twelfth ward. Patient J. E. struck L. D. R. and gave him a black eye, because he was plaguing him. Reported by attendant T. F. Dillon.

August 29. Twelfth ward. L. D. R. without any provocation struck M. Root below the eye and gave him a slight cut and also a black eye. Witnessed by attendant J. L. Evans.

September. Eleventh ward. F. H. was sitting on the seat in the water-closet, he attempted to get up and fell against the urine trough, cutting his upper lip so much that it had to be sewed up by Dr. Brush. Reported by attendant B. McLaughlin.

October 28. Twelfth ward. Patient W. R. L. M. kicked M. E B. twice, the latter struck him and bruised one side of his face very much. Witnessed by patient A. B.

December 10. Twelfth ward. Patient W. F. was talking out of window; A. B. struck him on the back of the head. The former returned the blow under the eye, which caused the latter to have a black eye. Reported by patient W. F.

1879.

January 2. Twelfth ward. Patient J. R. for no provocation attacked W. F.; the latter struck him and gave him a black eye. Reported by attendant T. F. Dillon.

January 10. Tenth ward. Patient P. G. T. was sitting in the recess with his foot up; J. B. O'G. passed by and rubbed against him; the former kicked him; the latter struck him in the eye, which caused his eye to be black. Witnessed by attendant John Brady and patient J. B. T.

January 10. Eleventh ward. Patient J. F. was going to dinner; he slipped in a wet place on the dining-room floor; slipped, fell

down and injured his hip joint. Reported by attendants E. D. Murtagh and J. L. Evans.

January 12. Eleventh ward. Patient E. W. fell down in a fit on the floor and cut his nose and forehead, from which cause his two eyes became black. Witnessed by attendant B. McLaughlin.

February 5. Twelfth ward. patient R. G. struck J. T., and gave him a black eye, because he called him a son of a b ——. Reported by attendant T. F. Dillon.

February 6. Eleventh ward. W. H. stumbled over the settee, fell down and struck his nose against a chair and gave himself a slight cut which caused his eye to be somewhat black. Witnessed by patient E. W.

February 9. Twelfth ward. Patient A. B., for no provocation threw L. T. M. down; in falling he struck his nose on the chair which caused his nose and eyes to become swollen and discolored. Reported by attendant T. F. Dillon.

February 14. Eleventh ward. Patient J. E., without any cause, struck F. D. and M. P. on the nose, which caused blood to flow freely; and also struck N. F. W. and gave him quite a cut on top of the nose; and, in a short time afterward I. D. took a seat beside him on the settee, he then struck him in the eye, which caused his eye to be slightly discolored. Witnessed by patient P. G. T.

February 17. Eleventh ward. Patient W. M. stumbled over F. D.'s feet; fell down against a chair and gave himself a severe cut on the head. Witnessed by attendant E. D. Murtagh.

February 23. Tenth ward. Patient F. R. said he wanted to knock the grace of God into these patients and make better men of them. He attacked P. W. A. for that purpose. They both struck at each other, the former received a blow on the nose which caused his eye to be black. Witnessed by attendants Alexander Barrisdale and George Davis.

March 3. Eleventh ward. Patient J. E. went into the water-closet, took up a pail of water and attempted to carry it; he stumbled and fell against the water-pipe and gave himself three slight cuts on the temple and also bruised his cheek. Witnessed by patient P. G. T.

March 12. Twelfth ward. In the dormitory J. J. became excited and struck J. T., and gave him a black eye. Witnessed by attendant T. F. Dillon.

March 16. Eleventh ward. Patient F. D. got up off his seat and fell down against the door-casing and gave himself quite a cut on the eyebrow. Reported by attendant B. McLaughlin.

March 21. Twelfth ward. Geo. M. D. B., when admitted bore the evidence of the height of abuse; several bruised spots on his chest and back, and his two wrists lacerated as if it were caused by handcuffs. Reported by attendant T. F. Dillon to Dr. Hailes.

April 4. Eleventh ward. Patient F. D. fell down on the floor

and gave himself a slight cut on the eyebrow. Reported by attendant B. McLaughlin.

April 5. Eleventh ward. Patient E. M. was very restless in the dormitory, and disturbing the other patients; he was struck in the eye, which caused his eye to be very much swollen and quite black; could not find out by whom he was struck. Reported by attendant B. McLaughlin.

April 13. Eleventh ward. Patient G. B. became very much excited in the dormitory; was running around and disturbing the other patients; some of them struck him and gave him slight cut in the eyebrow, which caused his eye to be black. Reported by attendant John Philo.

April 15. Twelfth ward Patient J. T. went to bed with his clothes on; when attendant J. S. Evans went and got him up, he threw himself right under the bed and became very much excited, and accidentally hurt his eye, which caused him to have a black eye. Reported by attendant J. L. Evans.

April 28. Tenth ward. Patient D. D. threatened E. W.; the latter struck him a severe blow, breaking the bridge of his nose, which caused blood to flow freely. Witnessed by attendant Alex. Barrisdale and patient M. B.

May 15. Tenth ward. Patients D. B. H. and M. H. were sitting alongside of each other on the settee, they got into a dispute, the former struck the latter a slight blow on the eyebrow; the latter returned the blow on his nose, which caused one of his eyes to be somewhat black. Witnessed by attendant John Brady.

Out on the Farm.

May 15. Patients F. R. and J. S. got into a dispute about a lead pencil, the former struck the latter and gave him a black eye. Reported by attendant D. E. Jones.

May 27. Eleventh ward. Patient J. F. P., without any provocation, struck M. P. and gave him a slight cut under the eye, from which cause his eye became swollen and black. Witnessed by patients P. G. T. and L. T. M.

May 28. Twelfth ward. Patient L. A. attacked attendant T. F. Dillon because he took hold of him by the arm and told him to make up his own bed. The latter threw him down and accidentally struck his head against the bed-post, and gave him quite a bruise on side of the head. Reported by attendant T. F. Dillon.

July 6. Eleventh ward. J. F. P refused to go to bed. Attendant E. D. Murtagh had to use some force, and accidentally struck his eyebrow against the edge of the covered bed and gave him a slight cut, and also caused his eye to be somewhat black. Reported by attendant E. D. Murtagh.

August 23. Twelfth ward. M. N. B., some time through the night, in the covered bed, gave himself a slight cut on the eyebrow, which caused his eye to be black. Reported by attendant T. F. Dillon.

September 23. In the yard patient L. R. accidentally broke his leg above the ankle, wrestling with patient L. B. Witnessed by attendants H. O. Jones and W. McMillan.

October 3. Twelfth ward. G. S. M. was struck by some of the other patients in the dormitory some time through the night. His eye was quite black in the morning. Reported by attendant T. F. Dillon.

October 9. Twelfth ward. Patient D. S. was out working ; he turned a somersault down the embankment and bruised his eyebrow, from which cause his eye became black. Reported by attendant T. F. Dillon.

October 13. Twelfth ward. Patient M. McG. became excited at the tea table and threatened to strike one of the other patients with a bowl. The attendants had to force him out of the dining-room and he accidentally fell down and gave himself a slight cut on the eyebrow. Reported by attendant T. F. Dillon.

November 8. Eleventh ward. Patient H. D. S. struck J. R. with his slipper and spat at him. The latter struck the former in the eye, which caused it to be black. Reported by attendant B. McLaughlin.

November 22. Eleventh ward. H. D. B., in a fit, bruised his face against the side of the covered bed, and also scratched it and drew blood in several places. Reported by attendant B. McLaughlin.

November 30. Tenth ward. Patients G. H. and T. H. got a quarreling in the dormitory ; the latter struck the former on the nose, which caused the blood to flow freely ; they both had their faces scratched quite badly. Witnessed by patient I. E. D.

November 30. Tenth ward. C. A. K. fell down in a fit and gave himself a slight cut on the eyebrow, which caused his eye to be very much swollen and black. Witnessed by attendant D. E. Jones.

Twelfth ward. J. T. and J. S. P. got a quarreling ; they struck each other ; the former received a black eye and the latter three or four slight cuts on the face. Reported by attendant T. F. Dillon

1880.

February 20. Eleventh ward. J. F. had become so feeble that he fell down on the ward and gave himself a slight bruise on the cheek. Witnessed by patient A. S.

February 21. Twelfth ward. Patient M. H. struck D. S. and gave him a black eye, because the latter called him a thief and a son of a b——. Witnessed by attendant F. E. Near.

March 13. Tenth ward. E. S. fell out of bed some time through the night in an epileptic fit and gave himself a slight cut on the nose ; was found on floor in the morning by attendant A. Barrisdale.

March 15. Twelfth ward. J. D. and P. R. T. were strapped to

a chair; the latter unbuckled his strap and struck former with the buckle and gave him two slight cuts on the head. Reported by attendant T. F. Dillon.

April 10. Eleventh ward. S. R. fell down and accidentally struck his eye against the chair, which caused it to be black. Witnessed by patient J. R.

May 7. Eleventh ward. J. E. fell down coming out of the diningroom and gave himself a severe cut on the eyebrow. Reported by attendant B. McLaughlin.

May 8. Eleventh ward. Patient P. R. T. without any provocation struck J. McC. and gave him a black eye. Reported by attendant B. McLaughlin.

May 11. Twelfth ward. Patient P. R. T. without any cause whatever strck A. W. D. and gave him a slight cut on the nose and also a black eye. Reported by attendant T. F. Dillon.

May 24. Eleventh ward. H. B. had a very black eye this morning which he got some time through the night; could not find out by any of the patients that roomed in the dormitory with him how or by what means he came by it. Reported by attendant B. McLaughlin.

May 30. Eleventh ward. J. E. fell down in the ward and gave himself a severe cut on the eyebrow, which caused his eye to be somewhat black.

June 3. Tenth ward. C. R. W. threatened to strike M. F. M.; the latter struck him in the eye which caused it to be black. Witnessed by attendant E. D. Jones.

June 17. Twelfth ward. Some of the patients unknown to any one struck J. B. out in the yard and gave him a black eye. Reported by attendant T F. Dillon.

June 23. Twelfth ward. H. B. fell down in an epileptic fit and gave himself a very black eye in the yard. Witnessed by attendant F. A. Randall.

June 24. Eleventh ward. H. W. S. fell down in an epileptic fit in the yard, and gave himself a slight cut on the nose. Witnessed by attendant W. R. Williams.

June 26. Eleventh ward. A. M. had his coat off on the ward; patient M. E. tried to get him to put it on; he refused; the latter struck him a slight blow which caused him to have a black spot on the left side of his face. Reported by attendant B. McLaughlin.

July 8. Twelfth ward. A. W. D. has become very feeble. He stumbled and fell down on the ward, and gave himself a slight cut on the eyebrow, and also his eye to be somewhat black. Reported by attendant A. E. Clark.

July 19. Eleventh ward. J. R. became dizzy and fell down against the chair, and gave himself a slight cut on the eye, which caused his eye to become black. Reported by attendant B. McLaughlin.

August 25. Twelfth ward. Out in the yard patient G. E. struck

J. McG. in the eye, which caused it to be discolored. Reported by attendant J. J. Ellis.

September 4. Twelfth ward. Out in the yard patient D. S. kicked G. H. in the privates, which caused them to be very much swollen and black. Reported by attendant Jas. Brady.

September 5. Twelfth ward. Patient J. S. P. struck F. S. and gave him a black eye. The latter was plaguing him. Reported by attendant T. F. Dillon.

September 10. Twelfth ward. G. H. hurt his right hand by striking it against a chair on the ward. Reported by attendant T. F. Dillon.

September 27. Twelfth ward. Patient J. McG. struck J. B. without provocation and gave him a black eye. Reported by attendant T. F. Dillon.

September 28. Eleventh ward. H. W. S. became excited in the yard; he was spitting at and threatening other patients, J. McG. struck him a very severe blow in the eye, which caused it to be very much swollen and black. Reported by attendant J. J. Ellis.

October 9. Eleventh ward. A. M. came out of the dormitory in the morning with black eye and also black spot on his forehead. Reported by attendant W. R. Williams.

October 20. Eleventh ward. A. W. D. fell down on the floor and gave himself a severe cut on the eyebrow, in which Dr. Russell put two or three stitches. Reported by attendant B. McLaughlin.

December 10. Eleventh ward. A. K. C. has become so feeble that he cannot walk without assistance. This morning he attempted to walk to the dining-room and fell down striking his face on the floor, which caused his left eye to be very black. Witnessed by attendants J. J. Ellis and J. D. Ferris.

December 11. Eleventh ward. M. L. struck H. W. S. a severe blow on the nose which caused blood to flow freely and also his left eye discolored. Reported by attendant J. D. Ferris.

December 30. Eleventh ward. A. M. was struck by some of the patients that roomed with him; he came out of the dormitory in the morning with a bruised eye. Reported by attendant B. McLaughlin.

February 15. Twelfth ward. P. R. T. without any provocation struck J. C. a severe blow on the nose which caused his nose to be very much swollen and his left eye to become black. Reported by attendant T. F. Dillon.

March 2. Twelfth ward. J. C. struck W. N. M. and gave him a black eye because he was plaguing him. Reported by attendant T. F. Dillon.

March 15. Tenth ward. C. R. struck A. F. on the eyebrow, which caused his eyelid to be quite black, for calling him a young scoundrel. Witnessed by patient M. B.

1881.

March 23. Eleventh ward. C. T. W. struck C. C. and gave him

a black eye because the latter insisted on taking his paper away from him. Witnessed by attendant B. McLaughlin.

March 22. Twelfth ward. E. D. C. became excited and struck W. L. in the eye, which caused it to be somewhat black. Witnessed by attendant J. J. Ellis.

April 12. Twelfth ward. P. R. T. bumped his face against the covered bed which caused both his eyes to be somewhat black. Reported by attendant T. F. Dillon.

April 24. Eleventh ward. R. F. N. was taken with a fit, some time through the night, and gave himself a slight cut on the eyebrow. Reported by attendant B. McLaughlin.

May 7. Twelfth ward. P. R. T. fell down in a fit and gave himself quite a bruise on the temple. Reported by attendant J. J. Ellis.

May 18. Eleventh ward. J. P. B. stumbled and fell down and struck his eyebrow against the door-casing which caused it to be quite black. Reported by attendant B. McLaughlin.

May 25. Tenth ward. This morning J. T. passed by the water-closet with his chamber; C. R. took hold of his arm to direct him, he turned on him and struck him with his chamber and gave him a severe cut on the left temple. Witnessed by patient J. B. T.

May 26. Eleventh ward. A. B. P. came out of the dormitory this morning with two black eyes, and his face very much bruised; E. P. attacked him some time through the night, struck and jumped on him. Witnessed by patient G. D.

May 31. Eleventh ward. E. P. struck at R. B. out in the yard; the latter returned the blow in the eye, which caused it to be discolored. Witnessed by attendant J. J. Ellis.

June 3. Eleventh ward. J. A. L. came out of the dormitory this morning with a slight cut on the eyebrow; he must have been struck by some of the other patients. Reported by attendant B. McLaughlin.

June 17. Tenth ward. C. R. undertook to hold J. R. on the seat out in the yard; the latter took hold of the former by the thumb on the right hand and almost twisted it out of joint. Reported by C. R.

June 23. Tenth ward. D. C. M. became excited and attacked G. W. T.; attendant John Brady went to his assistance, and in the struggle he accidentally struck his eyebrow against the door-casing and gave himself a severe cut, from which cause his eye became very black. Witnessed by attendant A. E. Clark.

June 28. Eleventh ward. J. P. B. attempted to walk; fell down and struck the left side of his head against the floor, which caused him to have a bruised ear. Witnessed by attendant O. Ladd.

July 13. Eleventh ward. J. B. was discovered with a black eye; he is very feeble and in attempting to rise fell on the side of his face; the patients who sleep in the dormitory were questioned, but could not give a satisfactory account. Reported by attendant B. McLaughlin.

July 25. Twelfth ward. H. C. came out of the dormitory this morning with a very black eye; he attempted to strike Mr. L. during the night, the first time he was told to get back to bed and did so, but he tried to strike Mr. L. again when the patient defended himself. Reported by attendant T. F. Dillon. In the struggle Mr. L. gave Mr C. a severe bite on the thumb of left hand.

July 28. Twelfth ward. Mr. E. D. C. was a little excited this morning when he got up and was talking to himself when Mr. R. got mad because he was making so much noise and struck at him, when Mr. C. scratched Mr. R.'s face and discolored his eye a little. Reported by attendant R. D. Jones.

August 16. Eleventh ward. B. S. stumbled and fell down against the seat in the water-closet, and gave himself a severe cut on the eyebrow. Witnessed by patient H. B.

August 18. Tenth ward. C. D. C. without any cause or provocation struck attendant Alex. Barrisdale and gave him a slight cut on the head, which caused blood to flow freely. Witnessed by patients J. A., F. S., W. O. and P. H.

August 22. Twelfth ward. C. D. C. fell off the bench in the yard in a fit, when he got over it he complained of a pain in the ankle; when examined his ankle was found to be swollen. Reported by attendant T. F. Dillon and J. D. Ferris.
A. F.

October 3. Eleventh ward. J. D. L. became excited and attempted to walk off in a hurry; he stumbled and fell down against the chair and gave himself a bruised nose, and also a slight cut on the left temple. Witnessed by attendant B. McLoughlin.

October 16. Twelfth ward. R. B. struck C. C. M. on the nose which caused both his eyes to be somewhat black; the former said his grandmother rose from the dead and had her in bed with him; the latter came to his bed and insulted her; for which cause he struck him. Witnessed by attendant P. Crave.

October 21. Tenth ward. A. F. was stooped down in the water-closet washing his eyes. D. C. M. came behind him and gave him a kick; the former grappled with him to put him out of the closet; in the scuffle he scratched D. C. M's. face. Reported by

November 2. Twelfth ward. P. R. T. came out of his room this morning with a black eye; I cannot find out in what manner he got it. Reported by attendant T. F. Dillon.

December 24. Tenth ward. D. C. M. fell down and accidentally gave himself a slight cut on the nose. Reported by attendant J. D. Ferris.

1882.

January 3. Eleventh ward. W. F. M. fell down in the water-closet against the urinal and gave himself a bruised eye, and also two scratches, one under the eye and on the nose. Reported by attendant O. Ladd.

January 15. Tenth ward. I. A. C. and J. C. quarreled in the water-closet about a paper; C. struck Curtiss a severe blow on the nose, which caused blood to flow freely, and his nose to have a bruised appearance, and also black under both eyes. Witnessed by attendant J. D. Ferris.

February 1. Tenth ward. A. H. came out of the dormitory with a black eye; he got up some time through the night, and without any provocation choked R. C.; then went to M. M.'s bed and awoke him up; the latter struck him in the eye, which caused it to be very much swollen and black; the reason he gave was that he was dreaming. Reported by patients R. C. and M. M.

February 6. Twelfth ward. T. I. struck R. B. and gave him a black eye because he spat at him. Reported by attendant T. F. Dillon.

February 6. Twelfth ward. T. I. was walking on the ward; H. M. N. came behind him and struck him on the head; I. returned the blow on his nose and head, which caused his nose to have a bruised appearance, and also sprained his own hand.

February 23. Eleventh ward. C. S. struck attendant J. F. on the head; the latter took him by the arm to set him down; he jerked his arm away from him, fell and struck his left cheek against a chair which caused it to have a bruised appearance. Reported by attendant J. Farrely.

April 26. Eleventh ward. C. L. was walking the ward; he accidentally fell and gave himself a slight cut on the eyebrow and a very black eye. Reported by B. McLaughlin.

May 6th. Eleventh ward. J. L. was going over the fence to escape from the yard attendant; Mr. Townsend caught hold of him by the feet to take him down, when he accidentally fell and gave himself a slight cut under the chin.

May 30. Tenth ward. R. T., without any provocation, struck I. A. C. in the eye, which caused it to be very much swollen and black. Witnessed by attendant J. B. Ferris.

June 7. Twelfth ward. G. D. K., the day he was admitted to the asylum, when he was taking a bath, the attendant discovered bruised spots on his body; one large spot on the right side of the chest, one on the back part of the left hip, not so large as the former; the small of the back was also discolored. Witnessed by attendants J. W. Sage and Alex. Barrisdale.

June 11. Tenth ward. J. L. was sitting in the veranda asleep; C. P. M. jumped up very much excited and struck him two blows in the face before attendant Jno. Brady could prevent him; he said L. was talking about him and his people, and calling his wife a whore. L. has a cut nose and a black eye.

June 16. Twelfth ward. G. D. became very much excited in the dormitory; was talking quite loud and disturbing other patients; F. H. struck him with a tin chamber-pot, and gave him a severe cut on the eyebrow. Reported by attendant J. W. Sage.

July 14. Twelfth ward. In the yard J. H. struck G. D. in the chest, knocked him down and gave him a slight kick in the eye-brow which caused him to have a black eye. Reported by attendant C. A. Scharmer.

July 23. Tenth ward. G. J. F. fell out of bed in an epileptic fit on his face, which caused his nose and one of his eyes to have a bruised appearance. Witnessed by attendants A. Barrisdale. J. G. Thomas and J. Isdale.

July 24. Twelfth ward. M. L. when coming out of the covered bed with the muff on, he stumbled, fell and struck his right temple against the door casing, which caused it to have a very bruised appearance. Witnessed by attendant E Powell.

Aug. 10. Tenth ward. H. R. struck E. S. and gave him a slight cut on the nose; the former accused the latter of tearing a book that he owned.

Aug. 20. Tenth ward. N. A. G. fell in an epileptic fit and gave himself a severe cut on the eyebrow ; from which cause his eye became black. Witnessed by attendant J. G. Thomas.

September 20. J. C. without any cause or provocation attacked attendant B. M. McLaughlin and struck him a severe blow on the eye, and knocked him over against the wall ; before he recovered he struck him several blows in the face, then denied attacking him, and said that he did not know that he done so. Reported by attendants B. McLaughlin and J. W. Keon.

November 2. Twelfth ward. H. C. attacked attendant J W. S. in the dormitory and threw two chamber-pots at him ; in the struggle the attendant threw him, in falling he accidentally struck his eye against the bed-post, from which cause a bruised eye. Reported by attendant J. W. Sage.

November 5. Eleventh ward. J. J. D. fell out of bed this morning in an epileptic fit, from which cause his eye was slightly bruised. Reported by attendant B. McLaughlin.

November 7. Tenth ward. D. J. some time through the night struck J. F. and gave him a black eye, because he was restless and disturbing him in his bedroom.

November 10. Eleventh ward. C. G. and J. J. D. got a quarreling over a spittoon ; the latter struck the former and gave him a slight cut under the eye, from which cause his eye became very much swollen and black. Witnessed by patients J. L. and I. B.

November 20. Tenth ward. This morning A. S. was going along shuffling his feet and spitting on the ward. Attendant J. D. F. cautioned him about it. He took hold of a chair, as if he was going to strike him with it. They grappled with each other. In the struggle the attendant got a very severe blow in the eye, which caused it to be very much swollen and black.

November 21. Twelfth ward. H. F. S. struck G. D. a slight blow with the broom-handle on the eyebrow, because he attempted to stop him from sweeping, which caused his eye to be somewhat black. Reported by attendant J. W. Sage.

November 23. Eleventh ward. J. S. B. fell off his chair and gave himself a bruised eye. Reported by attendants B. McLaughlin and T. D. Roberts.

December 3. Twelfth ward. F. McS. was sitting quietly in a chair. W. L. gave him a slap on the ear. The former struck him a heavy blow and gave him quite a cut on the temple. Witnessed by attendant J. W. Sage.

1883.

January 30. Twelfth ward. H. C. ran against J. E. and threw him down. He struck his cheek-bone against the floor and gave himself a slight bruise, from which cause his eye became black. Reported by attendant J. W. Sage.

March 16. Tenth ward. L. S. was sitting quietly on a chair. J. H., without any cause or provocation, struck him and gave him slight cut on the nose. Witnessed by attendant A. Barrisdale.

March 22. Twelfth ward. J. E. went out to take exercise. As soon as he got out, he sat down in the snow and refused to go further. Attendant J. Isdale went to lift him up and assist him along. D. R., without any warning, ran up and gave him a severe kick in the side.

March 28. Twelfth ward. D. R. was sitting on a chair. F. H., as he was passing along the ward, spoke to him; the former got up and struck him on the cheek-bone, which caused his eye to have a bruised appearance. Witnessed by attendants J. W. Sage, J. T. Davis and S. G. Barnes.

March 30. Eleventh ward. J. W. B. was taking D. C. M. to the water-closet; the latter has a habit of throwing himself around, and accidentally struck eyebrow against the door, causing his eyelashes to have a bruised appearance. Reported by attendant B. McLaughlin.

April 3. Tenth ward. J. G. F. was out with other patients taking exercise; he became excited and violent; he had several quarrels with patients, then he attacked patient J. F., when he struck him and gave him a black eye. Witnessed by attendant F. G. Barnes.

April 9. Tenth ward. T. E. was helping the attendants to sweep; he told G. A. B. to leave his way, and raised the broom as if he were going to strike; the latter attacked him violently and struck him several blows before the attendants could separate them; one in the eye, which caused his eye to be very much swollen. Witnessed by attendants J Brady and A. Barrisdale.

April 10. Tenth ward. J. H. was spitting on the floor; attendant Isdale told him he ought to spit in the spittoon; as the attendant turned to go away, the former struck him, knocked him down and gave him a slight cut on the head. Witnessed by attendant John Brady.

April 11. Eleventh ward. C. G. came out of the dormitory this

morning with a slight cut on the nose. Reported by attendant B. McLaughlin.

April 14. Eleventh ward. D. C. M. came out of the covered bed this morning with a bruised eye. Reported by attendant B. McLaughlin.

May 8. Eleventh ward. A. S., without any provocation, struck R. D. and gave him a slight cut on the eyebrow, from which cause his eye became black. Reported by attendant D. J. Bellinger.

May 15. Eleventh ward. M. S. K. and H. W. S. quarreled and got into a scuffle; the former accidentally struck his eyebrow against the chair and gave him a slight cut and also a bruised eye. Reported by attendant D. J. Bellinger.

May 27. Eleventh ward. G. M. came out of the dormitory this morning with a bruised eye. Reported by attendant D. J. Bellinger.

June 8. Eleventh ward. J. E. C. was sitting with his back against a tree in the yard; J. F. without any warning or provocation gave the former a severe kick on the head and also a slight cut.

June 9. Eleventh ward. Dr. N. came out of the dormitory this morning with a bruised eye. Reported by attendant D. J. Bellinger.

June 16. Twelfth ward. F. K. was struck in the eye with a stone thrown by W. B. L., a patient. Witnessed by attendant Henry Pflanz.

June 27. Tenth ward. P. McD. and J. W. N. got into a scuffle on the hall and before the attendants could separate them Mr. N. struck Mr. D. on the eye which caused it to turn black. Witnessed by attendant J. Brady.

July 16. Twelfth ward. R. C. came out of the water-closet yesterday with a slight cut over the left eye; he said Mr. H. struck him, but for what reason I could not find out. Reported by attendant Richards.

July 17. Tenth ward. While Mr. R. was mopping out his room this morning Mr. N. went to him and asked him for the mop; Mr. R. handed it to him and at the same time struck him over the left eye and cut him slightly. Reported by attendants Gossin and Pflanz.

August 6. Eleventh ward. As Mr. C. was passing Mr. S., the latter spit in Mr. C.'s face, and before an attendant could get to them Mr. C. struck Mr. S. in the left eye which caused it to turn black. Reported by attendant J. R. Jones.

August 7. Tenth ward. Mr. B. and Mr. C. got into a scuffle on the ward, and before an attendant could get to them Mr. C. struck Mr. B. in the eye which caused it to turn black. Reported by attendant R. J. Gossin.

August 11. Tenth ward. Mr. J. G. F. was found lying on the floor this morning when his door was opened; he must have had a fit and fell out of bed as his nose was slightly scratched and the floor covered with blood. Reported by attendant Gossin, K. J.

August 15. As Mr. L. was walking up and down the ward this morning he met Mr. R. and instead of turning out for him he pushed him aside. Mr. R. then struck Mr. L. in the nose and once over the right eye and cut him slightly. Reported by attendant W. W. Richards.

August 30. Mr. H. and M. F. were out in the lot to work with the rest of the men. Mr. H. called Mr. F. some names and offered to strike him with a potato hook, he had in his hand. Some of the attendants separated them, and as they were coming in Mr. F. walked up to Mr. H. and struck him over the left eye and cut him so that it had to be stitched. Reported by attendant R. J. Gossin.

September 12. Twelfth ward. While Mr. P. was in a disturbed condition this morning he struck Mr. G. without cause or provocation. Mr. R. seeing him strike him went and separated them. Mr. P. then turned on him and injured him about the side and elbow, and in the scuffle Mr. P. received injuries about the face and hand. Reported by attendant W. W. Richards.

September 16. As the patients were going into the yard this morning Mr. F. ran against Mr. J. S. P., a fellow patient, who became very angry at him, and struck him with a piece of brick and cut him slightly on the head. Reported by attendant W. H. Sanford.

September 24. Mr. F. H. was in the water-closet this morning and had an earthen chamber in his hand, swinging it around. Mr. C., a fellow patient thought he intended to hit some one with it and tried to take it away from him. Mr. H. became very much excited and struck Mr. C. with it on the right side of the face and head and cut him slightly. Reported by attendant J. R. Jones.

October 9. Mr. T. B. became very much disturbed last night and broke some windows in his room, and in doing it cut his right hand and finger slightly. Reported by attendant W. W. Richards.

November 12. As the patients were coming up the stairs from the yard, Mr. S. caught hold of Mr. P.'s coat, the latter became very much offended at him and kicked Mr. S. in the face, just below the eye, which caused it to swell and turn black. Reported by attendant W. H. Sanford.

November 22. Eleventh ward. As Mr. Jones, an attendant, was giving Mr. S. a bath this evening he got out of the bath-tub, and in trying to get him in again he struck the bridge of his nose against the tub, which caused it to bleed and swell, and the corner of his eyes to turn black. Reported by attendant R. H. Jones.

1884.

January 16. Eleventh ward. Mr. J. B. was admitted to the eleventh ward, January 16th, his right eye was blackened, and his body, arms, and legs were bruised and the skin knocked off in places, it being done before entering the building.

February 6. Mr. W. became very much disturbed in the dinin room and annoyed the patients so that he had to be removed out on

the ward, and in doing it a lively scuffle ensued, in which Mr. W.'s arm was slightly bruised, while trying to set him in a chair. Reported by attendant W. W. Richards.

February 12. Mr. H. W. S. while having a fit this morning fell and struck his face against the bed, which caused his eyes to be discolored. Reported by attendant R. J. Gossin.

February 13. Mr. O. P. was struck in the right eye by a fellow patient, Mr. W., without any cause or provocation whatever. Reported by attendant R. J. Gossin.

February 15. While Mr. Bremiller was cutting Mr. M. L.'s finger nails this morning he resisted and attacked Mr. Bremiller, when Mr. W. interfered and attacked Mr. Bremiller also, and in trying to free himself from both of them Mr. W. was pushed against the casing of the door in such a way that he struck his nose against it, which caused it to become swollen. Reported by attendant F. Bremiller.

Giles A. Penny, sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside?
A. Unadilla Forks.
Q. Otsego county?
A. Yes, sir.
Q. How long have you lived there?
A. Always.
Q. What is your age?
A. Forty-one.
Q. You are a married man?
A. Yes, sir.
Q. Have you any family other than your wife?
A. Yes, sir; I have children.
Q. How many?
A. Five.
Q. Children by a former wife?
A. Yes, sir; three of them are.
Q. And two by your present wife?
A. Yes, sir.
Q. What is your occupation?
A. I am a farmer.
Q Have you always been a farmer?
A. Yes, sir; except a few months that I worked in Remington's employ at Ilion.
Q. What was your father's name?
A. Alvah Penny.
Q. Your father was a justice of the peace of that town for a good many years, was he not?
A. Yes, sir.

Q. Did you become a patient at the New York State Lunatic Asylum at Utica, at any time?

A. Yes, sir; I was an inmate of that institution.

Q. When were you taken to that Asylum?

A. Twentieth day of February.

Q. And you were taken there as a pay patient?

A. Yes, sir.

Q. Upon what ward were you placed?

A. The seventh ward.

Q. Do you remember who the physician was who was in charge of the seventh ward?

A. Dr. Brush and Dr. Josselyn was together, they came through the ward together; I don't know that any of them had any particular charges.

Q. Who was the supervisor of that ward?

A. This man who went away just now, Mr. Jones.

Q. Who were the attendants on that ward when you went there?

A. Mr. Salsbury; I don't know his first name; Ezra Pugh and Hughie Hughes.

Q. Which of them was the head attendant?

A. Mr. Salsbury.

Q. What is the character of the patients of the seventh ward?

A. While I was there it was the patients that would refuse to eat their meals; he was considered a very good man for attendant.

Q. Do you mean the melancholia patients?

A. No, sir, I don't know as they were that; they would talk with you and they could talk, and would talk if you wanted to.

Q. How long did you remain in the Asylum?

A. I was there one year or a little longer; fourteen months and nine days; I was discharged the last day of April, 1881; I never had any writings, but they wrote to my friends saying that I was ready to go home.

Q. And you considered yourself as recovered?

A. Yes, sir, as much as I ever would probably.

Q. Did you remain on the seventh ward all the time you were there?

A. No, sir; I was there about two or three weeks only, then I was removed.

Q. Then where were you taken?

A. On to the sixth ward.

Q. Who was the suprvisor of that ward?

A. That is in the same division and Mr. Jones was the supervisor.

Q. But there were different attendants?

A. Yes, sir.

Q. Who was the head attendant on that ward?

A. Lou. Johnson and Johnnie Dillon at that time; with the help of the "super," he helped some.

Q. How long did you remain on the sixth ward?

A. I was there two or three weeks.

Q. Then upon what ward did you go?
A. I kept going along down, and went from six to three.
Q. How long did you remain on ward three?
A. Two or three weeks I should judge.
Q. Then where were you taken?
A. On to ward two.
Q. How long did you remain on ward two?
A. About two weeks.
Q. Then no to what ward did you go?
A. I remember the time, it was the first day of April, or the second day of April, that I left No. 2 ward and was put clear back on to ward No. 8.
Q. Do you remember why it was that you were transferred from ward to ward so rapidly?
A. The attendants told me that I was getting right along; I felt better; and I rested more and the medicine that they gave me seemed to cure me and I got along very well; I never had a word with any one; I went along pleasantly until I came down there to ward two, that is next to the visiting-room; they said then they thought I would be ready to go home soon; and I expected to go home and to get home in time enough to go to spring work; I felt as well as ever up to that time.
Q. So that the change from ward to ward was a progress toward recovery?
A. Yes, sir.
Q. What was the reason of your changing to ward eight?
A. I don't know.
Q. Do you recollect whether you were improved or worse after you got to ward two?
A. From that time after they had put me back, I grew worse; they told me then that just before my sister came and wanted to take me home; my sister, Carrie Wheeler, had a notion of taking me home, and had come to take me home; they would not let me see her; I said to them if you will let me know when they will let me go, I won't say any thing more about it; but they did not want her to see me, although she stayed there without her dinner waiting to see me; then she said they would not let me go; the doctors came round pretty soon after that and said to me that if I got away in quite a while (I don't know as they stated the time), but "in a year or so," that I would do pretty well; and that discouraged me and I felt bad, still I did not say any thing to any one about it; that night while I was in my room and asleep, I was woke up by two attendants rushing into my room; they took and carried me off and would not let me walk; I was well acquainted with them, and I said I could walk; but they insisted on shoving and pulling and they went a round-about way, and took me to eighth ward; went along the side passages.
Q. You say you were carried and pushed by the attendants?
A. Yes, sir.

Q. Who were those attendants?

A. Homer Jones was one of them; I don't know as I can swear to the other, but I remember him very well.

Q. Do you know who the other one was?

A. No, sir, I do not; I could not swear to the rest of them.

Q. When you were taken to the eighth ward what disposition was made of you?

A. I was thrown upon a mattress on the floor in the eighth dormitory; they threw me on to that; they had nothing to put over me at all.

Q. Did they dress you before they took you away from the other ward?

A. No, sir, and they did not bring my clothes; they went right out and locked the door; there were six or eight bedsteads there; it was in the night, and I had no bedstead; they put me on a mattress on the floor with my head toward the flue or ventilation hole; the draft disturbed me and I got up.

Q. After leaving you there they left you upon that mattress and went out of the room?

A. Yes, sir.

Q. What season of the year was this?

A. That was about the 5th day of April; I should judge it was somewhere from the 1st to the 5th of April.

Q. The room was warmed, I suppose, as the other rooms were by hot air?

A. Yes, sir.

Q. What year was this?

A. 1880.

Q. The April following you were removed?

A. Yes, sir.

Q. What next occurred after you were put in there; you say they went out and locked the door?

A. It disturbed these men that were in there; when the attendants came in and threw me down there, I was afraid to stay there, I was kind of frightened and I tried to get up when they did, and go out with them, but they closed the door and locked it, after throwing me down there; I went back and laid down but it had disturbed the rest of the men that were in there and made them uneasy, and I thought they would pitch right on to me; I did not know their condition, so I got right up; thinks I, if they are going to pitch on to me I am going to do the best I can; so I got up, but there was no violence from the patients whatever at that time; still they got up and walked round, and one of them tried to shove up the window, and they walked round; I partly sat on the bed and at that time I lost consciousness, and I did not remember any thing more till I found mysely strapped in a chair outside of the ward in the morning with my clothes on; there were a lot of men in the other chairs hollering and swearing and they were very violent, but

I cannot tell who they were; I knew before this of one of them, who he was.

Q. The next you remember of it was that the next morning you found yourself strapped in a chair?

A. Yes, sir; strapped to the benches, there is a long seat — a bench.

Q. Then what occurred?

A. I was in restraint then, and I was kept strapped in front of the attendant's door on that first day for a long while.

Q. Describe to the committee the manner in which you were strapped?

A. The strap is about two inches and a half wide, made of russet leather, and it is passed around your waist and round back of the chair; then the strap is drawed up; they draw that up and strap you right there; its an awful thing to be strapped up like that; sometimes two or three of them pull it and they get it so tight that you can't breathe; I have seen some of them drawed up with straps until I thought they were dead; they would be all dark, you know.

Q. Can you give the name of any patient who was strapped until he fainted?

A. Yes, sir, I can; Giles A. Penny.

Q. I do not refer to you personally, but were there any others?

A. At that time I did not pay any attention to names of anybody, but I have seen G. H. strapped.

Q. H. of S.?

A. Yes, sir.

Q. Any others?

A. A fellow named Booth; I have seen him.

Q. Now, how were your hands or arms secured when you were strapped in the way you have described?

A. They were strapped in, and after that the doctor came in and told "Bess" Humphreys, the attendant; it was Dr. Josslyn that came in, and Humphreys said to the doctor, "he is too many for me (meaning *me*).

Q. That is, Humphreys told the doctor that you were too many for him, Humphreys?

A. Yes, sir; and the doctor says then, "you must use the camisole on him."

Q. Describe the camisole.

A. It is made out of coarse canvas, the same as is used on board ship; it is very coarse, heavy stuff; it opens on the back and you slip your hands into it and then they come together like that (indicating); there are two button holes worked in the center, and they will pass the strap round you through the button-holes and that draws your hands in towards your stomach like that (indicating).

Q. So that they are pressed hard against the stomach?

A. Yes, sir; then there is a buckle on the straps that comes against your backbone; the worst attendants leave it against your back, where it hurts; but some of the attendants would turn it around on to the side; it would hurt the back until it got to be a regular

sore, you know; then they would turn it around; I have moved it for other patients to get it off of that spot on the back; I would walk up to them and move the strap around; I knew what was the matter with them for I have had it myself.

Q. How long were you kept in a camisole?

A. They took it off me sometime afterward when I went on the eighth ward.

Q. What kind of bed do they give you on that ward?

A. They gave me a good bed after that; when I was taken out of that room and taken to the dormitory and afterward was put into this chair in front of the attendant's door, and strapped there, I remained there, as nigh as I could guess at it, maybe three weeks.

Q. Were you ever put into the covered bed?

A. Yes, sir; in the crib; you have a sense of feeling that you are confined, you cannot raise up and you cannot turn over; that is I could not turn over because I had the camisole on.

Q. Could you have turned over in the covered bed if you had not the camisole on?

A. Yes, sir; you can turn over without that on.

Q. Did they keep the camisole on you night and day?

A. Not on that ward, they did not.

Q. Did you have a covered bed in that ward?

A. Yes, sir.

Q. And you did not have the camisole on all the time when you were in bed?

A. No, sir, not on that ward; they "cribbed" me always when I was there, except this first night, that is, after I was sent back from ward two to ward eight; then they "cribbed" me all the while I remained on that ward.

Q. How long did you remain there on that ward?

A. I should say it was about two weeks, perhaps three; it might have been longer than that, I cannot say as to that precisely, because I have kind of lost my reckoning of that time.

Q. State what you saw in the way of violence toward patients by attendants, and if you can, give the names of the attendants that used the violence?

A. They all pounded, and kicked, and struck, you know.

Q. Give the names of the parties who did it, and who they were that were struck?

A. I saw Bess Humphreys throw a man backward when he was going into his room; his name was L.; he threw him back and he struck his head on the threshold of the door; then he halted a minute or two and came back and kicked him in the sides; that is, the attendant came back after the rest of them walked round and over him, and he got down to the dining-room; he kicked him and he crawled up on his hands and knees; while he was on his hands and knees he would kick him again, and after a while he kicked him so that he got up.

Q. What was the final result of that?

A. He went on; he went on to his dinner; and that was the last I ever saw of this man; I never saw him afterward.

Q. You don't know what became of him?

A. No, sir.

Q. Do you know any other case upon ward eight, where there was any cruelty; if so, give the name of the patient and of the attendant?

A. Do you mean other than in my own case?

Q. I refer to others than yourself?

A. I don't know as I can give you any particulars.

Q. Now give us your own treatment on ward eight?

A. They do not allow them to have any water on that ward, that is, there is no arrangement for water; it is a hard ward; the faucets are taken off of the water pipes so that you cannot get a drink of water yourself.

Q. You have to call on an attendant?

A. Yes, but they would never give you any water if you asked them for it.

Q. How did you get water?

A. You got what you got at the table; of course they have coffee or something at the table to drink.

Q. Are they not permitted to have water on the wards?

A. No, sir, there is no access to water on that ward.

Q. I mean this, do they not have water there?

A. No, sir; not on the ward.

Q. All the drink you got there was at meal times?

A. Yes, sir; during all this time I was not allowed to go out from the ward to my business; I was strapped to the chair and they used to bring me some oatmeal with some milk on it, that is all I had.

Q. Were you allowed no other drink than the milk in the oatmeal?

A. No, sir.

Q. How long were you kept on oatmeal and milk without other drink?

A. As long as I was there on that ward, three weeks; but I did get water by stealing away when the rest of them were away in the dining-room; the boys have ice water by themselves; they have their victuals; and they have ice water, and I used to go and get some in that way.

Q. Did you ask the attendants for water?

A. Oh, yes, sir.

Q. What did they say to you?

A. That they would let you have water when they got ready; it was very seldom that I got a drink of water when I asked for it.

Q. Were there times that you suffered with thirst?

A. Oh, yes, sir.

Q. That was on the eighth ward?

A. Yes, sir.

Q. What was the physician's name on that ward?

A. The same ones; I never saw the physician only once while I was there, and that was when Dr. Josselyn came there and ordered these restraints put on me—the camisole.

Q. And you never saw him while you were on that ward again?

A. No, sir.

Q. Did you see any physician on that ward?

A. No, sir.

Q. While you were on that ward did you see Dr. Gray?

A. No, sir.

Q. When did you first see Dr. Gray after being taken to the Asylum?

A. I see him when they first took me in, but that was all; he had made an examination and he had said something to my friends but he never said any thing to me.

Q. Did he make any personal examination of you by looking at your eyes or tongue?

A. Not at all.

Q. When did you next see Dr. Gray?

A. I saw him on the eighth ward the second Sunday after I was put in there.

Q. And did he talk with you then?

A. No, sir.

Dr. Brush says: Here is the man that came in in a bag—they brought me in there in a bag—"Yes," says Dr. Gray, "I know him," then he turned his head and left the ward, he did not speak to me.

Q. And you think that during the period of three weeks while you were on ward eight the second time, you did not see Dr. Gray at all?

A. No, sir, I did not.

Q. And only saw Dr. Josselyn once?

A. Yes, sir.

Q. Did you see Dr. Brush at any time?

A. Yes, sir, I saw him when I was on the seventh ward.

Q. How was it in regard to the eighth ward?

A. I saw him about once a week, perhaps oftener than that.

Q. What other physician did you see on the eighth ward?

A. No other.

Q. After they had kept you in this restraint for about three weeks, then what was done?

A. Then I was put on to ward four from eight, that is the violent ward; then I had the camisole on and was not allowed to take it off, excepting that the strap was off, so that it was less troublesome.

Q. Do you remember who the head attendant was on ward four?

A. Yes, sir.

Q. Who was it?

A. Dan Torpey.

Q. Who were the other attendants?

A. John Philo, he was the dining-room man.

Q. He was a New Hartford man?

A. I don't know where he was from, and the other was Jones; I cannot remember his given name, but he was a Welshman.

Q. What treatment did you get upon that ward?

A. I never was allowed to go to the table but once while I was there; I was on the fourth ward a long time; I was on the fourth ward some four or five weeks or six weeks; it seemed an awful long time; I can remember distinctly from the time I went there in April until August.

Q. You went to the fourth ward in April and remained there until August?

A. No, sir; I was on the eighth ward a number of weeks, and then I went from there to the fourth ward some time in June, I think.

Q. And remained there until August?

A. Somewhere along there, I think.

Q. What treatment did you get while in that ward?

A. It was severe; I was kept in restraint all this time strapped down in the ward in the chairs; the patients there are much more violent; there is more fighting, and they come along and strike you and kick you; they struck and kicked me while I was strapped in the chair, and no one paid any attention to it.

Q. You were under such restraint that you could not do any thing?

A. I could not raise my hands or get out of the chair; sometimes I was strapped in with my hands in, and sometimes they were loose so that my arms were free; that was so when they brought up my victuals or something of that kind; the victuals were always brought in a large dish or a large cup.

Q. Did you see any injuries inflicted upon any other patients by the attendants?

A. On the fourth ward?

Q. Yes?

A. Oh, yes; a good many.

Q. Can you give the name of the attendant, and the person injured?

A. Sometimes all three of the attendants would pitch on one man at a time, and knock him down.

Q. Give the names of the attendants who assaulted one man, and give me also the name of the man who was so assaulted?

A. I could not give the names of those on the fourth ward, very well.

Q. Your recollection is not distinct?

A. No, sir; I did not have any chance; they do not allow any one to speak on No. 4.

Q. While you were on No. 4, did you receive any injury?

A. Yes, sir; I did receive injury.

Q. What was it?

A. I had all my teeth knocked loose — knocked out, some of them.

Q. How many teeth were knocked out?

A. I had one tooth gone, in front, when I went there; and when I came back away from there I only had five teeth on the upper jaw, and my lower jaw was broken.

Q. Are you able to tell how you received the injury of breaking your lower jaw, and breaking your teeth?

A. It was done by the heels of their boots, stamping, it was done that month while I was there, after I was sent on to No. 4 ward.

Q. Can you tell who did it?

A. No, sir; I know it was the attendants that commenced striking me and knocked me down, in the first place, and then pitched on to me; then they had some more help, and it was when I was down that I was injured.

Q. Do you know why it was an attendant knocked you down?

A. No, sir; no more than I would keep talking.

Q. Were you in restraint when they knocked you down?

A. Yes, sir.

Q. Did you have any struggle with them?

A. Oh, yes, sir; I tried to defend myself.

Q. You struck back the best you could?

A. Yes, sir; to get away from them.

Q. When your teeth were knocked out and your jaw injured, what was done by the physician?

A. They never mentioned a word to me about it.

Q. Did they leave it to unite of itself?

A. No, sir; it was left for a time; I was pounded senseless and carried off to my room; pounded senseless, and when I came to the doctors were standing over me; Drs. Brush and Josselyn; they put a bandage around my head and bandaged up my jaw; put on a flax-seed poultice.

Q. Dr. Brush and Dr. Josselyn were in your room when you came to, examining into your condition?

A. Yes, sir.

Q. Do you recollect any attendant that was there at that time?

A. No, sir; I don't think of any now.

Q. What was your condition after this injury; what was your mental condition?

A. I felt — well, I don't know as I could testify particularly to that.

Q. Do you remember whether you was more disturbed after this injury, or less?

A. No, sir; I don't remember about that.

Q. From ward four, where were you taken?

A. They said they put me back on to eight; I inquired of them since, but I don't remember when.

Q. From ward four to ward eight — if it was ward eight?

A. (Interrupting.) It was only for a few hours; they did not leave me over night, for I should have remembered that.

Q. Then where were you taken?

A. On to ward five.

Q. How long did you remain on ward five?

A. Almost until I came home; I stayed there a number of months.

Q. On ward five?

A. Yes, sir.

Q. Didn't you get back to ward two before you left?

A. No, sir; I went from ward five to ward one, skipping over two wards — I mean from five to three; I went from ward five to ward three.

Q. Now on ward three, did you receive any harsh treatment there?

A. No, sir.

Q. Did you see any patients that did receive harsh treatment there?

A. No, sir.

Q. Do you remember how long you were on ward three?

A. No, sir; I could not tell.

Q. And from ward three you went to ward one?

A. Yes, sir.

Q. How long did you remain there on ward one?

A. Three or four weeks; that is a very quiet ward.

Q. You had no difficulty there?

A. No, sir; had no difficulty on the second or third wards; they don't know any thing about it on the second ward.

Q. The first ward contains patients that are nearly ready to leave the asylum, does it not, a large share of them?

A. I don't know about that; there is men there that has been there 15 or 20 years.

Q. But that is considered the dismissal or "send-off" ward?

A. Yes, sir.

Q. Do you remember how long you were there before you were discharged?

A. No, sir; I didn't keep track of it.

Q. You had no ill treatment there on that ward?

A. No, sir.

Q. When you were taken away from there, who took you away from the asylum?

A. My wife came there and my brother-in-law, Charlie Wheeler.

Q. And you returned home on the cars?

A. Yes, sir.

Q. Did you walk from the Asylum down to the depot?

A. Yes, sir.

Q. And from the time of your arrival at home up to the present time you have attended to your own business?

A. Yes, sir; I have carried on my farm myself.

Q. Dairy farm?
A. Yes, sir.
Q. How many cows?
A. Six.
Q. Do you keep a hired man?
A. No, sir.
Q. I suppose some part of the summer time you have a hired man?
A. Last summer I hired a man, $20 a month through haying; but I done enough of other work so that I paid the $20.
Q. You are a very hard working man?
A. Yes, sir; I claim so.
Q. You have had no mental disturbance since you returned home?
A. No, sir.
Q. Can you suggest now any thing that you think would be an improvement in the way of the management of the Asylum?
A. I think that friends when they come there to see the patients ought to have the privilege of seeing them, any way they should not be told that the friends are not in a condition to see them, and then pretend that it was on account of the friends that they did not want them to see them; I didn't see any of my friends in eleven months; they said that I was not in a condition to see them, and they stated in a letter to my wife that I had an abscess on my cheek, and that it had not got well yet; that was the first they heard of the matter of my injury, they did not know it.
Q. From the time you went from ward two back to ward eight, you did not see any of your friends?
A. No, sir; except that when I was on the fifth ward I saw Charlie Wheeler; he was on the fifth ward and came to see me.
Q. Was your wife there to visit you?
A. She visited me when I first came there; when I first came there they allowed everybody to see me, but when I left the second ward and went back to ward eight, I never see any of my friends until about eleven months; then I got on to ward five and it was then that I saw Charlie Wheeler.
Q. How long did you say it was that you did not see your friends after going back to ward eight?
A. Eleven months.
Q. What ward were you on then?
A. The third ward.
Q. How often during the time you were on that ward did you see Dr. Gray?
A. I saw him pass through the ward with visitors.
Q. Did he say any thing to you?
A. No, sir.
Q. How many times was he on ward two while you were there?
A. I do not think I saw him more than once.
Q. How many times was he on ward eight?
A. I never saw him at all there on that ward.

Q. How many times did you see him on ward six ?

A. Once.

Q. How many times on ward three ?

A. I never saw him on ward three, I think.

Q. How long were you on ward three ?

A. I was there five or six weeks and did not see him ; I had two spells of being on ward three; I saw him once on five; I was on five the longest.

Q. You saw him once on there ?

A. Yes, sir.

Q. How often did you see him on ward four ?

A. I never saw him on ward four at all.

Q. And you were there how long ?

A. From June to August, about two or three months.

Q. How was it as to the other physicians, as to being attentive ?

A. They made themselves very scarce after I came to myself; when they see that I had come to my reason again they never came round any more; they left me after I came to myself.

Q. Did the physicians — one or more of them — make a practice of passing through the ward morning and evening ?

A. It was generally in the middle of the day, in the forenoon, when they came on to the wards.

Q. Did they come on in the afternoon ?

A. I could not say that I ever saw them there in the afternoon,

Q. While you were there you were a paying patient ?

A. Yes, sir.

Q. Have you with you one or more of the bills you paid to the asylum ?

A. Yes, sir ; I brought one of them along. (Produced.)

Q. Was this bill paid by you or your wife ?

A. By my wife, or by Charley Wheeler, my brother-in-law ; I guess he handled the money.

Q. This bill is from February 21, and is for twenty-three weeks— have you any other bill ?

A. Yes, sir, there are four or five such bills.

Q. Have you any thing to complain of about the bill ?

A. Well, the camisole and strap is charged to me, but I did not get it when I came away.

Q. You thought you ought to have had it ?

A. Yes, sir, but they did not let me have it.

Q. Did you ask for them when you came away ?

A. Yes, sir, I did.

Q. Do you know what excuse or reason they gave for not letting you have them ?

A. They did not give me any at all.

Q. Have you visited the asylum since you were taken away from there ?

A. Yes, sir.

Q. How many times have you visited it since then ?

A. I have been there three times.

Q. Why did you go?

A. I went there to see friends that were there, acquaintances that I made there while I was there.

Q. Did they allow you to go?

A. Yes, sir; I went with the rest of the visitors; I had to wait my chance to go around.

By Mr. RICE:

Q. What were you taken to the asylum in a bag for?

A. They considered that I might—well, they were afraid of me.

Q. Your own friends took you there in that way?

A. Yes, sir.

Q. You were taken with the consent and knowledge of your wife?

A. No, sir, she did not give any consent.

Q. She knew about it, did she not?

A. Yes, sir.

Q. You have no fault to find with the action of your friends?

A. No, sir, only I think they were hasty.

Q. Had you been violent, or undertaken to do anybody any harm before you went to the asylum?

A. No, sir, only in one case, and that I think was no more than you or any other man would have done; I wanted to walk, I was not content to lie down, I wanted to walk; there was one of my friends, I had nothing against him, he said I must lie still, lie down; he spoke very roughly to me; I said to him "keep your hands off of me"; I started to go out again, he grabbed me by the throat, I took his hand like that (indicating), threw him off, and in doing so I put his finger out of joint.

Q. You have no doubt but what you were insane, have you?

A. No, sir.

Q. What led to your insanity, if you can state?

A. I could not say as for that; hard work and too much tobacco, I suppose.

Q. When you were put into this bag, did you go in voluntarily, or did they have to compel you to go in?

A. I went in voluntarily.

Q. It was done simply to restrain you from doing any harm?

A. That was one purpose, and may have been *the* purpose; the bag was loose, but was tied at the neck.

Q. Your head was not covered?

A. No, sir.

By Mr. MORGAN:

Q. Your father was in the asylum on two or three occasions before you?

A. Yes, sir.

Q. And you had a brother that was insane?

A. I suppose he was; he committed suicide.

DAVID K. DAVIS,

Sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside?

A. In the town of Plainfield, Otsego county.

Q. Were you an attendant at the New York State Lunatic Asylum?

A. Yes, sir; I was there ten years.

Q. How old are you?

A. Fifty-five years of age.

Q. What wards were you on?

A. I was on the second ward during all the time; I had charge of that ward.

Q. During all the time you were on the second ward, did you see any abuse of patients by attendants?

A. No, sir; I never did on that ward.

Q. Did you on any of the wards of the asylum?

A. Not on any of the wards, myself.

Q. Do you personally know of any injury having been inflicted on any patient?

A. No, sir; not in my presence.

Q. During the time you were in the institution, how often did you see Dr. Gray visiting your ward?

A. I suppose about once a month; sometimes not so often as that while I was there.

Q. When did you leave the asylum?

A. Three years ago last fall.

Q. Before Dr. Gray's injury?

A. Yes, sir.

Q. How often did he visit your ward?

A. Sometimes he would only come on to the first floor, with strangers, you know, and then he would come back; that would be extra; I guess he would average once a month.

Q. When he came, did he go in to see any of the patients, or did he go in with people going through the asylum to visit it?

A. Sometimes he used to come and see the patients with another doctor, Dr. Andrews, or any other of the asylum physicians; sometimes he used to come through with strangers.

Q. How often did the other physicians having charge of that ward visit that ward?

A. They used to come some years ago only once a day; now these late years they come twice a day.

Q. You were there how many years?

A. Ten years.

Q. From your experience in the asylum and in that ward, in

your judgment did Dr. Gray visit that ward as often as you thought he should?

A. Well, I should think he should have come oftener; that was the cry, complaint; and I think he ought to have come oftener.

Q. That he did not come upon your ward very often; do you mean that was the complaint?

A. Yes, sir.

Q. That he did not visit the patients as often as he ought to?

A. Yes, sir.

Q. Was any remark made to him about visiting the patients?

A. Not that I know.

Q. Did you ever see an attendant afflict any blows upon a patient?

A. No, sir; not to hurt them any; but then they take hold a great many times of a patient, just to scare them a little bit, but not to hurt them; I never see any abuse or striking.

Q. While you were on that ward were there any patients injured?

A. They were all very quiet on that ward; there was only one man accidentally hurt there.

Q. How was that?

A. He got hold of a razor and cut himself; he got this razor accidentally.

Q. Where was the razor left accidentally?

A. In the attendants' room.

Q. And the patient got hold of it and what did he do?

A. He put it in his pocket, and then afterward he cut a little gash in his throat, but he soon got well; he cut a gash on his throat, we catched him before he got far.

Q. Before he inflicted any severe injuries upon himself?

A. Yes, sir; that is all I ever see on the ward.

A. Who was the attendant who left his razor where a patient could get hold of it?

A. Well, I must say that I was the one myself; I left the cupboard open right in my own room, and the other attendant was in bed at that time; I did not want to lock the door and lock him in, or else he could not have got out.

Q. Did it come to the knowledge of Dr. Gray that you had left your razor out?

A. Yes, sir.

Q. Who reported it to him?

A. I reported it myself; every thing was reported while I was there.

Q. What did Dr. Gray say to you?

A. He told me to be more careful; he gave us the keys for this very cupboard, and after that we were more particular about such things.

Q. How long did you remain an attendant after this accident with the razor?

A. I guess I was there two or three years after that.
Q. Was there any other accident while you were there?
A. No, sir; that is the only accident I remember.
Q. And when you left the asylum you resigned?
A. Yes, sir.
Q. What wages did you get?
A. Twenty-six dollars a month.
Q. And your board, washing and lodging?
A. Yes, sir.
Q. What were your duties?
A. I had charge of the second ward; there was a supervisor over me, and a first attendant had charge of each ward beside; I was first attendant of that ward the whole time.
Q. What time did you have to go on in the morning?
A. I used to go on at five o'clock in the morning in the summer time, and at half-past five in the winter.
Q. And you remain until what time at night?
A. Until nine o'clock; the patients are in bed at eight.
Q. What do you think about the number of hours that you are required to be on duty there?
A. The night watch used to take our place —
Q. You do not understand the question. Do you think the hours required of you are more than they ought to be?
A. Yes, sir; I think that was too many hours.
Q. What do you think of a man going on as early as that in the morning and then remaining on until nine o'clock in the evening?
A. I say it is too much; they are very long hours.
Q. Were you sick at all while you were in here?
A. No, sir; I was all right.
Q. Did you ever receive any injury from a patient?
A. Not to amount to any thimg.

The committee here adjourned to meet again on Monday, February 25, at three o'clock in the afternoon, in room B, at the Capitol.

ALBANY, *February* 25, 1884.
ROOM B, NEW CAPITOL.

The investigation was resumed at 3 o'clock, this P. M., as under.

Present — The full Committee.

DR. E. N. BRUSH,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?
A. Thirty-two.
Q. Where do you reside when you are at home?
A. Utica; until I came to the Asylum my home has been at Buffalo, N. Y.
Q. What position do you hold at the Utica Insane Asylum?
A. First assistant physician.
Q. How long have you held that position?
A. Since October, 1880.
Q. What was your position there previous to that?
A. Fourth, third and second assistant physician.
Q. How long have you been connected with the institution?
A. I went there in March, 1878.
Q. What are your duties at present?
A. My duties at present comprise the charge of the women's division of the house, and the duties of acting superintendent in the absence or illness of the superintendent, and I am supposed to keep a general oversight of the entire house, so far as possible and consistent with my other duties.
Q. How often do you visit the patients?
A. Either myself or the physician who is with me, as a rule, visit the department we have charge of twice a day; then, if there are any sick patients, or any thing on the ward that needs our attention, we are apt to be there anywhere from three to a dozen times a day, but not through the whole house; we make a tour of the whole house in the morning about nine or ten o'clock, and in the afternoon about four o'clock.
Q. How many patients are under your supervision?
A. About three hundred.
Q. Do you say that you are directly connected with the female department?
A. Yes, sir; I have charge of the female department; it is a rule of the house that the elder physician who is, or may be a married man, is to have charge of the female division.
Q. Do you have charge of the female wards altogether?
A. Yes, sir; supervise all the female wards.
Q. To whom do the attendants report?
A. To me, as a rule, or, if I am not in the office, to the physician

associated with me, or, if he is not accessible, to the next physician they can find.

Q. How much attention does Dr. Gray give, personally, to the patients?

A. That would be a matter dependent upon the character of the patients; for the past year or two the doctor, on account of his health, has been prevented from giving the attention to matters that he did before he was injured, and that he did when I first went there; I think it was March, 1882, that he was shot.

Q. How frequently does he go through each ward at present, or has he, since his injury?

A. Sometimes he is on the wards two or three times a week, and sometimes not as often as once a week; it varies; I may say that I see Dr. Gray perhaps six and eight times a day in regard to patients under my supervision, and in regard to the men patients when there is any thing serious the matter.

Q. Does he go through every ward in the institution as often as once a week?

A. I do not think every ward in the institution, he goes — for instance, to illustrate; he might go to-day on the top floor, and to-morrow on the middle floor, then to-day on to the back wards, or disturbed wards, and to-morrow on to one or two wards in the front of the building.

Q. How many wards are there altogether?

A. Twelve on each side of the institution when it is in full working order; there are some repairs going on now on the women's side, and that makes it, practically, only eleven.

Q. What was Dr. Gray's prior custom as to the inspection of the wards?

A. He was on the wards, would go on to the wards alone at different times frequently; at other times he would come and say to the physician in charge, "I want to make your tour with you this morning," at other times he would take the junior, and in a measure give him a clinical lecture.

Q. What is the pay of the ordinary attendant per month?

A. On the women's side, the female attendants get, I think, to commence with twelve dollars a month, and if their services prove acceptable after the first six months their pay is increased at the rate of a dollar a month, until they get sixteen dollars a month, unless thay have charge of a ward or are given some special duties like night nurses, or become supervisors of departments, and then their pay is fixed at a larger sum and stops; attendants in charge of a ward like the disturbed wards on the men's side, what we call "disturbed" wards, receive eighteen dollars a month; attendants in charge of other wards receive from sixteen to seventeen dollars a month, while supervisors receive more; I think their pay is twenty-five dollars a month, that is my recollection.

Q. Do they retain their positions a long time, or are there frequent changes among them?

A. There are changes among the attendants, the supervisors who are there have been in charge there ever since I have been in the house.

Q. How about attendants?

A. Some of the attendants have been there equally long; well, not as long as the supervisors — I will correct that, but some of them have been there as long as I have been there, and others have been there a shorter length of time; perhaps a third of the number of attendants go away during the year; I should not want to be positive about that, it may be more and it may be less.

Q. What estimate do you place on the character of the attendants as to their fitness for their places?

A. It is very much as in other departments of life, they come up to the average of mankind — that is, the average of the people or class from which they are drawn.

Q. Are you satisfied with the character of the attendants, as a general thing?

A. No, sir, I cannot say that I am satisfied with their character as a general thing. I am not satisfied with their standard of intelligence in the performance of their duties, and as illustrative of that, we are constantly trying to educate them. The matter has been under advisement for four or five months, and within the past two months we have originated there a training school, similar to the training schools for nurses in Bellevue Hospital of New York, and other places. I started the training school in Buffalo General Hospital with the object of improving the attaches, and lectures are delivered to them every week, embracing the general line of their duties, and particularly the treatment of such matters as may come under their observation — for instance, how to stop a hemorhage from a cut vessel; but more especially in regard to their duties in connection with the insane — self-respect, self-control, enabling them to acquire a more intelligent appreciation of the character of insanity, what it is — what it means.

Q. Does that apply to both male and female attendants?

A. Yes, sir.

Q. Do they stay in the institution long enough to benefit by the instruction?

A. Yes, sir, I think they do; I think the instruction tends to improve them, and they have evidenced a great deal of interest in the matter and they take notes of the lecture; the female attendants, whom I see more especially, take particular interest in the thing and watch the procedure of the physician for instance, on the taking of the temperature of a patient; they manifest desire to know, and they do know, why it is that the temperature in a case of consumption should rise in the afternoon and fall in the morning; and the like; and they evince more interest than I supposed they would evince.

Q. How much attention do you give to patients during the night?

A. Whenever a patient is sick during the night we always go to see them ; we generally know pretty thoroughly the condition of the patient, and if the patient is only restless, excited, noisy, knowing what treatment the patient is receiving, we send in a prescription and send the medicine if we have it, otherwise we go down to the apothecary's shop, get the prescription put up and send it, or go and see the patient.

Q. One of the attendants at the last hearing spoke of receiving night medicine for patients. Is there any one prescription that is used ?

A. No, sir ; it depends upon the patient ; as a rule the medicine is in the nature of a hypnotic, but they are not the same, for what would produce sleep in one patient probably would not in another.

Q. And the physicians make the prescriptions upon the report of the attendants during the night, based upon their knowledge of the patient's case ?

A. Certainly.

Q. Previously acquired ?

A. Yes, sir ; and in the case books there is a list of the mental and medical condition of the patient, carried along from time to time.

Q. Do you frequently observe patients with bruised noses, or black eyes in the institution ?

A. I cannot say "frequently" ; I do not think is frequent ; I know there are not two on all the women's side of the house, out of three hundred and fourteen, or three hundred and fifteen patients ; I think it is equally the same on the men's side ; I should say it applied equally the same to the men ; and I had three years' service on the men's division.

Q. When you observe such cases what do you do ?

A. I inquire immediately how it happened.

Q. Of whom ?

A. Of the patient, or if the patient is not in a condition to tell, of the attendant ; generally here patients are found on the ward who know something about it. To illustrate, patient was going into the dining-room on one of our wards last evening and resisted going in, she was hanging back ; the attendant coming along and trying to assist her they both fell ; the attendant was hurt a little and the patient received a bruise on the cheek which will eventuate in a black eye ; that matter was reported to Dr. Quinn. The assistant physician, Dr. Quinn, when he went in to administer medicine to a patient who would not take it from an attendant, he made inquiry into the matter to which I have just referred and reported it to me ; he inquired of the patient and of the attendant, and their stories confirmed each other ; but he went further and inquired of a patient standing by.

Q. Is so particular an inquiry usual ?

A. Yes, sir, unless the matter is perfectly self-evident how it occurred.

Q. Do you ever find that the attendants have struck at patients?

A. I have known those instances; yes, sir.

Q. Do the patients complain at any time of having been struck by attendants?

A. Yes, sir.

Q. What do you do in case of such complaint?

A. Make a thorough inquiry and if we find it to be true, discharge the attendant at once.

Q. It appears from the injury books that patients are sometimes injured in the covered bed at night, getting black eyes; is it possible to get a black eye in that bed?

A. Oh, yes, sir; we find a patient injured sometimes; we deprecate as much as possible putting the patient into the covered bed, especially if he struggles, preferring to put them in a room with mattresses on the floor, or in some other way furnished, or if necessary padded.

Q. Do you yourself examine these injury books?

A. Yes, sir.

Q. From time to time?

A. Yes, sir; from time to time; for the last year and a half or nearly two years we have had a series of daily morning reports from each of the supervisors.

Q. In addition to the injury books?

A. Yes, sir; which in a large measure have supplemented — or, that is not just the word, taking their place, superseded them; we have those reports every morning.

Q. How often do you see the injury books?

A. It varies from time to time; whenever, for instance, we are writing up a full history of a case we frequently make notes from those books; if an injury has been received, we send for the injury book in which the supervisor or attendant has reported or recorded it.

Q. One of the attendants who was implicated in the charge of inflicting injuries upon Mr. Hughes is named C. G. Weir?

A. Yes, sir.

Q. Do you rememder that attendant?

A. Yes, sir; quite well.

Q. Had he been long in the institution?

A. My recollection is two years last September.

Q. What character did he bear while in the institution?

A. He seemed to be a careful man, a man who was disposed to do every thing to obey the rules.

Q. Was he ever complained against by any of the patients?

A. Yes, sir.

Q. For what?

A. The general rule of complaints that we have every day of harsh usage and abuse and various things; there was, however, never any thing against him that inquiry revealed, and the inquiry was very thorough; I may say this in reference to Mr. Weir, that he last year testified before the Assembly committee, as you will see

by reading over their testimony, and his statements in regard to himself were such, as to his own good character, that it struck me, as well as my associates, that he was perhaps playing the part of a hypocrite, and for that reason he was watched more carefully than he otherwise would have been.

Q. How old a man is he?

A. As a matter of guess, I should say about thirty-eight.

Q. About what physical build is he?

A. About five feet nine or five feet ten inches; I should say he was about the build of Mr. Rice.

By Mr. Rice:

Q. Is he not at least six feet high?

A. Well, perhaps he may be from five feet ten inches to six feet.

Q. About how much would he weigh?

A. About 160 pounds.

Q. Is he an athletic, well-built man?

A. I should think so, though I never had any occasion to examine him more than once or twice when he had a cold, and then I noticed that his chest was pretty well developed.

Q. What would you say as to his disposition and temper?

A. As far as I have ever observed he is a man of even temper.

Q. What about his habits; were they temperate or otherwise as far as you observed?

A. As far as I observed, perfectly.

Q. You say that there has been complaints against him by some of the patients of harsh usage and bad treatment; can you refer more particularly to any such complaints?

A. The most positive complaint I think was from a patient named P., a man who committed a homicide in the asylum in killing a patient Mr. B.

Q. Of what did P. complain?

A. Mr. P. complained that Mr. Weir threw him down and struck him; I am simply relating this from memory; the investigation showed that Mr P. had —

Q. (Interrupting.) Was it an investigation made by you personally or are you giving what some one told you?

A. An investigation which I directed, and part of which I made.

Mr. Haskell — Doctor, please confine your evidence to what you have personal knowledge of, in this particular?

A. Well, my personal knowledge goes to the fact that there had been a struggle on the ward with Mr. P., but that he was not seriously hurt; and the patients and other attendants on the ward denied that any harsh usage was made on the part of Mr. Weir, any more than defending himself from a sudden and very fierce attack; Mr. Weir himself was hurt, because his clothing was quite badly torn; beyond that, I directed Dr. Josselyn, then in the asylum, to make a careful investigation of the matter, which he did, I believe.

By Mr. Haskell:

Q. Can you give me about the time of that occurrence?

A. I don't think I could; it was some time last year during the fall; I should think perhaps along in September.

Q. Was complaint made on that occasion that Mr. Weir had struck P. by any of the patients, or by P. himself?

A. My recollection now is that P. complained that Mr. Weir had struck him.

Q. What conclusion did you reach in that respect?

A. The conclusion reached was that it was not so; that conclusion was reached at the time, and that the injuries received by Mr. P., if any, were, in my recollection, very slight, and that Mr. Weir received more severe injuries in the course of the struggle; it was the result of a sudden and violent attack by Mr. P., such an attack as he has made once or twice since he has been in the asylum; and he is kept under restraint

Q. Can you recall any other complaints made by patients against Mr. Weir?

A. No, sir, I cannot; and I would not be a good witness on that matter perhaps, because of my not being so much on the men's division as on the female side of the house.

Q. Now, as to Mr. Brown, one of the other attendants who was present when Mr. Hughes received his injuries; will you briefly describe his age and appearance?

A. Mr. Brown is a large, tall, rather heavily built Irishman; I think weighing from 190 to 210 pounds.

Q. About what age is he?

A. I do not think he is thirty.

Q. How long has he been on the institution?

A. I think not quite a year; perhaps about ten months, and it may be less than that?

Q. What was his reputation prior to this affair, for patience and good temper, and generally as to his conduct toward patients?

A. As far as I have any knowledge, and if I may add as far as I have ever heard, there had been no complaints against him?

Q. No complaints at all against him?

A. Not that I have any personal knowledge of, or ever heard about; that is, not that I recollect of, although there may have been, and it may have escaped my recollection.

Q. Now as to attendant Bills, who was also present on that occasion, will you briefly describe his personal appearance, and state his age?

A. He is a shorter man than either of the other two; I do not think he is more than five feet eight, if he is that; he has a defect of one eye — is cross-eyed; he is a well-built and compactly knit man.

Q. How long had he been connected with the institution?

A. About thirteen or fifteen months, I should think.

Q. What reputation did he bear while he was there in the Asylum?

A. His reputation was pretty good.

Q. Had you heard any complaints about him from any of the patients?

A. No, sir.

Q. What methods do you employ for restraining violent patients?

A. Either a waist belt, which you saw illustrated on the ward, passing around the body and around the back of a chair, or it may be put around a patient so that he may be about the wards, wearing in addition to the belt a couple of padded leather wristlets sliding on a ring on the waist-belt sufficiently loose to allow them to feed themselves with a knife and fork by bending the head; in some instances, among the women more especially, and occasionally among the men patients, have a habit of mutilating the body or the face, by picking holes in the skin, or pulling out their hair, and on such patients we put leather mittens without any thumbs; they are fastened around the wrist by a lock.

Q. What are they called?

A. Mittens; then there is what is called the camisole, which is generally made of canvas and restrains the hands and arms, preventing the patients from getting into mischief or doing damage; then there is what we call the "muff," which e do not use as often as any of the others mentioned; it gets its name from its resemblance to a woman's muff, and the hands are placed into it; the camisole takes its place largely, and it is a little better, but some patients will tear the camisole with their teeth which they cannot do with the muff; then there is the covered bed; that is, to allintents and purposes, a child's crib; it is large enough for an adult patient and is well ventilated, the cover fastens on to it by means of hinges and will lock on; the covered bed is a necessary restraint especially when we desire to keep a patient in a horizontal position; the cover is movable so that the bed may be used as a covered bed or as an open bed; the cover may be taken off, and it can be used as an ordinary bed.

Q. Have you now stated all the restraints that are used in the institution?

A. Yes, sir; I think I have.

Q. Is the covered bed very frequently used?

A. On some wards we have some patients who sleep constantly in covered beds; but the use of the covered bed depends a great deal upon the character of the ward and the character of the patient.

Q. Are patients put into the covered bed without specific direction from the physicianr?

A. The direction may be special in this way that a patient is to sleep in the covered bed, or that a patient is to have a room, or to be kept in the dormitory; if they are up and about after such an hour the attendants are instructed to place them into the covered bed.

Q. So that the attendants or supervisors can exercise a certain amount of discretion in that particular?

A. Yes, sir.

Q. About putting patients into the covered bed, I mean?

A. A certain discretion in those directions.

By Mr. Rice:

Q. Have they ever permitted any of those restraints to be upon patients, when they go into the covered bed; that is, do you require them to wear a restraint over the hands or any portion of the body when in the covered bed?

A. Sometimes; for instance, a patient now in my mind who has a habit of besmearing her body with fœces — her hands are restrained during the night.

Q. How restrained?

A. She wears a camisole; she is placed into a covered bed; that is a case where restraint is absolutely necessary.

Q. Can a person turn round in a covered bed with one of those camisoles on?

A. Certainly.

Q. From one side to another?

A. Yes, sir.

Q. What space is there between the body and the patient and the lower side of the cover or lid?

A. There is sufficient space so that a patient can raise up — a quarter of the way up.

Q. How many inches — take the case of a person lying on their back — how many inches could the patient raise up?

A. My recollection is, I took a measure of that matter for the furniture maker one time and I think from the top of the cover to the bed on the inside, that is from the top of the mattress to the cover, was eighteen inches.

Q. From the mattress to the lid?

A. Yes, sir.

Q. Do you find that patients sometimes attempt to bruise themselves by striking portions of their body against the lid of the bed?

A. Yes, sir.

Q. And do they injure themselves in that way?

A. Yes, sir; we have a patient now in the Asylum who has attempted repeatedly and persistently to do that, and to such an extent that we have had to pad or strap pillows on the inside of the cover.

Q. Would not that injury be prevented by upholstering the lid?

A. It might be, but a pillow you can move and wash very easily, and the upholstery you could not; a pillow serves all the purposes required, and it is easily removable.

Q. Is there any pain to the patient in wearing the canisole?

A. No, sir; it is so made that it does not confine a single muscle; it is made large.

Q. Is there any way or method for drawing it up tight and drawing the arms in close to the body?

A. No, sir; there is in the middle of the sleeve two divisions through which a strap may be passed and that keeps the arms down to the body here, drawing the hands close together.

Q. What position would the hands occupy if the camisole were drawn close or tight?

A. They would be in a position something like that (indicating).

Q. Could the hands be moved in that position?

A. Yes, sir; when the camisole is fully extended, the hands can be brought that far apart (indicating), about a foot and a half, without restraint.

Q. Of what material is the camisole made?

A. It is made of canvas and some of it is made of heavy linen duck

Q. Which of those methods of restraining the arms do you regard as the less tedious and tiresome to the patients?

A. They are all more or less so I presume.

Q. Which would you say were the most uncomfortable?

A. I should think the muff was the most uncomfortable.

Q. And under which of those forms of restraint do they appear to suffer the least inconvenience?

A. They suffer the least inconvenience with simply a pair of wristlets running on the belt.

Q. What cases have you in the Asylum that cannot be properly restrained with the use of that restraint?

A. Patients who attempt self-mutilation; patients who attempt to disrobe themselves or those who destroy their clothing, and a certain class of suicidal patients.

Q. Do you mean to say that they can do this bodily injury to themselves or tear or take off their clothing when they have on the wristlets attached to the belts?

A. Yes, sir; unless the hands are confined down here (indicating) so very closely that it would be very irksome.

Q. I suppose you have all those appliances in the Asylum at the present time which can be seen by the committee?

A. Yes, sir; very little restraint is used in the Asylum in the shape of mechanical restraint, very little indeed; the Commissioner of Lunacy recently requested a statement in relation to the restraint used in the Asylum, and the months of May and September, 1883, were selected; the restraint on the men's division was less than one-half of one per cent, that is, the average number of restraints on the men's division during that period.

Q. There are some wards there, I suppose, where no restraint is used?

A. Yes, sir.

Q. What would be the percentage on ward number four at the present time?

A. Of mechanical restraints?

Q Yes?

A. I do not think there are three out of the twenty-seven patients on that ward so restrained; I never have within the past three years seen at any one time three patients in restraint on that ward.

Q. This percentage which you have given does not include the covered beds?

A. No, sir; I mean mechanical restraints aside from the covered beds; we do not include the covered bed.

By the CHAIRMAN (resuming):

Q. How many hours do the attendants work at a stretch on an average?

A. During the summer months the bell rings in the morning at from five o'clock to half-past five; and the patients are all in bed at nine o'clock, P. M.; the attendants are on duty from that time.

Q. That is, from half-past five in the morning until nine o'clock at night?

A. Yes, sir.

Q. About what hours are they employed in the winter?

A. In the winter the bell rings in the morning at half-past six, and the hour for retiring is the same; that is, the patients are all in bed at that time; the patients on ward number four would be in bed at seven o'clock.

Q. So that the attendants are employed about fourteen hours a day in the winter months, and not far from fifteen or sixteen during the balance of the year?

A. Yes, sir.

Q. And those attendants receive about $20 a month on the male ward?

A. They commence at $20 and run up to $24, $26 and $28, depending upon their positions.

Q. In the female at what rate are the attendants paid?

A. They commence at $12 and run up to $16 and $18 a month.

Q. Do they have any holidays?

A. They have two evenings a week, from six o'clock to ten o'clock, and later than that if they want to go to some entertainment in the city that is not out as early; they have also every third Sunday until ten o'clock at night, and once a month they have half a day; but all leaves of absence are given only by written request through the supervisor, which he lays upon my desk or upon that of the physician in charge of the men's division; there is generally a list made of attendants who want to be out during the evening.

Q. In your opinion is the compensation received by them sufficient remuneration for their services and time?

A. I should hardly think it was.

Q. If the compensation were increased do you think you could get a better grade of attendants?

A. I doubt that.

Q. Do you think that for the position they are as good attendants as can be obtained?

A. I think they are, because people who belong to the more intelligent or more refined classes, so-called, do not like that kind of work and would not take that kind of work.

Q. Have you had any experience with attendants of any other asylum?

A. I never have been in any other asylum except to visit; I have visited asylums in this country and Europe — in England and Scotland.

Q. Are you able to make any comparison between the character of the attendants of this institution and others to which you have referred?

A. I think the attendants in this asylum are equally good with any asylum that I have ever visited either in this State or others; I have visited in Massachusetts and Michigan and the asylums in England and Scotland; I visited eleven of the leading asylums of those countries.

Q. Have you any knowledge as to the rate of wages paid in other institutions for the same grade of attendants in similar institutions to this?

A. In some institutions they are considerably lower and very few are they higher.

Q. Is the rate of wages lower in any of the institutions in this country to your knowledge?

A. I only speak of my recollection that in the Massachusetts institutions, some of them, in the Pennsylvania institutions it is lower.

Q. Do you know of any where it is higher?

A. Only from general recollection.

By Mr. Haskell:

Q. I understand you to say that you do not think any increase in the wages would result in the improvement of the service, or of the grade of the employees?

A. I do not, and for this reason, Mr. Haskell, that people who earn the same wages, or who command the same rate of wages would find positions more congenial in other callings in life; I had an illustration not long ago; a young woman was sent to the asylum from the city, she was said to be a good nurse and she had come from a hospital where she had that reputation, and it was said she would be good in an insane hospital; she was sent to a ward where we had melancholia patients who had to be fed by means of the tube, which is not a very pleasant work; she was requested to assist by one of the physicians, and she flatly refused to do so; she said if that was the kind of duties she has to perform, she would leave the institution, and she did leave.

By Mr. Rice:

Q. What do you say to the effect of decreasing the hours of daily labor?

A. I have thought of that matter, and I have thought whether it would not be wise and advisable to employ a certain amount of assistants to do the drudgery which is always very wearing and very perplexing, and requires labor about the ward and cleaning up

after the dirty patients, to make the beds in the morning, and do that kind of work, and leave the attendants to be simply and solely attendants; that is to employ servants to do that kind of work and in that way lessen the hours of duty and work of the attendants.

By Mr. Haskell:

Q. Do you think that would increase the effectiveness of the attendants?

A. It might; I cannot speak from any experience; it is merely a matter of speculation; it is a matter that has presented itself to me, in thinking over the subject, and a matter about which I have talked with my associates, with Dr Gray and others.

Q. You simply think it might result in an improvement?

A. Yes; my impression is that it would, from the mere fact that—

Q. (Interrupting) It is only an impression and does not get down to a judgment?

A. No, sir; it is not a conviction.

Q. So that if there is any thing seriously wrong in the institution, or any abuses have crept into it, it is not on account of the amount paid to the attendants, or on account of the number of attendants, and the amount of work they have to do, in your judgment?

A. I do not think so.

By the Chairman:

Q. As to the care and attention given to the pay patients and to the pauper patients, is there any difference in any respect in their treatment?

A. No, sir; except in this respect, a patient might be brought there whose friends wish to employ a special attendant to look after him, and be with him, and room with him, by paying the wages of that attendant to a certain amount extra which would compensate for the room occupied, they may do that.

Q. Can pay patients obtain a portion of the time of an attendant, in association with other pay patients?

A. No, sir.

Q. So that any one pay patient must have the exclusive assistance of an attendant, or he must be in company with the pauper patients and under the general charge of general attendants?

A. Yes, sir; and even if such a patient should have the exclusive use of an attendant, for which he pays extra, he would still have to be on a ward suitable to his mental condition.

Q. Is there any difference in the table fare and accommodation of pay patients and pauper patients?

A. No, sir; they all eat at the same table; of course if their friends send them any thing, they have that, but otherwise their diet is all the same.

Q. Then what advantages do the pay patients have over the pauper patients?

A. They have none; if a rich person comes and brings a patient and says: "I want this patient to have a private room," and to do this, that and the other thing, which many of their friends request, as to going out walking or riding, or something like that, I say to them, or whoever receives that patient into the asylum says to them: "Your friend will be put on to a ward suitable to his condition; if he is a proper patient suitable to be in a single room, he will be put into a single room; if not, he will be put into a dormitory; or if he is suitable to be put into a covered bed, he will be put into a covered bed; he will be treated in all respects similar to any other patient; just the same in all respects."

By Mr. Rice:

Q. Are there any regular rates for pay patients?

A. Well, the rates are from six dollars per week to ten, depending upon the character of the case, etc., etc.

Q. Do not some of the pay patients pay more than ten dollars a week?

A. There are a few, and one or two pay fifteen dollars a week.

Q. And some pay as high as twenty-five dollars a week, do they not?

A. I do not think any patient who has not a private attendant pays as much as twenty-five dollars.

Q. Then these prices, ranging from six to ten dollars per week and upward, do not include a private attendant?

A. No, sir.

Q. What is the difference; why should one patient pay more or be charged more than another?

A. Well — perhaps one patient may require a great deal more care than another; the quiet, mild cases of melancholia coming there, and getting along after a few months' treatment— well, some of the patients require the exercise of a good deal of care, you know — some of them require a great deal of time and attention.

Q. What is the lowest amount paid by pay patients; is six dollars a week the lowest?

A. I think there are some who pay four dollars and one or two who pay five.

Q. What is the character of those?

A. They are old cases who have been there a good many years.

Q. Are there any patients there who pay less than four dollars per week?

A. I do not think that any have been received at less than that rate.

Q. Are there cases where friends of the patient pay a certain sum and the public pay a certain other sum?

A. No, sir.

Q. The whole amount then that is paid comes either from the public or from the patient, or from the patient's friend?

A. Yes, sir.

Q. Are you familiar with the case of a patient named K.?

A. No, sir; I do not remember such a patient.

Q. Within three or four months coming there from Canandaigua?

A. We have not had a patient from Canandaigua for some years, I think.

Q. Do you remember a patient by the name of Mrs. C., from Ontario county?

A. Yes, sir; she is there now.

Q. Does she pay six dollars a week?

A. I think she is there on the order of the county judge; that is merely a recollection; I could not tell you without referring to the book.

Q. I understood it was four dollars a week she was paying?

A. It may be in this way — I have known it in more than one instance — of a patient making an arrangement with the superintendent of the poor of the county they come from.

Q. Referring to the difference in prices paid by the different persons, does it make any difference as to the ward they are on?

A. No, sir; there is a young man on the first ward, my recollection is, that has been there since 1881, whose friends pay from twelve to fifteen dollars a week for him; he has considerable liberty and goes out walking alone in the summer; and his father sends him out into the North woods and we furnish an attendant who goes with him, and he pays the attendant wages while he is away; his friends furnish him with a good many luxuries in the way of fruit and other things and in the way of going to entertainments; I think, as a rule, perhaps he goes to two entertainments a week.

Q. Such a patient as that then gives you a little trouble?

A. He causes very little trouble.

Q. How do you explain the fact that he pays so much money?

A. Well his friends are quite wealthy and are perfectly able to pay it; but this is a matter that is entirely in the hands of the board of managers, and the rates are fixed by them; the physicians have nothing to do with the collection of financial matters of the institution.

By Mr. Haskell:

Q. As you understand it, do the managers fix the price of each patient?

A. No, sir; I think it is fixed according to a general grade of prices, from $6 to $8, or from $10 to $15 a week; for instance, when a patient comes there — if I were there in the office when a private patient came, I would state to Dr. Gray: "He is a private patient coming, who proposes to pay his own expenses;" I then give a history of the case as I have taken it, that it is so and so, that the circumstances of his family are such and such; "at what rate shall I fix upon in his case?" and the doctor will fix the rate, $6, $8, $10 or $12 a week.

Q. So that it depends somewhat upon the ability of the patient to pay?

A. Yes, sir; to some extent, but more largely upon the nature of the case; both of those matters are taken into consideration.

Q. What becomes of the fund that is realized from these pay patients?

A. The bills are sent to private patients the same as they are sent to the county treasury, and the money goes into the hands of the treasurer and into the general fund of the institution.

Q. Out of the sum that is paid by the private patients, does any part of it go to Dr. Gray or the other physicians?

A. No, sir.

Q. For extra attendance?

A. No, sir.

Q. There is no extra charge by the physicians for extra attendance?

A. No, sir; not a cent.

By Mr. RICE:

Q. Is there any such thing as feeing an attendant?

A. No, sir; that is not permitted, and an attendant who is known to receive a gratuity would be discharged at once; I may say that patients have gone away and have afterward sent back presents to attendants; but while they are patients, it is in direct violation of the rule for an attendant to receive any fee, and he would be discharged at once in such a case.

By Mr. HASKELL:

Q. Has there been any difference in the make of the camisoles within the last few years?

A. No, sir.

Q. They always have been made the same?

A. Yes, sir.

Q. Are there any difference in the sizes of them?

A. They are fitted to the patient; the tailor either makes a new camisole for the patient, or adapts one to the patient; but as a rule we have an assortment of sizes, so that we can fit a camisole to the patient.

Q. And you testify that in no case that a patient has been put into the camisole can it be strapped so tightly that it would bring his hands close to his person?

A. It would bring the center sleeve down to the —

Q. (Interrupting) Will you testify that the camisole could not be so applied as to draw the hands of the patient close to the person?

A. No, sir; not so close but what he could move his hands backward and forward from six to ten inches.

Q. And in no case could it draw the hands close to the body?

A. No, sir; it could not do that.

Q. When it is drawn that way, how is the strap fastened?

A. It is passed through loops at the side of the camisole, and then buckled behind or at the side.

Q. Buckled or locked?

A. Usually locked.

Q. Can you describe the lock?

A. We have two or three different varieties of lock-buckle; it is a regular buckle with a lock in the shaft of the buckle — the fore-part of the buckle.

Q. And is that buckle sometimes placed in the middle of the back and sometimes upon the side?

A. It can slide around anywhere; it is not fastened.

Q. Is it ever drawn tight?

A. It is drawn tight enough to keep the camisole down in front, bnt not so tight but that it can be slid around easily.

Q. Have you ever known the buckle on the back to make a sore?

A. No, sir.

Q. Would it be impossible for it to do so?

A. I think it would, because, in the first place, a patient would not wear a camisole buckled on that way long enough at any time.

Q. How long are the patients ever kept strapped in a chair steadily?

A. From fifteen to twenty minutes; varying from that to two to three hours.

Q. Are they ever kept there so all day?

A. No, sir.

Q. Will you swear positively that that never has been done?

A. Well, no; I won't swear positively that it never has been done; but it never has, to my knowledge.

Q. May it be done, and a physician not know it?

A. I don't think it would be.

Q. How would the physician know if it had been done?

A. A patient who was placed in that position in the morning the physician would notice whether that restraint was on in the afternoon when he is visiting the wards on his round.

Q. Suppose the physician were informed by an attendant that a patient had just been placed in that restraint?

A. We should make it a matter of inquiry.

Q. Would not the physician be obliged to take the attendant's word?

A. Yes, sir, and the patient's word at the same time.

Q. Where there is a conflict between the statement of an attendant and of a patient, are not the statements of the attendant taken?

A. Yes, sir; if there is any controversy, further inquiry is made to settle the matter.

Q. Has there never been a direct conflict of statement between the attendant and the patient?

A. Oh, yes, sir.

Q. And in those cases you have invariably taken the attendant's word?'

A. No, sir, I cannot say that we have.

Q. Can you state a case where you did not?

A. I have discharged attendants for maltreating patients when they have emphatically denied it.

Q. And the only evidence you have had —

A. Has been the word —

Q. Of the patient?

A. The first evidence has been the word of the patient; then the matter has been reported to me by the supervisor.

Q. I am asking you as to cases where there have been a direct conflict between the word of the patient and that of the attendant as to the inflicting of injuries?

A. Yes, sir, I understand, and I have discharged an attendant, I remember, last May or June.

Q. On the woman's side?

A. Yes, sir; and I have done the same thing on the man's side.

Q. Can you recollect any other instances?

A. I do not recall any just now; some instances have been reported to me and have been inquired into; a woman complained to me some time ago that while she was out walking an attendant called her back and she paid no attention to the attendant on account of deafness; the attendant ran after her and called her back again; she said, "I didn't hear you;" the attendant said, "I will teach you to hear me if you go away like that again." It was reported to me by a patient and I inquired into it.

Q. Of whom?

A. Of the attendant's charge, and she denied it emphatically; I then made some inquiries of the patients who were near whose statements could be relied upon, and the result was, that before night, the patient was out of the house.

Q. You mean the attendant, do you not?

A. Yes; the attendant, I mean, was out of the house before night; I also remember a case of the man's division.

Q. On what ward?

A. On the eleventh ward, where an attendant was charged with abusing a patient; it was not reported by the patient because the mental condition of the patient was not such that he could report it, but it was reported by another patient and a patient on whose word I had implicit confidence; the attendant was discharged; I had that testimony and one other patient, who in a measure confirmed, and a strong denial by the attendant.

Q. So that the evidence of the patients is regarded by you, in some instances, as more reliable than that of the attendants?

A. At times it is.

Q. So that the mere fact that a person is in the Asylum is no evidence that what they relate to have occurred, is not reliable?

A. It is not conclusive evidence always; it would depend upon the nature and condition of the patient.

Q. I suppose a great many of your patients, who are undoubtedly insane, have very good memories; have they not?

A. Some of them have remarkable memories; yes, sir.

Q. And I suppose that certain of your patients, although they are insane, yet have a regard for the truth?

A. Yes, sir.

Q. And you can rely upon them?

A. Yes, sir.

Q. Now I want to ask you a little further: Suppose a patient had become cured and discharged, he may recollect distinctly what had occurred in the institution, may he not?

A. Yes, sir; he may.

Q. And if he was a truthful person and recollected accurately a great many things about which there could be no dispute, what would you say in regard to believing what he said with respect to a matter where there might be some dispute?

A. I understand you; the natural presumption would be that his recollection about matters in which there might be some dispute might be correct if he recollected a great many things in which there was no dispute; of course, on the other hand, those very things might be matters in relation to which he had delusions, or concerning which he had delusions, hallucinations of sight or hearing which had made such an impression upon him that he recollected them as matters of fact and actual occurrence.

Q. But if a patient had recovered and was a man of known truth — a person of known truth and veracity — and in detailing occurrences at the asylum, he recollected all those matters running through his case which could readily be corroborated, they were found to be correct, it would be a very strong evidence, would it not, that other matters which could not be corroborated were also true and correct?

A. Oh, certainly, it would be presumptive evidence.

Q. How long have you been connected with the institution?

A. Since March 7, 1878.

Q. How long have you been connected with the female side of the institution?

A. Since the summer of 1880, I think.

Q. During the first two years you were on the male side of the asylum?

A. Yes, sir.

Q. Do you recollect Evan D. Hughes when he was originally brought to the institution?

A. Yes, sir; I recollect the first time Mr. Hughes was brought.

Q. You were then connected with the male department of the asylum?

A. Yes, sir.

Q. Do you recollect of his being injured in a struggle with the attendants at that time?

A. No, sir; I have not any such recollection.

Q. You say that the supervisors now make daily reports, and that it has to a large extent superseded the injury books?

A. No, sir; they still keep up the injury books.

Q. Do they keep them up in the same way that they used to?

A. Yes, sir.

Q. And they are no less careful and correct about making their entries in the injury books, now that they make a daily report, than they were before?

A. I do not think they are, with one exception; I found that one of the supervisors understood that this morning's report set aside the report in the injury book; that was the supervisor of the third department on the woman's side.

Q. As I understand it, the records made in these injury books, at least prior to the time of making the daily reports, were in reality a written report of the supervisor in regard to any injuries that were received, and were so regarded. Is that the fact?

A. Yes, sir.

Q. At the time you were on the male department of the Asylum, how often did you see the injury books that were kept in that department?

A. Sometimes every two or three days.

Q. Did you make a practice of seeing them within a given stated time?

A. Not any given stated time, it was at irregular intervals; whenever I needed them for any matter, such as referring to them in making up my notes of a case, or something of that kind; to see what was reported about any particular patient.

Q. Then you do not go to the injury book for the purpose of finding out what has happened?

A. No, sir; such a thing would be reported to me at the same time, and frequently I would see it before it was reported.

Q. You would either see the case yourself, or would receive it as a verbal report?

A. Yes, sir.

Q. Then the report in the injury book is not intended as a means of informing the physicians?

A. No, sir.

By the CHAIRMAN:

Q. What is the object of the injury book?

A. As a matter of record to a certain extent, and to impress upon the minds of the supervisors that those matters must be kept track of.

Q. Kept track of, how? By informing the physician?

A. Yes, sir; and to keep their eyes open.

Q. Who informed you about it — the supervisors?

A. I think in nine cases out of ten I would be informed by attendants on the ward.

Q. Would it be the supervisor's duty to inform you of what had occurred in regard to any injury?

A. It would be his duty to inform us at once.

Q. If the injury were not of a grave nature, what would be the practice then?

A. He would be apt to wait until I came in the ward and would say: "Mr. so and so has received a black eye."

Q. Would he inform you? Is it his duty to inform you?

A. Yes; it is his duty.

Q. It is the attendant's duty as well as the supervisor's duty to inform you of those matters when he sees you, is it not?

A. Yes, sir.

Q. And you say that these injury books are also used in making up the records of cases?

A. They are sometimes used so, but as a rule we have these injuries recorded in our own note books or pocket memoranda.

Q. But not always?

A. No, sir; not always; when I am writing up a case I spread out my own notes of the case.

Q. Is there any other record necessarily kept of such occurrences as appear in the injury books; or is it a fact that certain injuries that appear here on the injury books would not appear anywhere else?

A. It might be in the case of a black eye or something like that.

Q. Is a black eye regarded as a trivial matter?

A. No, sir; not so trivial but what its occurrence and cause is examined into.

Q. I call your attention to an injury in this book, "Exhibit 4," bearing date February 23, 1884, in regard to Evan D. Hughes; do you recollect that occurrence?

A. No, sir; I do not recollect it.

Q. You were at that time a physician on the male side?

A. Yes, sir; I recollect, in January, that Mr. Hughes was frequently quite violent during the first few weeks of his stay here, the first time he was brought to the institution.

Q. Does it appear in the records of his case?

A. Yes, sir.

Q. What form of insanity did you describe Mr. Hughes as suffering from?

A. When he first came there?

Q. Yes.

A. It was a case of acute mania.

Q. Did you see him when he came the second time?

A. Yes, sir; I saw him the day he came in.

Q. Did you make an examination of him?

A. I remember going into the office and of hearing some one speak to me; it was Mr. Hughes, and he said: "How do you do, W. Brush."

Q. He recollected you, then?

A. Yes, sir.
Q. And did you then recollect him?
A. Yes, sir; I remembered him then.
Q. Did you make any examination of him at that time?
A. I talked to him about two minutes.
Q. You ascertained his condition?
A. Not especially.
Q. Did you examine him sufficiently to ascertain whether there was any difference particularly in the form of his insanity at that time, to what it was when he first came to the institution?
A. He impressed me as being very much depressed and quite nervous.
Q. More than he was the first time he came to the institution?
A. Yes, sir; I should say so.
Q. Is there a record kept of the changes of a patient from one ward into another?
A. Yes, sir.
Q. And that would appear in the case book, would it?
A. Yes, sir.
Q. And it would appear upon the ward record also; would it appear in the case book also?
A. Yes, sir; I stated that it would appear in the case book.
Q. I suppose you had nothing whatever to do with the medical case, or otherwise, of Mr. Hughes until after he was injured.
A. No, sir; not until after he was injured.
Q. You may state what, if any, investigation was made, or whether you considered it a part of your duty to make any investigation in regard to the causes of his injury?
A. Yes, sir.
Q. State first whether you directed or made any investigation in regard to the causes of his injury?
A. I made no particular investigation myself.
Q. State if it were any part of your duty to do it?
A. I reported directly to Dr. Gray — Dr. Pilgrim reported to me and I to Dr. Gray; Dr. Pilgrim was directed to make an investigation and I considered that my duty had ceased.
Q. You made no further investigation of the matter?
A. No, sir.
Q. When were you informed, and how, of the injury to Mr. Hughes?
A. I was informed, I should think, about twenty minutes after it occurred.
Q. By whom?
A. Dr. Pilgrim.
Q. And you reported it to Dr. Gray?
A. No, sir; I am mistaken — Dr. Pilgrim and I were talking together and Dr. Backus came and informed us; we then went immediately to the ward—Dr. Pilgrim, Dr. Backus, and myself, I mean; we went on the ward four, and we took Mr. Hughes to the attendant's room.

Q. Where was Mr. Hughes when you saw him?
A. Sitting in a chair.
Q. Was he strapped in a chair?
A. Yes, sir; he was strapped.
Q. Who unloosened him?
A. Mr. Weir.
Q. At whose direction?
A. By mine.
Q. What was said?
A. My recollection is that I asked how it happened; I asked Mr. Weir how the injury happened.
Q. What did he say?
A. He said that he did not know when it happened; that it occurred when he was gone from the ward, or something to that effect.
Q. Did you make any further inquiries about the matter?
A. No, sir; not at that time; I immediately commenced paying attention to the man.
Q. Then you made no further inquiries?
A. I examined Mr. Hughes and took him into the attendant's room and stripped him; upon stripping him and making an examination I found that the tenth or eleventh rib had punctured the lung.
Q. Did you find that then and there?
A. Yes, sir; and that there were other ribs broken.
Q. Did you ascertain how many?
A. I did not continue the examination very far, because I found that one rib must have punctured the lung and I thought it would not be at all advisable to manipulate and find out how many had been broken; nor was it very essential to ascertain how many ribs had been broken as the treatment would be just the same whether it was one or five that were broken.
Q. Did you notice that two ribs had punctured the lung?
A. No, sir, I could not tell that, any more than one had; the only evidence I had that it had punctured the lung was the escape of air under the skin.
Q. Did you regard that as necessarily fatal at that time?
A. No, sir.
Q. As probably fatal?
A. In that case I did, as *probably* fatal.
Q. In that case — necessarily fatal?
A. I say probably fatal; I had reference to such cases, generally.
Q. And afterward you confined it to that case?
A. Yes, sir.
Q. How did you consider it necessarily fatal in that case?
A. At that time?
Q. Yes?
A. I could not say that it would be undoubtedly fatal; I said I considered it was probably fatal.
Q. Does "probably" express the views you entertained at that time?

A. Yes, sir; I could not say positively.

Q. Did you at that time make any further examination of any of the attendants or did you make any further examination of any of the patients to ascertain how the injury occurred?

A. No, sir; I immediately proceeded to the apothecary shop and got materials to take care of Mr. Hughes; after we reported to Dr. Gray, he instructed me to tell Dr. Pilgrim to make inquiries carefully and thoroughly about the matter.

Q. And that ended your connection with the matter?

A. Yes, sir.

Q. What was then done with Mr. Hughes?

A. During my absence from the ward he was taken to the eighth ward; I went up there and attended to him.

Q. And did you attend to him more or less until the time of his death?

A. Yes, sir; I saw him more or less.

Q. I suppose that no further examination was made of him before he died to ascertain how many ribs were broken?

A. No, sir; it would not have been profitable.

Q. State what examination was made after his death in regard to the extent of his injuries, if any?

A. There was no examination made at the Asylum.

Q. Were you present at the time of the coroner's inquest? Did you attend when that inquest was held?

A. I was out of the Asylum at the time.

Q. Were you present at all at the inquest?

A. No, sir.

Q. Mr. Hughes was injured upon what day?

A. That I cannot state. The day of the week do you mean?

Q. Yes.

A. My recollection is that it was on Saturday.

Q. The day after his arrival?

A. Yes, sir.

Q. Do you remember how long he lived?

A. He lived until the following Friday night, nearly a week; it would be just a week after he arrived.

Q. Do you personally know in regard to what investigation was made with respect to the causes of his death, of your own personal knowledge, I mean?

A. No, sir.

Q. Do you remember what day his body was taken away from the Asylum?

A. Saturday afternoon, after the coroner and jury had viewed it.

Q. When were these three men discharged. What day of the week?

A. I can't say.

Q. Do you know personally what investigation was made in regard to the causes of the injury received by Mr. Hughes — that is, any investigation after his body was taken away from the Asylum, and during the ensuing week?

A. I know personally that there was a coroner's inquest.

Q. Any thing more than the coroner's inquest?

A. I know of nothing more than that.

Q. Do you wish to give any reason why these three men, or either of them, were not discharged sooner than the second Saturday succeeding — two weeks from the Saturday on which Mr. Hughes received his injury?

A. If it is proper I should like to state, I would rather have you say "wish" instead of "can."

Q. I will make the change then in the question?

A. I should be glad to give a reason if I could, but I don't know.

Q. You don't know of any reason?

A. No, sir, I do not.

Q. Who has the authority in that institution to discharge attendants?

A. The superintendent, or in his absence, myself.

Q. You two only?

A. Yes, sir.

Q. And you only in the absence of the superintendent?

A. Yes, sir.

Q. In case any of the officials of the institution discover any thing wrong, before an attendant can be discharged or suspended it is necessary to report the case to either Dr. Gray, or in his absence to yourself, and allow you to act?

A. You mean with regard to an attendant?

Q. Yes.

A. Yes, sir.

Q. And you have no power in the premises except in the absence of Dr. Gray?

A. No, sir, except in the absence of Dr. Gray.

Q. Do you recollect the name of Mr. Giles Penny?

A. Yes, sir, I recollect him.

Mr. Haskell — I should prefer to have the case-book before I question you about that, and I suppose you would rather have the dates?

Witness — I know about that case and I remember how his jaw was injured, though I do not remember the dates perhaps.

Q. Have you any knowledge of it?

A. Yes, sir, I saw it done; it was self-inflicted by pounding his head against the arm of a chair, and at the same time biting his lip, and trying to bite his cheek for purposes of self-injury; at the time of his injury to his jaw he was wearing a camisole and sitting in the chair.

By Mr. Rice:

Q. How did he lose his teeth?

A. I don't recollect.

Q. Suppose a patient is brought to the Asylum, and during the first evening of his being here word is sent to you that he is restless and

disturbed and noisy; would you consider that your full duty was done if you did not go and see the patient?

A. It would depend entirely upon the nature of the word that was brought to me; if it was brought that he was sleepless and I had not already prescribed for him, and was thoroughly acquainted with the patient and the nature of his case, I think I could prescribe as intelligently if I did not see him as if I did.

Q. So that the mere fact of its being the first day in the Asylum would make no difference, and would not be a factor in enabling you to make up your judgment as to whether you should or should not go and see him personally?

A. No, sir; it would depend very much upon the nature of the case and the character of the word that was brought; I have visited the wards as often as four or five times in the night, and then again I have not visited them for three or four or five nights at a time.

Q. You came to the institution in 1878?

A. Yes, sir.

Q. At that time and until Dr. Gray received his injury will you state to me how often Dr. Gray made a thorough tour of the Asylum for the purpose of examining into and ascertaining the condition of the patients?

A. It would be a difficult matter to answer, except to say that every little while the doctor would come — either by himself or with Dr. Andrews, his associate, would come and go through a division. On some occasions I have been on the wards when I did not know but what Dr. Gray was down stairs and I would find him there on the wards.

Q. Could you say whether or not Dr. Gray made a thorough tour of the entire Asylum for the purpose of investigation and understanding and ascertaining the condition of the patients as often as once a month?

A. Oh, yes, sir; I do not want to say — I should not want to swear that he made a regular routine tour of wards consecutively.

Q. I do not mean consecutively.

A. I understand what you mean — would he get an entire knowledge of the inmates once a month?

Q. Yes.

A. Yes, sir, I should say he would.

Q. Would he any oftener than that?

A. Yes, sir.

Q. As often as twice a month, should you say?

A. Yes, sir.

Q. Three times a month?

A. Perhaps not to go through the entire Asylum as often as that.

Q. I am not asking about the entire Asylum. Would you swear that he did that as often as once a month from 1878, when you came there, until the time of his injury?

A. I should think as a rule that he did; I would not be positive or give figures.

Q. How much time from 1878 — what time in the year 1878 did you go there?

A. The 7th day of March.

Q. From that time to March, 1882, a period of four years, how much was the doctor absent from the institution?

A. That I cannot say; during the time just before he was shot he was absent for two or three months; two months, I guess it was, at the Guiteau trial. During the summer he would take a vacation of three or four weeks, although usually coming back once in that time. In 1879 he went to Europe, going, I think, on the 21st or 22d of May and returning the 5th or 6th of September, that was 1879.

Q. How was it in 1878 — was he absent several months during each of the years on vacation or business?

A. No, sir; I should not say several months — several may be three or four.

Q. While several weeks then in each of those four years?

A. Taking all of his absences together, yes, sir.

Q. Several weeks in each of the four years on business or pleasure?

A. Yes, sir; in 1878 I think he was away for a few weeks in the summer and I have a recollection of his being away on vacation another time; during the winter of 1878 he went to New York and delivered his lectures.

Q. The winter of 1878–9 how much time did he occupy?

A. My recollection is that he delivered twelve lectures; that he goes on Wednesday afternoon and gets back Saturday nights; delivering two lectures a week, Thursday and Friday.

Q. That would amount to five or six weeks?

A. That would take six weeks to deliver the twelve lectures.

Q. Then how is it as to his being away on expert or other business during that year?

A. I don't remember how that is.

Q. With regard to the injury to Mr. Hughes, have you any suggestions that you would like to make, or that you can make, with regard as to how the thing could have happened, and as to how such accidents may be avoided in the future?

A. The thing happened — I have not very much doubt — through lack of judgment on the part of the two attendants, Brown and Weir; the lack of judgment on the part of Mr. Weir in leaving the man for one attendant to look after while he went to report the matter that he was disturbed, because he could much easier have sent some one. I think if he had sent some one —

Q. I do not care for an argument; please state briefly your views.

A. The prevention of such accidents is of course only to be accomplished by the instillation into the attendants of greater judgment, and impressing upon them the necessity of great care, which has been as much done in the past as it can be in the future.

Q. Then you think you do not see any way in which this unfortunate affair could have been avoided or foreseen?

A. I do not see any way in which it could have been foreseen.

Q. And it does not suggest to you any change that should be made in the conduct or care of the ward?

A. One change which might be made would be to divide the ward into two wards. Shut off, as you recollect the day-room, shut off that from the balance of the ward and place three or four attendants in charge of that end and three or four in charge of this end.

Q. Then you would not suggest an increase in the number of attendants in that ward as a means of preventing such occurrences.

A. Perhaps so, for the reason that even those two attendants, if they had simply set down and held him firmly without struggling I do not think this would ever have happened.

Q. Then you think one cause for this affair was lack of sufficient attendants?

A. No, sir, I do not think it was that particular reason that caused the injury; I think there were sufficient attendants there at the time to control him without further help.

Q. I wish to call your attention further to the fact that a very large share of the injuries which occur in the institution occur on the fourth ward. Have you observed that?

A. If my attention had not been particularly called to that I should have said the injuries occurred most frequently on that ward.

Q. Do you not recollect that you swore that in that part of the institution a large share of the injuries did occur?

A. Yes, sir, I think a larger proportion occurs on that ward than on other wards, because there is a different class of patients there.

Q. Has it always been so since you knew any thing about it?

A. Yes, sir.

Q. Do you not think that there are too many injuries occurring upon that ward, to be consistent with the good government of it?

A. No, sir, I am surprised that there are not more.

Q. Are you surprised that there are not more violent deaths upon that ward?

A. No, sir; but I am surprised that there are not more injuries occurring on the ward — injuries in the shape of black eyes and bruises, and things of that kind.

Q. I suppose you have no knowledge of the habits of the attendants of endeavoring to control the patients by striking them in their abdomen?

A. No, sir.

Q. Does any reason suggest itself to you why a blow in the abdomen would be a very practical means of controlling a refractory patient?

A. I should think it would control any person, because it would produce such a shock, and at the same time would not leave any mark on the patient. It would not be so apt to leave a mark as a blow in any other place.

Q. It would not be so observable as a blow on the head?

A. Well, a blow anywhere else might break the skin; it would not show very much there, of course.

Q. And, therefore, would not be so apparent to any person passing through the ward?

A. No, sir.

Q. Have you any reason to doubt the evidence of the attendants Weir, Bills and Brown to be true that they have been in the habit of striking the patients in that way, or are you not aware that they have given such evidence?

A. I was not aware that they had given such evidence.

Q. Were you present at the inquest when the evidence was taken?

A. No, sir.

Q. Were you sworn before the coroner's jury?

A. No, sir.

Q. Did you read the evidence?

A. No, sir; as soon as it became at all probable that there was going to be an inquiry into the matter I abstained from reading the evidence, so that I could form an impartial opinion on the matter.

Q. Did you have any conversation with Dr. Gray with regard to the discharge of these men, prior to their discharge?

A. Yes, sir.

Q. That matter was talked about between you?

A. It was understood that they were going to be discharged as soon as the coroner's investigation was finished.

Q. In your conversation with Dr. Gray did he tell you that they would be discharged as soon as the coroner's inquest was finished?

A. Well, words to that effect.

Q. When did you first have any words with Dr. Gray in regard to the discharge of these men?

A I cannot state now; I think it was immediately after the death of Mr. Hughes.

Q. You did not have any until he died?

A. No, sir.

Q. And not until after the inquest had commenced?

A. No, sir, I do not recollect any.

Q. You said you always made personal inquiry in regard to every case of injury, if it came to your notice, when you were in the institution?

A. Yes, sir.

Q. I suppose all of the cases of injury appearing in these books which occurred from March, 1878, until the time you were transferred to the female side of the institution, did not come to your attention?

A. I presume they all did, or nearly all of them.

Q. So that very likely you would not be able to recollect them?

A. Some of them I would recollect.

Q. Who was attendant R. R. Morris?

A. He had charge of the fourth ward.

Q. What has become of him?

A. My present recollection is that the last I knew any thing about him he went on to a farm up near Oneida.

Q. How long has he been gone away from the institution?

A. Some three or four years; he left the institution in poor health and he has been there once since.

Q. As an attendant?

A. No; once or twice he has called at the institution on a visit.

Q. Do you recollect the case of J. E., who in August, 1878, bruised his arm and knee very badly while in a covered bed, and was removed to the eleventh ward on that account?

A. I remember such a patient; I do not remember that exact instance; it was a case of general paralysis of the insane.

Q. Would a person suffering from general paralysis be inclined to injure himself that way?

A. What we term "general paralysis of the insane" does not convey to your minds a correct appreciation of the case, because they may not be paralyzed in the usual acceptation of the term until toward the latter end of the disease, when they are quite helpless.

By the CHAIRMAN:

Q. Have you, yourself, attended to any outside expert work since your entrance into the Asylum as a physician?

A. I have, to a certain degree.

Q. To what extent; during the time you have been here how much time has it taken you outside of the Asylum?

A. I have never been gone more than three days at any time; I don't think that I have been engaged in more than half a dozen cases; one of them was by the direction of Governor Cleveland; I examined into the matter, came to Albany and reported to the board, and I went up to Morrisville on the Haight case.

Q. That was the trial of Mrs. Haight for the murder of her husband?

A. Yes, sir.

Q. For whom did you appear in that case?

A. I was called for the district attorney.

Q. Were there any other public cases in which you were called for the people, or on their behalf?

A. Yes, sir; I was at the trial of Osterhout; the matter of insanity was raised there and was under consideration; I was then called by the people; last fall I went to Buffalo and was there two days and a half in the matter of the will of Mrs. Fillmore.

Q. On whose behalf?

A. The contestor.

Q. Was Dr. Gray also there at the same time?

A. He was there the last day I was there.

Q. Did you both receive compensation for your service in that case?

A. I cannot say for Dr. Gray, but I did.

Q. What salary do you receive in the Asylum?

A. Two thousand dollars a year, and I live there; I want to make a statement; the statement is frequently made that these positions in Asylums are obtained through political influence; I went to the

Asylum in 1878 to fill a vacancy at the request of Dr. Gray; I was then fourth assistant, taking the place of the regular fourth assistant, who had gone to Europe for three months; Dr. James D. White, of Buffalo, told me that they wanted some one to fill a vacancy; I was then engaged in lecturing at the college on diseases of the nervous system; I told Dr. Gray that I should like to fill the vacancy, and see some practical work in relation to insanity; I went to Utica on that understanding; Dr. Kendricks died abroad, and I have remained there ever since; the present second assistant, Dr. Bloomer, who is now in Europe, applied at the Asylum for a position, and sent in his credentials from the University of Durham and the University of Edinburgh, at which places he had received his education; he also had one from the University of Pennsylvania; he presented them and was engaged; that is how he came into the institution; the third assistant, Dr. Pilgrim, came there on the recommendation of Dr. Austin Flint, of New York; he had been an assistant at Albany; when Dr. Russell went to Europe a year ago last December, Dr. Pilgrim applied for the position and was appointed; the fourth assistant, Dr. Backus; his application was made by his father, Dr. Backus, of Rochester, in the absence of Dr. Gray last summer; I knew something of his father in Rochester, although I did not know his son, except by reputation; I forwarded the letter to Dr. Gray, with the indorsement that he would get a good man if he secured him; Dr. Gray immediately wrote to me to make inquiries, which I forwarded to him and Professor Pepper of Philadelphia, and Dr. Backus was appointed; that is all the political or other influence that has been used in relation to any of the present staff.

Q. Who had the appointing power of the present staff?

A. The superintendent nominates them to the board of management.

Q. Have you any information as to the method of appointment of subordinates in the institution?

A. Yes, sir.

Q. As to whether any political influence has any thing to do with them?

A. I am very positive that no political influence is used.

Q. How much attention is paid to the Asylum by the board of managers in the way of personal visits?

A. Mr. Campbell, the president of the board — during the summer months I hardly think a Sunday goes by but what he comes down and goes through with some of the ward; then he is there once or twice during the week, sometimes; sometimes he is not; sometimes he does not come at all during the week.

Q. When he comes there during the week is it his custom to go into one or more of the wards?

A. Not always, unless it is to see a patient; sometimes some friends will apply to him to see a patient, and he does so; during the winter months he is not there quite so often; other members of the board do not come there as frequently; Mr. Swan is there

sometimes, and General McQuade, who is chairman of the general executive committee — I don't remember just the title of the committee — he is there quite often.

Q. What is the practice as to the board of managers visiting the Asylum?

A. At the quarterly meeting they go through all the wards.

Q. Is it usual to go through all the wards except on the occasion of the quarterly meeting?

A. It is, except in Mr. Campbell's case.

Q. In his case, does he go through the wards quite frequently?

A. He usually goes; as I say, takes one division on Sunday, and the following Sunday he takes the other division.

Q. Is he then the only member of the board who makes a thorough visitation of all the wards at regular intervals?

A. I think so; yes, sir.

Q. Is it an unusual thing for the managers to go through all the wards except at quarterly meetings?

A. It is rather, for them to go through all the wards; during last summer we have been making repairs on the women's division, and some one of the board of managers was up there every week, and some twice a week.

Q. On such occasions their visits were directed principally to the portions of the building undergoing repair?

A. Yes, sir.

Q. And for the purpose of inspecting the work then going on?

A. Yes, sir.

Q. Do you know whether there is any rule requiring any member of the board to make a regular visitation except at the quarterly meetings?

A. I do not, except at the quarterly meetings; the rule requires that they shall go then.

[Three books marked respectively, "Exhibits '7,' '8' and 9,' — J. H. M.," were then shown to the witness and identified as the injury books of the female wards of the Asylum.]

By Mr. Haskell:

Q. Will you have the kindness to specify what are known as the "bad" or "disturbed" wards on the women's side of the asylum?

A. Wards 7, 8 and 9, and to a certain extent, ward 11.

Q. Which is the suicidal ward?

A. No. 6.

Q. Which are the convalescent or best wards?

A. No 1 to No. 4 are the wards in which the patients are in the best mental condition.

Q. I call your attention to an entry on the injury book — "Exhibit No. '4,' in regard to W. H. S." — accidentally breaking his knee-cap, etc. Do you know any thing about that?

A. I recollect that.

Q. Do you recollect what investigations were made in that case?

A. I cannot say whether myself or Dr. Andrews made an investigation in that case; I remember dressing the leg; I recollect how it occurred — but only from hearsay.

Q. Mr. Weir has had charge of the fourth ward since you went on to the other side of the building — the women's side?

A. Yes, sir.

Q. And would not have any thing to do with him personally?

A. No, sir.

Q. Did it ever strike you as strange, or was your attention ever called to the fact, that so many of the patients on the fourth ward get black eyes?

A. It never struck me as specially strange.

Q. So that that matter has never made you suspicious that perhaps those injuries were caused by the attendants?

A. No, sir; I cannot say that it has.

JOSEPH R. SWAN, JR.,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Please state your age and residence?

A. I am forty-two years old, and reside at Utica.

Q. What position do you hold with reference to the Asylum?

A. I am one of the managers.

Q. How long have you been one of the managers?

A. Since 1878.

Q. When does your term expire?

A. It expired in 1881, and I am holding over.

Q. What attention have you given personally to the affairs of the Utica Insane Asylum during your term of office — state generally?

A. The first few years of my term of office I was not a member of the auditing committee; the auditing committee is the only standing committee that there is in the board of managers, and it is with the president of the board, substantially the executive committee of the board of managers.

Q. And their duties are mainly with reference to the accounts?

A. Not only with reference to the accounts but generally; Dr. Gray, the superintendent, confers with the auditing board and with the president of the board of managers the same as he would if it were the executive committee of the board. During the first three years I did not pay as much attention to the Asylum as I have since, necessarily. The board of managers have four regular meetings— quarterly meetings of the board; one, the annual meeting, is December, and the other three are in April, July, and October. At three of these meetings the board goes through the Asylum, that is they

are not bound or required to go through the whole Asylum, but they go through portions of it.

Q. At the quarterly meetings?

A. At either of the meetings except the annual meeting. At the annual meeting the whole board goes through the Asylum, from one end of it to the other.

Q. At the other three meetings they do not take every ward?

A. They do not on every occasion; sometimes they do and sometimes they do not.

Q. How much time, besides what you have stated, is given to an inspection of the wards by the managers, personally?

A. I could not speak about that, except as to myself. There is no time fixed for the board of managers visiting the Asylum, but different members of the board go there, and especially the auditing committee, or members of the auditing committee; they are required to go there frequently about the business of the Asylum, and when they go it is usual, not always, but usual, to go through some portions of the Asylum.

Q. How often on an average have you visited the wards, or any of them, during your term of office?

A. I could not say exactly.

Q. Once a month do you think?

A. I think I have been in the wards of the Asylum at least once a month, if not oftener. In some of the wards of the Asylum, when I go there, I make it a point to go through the disturbed wards; I do not think that there is the same necessity for going through the other wards of the Asylum as there is through the disturbed wards; there it is necessary and proper for members of this board to go. It is also very essential that some members of the auditing board should know something about the outside affairs of the Asylum, for instance the butcher shop, or rather the slaughter-house, you might call it, and the bakery and the stables, and the garden and farm.

Q. And those you visit from time to time?

A. Yes, sir; I visited them the other day when you were there; while the committee were going around, I spent considerable time in going over the premises; I did not go on that occasion into any of the wards, and I give this simply as an illustration; the other day while you were examining Dr. Gray I went round to the barns, and to the slaughter-house and bakery; not because I knew of any necessity of doing it, but because I wanted to do it.

Q. For the purpose of seeing those parts of the institution?

A. Yes, sir; the Friday before that — to carry out my illustration — that is a week ago, while you gentlemen were going through the men's department, Mr. Rogers, Mr. Lowery and myself went through the disturbed wards on the female side.

Q. When had you previously been through the disturbed wards on the female side?

A. I think it was in December previous; and I was through the men's ward about three months previous — no, sir; I think it was in the latter part of December.

Q. About six or eight weeks previous.

A. Yes, sir; I went through the men's department, that is the disturbed wards, and I had to pass through the other wards to get to them; I think I have been twice since December; I could not of course tell you each time I have been through, because I did not carry it in my mind, and I kept no memorandum of it.

Q. How often are you willing to say that you have visited some of the wards during your term of office?

A. I think, taking the last year for instance, that I should average more than once a month; I should say in some respects more than that; I have been in some of the wards at least a dozen times — rather more or less; I should think now that I have been to the Asylum on business; it seems to me I have to go there every two or three weeks about something.

Q. Would once in every two or three weeks fairly represent the number of occasions that you have gone to the Asylum during the past year?

A. Sometimes, you know, I would go two or three times a week, and at other times I would not go as often; as I would be called upon for some special reason.

Q. Are you acquainted with the rate of wages paid to the attendants and officers?

A. I think I know generally.

Q. What is Dr. Gray's salary?

A. He gets $4,000.

Q. What are the physician's salaries?

A. I may not get this exactly, but I think the first assistant receives $2,000 a year, the second $1,800, the next $1,500, and the fourth $1,200.

Q. What are the supervisors paid monthly?

A. The men are paid $40.

Q. What are the attendants on the men's side paid?

A. The attendants on the male side are paid all the way from $20 to $28 a month, I think.

Q. It has been testified that they work from fourteen to sixteen hours a day?

A. Yes, sir.

Q. That is substantially true, according to your knowledge?

A. Yes, sir; I think it is.

Q. Do you think that the wages paid the attendants are sufficient, considering their hours of labor and the duties required of them?

A. Before the commencement of these investigations it was easy to get attendants at those rates, but since the inquiries that have taken place, attendants have felt that they were subject to criticism — more than that — that odium was cast upon them and it has become, and is now, difficult to obtain the same class of attendants at those prices; I state this on information; the managers have nothing to do with the hiring or discharging of attendants.

Q. Who has the hiring and discharging of them?

A. Dr. Gray — no, sir, they are hired by the steward on the recommendation probably of Dr. Gray, and upon examination. My view about the relations between the managers and the officers of the Asylum is this: the managers appoint the superintendent and the steward and matron, and the assistant physicians are appointed by the board of managers upon the recommendation of Dr. Gray. They are responsible to the board of managers for the management of the Asylum, and it would only create discord and trouble if the managers should undertake to interfere as between the governing head of the Asylum and the employees.

Q. So that the employment of the attendants has been entirely left to Dr. Gray?

A. Yes, sir; Dr. Gray and the steward.

Q. Are there not frequent changes among those attendants? Have there not been during the past few years?

A. I think there have been, as I am informed, but personally I know nothing about it; I make inquiries about such things and get information.

Q. Have you any opinion as to the character or fitness of the attendants?

A. I have nothing to do with it, and would have, under no circumstances.

A. Do you think that that should be left where it is, without any direction by the board of managers?

A. Yes, sir.

Q. As a matter of the executive management of the institution?

A. Yes, sir; he and his assistant are the responsible heads of the institution.

Q. I understand you to say that the employees are engaged by Mr. Dryer upon the recommendation of the superintendent?

A. I think so; when an attendant or other similar employee is engaged in the Asylum, as I understand it, he signs the following

AGREEMENT.

In consideration of being employed by the Superintendent of the New York State Lunatic Asylum, for the said Asylum, I do hereby agree to work for the said State Lunatic Asylum for one year from date, at any work or service assigned me by the said superintendent, or other officer, on the terms specified opposite my name, payable after the first month, so that one month's wages will remain unpaid until the end of the year; and I agree to observe and obey the rules and regulations of the Asylum, and the directions of the superintendent or other officers, from time to time; and in case I leave my employment before the expiration of one year from date, without the permission of the superintendent, or am discharged for the violation of the rules or neglect of duty, I am to forfeit one month's wages; and if I continue in the employment of the Asylum after the termination of this contract, I agree to be liable to forfeit one month's wages, on the conditions above specified.

Dated this day of , 18

NAME.	RESIDENCE.	PRICE PER MONTH.

Q. Who purchases the supplies for the institution?

A. The steward of the Asylum.

Q. And his purchases are audited by the committee of which you are a member?

A. Yes, sir.

Q. Have you any of the accounts presented to the Asylum for any of those supplies?

A. I have not with me.

Q. Where are those supplies usually purchased?

A. They are usually purchased in Utica or the vicinity.

Q. What effort is made, to your knowledge, to secure the best prices — by competition, or otherwise? Do you know that at any time bids are asked for and received?

A. The steward, as I understand, has at all times gone to different persons to purchase his supplies; I believe that they are mostly purchased in the city of Utica and the vicinity; and I believe that there are over 130 persons that he has to deal with; sometimes he goes to one, and sometimes to another.

Q. State, if you know, what are the aggregate expenses of the institution annually?

A. My recollection is — I cannot carry these figures in my head, but my recollection is that it is something like, altogether, $180,000.

Q. That is for all the purposes of the institution?

A. I think that covers all purposes of the institution except the salaries; whether it covers salaries or not I do not know.

Q. In your opinion, is the method of purchasing supplies so arranged as to be fair?

A. I believe it is; I believe that we have got a very exemplary, upright man for the position of steward.

Q. What supervision is there over his method of buying the supplies?

A. The accounts are audited by the auditing board; I can show you the form of his account.

Q. What have you to say as to the advantage of purchasing supplies for the Asylum by wholesale?

A. The suggestion was made about getting the flour, etc., at wholesale prices, and the effort has been made at different times; we sent each month direct to the mills, and bought the flour there in hopes of getting it at a lower price; we found, at that time, that it was more economical to buy the flour in Utica; bad weight was given, when the flour was sent, and if it had been purchased in Utica, it would have been returned, as not of the quality desired; and in that instance, at least, it was found that it was more economical to buy the flour in Utica.

Q. About how many barrels do you buy at a time?

A. About a hundred barrels at a time, I should think.

Q. Is there any competition sought among the merchants in obtaining supplies by inquiry to ascertain what prices the articles can be obtained at?

A. I think there is to a certain extent.

Q. Do you know that of your own knowledge?

A. All this that I testify to about supplies and the purchasing of them, I do not know of my own knowledge, because I do not pretend to be present at the time any of this business was done.

Q. All the purchasing for the institution is done by whom?

A. By the steward of the Asylum.

Q. And the only supervision is in the auditing of his accounts?

A. In the examination and auditing of his accounts — that is the only supervision.

Q. What knowledge has the auditing committee that the exact quantity charged for has ever been delivered to and received by the institution?

A. I am not the book-keeper, but if I had the books of the Asylum I could explain to you how it was done.

Q. You mean to say that the knowledge of the auditing committee is derived from the books?

A. No, sir, there is more than that. The steward every morning makes a list of all the articles that he is going to purchase that day; that is copied into a book by the book-keeper. He makes his purchase for the day and returns and reports what he has purchased. The goods are delivered by the vender with his bill in the usual form. Every article that goes into the Asylum is either weighed or counted.

Whatever the measure may be, it is weighed by the assistant clerk, and is marked on his book by the book-keeper, and then the account is not paid until it is made out and presented to the vender in triplicate form in that shape (handing to the committee triplicate printed blanks of account).

The vender has to swear to this account, as you perceive by one of the blank forms; it has then to be countersigned by the superintendent and the steward both, and has to be restated. There are three blanks, one of them is delivered to the treasurer of the Asylum, the second to the Comptroller of the State, and the third one is not sworn to and is kept in the Asylum; it is in this form, and is the copy of the account that was kept in the Asylum.

Q. Who gets the one that goes to the Asylum?

A. It is kept by the steward's clerk in the Asylum; he gets the books; these supplies, for instance, such as butter and provisions and groceries and such things, are all kept by the storekeeper; there is not any thing, as I understand it, from a paper of pins to a barrel of flour, but what is charged to some one when it goes out of the storekeeper's hands and has to be accounted for.

By Mr. Brown:

Q. I suppose you mean going into the different departments of the Asylum?

A. Yes, sir.

Q. Do you think of any other thing you want to say in regard to the business management of the institution?

A. Nothing, except I believe it is well managed; there has been one suggestion made that the affairs of the Asylum should be separated — that is, that the business management should be separated from that of the head of the medical department.

Q. How does that present itself to you — favorably or unfavorably?

A. I think it is utterly impossible to do it and have justice done to the Asylum, because I think there ought to be, in such an establishment, one responsible head for doing all of its business; for transacting all the business affairs of the Asylum and all the medicinal; the treatment of patients as well as the purchasing of articles of supply for the patients, and luxuries for patients, etc. If it were otherwise, it seems to me that it would lead to a conflict of authority, which would be very prejudicial to the affairs of the Asylum. Either one or the other ought to be at the head — either the business managers ought to be at the head, or the superintendent of the Asylum ought to be at the head; as it is now the superintendent of the Asylum is at the head, and we have a business manager, who is the steward, and subject to the Superintendent.

Q. Then you are perfectly satisfied with things as they are?

A. As far as I know I think the business affairs of the Asylum are well conducted.

Q. I want to call your attention to these injury books. Have you ever seen them before to examine them?

A. Yes, sir.

Q. And have you examined them from time to time? If so, what examination have you made of them from time to time?

A. I have looked at them.

Q. How often have you seen them to make an examination of them?

A. I do not know.

Q. Do you think you have ever seen all six of them to examine them?

A. I don't know whether I have or not.

Q. On how many occasions would you say you had seen any of them more than twice to examine them carefully?

A. I do not remember; I remember seeing those books and knowing what they were and that is all I can say.

Q. You have never taken them carefully to make an investigation of what they contain, have you?

A. I have looked at them.

Q. Have you looked at the outside or the inside?

A. I have looked at the inside.

Q. Can you pick out of the six books lying on the table before you which one you have looked at to examine?

A. I do not believe I can.

Q. Have you ever taken any pains to acquaint yourself with the circumstances surrounding any of the instances recorded in the books?

A. I have not; in going through the Asylum I have often asked the patients how they were hurt; when I have seen a man with a black eye, for instance, I have asked him how he was hurt.

Q. Can you recollect any individual case, and the answer that was made to you?

A. Yes, sir, I can remember one case where it was demonstrated by one patient, with regard to another; I inquired about that case, and learned how it occurred, that it was the result of an attack by one patient upon another. [The witness then stated what he was told by a patient.]

Q. As I understand you, in going through the Asylum when you see an injury, or the evidence of an injury, you make some casual inquiries with regard to it; but you do not make it a business to investigate those things?

A. I don't know; I make inquiries; I don't know whether you would call it a "business" or not.

Q. Aside from the one case that you have just mentioned to us do you recollect any other case?

A. Yes, sir.

Q. Where you followed it out?

A. I remember going through the Asylum with the Woodin Investigating Committee; I remember a man there apparently badly injured in the face; I asked Senator Woodin to ask that man how he was hurt, and the man said he had hurt himself.

Q. Do you recollect any others?

A. I do not remember any specific instances; I have no doubt I have made a good many of them that I do not recollect about.

Q. (Repeated.)

A. If I should rake back over my memory I might think of others that do not occur to me just now.

Q. At the quarterly meeting of the board of managers are these injury books brought round and examined and the subject taken into consideration by the board?

A. No, sir.

Q. Now, in regard to Dr. Gray's outside employment; what do you, individually, as a member of the board, think of his accepting outside employment?

A. I think it is just as proper for Dr. Gray to accept outside employment, if it in no way interferes with the good government of the Asylum, as it is for a judge who writes a law book and sells it for a profit. And I would say one thing further; that is: that I think it well for Dr. Gray to keep up his knowledge, as a physician and surgeon, by consulting with other physicians; I think it is for the good of the Asylum in that regard.

Q. Then what do you say as to whether or not you would recommend a stoppage of his taking employment away from the institution?

A. Not if it interferes in nowise with the discipline and welfare of the institution.

Q. Do you think that it does interfere with the discipline and welfare of the institution?

A. I have never found any evidences of it.

Q. Have you ever taken any pains to look for the evidences of it, especially personal?

A. Only to examine into the welfare of the Asylum, and I do not see that it has deteriorated any from the facts of his having taken outside employment.

Q. Do you know, as a fact, whether he took more outside employment away from the institution before you became a member of the board than after you became a member of the board?

A. I do not know.

Q. When did you learn of this injury to Mr. Hughes?

A. I heard of it the Saturday after he died.

Q. Do you know what, if any, action was taken by the board in regard to his death; you may state what you did upon hearing of his death, if any thing?

A. Well, upon the —

Q. (Interrupting) Had you heard of his injury until after his death?

A. I had not heard of his injury until after his death; they impaneled a coroner's jury on Monday, I think; I heard of it Saturday, and I saw Dr. Gray on Sunday at the Asylum in regard to it.

Q. You went to the institution to see Dr. Gray particularly in regard to that matter?

A. Yes, sir; and on Monday (that is my best recollection) they impaneled a coroner's jury. It may have been that they impaneled the jury on Saturday; on Monday I went up to the Asylum, and the coroner's jury had been impaneled; I suggested to Dr. Gray immediately that the district attorney ought to be employed and he agreed with me; and then a letter was produced from some one in Madison county by the coroner asking that the matter be adjourned over, I think; I then went down after the district attorney myself; I went to his office and he was not in; there was a note on his door that he was at the court-house; I went to the court-house and he was not there; I then went to his house and I could not find him; I then came back to the assistant district attorney's office and I found him in his office, and I asked him to go up and appear before the coroner's jury; but for reasons which he gave at the time, he declined to do it; I think the district attorney came in the afternoon.

Q. Was there any meeting of the board to consider the case?

A. I think there has been, but I am not certain about it; I think there was a meeting to consider the matter.

Q. Was that before or after the verdict of the coroner's jury?

A. I do not know; I do not remember; I think every thing was done that was possible; I do not think in either of those cases that

of Mr. B. or that of Mr. Hughes, that any human foresight could have prevented either one, by the board of the management or the officers of the Asylum.

Q. What, if any, inquiries have you made personally as a manager of that institution into the circumstances surrounding the death of Mr. Hughes, and who was responsible for it?

A. I went immediately into the ward as soon as I got up there that Sunday to find out; it may have been Saturday that I was up there first, but when I went up there I went into the ward and talked with any one I could find, about it, who knew any thing about it.

Q. Do you recollect who you found to talk with about it?

A. I talked with Dr. Gray, principally, about it.

Q. Did you talk with those in the ward?

A. No, sir; I did not talk with them.

Q. You did not talk with Mr. Bills?

A. No, sir, I did not, for I had learned after this that it had got into the hands of the coroner's jury, and I did not think that any one ought to interfere with it in the most remote degree; I did not know about the matter before that time; I had simply talked with Dr. Gray about it.

By Mr. Olin:

Q. Who purchases the supplies for the Asylum?

A. The steward, Mr. Dryer.

Q. Where are they purchased?

A. They are purchased in Utica and the vicinity.

Q. From a large number of different persons?

A. Yes, sir.

Q. Take, for instance, their sugar, teas and coffees; do you know how they are purchased?

A. I think they are purchased in the manner I have already described to you in conversation; the steward has an arrangement on behalf of the Asylum with Messrs. Butler & Hamilton that certain things, which, I think, consist chiefly of sugar, coffee and tea, shall be purchased by Butler & Hamilton with their other goods, and that the Asylum shall pay fifty per cent on the cash price.

Q. And do you say that the flour is purchased in Utica?

A. It is purchased, I think, of different parties in Utica.

Q. And their vegetables are purchased by the steward from whom?

A. A large number of vegetables are raised upon the farm.

Q. How is it about butter and milk?

A. The butter is purchased from different individuals — from the dairymen or grocers; I think they purchase it from the men that make it; that is, the butter.

Q. Now, how is it about the milk?

A. Well, the milk — I don't know whether that is furnished from the farm or not, but a greater portion of it is; they have a farm there and have to use what it produces.

Q. They give the farm credit for so much stuff?

A. Yes, sir; you can see it here from this steward's report that I hand you; for instance, "apples, fifteen bushels;" there is an account kept between the Asylum and the farm.

Q. You think the milk principally is the product of the farm, then?

A. I don't know what proportion, or whether all of it.

Q. Do they buy cattle?

A. Yes, sir, they buy stock and kill it themselves; buy it on the foot.

Q. Do they keep their own butcher and baker?

A. Yes, sir, they do.

WITNESS — There is one thing that I would suggest, that is about the convicts in the Asylum — I think they should not be there.

Q. Have you any other suggestions to make whereby the general welfare of the institution could be improved?

A. With regard to the matter I have just spoken of, I think the laws ought to be amended so that criminal patients who are dangerous in the Asylum can be removed to the Asylum for Insane Convicts at Auburn? There is another thing I would call attention to, and that is as to visiting the Asylum. There are over eight thousand visitors to that Asylum every year. There are five days in the week that visitors go in, and let me suggest this — those people who visit there, outside of the ones who come for the purpose of seeing their friends, are ignorant as a general thing. There are some exceptions in the line of philanthropists who come in there occasionally, but generally it is the ignorant and brutal. It is out of the power of the board of management to prevent such visitation, but I have no doubt that a larger number of people go through the Asylum than is at all necessary, and I think it results to the disadvantage of the inmates. In my opinion no visitors should be allowed in the Asylum except friends of patients, unless they receive a ticket of admission from some member of the board of management, that would cut off half of the visitors who go out of a morbid curiosity.

Recess until to-morrow afternoon at 3 P. M.

ALBANY, N. Y., *February* 26, 1884.

The committee met at 3 P. M. in room "B," pursuant to adjournment.

Present — The whole committee.

Dr. OGDEN BACKUS,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?

A. Twenty-five.

Q. What is your residence, excepting the Asylum?

A. Rochester, New York.

Q. What position do you hold in the Insane Asylum?

A. I am the fourth assistant physician.

Q. How long have you held that position?

A. I was appointed the 13th of last August.

Q. How long have you been connected with the Asylum?

A. Since that time — 13th of last August.

Q. What are your duties?

A. At present I am assistant physician on the north side of the house — the men's side.

Q. Please state more specifically in what your duties consist?

A. My duties consist in assisting the physician who has charge of the north side, assisting in the wards, keeping the books containing histories of the cases, and the getting out of statistics; I also have charge of the amusements of the Asylum.

Q. How often do you visit the patients?

A. Always twice a day and sometimes more.

Q. How many wards do you have to visit?

A. Twelve wards.

Q. How many physicians are associated with you in visiting those wards?

A. One, Dr. Pilgrim; and Dr. Gray, the superintendent, of course.

Q. How many patients are there?

A. There were three hundred and twenty-one this morning.

Q. Do your duties extend over all classes of patients in those wards?

A. Yes, sir.

Q. How many of those wards are known as violent wards?

A. Two, really; one is known as the disturbed ward, and the other is a semi-disturbed ward.

Q. About how many patients are there in the disturbed ward?

A. I should say twenty-seven or twenty-eight on ward four; it

will vary daily; sometimes there may be twenty-nine, and sometimes only twenty-six.

Q. What causes such variations?

A. When a patient is quiet and not noisy, at night specially, and in a condition to be removed from among the class of patients who are on ward four, he is changed and sent to some other ward.

Q. Are you familiar with the case of Mr. Hughes, who died in the Asylum?

A. Yes, sir.

Q. When was your attention first drawn to his case?

A. I met with the case first on the 25th day of January, at about half-past eleven in the morning; between half-past eleven and twelve.

Q. Is that the day he was brought to the Asylum?

A. Yes, sir.

Q. What attention did you then give to the case?

A. I took the history of the case from the son; examined the patient and sent him on to the ward.

Q. What ward did you send him on to?

A. The ninth ward.

Q. When did you next see him?

A. I next saw him that afternoon about five o'clock.

Q. Where did you see him at that time?

A. On the ninth ward.

Q. What was his condition and appearance at that time?

A. He was sitting quietly in a chair; I spoke to him and he appeared to be depressed at that time.

Q. Were you aware that he had been in the Asylum previously?

A. Yes, sir.

Q. Were you aware of his condition during his previous stay in the Asylum?

A. At that time I was not.

Q. Was there any thing said to you by his son in regard to his being previously an inmate of the Asylum?

A. Yes, sir.

Q. What did he say?

A. I cannot recollect it in the words that were used, but in substance it was that his father was there before; and we were talking generally on the subject of the Asylum, as to how his father would be treated, he hoped that his father would make as good a recovery this time as he did before when he was admitted, in 1878.

Q. What was the nature of Mr. Hughes derangement as you understood it from his son?

A. It was a case of melancholia with suicidal tendencies.

Q. Did you ask if he were violent?

A. I can't recollect whether I asked the question; I presume I did.

Q. Did his son say any thing in regard to that subject to you?

A. I can only state that I took the notes of the case in lead pencil as his son gave them to me, and in the notes there is no statement whatever of the man's being violent.

Q. You say you next saw him about five o'clock in the afternoon and that he was then quiet?

A. Yes, sir.

Q. Did you prescribe for him at that time?

A. Not at that time.

Q. Did you give any special direction to the attendant concerning him at that time?

A. No, sir.

Q. When did you next see him?

A. I saw him about ten o'clock the next morning.

Q. In what ward?

A. He was then — well it was after ten, allow me to change that; it was then after that he was moved, and he was on the fourth ward.

Q. Do you know by whose order he was removed?

A. Yes.

Q. By whose?

A. My own.

Q. Upon what statement?

A. Upon the statement of the supervisor that he had become violent and was striking the patients.

Q. What supervisor?

A. Supervisor Jones, second department.

Q. When was such statement made to you?

A. It was made about ten o'clock.

Q. The same morning?

A. Yes, sir; it might have been a little before ten.

Q. Was any report made to you during the night, of his condition?

A. Yes, sir.

Q. At what hour?

A. About twelve o'clock.

Q. What was the report?

A. The report was that Mr. Hughes was restless, and that he would not stay in bed, or would not stop in bed, as the night-watch expressed it; he was reported as sleepless and I sent him a little chloral and tincture of hyoscyamus.

Q. Is that the usual draught given to restless patients?

A. That is the usual draught, yes, sir.

Q. Does it vary very much from time to time, according to the character of the patient?

A. Not very much.

Q. If it varies, in what respect does it vary?

A. It would vary in the dose, which is either increased or diminished.

Q. What influences you in deciding the size of the dose that is given to the patient?

A. Our knowledge of the patient.

Q. How large a dose did you give this patient?

Q. I gave him, I think, fifteen grains of chloral,, and two drams of the tincture of hyoscyamus?

A. That is a medium dose.
Q. Did you see that patient during the night?
A. No sir.
Q. Why did not you visit him yourself?
A. Because he was simply noisy and restless.
Q. Where was he at that time?
A. On the ninth ward.
Q. Was he in the dormitory?
A. Yes, sir; we have no single rooms on that ward, they are all dormitory.
Q. How many are there in the same room?
A. I think there are seven or eight beds in the dormitory.
Q. Was any other report brought to you during the night?
A. No, sir.
Q. What information did you receive as to the effect of this dose?
A. None whatever.
Q. What do you believe was the effect of it?
A. I believe — I knew the man took it because Mr. Summers, our night watch, did not report; if the man had refused to take the medicine, or had continued restless, he would have reported; he did not report and I heard nothing more about it.
Q. When did the man first become restless again?
A. I believe somewhere about nine o'clock, to the best of my knowledge; it was in the morning, it was after breakfast, after they were dressed.
Q. And was the report of his condition then brought to you?
A. Yes, sir; it was brought to me in the office.
Q. By whom?
A. By supervisor Jones.
Q. What did you do then?
A. I was just about to go on the wards; I told him to take Mr. Hughes to ward number four.
Q. Who was charged with that duty?
A. Mr. Jones.
Q. Alone?
A. Well, of course he was charged with it, but he would take another attendant who was in the department.
Q. Then you say you went on to the fourth ward yourself?
A. Yes, sir; that is, I went through wards one, two and three, and then down to ward four.
Q. What was his condition when you saw him on ward four?
A. I found Mr. Hughes in the day room walking up and down, this way — with his arms folded across his breast, and his head down, in that way (indicating); I went up to him, put my hand on his shoulder and I said to him, "Mr. Hughes, what is the matter? what makes you so disturbed this morning?" He did not answer but he walked off, and I followed him and repeated my question to him, but I did not get any answer; so I asked him the third time; by

this time he had walked across the day room and he turned round on me and muttered something that sounded like Welsh; I could not swear it was Welsh; but I saw I was only disturbing him, and I concluded it was better to let him alone for the present.

Q. How long did you remain there with him at that time?

A. I do not suppose I was there more than —

Q. (Interrupting.) On the occasion of that interview, talking with him?

A. I do not suppose I talked with him more than two or three minutes personally; I was on the ward for some time; I saw I was annoying him, and that he was getting restless and nervous, and I concluded it was better not to disturb him.

Q. And you then left him?

A. Yes, sir; I then left him.

Q. When did you next see him?

A. I went on through the house on my rounds through the eight other wards, and while on the twelfth ward, that is the last ward in the house we visit, supervisor Barrisdale, of the first department, came up and said that Mr. Hughes was very bad, that was his expression, and asked me what we were going to do with him; I asked him what was the matter; he said he was thrashing around him and that they did not know what to do; I said I will go and see him, and I went immediately to the ward and found Mr. Hughes sitting in the strong chair, the second from the door; the chair which you saw when you were in the Asylum visiting the wards; he had the belt round him, there was blood on the floor, a little blood on his lip, a few drops of blood on his coat; blood on the floor — I will state about that, I should have said that the floor gave evidence of having been mopped up, there had been blood there, but there was only one or two drops of blood perhaps then on the floor; I went up and asked what was the matter with him; I said to the attendants: "How did this happen?" and I think some one made some answer; I was so taken up with the patient, I thought it better to investigate the matter afterward and not stop to do it then; I put my hand in his mouth, found there was a fracture of the lower jaw.

Q. Whereabouts was the jaw fractured?

A. The fracture was a little to the right of the center; about here (indicating); it was a complete fracture; the attendants said "look out, he will bite you, he is a very dangerous man;" but he was perfectly quiet then, and he did not offer any resistance, and he seemed very glad to see me; I then went to the office; he then had the waist belt around him in the chair; I thought I had better report the matter at once; I went to the office and there I saw Dr. Pilgrim and I reported the matter to him; we saw Dr. Brush and reported to him; then I went immediately and reported it to the superintendent, Dr. Gray; I reported the whole of the circumstances of the case; he asked me how it happened, and I told him I had not investigated it at all, that I thought I had better report the matter first; Dr. Brush, Dr. Pilgrim and myself then went to

the ward to see the patient; we found him there in the same position, and the waist belt was removed; I noticed the man winced a little when he was moved, and I suspected there might be a fracture of the ribs; he was taken to an attendant's room just off from the ward; his clothing was removed, his shirt was removed; Dr. Brush put his hand there and said "Yes," and I knew what he meant; Dr. Pilgrim did the same; then I did the same, and I felt the crepitus.

Q. Explain what you mean by the crepitus?

A. By crepitus, I mean the grating sound that is produced when broken bones are rubbed together; it is unmistakable; there was a bruise here on the side, a little bruise; Mr. Hughes was in a very weak condition, and Dr. Brush said we had better put him to bed at once; I said "I will go and get a single room ready for him on ward eight; we have one there;" and I went to see that the room was prepared; that would be the best ward to take him to; I went up and got the room ready, the bedding changed, etc.; and shortly afterwards Mr. Hughes came up with the physicians; we put him to bed and administered some stimulants in the shape of brandy or whisky, and carbonate of ammonia; then we dressed his side; that is, fixed his chest.

Q. Did you ascertain, before you treated him, how many ribs were broken?

A. It was not necessary in order to properly treat him to find out at that time if one rib or more than one was broken; the treatment would have been the same if it had been one rib or five ribs broken.

Q. What inquiries did you make as to the cause of the injuries at that time?

A. I remember asking how did this happen.

Q. Of whom did you ask that?

A. I could not say, now.

Q. Was it one of the attendants?

A. It was one of the attendants; I was taken up with the patient and his condition, and did not pay any attention to the matter then; I thought it could all be investigated afterward and that my first duty was with the patient, I did not care how it happened at the time, I thought that could wait and the patient could not; his case demanded immediate attention.

Q. When you say you did not "care how it happened," you mean that you considered your first duty was to the patient?

A. Yes, sir.

Q. That the cause of his injury was most important, and who was to blame about it, was secondary in importance?

A. Yes, sir; that is what I mean; I did not mean that it was a matter of indifference to me how it happened.

Q. Who conducted the inquiry as to the cause of these injuries?

A. Dr. Gray ordered the inquiry; it was conducted by Dr. Pilgrim and by Dr. Brush, I think; I am not positive about that.

Q. And you took no special part in the inquiry as to the cause of the injuries?

A. No, sir.

Q. Dr. Pilgrim has charge of the men's side and it would be his duty in such a case, I suppose?

A. Yes, sir; he is the principal physician on the men's side; besides, Dr. Gray assigned him to do it; and Dr. Gray investigated personally.

Q. What is your present belief as to the cause of those injuries?

A. Taking the statements that have been made?

Q. Yes.

A. I think, in my opinion, that that injury was caused by the patient falling down over the arm of the chair, and an attendant falling on him, and that his jaw was fractured when he struck the floor; that is my opinion.

Q. Could not such an injury to the jaw have been caused by a blow from an attendant?

A. Yes, sir; but it would have been a very severe blow, I think.

Q. Has your attention ever been called to the frequency of bruises and black eyes on patients in that ward during your presence there?

A. Yes, sir; I think—well I will not say frequently, but my attention has been called to it, and I have seen a great many black eyes; I have been on the north side two months; I was on the women's side previous to that, but the last two months I have been on the men's side, and am still in that department; while on my rounds on the fourth ward I have noticed these black eyes, and have been told about them by the attendants, and I have investigated how they have happened.

Q. What have attendants told you about them?

A. It would depend upon the nature of the accident.

Q. What is the general nature of their story?

A. There are violent patients there, and a man frequently makes attacks on other patients and also on attendants; sometimes when he makes attacks on other patients he gets it back, and gets a black eye. A short time ago we had one man tried to kiss another, the man did not like it and wanted him to desist, but the fellow insisted upon doing it, and he struck him a severe blow, and gave him a black eye; there are instances of that kind.

Q. Have you ever known a case where an attendant struck a patient and gave him a black eye?

A. No, sir; and I may add that I never knew since I have been in the institution of an attendant striking a patient.

Q. When an explanation is given as to the cause of a black eye, received by a patient, whose statements do you receive?

A. The attendant generally reports it first that Mr. *so* and *so* was hurt by Mr. *so* and *so*, or something of that kind—Mr. Jones was hurt by Mr. Smith for instance. I then inquire particularly of the attendants; I also see the patient, and if their stories all agree and the injuries are not severe, I dismiss the matter from my mind.

Q. Have the patients ever complained to you that they have been struck by attendants?

A. No, sir, I never had such a complaint as that.

Q. As a general thing, do you not accept the statement of the attendant as to the cause of the injury?

A. That would depend upon who the patient was; if it was from a patient whose testimony we should consider reliable, I should accept his word; in some cases I should hold the word of the patient as equal to that of the attendant; but it depends upon the patient, that is what I mean.

Q. Do you consider the patients in the fourth ward reliable in this respect?

A. No, sir, I do not.

Q. Then did you frequently consult the patients in the fourth ward as to any such injuries?

A. Well, injuries do not frequently happen.

Q. When they do happen, did you inquire of the patients about the matter?

A. As a rule, I have accepted the attendants' statements on the fourth hall.

Q. As a rule, are not most of the injuries received on the fourth ward?

A. There are more injuries, perhaps, on that fourth ward, in comparison with the number of patients. Of course I am only speaking of the last two months; I have only been there on that side two months.

Q. What is the comparative frequency of such cases of black eyes and injuries on the women's side compared with the same on the men's side.

A. I do not think there are as many black eyes on the women's side, there are more scratches; they scratch more there; that is my impression.

Q. What are the attendants on the women's ward, men or women?

A. Women.

Q. Do you know what wages the attendants receive on the women's side?

A. No, sir; not positively. I know they receive from twenty dollars a month up, that is on the men's side, and the female attendants, I believe, begin at ten dollars; I cannot be positive about that; the assistant physicians have nothing to do with that matter.

Q. And what hours do those attendants serve during the day?

A. It depends upon the season, fourteen to sixteen hours a day. Sometimes they are required to stay up all night if the physicians so require. Their whole time is devoted to the Asylum.

Q. In your opinion do you think that the wages paid to these attendants are sufficient?

A. I do not care to give an opinion about that.

Q. Do you think that the grade of attendants could be improved by shortening the hours, or increasing the wages, or both?

A. I think that the higher the wages paid the better class of attendants we might procure—a better class than we have, perhaps.

Q. Do you think a better class of attendants is desirable?

A. Of course we would like to have ideal attendants if we could get them.

Q. Are those attendants as good as they ought to be, in your opinion?

A. I do not think any of us are as good as we ought to be.

Q. Do you think the grade of attendants employed by the Asylum authorities is high enough to secure intelligent and considerate treatment of the patients?

A. Yes, sir; I think our attendants as a class are intelligent, kind hearted, and try to perform their duty to the best of their ability.

Q. Then you have no fault to find with the average character of the attendant?

A. No, sir.

Q. Have you ever observed any attendants under the influence of liquor at any time while on duty?

A. No, sir; I have not.

Q. Is there any difference in the grade of attendants between the male and female wards.

A. No, sir; I don't think so; they are all about the same class; we have a good many attendants out of the same family; that is the sisters are on the women's side and the brothers on the men's side.

Q. How often does Dr. Gray visit the wards?

A. That depends upon circumstances; I have seen him in the ward as often as three times a week, and then again it will be some little time before he goes on.

Q, How often does he make a regular visitation of each ward?

A. Well, Dr. Gray goes on the wards, at least I have heard of him being on the wards when none of the staff were with him, and it would be very hard to state how often he does go on; I could not tell you.

Q. How many times have you seen Dr. Gray on the wards since you have been on the men's side in two months?

A. I would have to give that approximately; I can recall seven times.

Q. Do you think that about represents the amount of times you have seen him?

A. I think that represents the number of times; I can recollect seven times, and there may have been more.

Q. How often did you see him during the previous four months in the female wards; about what was the frequency of his visits?

A. He would go on the ward occasionally; I should think—well, that is a pretty hard question to answer.

Q. You can say whether he was there once a week?

A. No, sir; he was not there once a week.

Q. Was he there once a fortnight?
A. To my knowledge?
Q. Yes, that you saw him there?
A. I do not think it would average that.
Q. Do you know whether he was away from the institution during any part of that time?
A. Yes, sir; he was away.
Q. About how long was he away?
A. I should think he was away — these questions I cannot answer positively.
Q. Was he away a month during the time you were there?
A. When I first came down here Dr. Gray went away to Newport, and I think he was gone ten days; I am not positive, but somewhere about there; then he went away again and went up to Buffalo in the Fillmore will case.
Q. And was absent how long?
A. It could not have been over three or four days.
Q. Do you know of any other absences?
A. Then he went down to Albany at the meeting of the Alumni Association, or to deliver an address before the Albany Medical College.
Q. And was away how long?
A. I think about a day, to the best of my recollection.
Q. How long altogether would you say he had been away during the past six months — about how many weeks or days?
A. I did not keep a record of it; those are questions I cannot answer.

By Mr. Haskell:

Q. Tell me which two months it is that you say you recollect having seen Dr. Gray seven times on the wards?
A. The past two months.
Q. Will you specify briefly the seven times that you refer to?
A. It may be difficult for me to give the dates; I know Dr. Gray was through the wards some time in the early part of January; I cannot remember the dates; when Mr. Hughes was injured, Dr. Gray saw him; he saw him a good many times; he went up with me one night at twelve o'clock; in the early part of January, the day that Mr. Hughes was hurt, he went up that night to see Mr. Hughes; he went up the next day to see Mr. Hughes; it was on Tuesday night that Dr. Gray went up with me at twelve o'clock to see him; he has been on the ward the last week four or five times to see a Mr. B. who has been very ill; he went up also to see another patient who was very sick; he was very attentive to Mr. Hughes; it is more than seven times, really.
Q. Then these times that you have referred to, when Dr. Gray was on the wards, it was in reference to some special case?
A. Yes, sir.

Q. Rather than being an extended and thorough inspection of the wards?

A. Yes, sir.

Q. You do not mean that you recollect seven distinct times within the last two months that he had made an entire inspection of the institution?

A. No, sir.

Q. You mean simply that he had been there —

A. (Interrupting) Yes, sir; he had been there to see some special cases.

Q. You were at the institution when Evan D. Hughes was brought there by his son?

A. Yes, sir.

Q. Where were you when he came in?

A. I was sitting in the office, and the papers were brought in to me, and I went in and saw Mr. Hughes.

Q. Where was Mr. Hughes and his son taken?

A. Into the middle office.

Q. That is the one to the right, inside, as we go into the main hall?

A. Well, Mr. Hughes was taken in first into the key office, as it is known — the first office — then there is a central office known as the middle office, and then Dr. Gray's office, and our offices are on the other side, where the library is, that is the general office.

Q. Where did you see him first?

A. In the key office; I then took them into the center office.

Q. Took them all in?

A. Yes, sir; to my recollection; there were two gentlemen, Mr. Hughes and the friends who came with him; to the best of my recollection, I left those friends with Mr. Hughes in that office, and I took the history of the former case into the key office.

Q. Mr. Hughes was brought there by his son and two or three gentlemen, was he not?

A. No, sir; one other, I think.

Q. Do you desire to put that so strong as a positive assertion, that there was only one?

A. I only recollect seeing one.

Q. You commenced to talk to the young man about the condition of his father in the presence of his father?

A. Yes, sir.

Q. And then did you not make the suggestion that it might worry him or disturb him?

A. Yes, sir, I think I did, and we went into the key office.

Q. You and the son?

A. Yes, sir; we went into that office?

Q. Will you give me, as you recollect it, what the conversation was that passed between you and the son?

A. Mr. Hughes was quite agitated; his eyes were filled with tears (I refer to the son); I sat at the key office desk with the history book

and my blank-paper pad and lead pencil, and Mr. Hughes sat there, and we talked about the case; I asked him particularly about it, and he gave me the answers, and I put them right down in lead pencil upon this pad; he gave me a history of the case; that about a week previous to this time his father had become very much depressed; imagining that people were trying to make away with him; that his wife wanted to kill him; that at one time he had asked for a knife in order to kill himself; that this thing was probably brought on by an unfortunate business transaction, which he went on and explained — something about pigs, and something about their putting him out of the church; something of that kind; I don't remember just what it was; it was anxiety and worry over this affair which brought on the present attack; that is about the substance of it.

Q. Is that all you now recollect about the matter?

A. Yes, sir; I have it in the case book.

Q. Were you made acquainted with the fact that his father had been in the Insane Asylum before?

A. Yes, sir; we had a conversation about that.

Q. Was something said to what his father had said in regard to his treatment?

A. Yes, sir; I remember that he said something about his father; I told him that his father would be treated very kindly, and I tried to comfort the fellow — he felt very bad; I remember his saying that his father complained of ill treatment while there before, and I said I thought that must be a mistake, something to that effect.

Q. And he asked you to see that his father was treated kindly, did he not?

A. Yes, sir; and I promised to do the best I could.

Q. And it was in connection with his father making the complaints of ill treatment the last time that he was there?

A. Yes, sir.

Q. Did he not tell you that the immediate cause of this disorder was that it grew out of a lawsuit in regard to some pigs, followed up by charges made against him in the church, that his father had sworn falsely, and that it was the church difficulty that troubled him?

A. Yes, sir; substantially.

Q. And he told you in regard to his father trying to get an ax or a knife to cut himself?

A. He told me that his father had asked for a knife; I do not recollect any thing about the ax.

Q. Did he also tell you about the number of men that he had there to watch his father?

A. No, sir, I never heard of it until afterward.

Q. And he did not tell you about his father being watched by two men and getting away from them, and the two other men that had been helping to take care of him stopped him before he got out of the house?

A. No, sir, I don't recollect that.

Q. And you do not recollect of his saying any thing in regard to his father having been violent at all?

A. No, sir.

Q. All that you recollect was in regard to his father being despondent?

A. Yes, sir, despondent and depressed; it was a case of melancholia with suicidal tendencies.

Q. How many times since then have you read over or looked at the minutes that you made at that conversation?

A. I think I have read them over once; perhaps twice.

Q. When was the last time?

A. I read them once before the coroner's jury; I read them once before that; I do not think I have read them over since the coroner's investigation; of course it is in the case book, and I have seen the name of Evan D. Hughes.

Q. Are you not testifying more of what took place between the son and yourself, from what appears in that case book, than you are from actual recollection of what really did occur between you and Mr. Hughes?

A. As I told you before, we have a great many cases come into the Asylum, to keep every history and know about every patient, and keep them in your mind; we have 321 cases there, and you cannot remember all the small points; you have got to generalize.

Q. Do you not then depend more in your recollection of what occurred at that interview, upon what appears in the minutes than from actual recollection?

A. We depend more on the minutes, that is what they are for.

Q. And it is because there is nothing appears in your case book in regard to Evan D. Hughes being violent that you do not think any conversation of that character occurred between you and the son?

A. Not of that kind, because if there had been I would have recollected it; I should have put it down.

Q. And because it does not appear —

A. (Interrupting) That only strengthens my belief.

Q. And that is one reason why you think it did not occur between you and Mr. Hughes?

A. It strengthens my belief; I do not state that as a reason, but it strengthens my belief.

Q. Did you read the minutes of what appeared in the case book in regard to Mr. Hughes first being in the Asylum in 1878? Did you first read the minutes of his case then?

A. I read them over as soon as I heard he was injured; he was admitted Friday afternoon and was injured Saturday morning; I read them over Saturday morning after he was injured; when I say I did not read them over, — I read part of them to Mr. Hughes, that he was discharged on such a day. I got the case book, as it is always customary to do in a case of re-admittance, and I stated on the margin, on the side, the fact of his re-admittance where the entry is made with reference to the re-admission. See case book so and so.

Q. If you had read the history of that case, you would have discovered that the form of his insanity was violent in character?

A. Yes, sir; I should have seen that he had been violent, but not any more so than a great many patients.

Q. He was not more violent, as far as you know, on the second admission to the asylum than any other patients. Now do you claim that it made any difference with Mr. Hughes' treatment and disposition so far as it affected the subsequent injury to him — the fact that your attention was not called to the violent form of his insanity?

A. I can state that in this way: That even if Mr. Hughes' son had given me the history that his father had required four men to restrain him, he would have been sent to ward nine in the condition he was, while in the office, he would have been sent to the ninth ward, and when he became violent, he would have been transferred to the fourth ward; his condition was one of melancholia with frenzy; while in this condition of melancholia and suicidal, a frenzy comes on, he loses the suicidal tendency and becomes violent; then the frenzy passes off in a moment, and he becomes suicidal again.

Q. And, in your judgment, you would have done just the same, would you?

A. Yes, sir; I should have done just the same.

Q. Do you recollect his son notifying you that he was under the influence of chloral at the time he was brought to the institution, bringing you a message from Dr. Chase, of Morrisville, the physician who attended him, to that effect?

A. Yes, sir; now that you refresh my mind, I believe he did say something about his being under the influence of chloral.

Q. Do you recollect whether your minutes show that or not?

A. My impression is that they do not; I do not think they do.

Q. You did not take down every thing that was said?

A. Oh, no.

Q. But you merely took down those parts that impressed you as essential and that were proper to put down?

A. Yes, sir.

Q. State whether you have any suggestions to make as to how affairs of this kind might be guarded against in the future, and what possibly might have been done to avoid it in the past?

A. If Mr. Hughes, when he was admitted to the Asylum, had been put into a camisole or muff, restraint, in other words, he could not have hurt himself or others; or if you have a great many attendants — suppose you have an attendant to each patient, probably those injuries would not occur; but you take a lunatic, and if you are going to keep him from hurting himself or others, you either must have plenty of attendance, that is, a great many more than the State would want to employ, or you have to put them in restraint.

Q. Then you think that one of the causes that led to this injury to Mr. Hughes was the fact that there was too little physical restraint used; that is, that there should have been more physical restraint, or that the number of attendants should have been increased?

A. I think that if we had more attendants on the ward it would lessen the danger of such accidents.

Q. That is, that there should be more physical restraint used on the violent patients?

A. Mechanical restraints.

Q. Do you understand the word "mechanical" the same as I used the word "physical"?

A. That is the sense I used it; if that were used, it would also lessen the danger.

Q. I asked you whether there is too little mechanical restraint used upon violent patients in proportion to the small number of the attendants?

A. I do not think there is too little restraint used, when you take the object into consideration — that question cannot be answered by a direct answer.

Q. State whether or not, in your opinion, the absence of mechanical restraint led to violence, there being so few attendants to the number of violent patients?

A. Of course, if we had restrained Mr. Hughes, he would not have been hurt; I do not want to answer your question, because I do not know what you mean; I must say that plainly.

Q. What do you think of the number of accidents—black eyes and other injuries that occur, especially in the fourth ward, and have during the last six months; do they strike you as large?

A. No, sir, they do not; I am surprised there are so few.

Q. Do you think that the best interests of the patients are preserved by their being so kept, and that so many injuries do happen?

A. Yes, sir, I do; I think the best interests of the patients are consulted; they make a better cure.

Q. Do you think the injuries assist and aid in the cure?

A. No, sir; I do not know about that; I think the injuries are bad enough, but an occasional black eye, one patient giving another a black eye, it is not very frequent, we only had fifty-eight black eyes in one year in the whole house, and most of those were the result of men falling down and hurting themselves; we only had fifty-six or fifty-eight cases of that kind in a year, and it is a good deal better to let fifty-six or fifty-eight men get a scratch than it is to go through the ward, and have them all bound up, in my opinion; of course an accident like Mr. Hughes' has happened, and it was very bad — well it was very unfortunate, to say the least, a very sad occurrence, but it was an accident; it is the first one in the history of the institution, and there have been fifteen thousand lunatics there, the first accident of that kind, except where one patient has killed another.

Q. Are you aware of the case of B.?

A. Yes, sir; that case was pretty well proved that it was fractured before he was brought there.

Q. In your judgment, Dr. Backus, is there sufficient mechanical restraint imposed upon the patients in the violent wards at the present time?

A. At present, yes, sir, that is — taking every thing into consideration, yes, I think there is sufficient restraint employed.

Q. Is there not too much restraint, in your judgment?

A. No, sir.

Q. In regard to the inconvenience to the patients by such mechanical restraints, what supervision is there by the physicians to determine whether the patients are not confined too long at any one time?

A. The restraint is never applied without an order from the physician, and it remains on until he gives directions for it being removed.

Q. How long may such restraint be on a patient at one time?

A. How long may it be there?

Q. Yes?

A. It depends a great deal on the patient; I have known a girl to wear a camisole for a week at a time, and only have it taken off once or twice to change her clothing, or something of that kind.

Q. Do they ever wear such restraints at night?

A. Yes, sir, I have known them to sleep in camisoles.

By Mr. Rice:

Q. In a covered bed?

A. Yes, sir; where a patient strikes at themselves, or a patient who tears out her hair; last week I had to put a muff on to a man to restrain him from self-mutilation.

Q. In your judgment, does not such restraint tend to irritate the patient?

A. I think restraint does tend to irritate the patients; that is why I do not like it.

Q. Is there not a tendency among the physicians to watch such restraint and use it as little as possible?

A. Yes, sir, as little as possible.

Q. Does a physician consider that, when he has given an order to restrain a patient by such mechanical appliances, that he is responsible for the continuance of such restraints, until he gives the order to remove them?

A. Until he or one of the staff do.

Q. Do the attendants ever remove such restraints without order from one of the physicians?

A. Not to my knowledge.

Q. Are they permitted to do so?

A. No, sir; not unless they are directed to specially.

Q. How many are there under restraint at one time in the institution usually?

A. I can only answer as to one side of the Asylum — the men's side of the house; this morning there were four in restraint.

Q. What sort of restraint had they?

A. One man had a belt around him, and had wristlets on his hands, confining his hands to his sides, so that he could not strike another patient; another man is very suicidal and very noisy, and disturbs patients very much on the ninth ward; to keep him from committing suicide, we let him sleep in restraint, and the restraint in his case is simply a waist-belt and wristlets; we have another man, a paretic, who is also very noisy, and he sleeps in restraint in a covered bed with a waist-belt and wristlets; we have three in restraint, sleeping in restraint; that is, they were last night, and one man during the day. Then we have another patient there who is in the last stage of general paretis; he is apt to strike people; we are afraid if he does strike some one they will hit him back and injure him, therefore most of the time he stays in this chair, with a simple belt to prevent him from getting up; that is all the restraint in the north side.

Q. What would you say would be a fair average of the number of patients restrained on the men's side from day to day?

A. Last year it was three-tenths of one cent, I believe.

Q. Of all the patients on the men's side?

A. Of the patients on the men's side.

Q. Do you know what per cent of patients it was in ward four?

A. No, sir, I could not tell you.

Q. Most of the violence is among the patients on ward four, is it not?

A. Yes, sir.

Q. Of course the percentage must be very much greater among the patients on ward four than the figure you have made?

A. Well, during the day time the percentage on ward four of violence is greater.

Q. What would be the average among the twenty-five or thirty patients on that ward?

A. Only one in restraint in the day time; they would not average that the year round, from my knowledge.

Q. How long have you been a member of the profession?

A. I graduated the first of April, 1883.

Q. Last year?

A. Yes, sir.

Q. From what college did you graduate?

A. The University of Pennsylvania.

Q. Have you had any other experience in the treatment of the insane?

A. I have; I was at Brigham Hall, Canandaigua, during my medical studies; I commenced my studies in 1879; I was a resident of the county hospital, Rochester, before I graduated, for two summers; next to that I was in the Monroe County Insane Asylum, where they have two hundred and fifty to three hundred patients; I was over there quite a good deal myself and saw more or less of the insane at that institution.

Q. From your observation of the system at Utica and at the other

institutions named by you, are you able to suggest any changes in the treatment of the patients?

A. No, sir, I cannot; I think that every thing is done for them that can be done.

Q. Is there any difference between the treatment of the pauper patients and the pay patients to your knowledge?

A. Not in the least.

Q. How do you distinguish them?

A. They are simply distinguished by looking on the books of the institution; the attendants themselves do not know which patients are pay patients; some apparently private patients, as they think, are really on the county.

Q. It has been testified before the committee that some patients pay $6 per week, and some pay $10; is there any difference in the treatment of the patients who are paying such a difference in prices to your knowledge?

A. No, sir; no difference in the treatment of those patients, except that a case comes in in which the patient would require a great deal of attention, for instance, has to be fed three or four times a day with a stomach tube; some require attention of that kind, and that is charged extra; of course we have nothing to do with the matter of charging.

Q. And you are not familiar with that portion of the affairs of the institution?

A. No, sir; persons come and ask what the charges are and we say from $6 a week up.

Q. You speak of feeding patients with a stomach tube?

A. Yes, sir.

Q. Now, under what circumstances are patients so fed?

A. Very frequently we have patients who refuse all food. They come into the institution almost starved to death; they have got to be fed and sometimes we give them nutritious enemas, and they would expel them, and the food has to be introduced into the stomach; I have fed as many as eight women twice a day, and one of them three times a day; there is more feeding to be done on the women's side of the house than on the men's; it consists in placing a patient in a chair, or she is in bed, an attendant holds her hands, or if she resists very much, is confined at the waist with a belt; a wedge is introduced to open the mouth and one finger is passed into the mouth, depressing the tongue, then a very flexible tube, well lubricated with cosmoline, or vasseline, is passed in and down into the stomach; at the other and outer end of this tube is a funnel and into that is poured a certain quantity of milk or eggs, or any thing of that kind into the stomach. I have fed as many as eight twice a day and sometimes more.

Q. Of what are these tubes made?

A. The tubes are many of them made of silk, covered with shellac.

Q. What other substance are they made of?

A. I think some of them are made of a composition, that as soon as the tube is warmed it becomes very flexible and soft; holding it in the hand will warm it, and that is put down into the œsophagus.

Q. A patient that could eat and would not eat, does it not usually bring them round to eat?

A. I have fed one patient four months twice a day, and she could eat if she wanted to but she will not; some patients will be fed by the tube, and then the next meal they will eat and will eat two or three meals, and then again they will have to be fed two or three days, and they will begin and eat again; I have one patient who will come to a chair, sit down, open her mouth and let me pass the tube down and feed her; she does that under the delusion that she is taking medicine, but of course she must be fed.

Q. Does it usually have the effect of bringing a contumacious patient round to eating?

A. No, sir; we do not do it for that reason.

Q. Does it usually have that effect?

A. A patient begins to eat, whether he does it on account of the stomach tube, or whether he does it because he gets rid of his delusion, I cannot say; that is an aberration of the mind of the individual that I cannot go into and about which I have formed no opinion.

Q. Do the patients ever complain of the use of this tube or of its hurting them?

A. They complain of its gagging them at first, but after they get used to it they do not mind; as soon as you introduce any thing into the œsophagus there is a tendency for the stomach to heave.

DWIGHT D. WINSTON,

Who appeared in answer to a subpœna *duces tecum*, was then sworn and examined, and testified as follows:

By the CHAIRMAN:

Q. What is your age?

A. Fifty-six.

Q. What is your residence?

A. Utica.

Q. What is your business?

A. Merchant, wholesale grocer; grain and groceries.

Q. What relation do you hold to the Utica Asylum?

A. I am one of the managers.

Q. How long have you held that position?

A. Since last March; my appointment was made then.

Q. And it runs over three years?

A. Yes, sir.

Q. How much time do you spend at the Asylum with reference to your duties as manager?

A. I do not spend a very large amount of time at the Asylum; I go there as often as it seems to me my services are required.

Q. How many meetings of the board are there held during the year?

A. I think about twelve regular meetings of the board.

Q. Do you now refer to the full board of managers, or to the auditing committee?

A. No, sir, I refer to the board of managers.

Q. Those meetings are the only meetings?

A. No, sir; we have an annual meeting in December, then we have usually met about once a month since I came in.

Q. Including the usual quarterly meetings?

A. Yes, sir.

Q. In addition to those you hold monthly meetings?

A. Yes, sir; we go up there once a month, and have been since my term of office commenced.

Q. Those are the regular meetings of the board?

A. It seems to be.

Q. Are you a member of the auditing committee?

A. Yes, sir; I am.

Q. That is the only standing committee of the board?

A. Yes, sir.

Q. And you say that the auditing committee holds meetings in addition to the meetings of the board?

A. If there is any thing for them to do especially, we are called together if there is any thing that requires action, we are called together by the chairman.

Q. How many members of the board compose an auditing committee?

A. Three.

Q. How many members of the board are usually present at the monthly meetings?

A. They are nearly all there; they have been there with the exception of Mr. Lawrence who is now in Florida, and he is there a good deal of the time; I think they have been there; pretty much the entire board.

Q. How often does the board of managers visit the wards?

A. It is not regular, we have not visited it regularly since my term commenced; I do not think we have been through the different wards more than three or four times, when we have been up there we have had so much business to do that it would take us so late in the afternoon that we would not have time, something required us to be in the office attending to the different kinds of business that we had on hand, and we could not have a chance to go through, and we would say that we would come up in a few days and go through; I don't think I have been there three or four times since my term commenced.

Q. That was about how long ago?

A. Well, I have not been through the Asylum within the last three months, I think.

Q. Is there any regular inspection of the Asylum provided for by the board of managers or by its members?

A. No; there are rules that govern the managers, and I think those rules state that the managers should go through the institution as often as they can make it convenient, or something of that kind; it seems to be understood by the managers, each and every one of them, that they ought to go through oftener than they do.

Q. Is it, in your judgment, desirable that the managers should visit the wards frequently?

A. Well, so far as my observation has gone, it never has seemed to do any harm, and the physicians tell us that it does not.

Q. How frequently would you regard it as desirable that the wards should be inspected by some one or more members of the board of management?

A. I should think they ought to go through at least once a month; and I think it would be better if they would all go through, or as many as could, if they could not all go.

Q. Do you think that is a sufficient inspection of the wards on behalf of the managers?

A. We might make those visits oftener, perhaps without any detriment to the patients, but it is a hard matter to get the managers to be able to give the time; they are all business or professional men, and not men of leisure, and it is hard to get the time to go oftener than that; to answer your question as you put it, I reply that it would be better if they could go through oftener; I certainly would myself; I was invited very frequently by the superintendent to come and go through the Asylum at any time I could make it convenient, myself or with any other member; I certainly should do so, but my engagements at home have prevented me and I have not done it as often as I would like to.

Q. You would regard it as desirable to have a regular weekly inspection of every ward of the Asylum by at least one member of the board?

A. I think it would be a good plan.

Q. Do you not think that such regular inspection would better familiarize the board of managers with the wants of the institution?

A. It could not but be so.

Q. Would they not be better informed as to the treatment and condition of the patients?

A. I should think they would most certainly.

Q. Do you not think that the board of managers should have such information as to the domestic management of the institution?

A. Yes, sir.

Q. And of the actual condition of the patients from time to time?

A. Yes, sir; I should think it would be beneficial to any in-

stitution of this kind to have some part of the managers go as often as it could be convenient, and if it could be done once a week it certainly should be done; it would tend to more efficiency in the administration of the whole institution I should say.

Q. What knowledge have you as to the pay of the attendants at this institution?

A. Well, mostly from the reports of the superintendent and from looking over the books.

Q. What are the attendants paid?

A. The attendants are paid — I think from $20 to $28 a month.

Q. Do you know what hours a day the attendants are on duty regularly?

A. I think it is twelve hours a day.

Q. Do you not think it is longer than that?

A. In certain cases perhaps it is; I think they are subject to the call of the superintendent or physicians to serve a longer time if their services are required; I cannot give you the details about that, for I have not become thoroughly acquainted with it yet.

Q. It has been stated that the hours of work of the attendants vary from fourteen to sixteen hours a day; do you consider such hours too long or otherwise?

A. I should not think that would be conducive to good service; that it was too long for any attendant to be on duty from fourteen to sixteen hours; I think any one who is compelled to work as long as that would get lax in their duties; it would seem to me so.

Q. Would you recommend that the number of hours of duty be shortened for each attendant?

A. If they are over twelve hours I should, certainly.

Q. Do you think the pay of the attendants is sufficient, considering the nature of their duties and their hours of labor?

A. I do not think it any too much, although I have expressed myself frequently in the board that I thought, particularly in the women's department, they were not paid high enough.

Q. How much are they paid in the women's department?

A. I think they are paid from twelve to sixteen dollars a month.

Q. And you would recommend that the hours be reduced and the pay increased?

A. I should. Do I understand that that is the fact, the hours of service are from twelve to fourteen?

Q. It has appeared in testimony that the hours are from fourteen to sixteen?

A. I should, because I think it is too long a time, and I think their salaries are too low, and I have so expressed myself in the board.

Q. Then you were not aware that the attendants had such long hours as from fourteen to sixteen hours a day?

A. No, sir; I was not aware of that.

Q. And this is the first that you have been so informed?

A. Yes, sir; I do not recollect now that that question has ever come up in our board, or that it has been brought to my attention.

Q. From your personal knowledge, what attention does Dr. Gray give personally to the patients?

A. My ideas are, from what I learn from the attendants with whom I have talked, and the doctors that I have conversed with, that the doctor goes through the institution quite frequently; I do not think that he has a regular time to go through, but that he goes through some of the departments, I have so heard from attendants, and where he thinks his services may be required the most.

Q. Have you any idea how frequently he makes an inspection of the wards?

A. No, sir, I have not.

Q. How frequently do you suppose or believe that he visits each ward?

A. I should think that he goes through there four times a week.

Q. Through each ward?

A. Yes, sir.

Q. And you now refer to the twelve male wards and the twelve female wards?

A. Yes, sir; I refer to all the wards.

Q. Has the doctor been absent from the Asylum during the period in which you have been manager, for any extent?

A. Not for any length of time; he was away last summer some time during the month of August, I should think he was away pretty near the whole of the month of August.

Q. Has he been away on any other occasion since to your knowledge?

A. I do not think he has, for any length of time.

Q. He may have been away for two or three days at a time without your knowledge?

A. Yes, sir; possibly he may and I not have known it.

Q. Are you aware that the doctor has to a certain extent been employed as an expert in diseases of the mind?

A. Outside of the Asylum?

Q. Yes.

A. I hear of his being called frequently to different places to examine such cases, but not very frequently have I heard of his being out of town.

Q. Are you aware that he lectures regularly at Bellevue Medical College on the treatment of the insane?

A. No, sir; I have heard of his lecturing there, I think, and in Albany, but I was not aware that he delivered regularlectures at stated periods.

Q. Do you regard such outside practice or employment as consistent with the duties of the Asylum?

A. I do not; I have always thought, if I may state, I have always thought that with the number of patients that there is there, so many very severe cases of insanity, that it required the presence of the superintendent all the time that he has; there are cases where he is

called upon by the officials of the State to visit some person or place, perhaps it is just as proper as for him to stay there, and excepting such cases, I should say that his duties should be there at the Asylum.

Q. Where are the supplies for the institution purchased?

A. They are mostly purchased in Utica, the greater part of them; they go out sometimes in buying certain articles, to Boston, or Gloucester for their fish, for instance.

Q. What supervision in the purchase of such supplies is made by the board or any of the members thereof.

A. Nothing further than auditing the bills.

Q. So that the board are unable to say whether such purchases, when made, are made to the best advantage or not?

A. No, sir; they cannot say that intelligently.

Q. They depend upon the faithfulness of the steward?

A. Yes, sir, that is it; and the direction given by the superintendent as to the purchases.

Q. In other words, that is left entirely to the superintendent and the steward?

A. Yes, sir.

Q. Among how many people in the city of Utica (roughly speaking) are the purchases distributed so far as you know?

A. I have known how many there were in Utica that we purchased of; I should think in the vicinity of a hundred, I don't know any more than that; if I had thought of it I might have made a closer examination of the bills and I could have told very readily, if not exactly; I gave a little more attention, in our last examination of the accounts, to that matter than has been given in a long time, I think; I gave more attention to it; they claimed that I was the most practical member of that board for examining into that matter, and urged me to do so; of course a large quantity of the supplies of the institution are in our line; the most expensive part of them are in our line — that is the groceries and provisions.

Q. Does your house furnish the institution with any such goods?

A. A very little; we never have supplied but very little; indeed we have almost felt that we did not supply as much as we ought to because we have thought that we could sell goods to better advantage than they have been buying them; but as I said it was a delicate position for me to be in, being a member of the auditing board, to find fault with the prices of that class of purchases; that is, purchases in our line; it was a delicate thing for me to speak of, because it would naturally be thought that I was jealous that the goods were not bought of us; we handle groceries on a large scale; there are only two more concerns in our city that are about the same, in extent, as ours; those are Crouse Bros. and Comstock Bros.; they are large dealers for a place like ours; they buy and sell in large quantities; the Asylum has been in the habit of buying that kind of goods that they deal in, in Utica.

Q. What do you say as to the purchases being to the best advantage o the Asylum?

A. I understand that some of the purchases have been made of certain goods, at the same place for twenty-five or thirty years, under the same arrangement that was made that length of time ago, or ever since Dr. Gray has been superintendent; in answer to your question, I think there are some goods that might be purchased to better advantage; I think they should purchase at wholesale.

Q. State what class of goods you think can be purchased to better advantage?

A. Sugar, tea, coffee, and molasses, and goods in the grocery line; I think they could perhaps do better in purchasing such articles of a wholesale house.

Q. Where are they purchased now for the most part?

A. Butler & Hamilton's, of Utica.

Q. Most of the supplies above enumerated are all bought of that concern?

A. Yes. sir.

Q. And they comprise the bulk of supplies in that line of groceries that are bought for the Asylum?

A. Yes, sir.

Q. You have stated that you were a little surprised that the purchases were made of a retail house?

A. Yes, sir.

Q. Instead of from one of the three wholesale houses referred to?

A. Yes, sir.

Q. Do I understand you to say that you, from your knowledge of prices, have observed any difference in the prices that are charged by this concern as against the wholesale prices for those articles?

A. I have said very frequently that the articles could be sold to the Asylum to better advantage than they were getting them; and when I came to audit the bills I saw that a great part of those goods could be obtained at a good deal less money.

Q. That is, that they could be supplied to the institution by wholesale houses to better advantage?

A. Yes, sir.

Q. Do you think the Asylum could buy to better advantage, buying such articles by wholesale?

A. I am satisfied of it; I have so stated to the board and to the superintendent.

Q. Have you suggested to the superintendent that such purchases should be made elsewhere?

A. I have, so far as I could do it in my position; of course I labored under the disadvantage I mentioned.

Q. That you were in the same business and did not care to make the suggestion?

A. No, sir, I did not care to put it very strongly; I think they could see that themselves; that board were men who had been there a great many years; I didn't want to make them think that I wanted the trade to come to our firm, so I said very little about it; I carried some bills back that were spoken about by me.

Q. Have you ever had occasion to criticise any bills for groceries that have come before your audit? If so, state what bills?

A. I have; certain bills of Butler & Hamilton's.

Q. Upon what occasion was your attention directed to the charges in such bills?

A. At the last meeting of the auditing committee.

Q. When was that?

A. That was the last of November, or about the 1st of December, 1883, just before the annual meeting.

Q. Who was present at the meeting?

A. General McQuaid and Mr. Swan.

Q. What bills did you then criticise?

A. The bills that I have just referred to of Butler & Hamilton's, mostly.

Q. Have you brought any of those bills?

A. Yes, sir; a bill from March 12, 1883, to May 23, 1883.

Q. Will you please produce those bills?

A. Yes, sir.

(The bills were then produced and marked "Exhibits '10' and '11,' J. H. M.," respectively.)

Q. From your knowledge of prices, and of the business, did you notice any charges in those bills which you criticised as being too large?

A. I did.

Q. Will you please to state generally what particular items on those bills have been brought to your attention and to the attention of the auditing committee?

A. There are several articles on them; articles in large amounts — sugars — they were too high; there are some articles on that bill that are sold as low as any one else would sell them, and as low as any wholesale house could possibly sell them; there are others that there should be a large profit on, to any one who buys their goods at the right prices, and as low as they should be bought.

Q. And in those bills are any of the articles sold at a higher price than what would yield a fair profit?

A. At a higher price than would yield what we call a legitimate profit for a wholesale dealer.

Q. Will you further specify the difference in prices to which you refer?

[The witness then read from the Exhibits referred to — "Exhibit 10" particularly.] I refer to the item of "tea," the first item on the bill; the item on the bill is "two chests of green tea at sixty cents"; there is no percentage added to that; that is one item to which I refer.

By Mr. Brown:

Q. Do you not think the prices charged for some of the articles are very excessive?

A. I think some of them are excessive; we buy good tea, as nice

tea as the merchants throughout the country want, and I think we have no tea that they ask such prices for.

Q. At what prices are good teas sold?

A. We have sold for the last two or three years best green tea that we buy at not over fifty cents, and from that down to forty and thirty-five cents.

Q. What is the price charged on the bill?

A. Sixty cents.

Q. Is that apparently bought in a quantity large enough for the patients, or may it not be tea for the table of the physicians?

A. I am inclined to think that the physicians do use this tea; I think, perhaps, this is for the physicians' table.

Q. Do you regard the price as high for that grade of tea?

A. Yes, sir; we don't get much grade of tea as high as that?

By Mr. Olin:

Q. Would they be likely to buy two chests for the physicians' table?

A. It would be a large quantity, I should think.

Q. Specify any other items on that bill that you think are charged higher than they should be?

A. The next thing that I should call attention to is the rice —"four barrels of rice"— that is so indefinite that it is a little difficult to get at that; this may be a rice that is worth that money; if it were Carolina rice, for instance, we could tell about what the price should be, but we cannot tell by that entry what grade of rice is sold.

Q. Is there any commission added to that article?

A. To that there is five per cent added; that is supposed to be the commission.

Q. It is the wholesale price with five per cent added?

A. Yes, sir.

Q. You are unable to say, in the absence of the specified grades, whether that is a reasonable price or not?

A. I could not say that unless I knew the grade; I don't know but it may be a rice worth that; but in the case of tea, we should call fifty cents to fifty-five cents wholesale price, very good tea.

Q. Is the five per cent advance a fair or reasonable amount?

A. It would be a fair commission on that class of goods.

Q. In your opinion could the Asylum purchase to better advantage by procuring such goods from wholesale houses?

A. Yes, sir.

Q. That is, to make their purchases from wholesale houses directly, instead of from a retail establishment?

A. Yes, sir.

Q. Can you specify any other items in that account, which, in your opinion, are charged at a higher price than similar articles would be purchased for elsewhere?

A. I will call attention to this item: "One hundred and six pounds of coffee;" it does not say what kind of coffee that is, but

it is undoubtedly Rio coffee, and, if that is so, I cannot say that it is much out of the way, but it is very indefinite; if it is a good, fair, roasted Rio, I should think it was reasonable, but they add five per cent to that.

Q. Any other item on the bill?

A. Yes, sir.

Q. State what?

A. "One barrel of syrup, fifty gallons, at fifty-five cents;" that is very indefinite, because we cannot learn from the bill what kind of syrup it is, but it takes a very fine syrup to be worth fifty-five cents.

Q. What could a good grade of syrup be purchased, for suitable for Asylum uses?

A. Forty-five cents or fifty cents at the outside.

Q. If there are any other items on the bill, please call the attention of the committee to those items?

A. Four barrels of sugar is the next item — one thousand two hundred and thirty pounds, at eight and forty-four one hundredths cents per pound.

Q. What, in your opinion, could such a sugar be purchased for?

A. The price that is charged for that may be just what it cost them in New York with the freight to Utica, but there is five per cent added; any wholesale firm — either our firm or the other two firms that I have referred to — could sell it at two and a half per cent added.

By Mr. Brown:

Q. Do you not think that two and a half per cent is a very good margin, and sufficient to pay for handling?

A. Yes, sir; it is more than is made on the average; we should be satisfied to sell to dealers at two per cent added; and that is what we are selling at — from two to two and a half per cent profit — that is what we are selling at all the time. Then there is an item on this bill of four chests of tea at thirty-five cents, with five per cent added; a very good black tea should be bought at thirty or thirty-two cents; a very good tea should be bought for that.

Q. Is there any thing else on the bill?

A. The next thing is "powdered sugar, one barrel"; there is no percentage added to that; that is put down on the bill at net; when we presented our report, the auditing committee, I inquired why it was that they made a difference in sugars — why one was charged a certain percentage and another was not; the only reply they could give was that it had been a custom from time immemorial; I said I could not see any reason for that myself.

Q. At what price is that item charged?

A. Nine and a half cents; that would be about the right price at that time, I should think.

Q. To whom did you speak about that matter? Did you call the attention of the steward to it?

A. No, sir; Dr. Gray; it was an open meeting of the board.

Q. Was the steward present at the meeting?

A. No, sir; he was not there; Dr. Gray was there.

Q. And did Dr. Gray say that it had been the custom from time immemorial?

A. Yes, sir; that it was so when he came into the establishment.

Q. Did they buy from the same firm for all these years?

A. Yes, sir; they always dealt with that firm ever since Dr. Gray has been there.

Q. You have called the attention of the committee to certain specified items upon the bills before you. Does the same criticism apply to the same items on all the bills?

A. What I have said with reference to the charge for a certain article applies to the repetitions charged for the same article on the other bills. "Item: Two chests of gunpowder," there is no percentage added to this; that is charged at fifty-five cents. Then there is an item here "snow-flake crackers, one box five and three-quarter pounds at fifteen cents"; that seems to me to be too high, but we do not handle those goods, so that I could not say about that; I should not be a good authority. One sack of Ashton salt, $3.25; that is a very high price — it is half a dollar too high; it could be bought at $2.65.

Q. Do you mean that it could be bought by the Asylum?

A. Yes, sir.

Q. What could the Asylum buy it for?

A. Two dollars and seventy-five cents would be all that anybody would charge them, and they would get a good profit out of it; "eight boxes of cheese — 460 lbs. at 14½ — 14 cents;" that would be at that time a fair price for that; there is no commission added to that; "one hogshead of molasses — 110 gals. — 52 cents;" it does not say whether it is Porto Rico or New Orleans.

Q. The Porto Rico does not come in hogsheads, does it?

A. No, sir, it does not; that is high.

Q. Do you think fifty-two cents is too much?

A. Yes, sir, I do.

Q. And upon that they also charge five cents commission?

A. Yes, sir.

Q. And that do you consider excessive?

A. Yes, sir, I should think it was; if that amount — fifty-two cents — were the cost price, the five per cent would not be out of the way; but I cannot tell what the grade is; it appears from that bill that goods which sell at close rates are charged a commission of five per cent, and that goods upon which it is customary to make larger profits there is no percentage added.

Q. What inference do you draw from that — as to the profits made; does that not indicate to you that the profits made upon the goods, where no commission is charged, is greater than the profit they would realize with a commission of five per cent added?

A. It would seem so.

Q. And do you not think those articles could be purchased to better advantage of wholesale houses?

A. I do.

Q. Then, in reality, the Asylum are paying retail profits on those articles?

A. No, sir; perhaps not retail profits, but I think they are paying larger profits than they ought to pay.

Q. What is the total amount of that bill which you hold in your hand for three months?

A. One thousand nine hundred and ninety dollars and twenty-four cents.

Q. In your judgment — roughly speaking — what per cent could that bill have been diminished, if the articles referred to had been purchased at wholesale?

A. I think that bill could have been reduced five per cent at least.

Q. Do you mean by taking an average of all the articles?

A. Yes, sir, right through.

Q. Now, as to "Exhibit 11" — being the bill for the succeeding three months — have you examined the items upon that bill in the same way?

A. I have.

Q. And do you find the same difference in prices?

A. Yes, sir, the same state of things in both the bills.

Q. And, in your judgment, the same high prices?

A. Yes, sir.

Q. Did I understand you to say that General McQuaid agreed with you that the charges were high from his examination of them at the meeting of the auditing committee?

A. Well, the General was very careful; he said to me that if I thought there were a good many things on the bill charged with a higher price than they ought to be, that I understood it perfectly and he did not; and he thought it was the best thing to have the matter reported to the board; the bills were taken out and left with me to look over particularly. We reported that we considered the articles on those bills were paid for at too high a price, and higher than they could be bought for; we made that report to the board of managers at our meeting.

Q. What did the board do in regard to your report?

A. I think they recommended that we should look into the matter a little more particularly, and see at what rates such articles could be bought.

Q. What was done with reference to these particular bills? Were they ordered to be paid? A. They had been paid before; they were paid at that time when we saw them.

Q. Paid before they were received for audit?

A. Yes, sir.

Q. So that the bills are paid and then the checks and the bills are examined together?

A. Yes, sir.

Q. Merely to test the fact of payment?

A. That is all it seems to be.

Q. And not to test the propriety of payment by the board?

A. No, sir.

Q. But merely to attest the fact that such payment has been made, and to compare the checks with the bills — which are the vouchers?

A. Yes, sir.

Q. You say that the board recommended that you should make further inquiries. Have you made further inquiry?

A. We have talked it over, the auditing board, particularly Mr. McQuaid, once or twice since that, and the effect of it has not been obvious upon the superintendent. There has been no change in the purchasing of the things, they go along just as they have been going; it seems as though they got into a groove, and did not know how to get out.

Q. Have you made any suggestions to the superintendent?

A. I have; I have said to him I wanted to see him upon this special business, and I should have crowded the thing more myself, but for the delicate position I occupied; I did not want them to think that I was crowding the thing to have them buy of us, because that was not my intention at all. I considered it within the line of my duty as manager to call attention to the fact that the Asylum was paying a higher price for its commodities than it ought to pay.

Q. What answer would the superintendent make to those suggestions by the auditing committee?

A. He rather assented to them, and agreed that whatever could be done in the way of saving the institution money that he should be glad to do it.

Q. Did you say that Mr. McQuaid and you had not seen any compliance with your suggestions heretofore?

A. No, sir.

Q. Have any other members of the board spoken together with you about it?

A. Yes, sir, Mr. Lowery has.

Q. Any other member of the board?

A. I think Mr. Rogers and I have talked the matter over.

Q. It has then been a matter of discussion between you?

A. Yes, sir; not in the board particularly, but among the members of the board when we have met together.

Q. Do I understand that Dr. Gray is himself a member of that board?

A. No, sir, he is not.

Q. Does he attend the meetings of the board?

A. Yes, sir, always.

Q. So that this subject has been talked up privately, apart from Dr. Gray?

A. Yes, sir.

Q. And it has not been discussed in the board?

A. It never has been discussed in particular, except this once; and when we rendered our report, Mr. McQuaid called upon me to give a little explanation of this thing; I did so, and the doctors seemed to be willing to change any thing that would be for the benefit of the institution.

Q. This was at some of the meetings?

A. Yes, sir.

Q. But to your knowledge no change has been made?

A. No, sir; they are buying just the same as they have been.

Q. Are any other members of the board of management business men?

A. There are several of them, but none of them in the mercantile line.

Q. That is to say none who would be likely to sell goods to the Asylum themselves?

A. No sir; I think Mr. Campbell has sometimes sold goods to the Asylum, goods from his cotton mill, which would be to as good advantage or better than they could get anywhere else, for he lets them have it at wholesale prices.

Q. I think you said that your own firm do not supply goods to the Asylum?

A. I stated that we sold very little.

Q. How has that been since you have been manager?

A. I have sold no more since I have been manager than I have during the years before; it has seemed to us that they have only purchased of our firm when they could not get certain things elsewhere; but apart from business matters we have always been upon a good standing, socially; the steward is a particular friend of ours.

Q. Socially your relations have been pleasant with the Asylum people?

A. Yes, sir, with the doctors, the superintendent and the steward.

Q. About what amount would the sales made by your establishment to the Asylum average from year to year before you were appointed?

A. Perhaps $500; not any more than that in a year.

Q. And you say that they are about the same now?

A. Yes, sir; no more than that.

Q. Why did not the board at once direct the steward to purchase at wholesale houses all such supplies as far as possible?

A. I cannot tell you.

Q. Have they held any meeting since this December meeting?

A. Yes, sir, I guess we have been there twice.

Q. And you say that Dr. Gray has always been present at such meetings?

A. Yes, sir.

Q. Do you suppose that any kind of delicacy of feeling toward Dr. Gray has prevented the bringing up of this subject?

A. It may be so.

Q. Do you think it likely that it has been so?

A. I should think very likely that the members of the board might, perhaps, feel rather diffident bringing up such a matter before Dr. Gray.

Q. As being, to a certain extent, a reflection upon his management?

A. Yes, sir.

Q. What is your opinion as to the duty of the board in the premises?

A. My opinion always has been that they should look after those matters a little closer, and see in regard to the purchases by the steward, and if they see at any time where they can make any recommendations that they think would be favorable to the institution, I think it is within their province to make such recommendations; they would naturally go to the superintendent, of course.

Q. But at present they do not interfere at all?

A. No, sir.

Q. And the matter is entirely in the hands of the superintendent and the steward?

A. Yes, sir.

Q. Would you recommend that the bills be inspected by the auditing committee before payment is made by the steward?

A. It seems to me as it should be so.

Q. Do you not think it would be wise to have a regular inspection and auditing of the bills monthly before their payment?

A. It certainly seems as if that would be a better plan.

Q. But would you recommend that such inspection should be done at a full meeting of the board, or by a sub-committee?

A. I should think that it would hardly be necessary to bring the board together for any thing of that kind; it might be left in the hands of an auditing committee, or a sub-committee, as you call it. And there should be a direction from the board that such bills should be audited once a month.

Q. Do you think it would be well that each bill should receive the approval of at least two or three members of the board?

A. Yes, sir, or of all the members of the board.

Q. And that some proper official should attach his signature or some other mark of approval before the bill is paid by the treasurer?

A. I should think that would be the best way.

Q. Who appoints the steward?

A. The superintendent.

Q. And the purchasing department is in the hands of the superindent and the steward?

A. Yes, sir.

Q. Do you, or do you not, think it would be wise to separate the purchasing department from the executive part or government of the institution, now in the hands of the superintendent?

A. I have always said that when I have talked on the subject; I have always expressed myself very freely that I thought these should

be separated ; that the duties of the superintendent should be to take charge of the medical department and of the humanitarian and sanitarian department, and that the business part — the farm, the garden, the purchasing of supplies, etc. — should be in the hands of another person who should not be responsible to him, the superintendent; I have always expressed myself freely in that way; I may not have said it to Dr. Gray, for he is very tender on that point, and I have avoided any thing that might precipitate a controversy with him on that subject.

Q. You say he is tender on that point; do you mean on the question of his supremacy in the institution?

A. He thinks, from what I have heard him say, that the institution can be better carried on and more efficiently managed by having the two under one head, and there is a fair chance for a difference of opinion upon that ; I am simply of opinion that there should be some one outside of the medical department to take care of the outside business of the institution.

Q. You then would suggest that a change should be made in the present system in that respect?

A. My idea is that there should be some one there to do the business of the institution ; I do not think it could be done by a person appointed to do that sort of business for the institution, but I think a person should be there on the spot to attend to all the business of the farm, etc. ; there are several hundred acres of land, cattle, horses, sheep, hogs, etc., poultry on the grounds, etc., to take care of ; in addition to that care of the farm and stock there is the purchasing of supplies, and I think that should be in the hands of a resident manager.

Q. How should such a manager be appointed in your opinion?

A. That I have never thought of, whether by the board of managers or otherwise ; I should think it could be made more efficiently if it were by appointment from the board of managers.

Q. As distinguished from an appointment by the superintendent?

A. Yes, sir.

Q. Would you then have such manager account only to the board for the expenditures of the institution?

A. My opinion would be that that would be the most direct way, that his responsibility should be immediately to the board, and that the board should report to the State.

Q. Have you any knowledge as to the prices paid for other articles supplied to the institution except those that have been previously enumerated by you?

A. I could not say, although I looked over a great many of the bills after the matter was brought up in the meeting of the board; I tried to use all the care I could ; I used to be in the dry goods business, so that I knew something about that, and I endeavored to be as conscientious as possible in looking over the bills.

Q. Are there a great many dry goods purchased by the Asylum?

A. Yes, sir.

Q. What can you say with reference to the prices paid for such goods?

A. In respect to the dry goods I should say the prices paid were fair as far as I could see; there are a great many ready-made clothing, sheets, etc., shirts, etc.

Q. Do I understand you that you do not feel competent to pass fully upon those goods?

A. No, sir.

Q. Do you know any thing about prices paid for medicines?

A. No, sir, I do not.

Q. Do you know where such articles are purchased?

A. I see that some of them are purchased in our own city, some in New York and some in Philadelphia.

Q. Do they appear to be principally purchased in Utica?

A. Most of them, I think, are purchased of our druggists in Utica; they are purchased of parties in whom I should have every confidence would do the fair thing if left to themselves, but it is supposed to be important for those buying them to know what they are worth, and what they can purchase them for in Utica, as compared with other places, of course.

Q. Would you not suppose that such articles as drugs could be better purchased at wholesale from the manufacturers or importers in New York or Philadelphia?

A. That would be the reasonable conclusion, and in investigating that matter, there was one very high priced drug that came to my attention; it was purchased of one of our druggists; it was so high priced that one day I went in and asked him: "What is the highest priced drug that you have in your store?" and he named this very thing. He was a man who thoroughly understood his business, and he did not know what I was getting at. I said "What is it worth?" and he gave me the price that was charged, and he told me at that time that there was not as much as five per cent made on that particular drug; it was something that costs $20 an ounce, or over, but I cannot recall the name of the drug.

Q. It has been stated that the State Board of Charities has requested from all the asylums and other charitable institutions subject to their visitations, an inventory of their property, etc. It has also been stated that the Utica Asylum, and the Asylum at Buffalo, are the only institutions in the State which have declined to furnish such inventories. Do you know whether that matter has been laid before your board?

A. It has not, to my knowledge; never while I have been in the board.

Q. Do you know of any request made of the board by the State Board of Charities for information, since you have been a member of the board?

A. No, sir; I do not.

Q. How long have you been in the board?

A. Nearly a year.

Q. Then if the board has made a refusal to grant such a request it has been prior to your term of office?

A. Yes, sir; I have never heard of any thing of that kind.

Q. Do you know whether Dr. Gray has laid any thing of that kind before the board for its action?

A. I never heard of any such question.

Q. Have you been present at all the meetings of the board?

A. All except one; I so reported here to Governor Cleveland; I think that was in the month of July; I was out of town at that time.

Q. Is this the first time that you have ever heard of any such request?

A. Yes, sir; I should think it was. And I think that the board of managers, as constituted at present, would be in favor of doing it in a moment if they were asked.

Q. Are there any suggestions you can make, other than those you have already made, which, in your judgment, would improve the management of the institution?

A. I think we have gone pretty thoroughly over the ground; that is all that has come under my observation that I would give an opinion upon intelligently. I think, in going over the building the other day you must be convinced that the inside of the institution is well taken care of, and that every thing is in good condition in a sanitary point of view.

Q. Are you aware that there are certain books kept in the institution called "injury books"?

A. No, sir; I have never heard name of them, that I recollect.

Q. Do you know of a book called "the case book," containing a history of all the cases?

A. Yes, sir.

Q. But you do not know that they use some small books on the wards that are called "injury books"?

A. No, sir.

[Injury Books — Exhibits Nos. 4 to 9, inclusive, shown to the witness.]

Q. Have you ever seen those books before?

A. No, sir; never.

By Mr. Haskell:

Q. Have you any idea in regard to the number of injuries to the patients in the institution?

A. It has only come to my knowledge from the attendants and doctors that there are very few, considering the number of patients in the Asylum; but of my own knowledge I could not say.

Q. Your attention has never been called to that feature of the institution at all?

A. No, sir.

Q. In regard to the gas bills of the institution have you ever investigated that matter?

A. I looked at the gas bills and they seemed to me to be pretty large, but perhaps it would be presumption on my part to state about that without possessing more knowledge than I have upon the subject.

Q. Are you aware that the original contract was made between the Insane Asylum, and the gas company when the mains were laid up at the Asylum?

A. I cannot say that I am.

Adjourned until to-morrow at 3 o'clock, P. M.

ROOM "B," NEW CAPITOL,
ALBANY, N. Y., *February* 27, 1884.

At 3:30 o'clock, P. M., the committee reconvened, and continued the investigation as under:

SAMUEL S. LOWERY,

Sworn and examined, testified as follows

By the CHAIRMAN:

Q. What is your age?
A. Fifty-three.
Q. And your residence?
A. Utica.
Q. Your business?
A. Manufacturer of woolen goods.
Q. Your relation to the Asylum?
A. Manager.
Q. When were you appointed?
A. I think my commission bears date the 23d of last March.
Q. And runs for three years?
A. Yes, sir.
Q. Please state what attention you have given to the management of the Asylum since your appointment?
A. I think I have met with the full board six or eight times; I have been up there with Mr. Winston and one or two others when the full board were not present; since this accident perhaps I have been four or five times; the books will show how many times I have been there — but since my appointment I think I have been there twelve or fifteen times.
Q. That is you think you have made twelve or fifteen visits to the Asylum during the past eleven months?
A. Yes, sir, about that number.
Q. How often does the board have its regular meetings?
A. They have regular meetings once a quarter; we meet oftener than that when something comes up; and any two members can call a meeting of the full board.
Q. As a matter of fact, how many meetings have there been since your appointment?
A. It would only be from memory, Mr. Chairman; I should say, meetings of the full board about five or six times, possibly six times; I may be mistaken, but I should say as many as that.
Q. Are there any standing committees of the board?
A. Yes, sir; an auditing committee, consisting of three, General McQuaid, Mr. Swan, and Mr. Winston.

Q. Any other standing committee?

A. I think the committee of Legislature is considered a standing committee; I think, I am not sure, there is such a committee appointed by the board.

Q. What are their duties?

A. Any thing necessary to be done here at Albany, any explanations to be made in regard to the annual report or in regard to the appropriations wanted; this committee is supposed to make it their business to see to it.

Q. Are there any other standing committees that you now recollect?

A. No, sir; there are special committees.

Q. Are special committees appointed from time to time?

A. Yes, sir; for purposes; there is a special committee now on water supply.

Q. And any other during your term of office?

A. I think not; there has been a special committee to see to the erection of an addition to a new building, and that committee is still in existence, I think.

Q. How often have you personally visited the wards of the institution?

A. I think I made a thorough inspection about five times during the last ten months; I have been through all the wards, I think; I understood that I passed through them all.

Q. How many wards are there in the institution?

A. I cannot tell exactly; I have forgotten.

Q. You are aware that the institution is divided into two departments, male and female?

A. Yes, sir.

Q. How many wards should you say there are in each department; into how many wards is each department divided, as near as you can judge?

A. My recollection would be about eight or nine in each department; there are three supervisors, and I think each supervisor has three departments to see to — that is, three supervisors in each of the departments, male and female.

Q. In addition to these thorough inspections you have referred to, have you visited the wards on any other occasions — that is, any of the wards?

A. I have.

Q. To what extent?

A. I was in two or three of the female wards not along ago with a view of finding out the condition of two or three patients to whom my attention had been called.

Q. How frequently have you made such partial visits to the wards?

A. About three times.

Q. Or visits to a portion of the wards?

A. I think three times since my appointment I have partially sits to the wards.

Q. Is there any regular visitation of the wards by the board of managers?

A. Yes, sir; the rules say that—my recollection is that the rules say that — we shall make a thorough examination or visitation during each quarterly meeting; that is my recollection; I may be mistaken; I know we have such a rule and we do that.

Q. Have you been present at a quarterly meeting during your incumbency; have you, in company with the board, made a thorough inspection?

A. Once we did.

Q. On what occasion?

A. I think it was in October when we were getting up our annual report.

Q. On that occasion you did not visit the wards?

A. Not thoroughly; we went through some of the wards and we looked at the books.

Q. Were there some members of the board who went through, as far as you know?

A. I do not think there were any that passed through the whole building at that time.

Q. Did any pass through a portion of the wards at that time?

A. Yes, sir.

Q. You have no knowledge to what extent?

A. No, sir.

Q. Did you know who they were?

A. Mr. D. V. Rogers, and my recollection is, that the chairman, Mr. Campbell, passed through the same ward.

Q. Is Dr. Gray present at the meetings of the board?

A. Yes, sir.

Q. Does he take part in the discussions?

A. He is obliged to take part with a view to giving information.

Q. Does the board ever hold meetings in executive session in which Dr. Gray is not present?

A. They never have, since my connection with it.

Q. Has your attention ever been called during your visits to the Asylum, or otherwise, to the character of the attendants as to their fitness for the place?

A. Upon two or three different occasions we have talkad over the fitness of attendants.

Q. What has been the nature of such discussions?

A. Upon one occasion the superintendent informed the board that a number of the attendants had sent him a paper asking for an increase of pay; I think we discussed the fitness of some of the attendants; of course we received most of our information from the doctor as to their fitness; we come very little in contact with the attendants in a conversational way.

Q. By whom are they appointed?

A. By the superintendent entirely; the by-laws say by the rec-

ommendation of the managers, but it is usually left with the superintendent.

Q Entirely with the superintendent?

A. Yes, sir; it is really under the management of the board.

Q. Upon this occasion of the request for an increase of salary, what did the board do?

A. After discussing the question, I think the majority of the board were of the opinion (that is referring more particularly to the male department) — I think the majority of the board decided that they were being paid relatively more than the females, and if there was to be a raise, the females should get more pay.

Q. What was Dr. Gray's opinion on that subject?

A. He seemed to coincide with our views; I think those views were advanced by the managers before, but the doctor took part in the discussion.

Q. What is your own opinion as to their pay?

A. My own opinion is that the pay is rather low.

Q. Do you know the hours of their employment?

A. They are employed — their time is hardly ever their own, except about once a week they get out.

Q. What are their daily hours of employment?

A. My recollection is they have to be up at six o'clock in the morning and are upon duty, I think, until nine o'clock; I would not swear positively to that; I have not posted myself fully as to how often the men are changed, but that is my recollection.

Q. Have the women attendants the same hours?

A. Yes, sir.

Q. What are the wages on the men's side for attendants?

A. From $23 to $28, I believe, per month.

Q. Do you mean $23 is the lowest amount paid?

A. With a new attendant — they start on that basis, and after having been there six months they are put up from $1 to $2 a month.

Q. Do you know how much a month they start on?

A. I think it is $23.

Q. And you say that is too low considering the hours and duties of the attendants?

A. I do.

Q. Did you express yourself when this subject was before you upon this petition?

A. I expressed myself that I thought the wages were low, but, as compared with the services rendered and pay received by the females, high enough, and until the wages of the female attendants were put up very materially, we ought not to raise the wages of the men, there was too much difference between the two, I thought, for the same services.

Q. Are you familiar with the duties of such attendants?

A. Yes, sir.

Q. Please state what they are requested to do?

A. Those attendants are required to see to the patients, wash them,

comb their hair and keep them in proper shape, watch and care for them during the day, and see that they are not allowed to injure themselves in any way.

Q. Are not the attendants kept there for a long while, or are there occasional or frequent changes?

A. Some attendants are kept for a long time; if after a while the attendant does not seem to be suited to the work, a change is made, and changes are made very often because of that; and a great many attendants are not calculated for that work; attendants stay five or six years frequently.

Q. How many attendants are in the house altogether?

A. About fifty, I think, including supervisors.

Q. And including both departments, male and female?

A. Yes, I think there is about one attendant to eight patients on an average.

Q. How many physicians are there?

A. Five, I think, including the pathologist, Dr. Beeke.

Q. What is the salary of the physicians?

A. I do not know exactly what the assistants now get; the doctor rather regulates that; I believe it runs from $1,200 to $2,000 per year; I think the superintendent regulates the salary of the assistant physician, that is, he recommends, and the board confirms those recommendations as to the services of the physicians and their remuneration; the doctor himself—I think his salary is $5,000.

Q. Do you know what the duties of the physicians are, and the nature and extent of their services?

A. The physicians have to attend on their different departments, and they are expected at all hours to be ready to respond to any call, even in the night; they are expected to respond to the call of the supervisor in case there is any necessity for them to get up; they all must reside in the Asylum.

Q. Do you know how much attention Dr. Gray personally gives to the patients?

A. I do not know, but I am under the impression that he cannot personally devote a very great deal of attention to the patients personally.

Q. For what reason?

A. For the reason of having too much work to see to.

Q. Of what nature?

A. Responding to parties who come there to call and see patients; it requires pretty much all his time in his own office.

Q. Do you think that those duties take most of his time?

A. I think they are calculated to take most of his time; I think; the doctor knows what is going on in the Asylum from the reports of his assistants.

Q. So it is your belief that he does not personally give much attention to the patients themselves?

A. It is my belief that he cannot personally give very much attention to patients from the nature of his engagements.

Q. How often do you suppose he goes upon the wards of the institution?

A. That would be a question I could not answer; he gives the board to understand that he frequently goes upon the wards, but I do not know of my own knowledge.

Q. What do you understand by frequently?

A. Once in two or three weeks; I am under the impression that he trusts very much to his assistants for the attention to the patients — that is, his knowledge of the condition of the patients.

Q. Are you aware that he has sometimes been away from the institution on private and professional employment?

A. I am not aware that he has been away on private and professional callings, of my own knowledge.

Q. Have you heard that he had been away as an expert witness?

A. Yes, sir.

Q. In the case of Mrs. Fillmore's will, at Buffalo, for instance?

A. Yes, sir; I so understood it.

Q. Are you aware that he regularly lectures, during the winter, at Bellevue Hospital Medical College in the city of New York?

A. I have understood he does.

Q. How much, during the term of your office, has he been away from the institution?

A. My impression would be five or six weeks; I think he was at Newport last year, at Newport six weeks; it is fair to state, Mr. Howe, that the board understood his health required his absence at that time.

Q. Would you regard his acceptance of fees for private professional employment, which requires his absence from the institution, to be an interruption of his duties at the institution?

A. Yes, sir; if it required the interruption of his duties at the institution I think the board would consider it wrong; I would.

Q. Would you consider it wise for Dr. Gray to refrain from accepting such outside professional employment if the effect of it were to take him away from the institution?

A. I think it would be wise for him to refrain from taking such employment, if that were the result — especially if the institution required his services, but I know there have been times when the doctor has been compelled to go away by the Governor and by the State authorities, and the institution might perhaps suffer in consequence of these orders, but the State also feels that they have the right to command the doctor's services, and I believe they have usually also recognized the right of the State to pay him extra for such services, and on some occasions I have voted in the Senate myself to allow extra compensation, because it was the judgment of the State officers that he ought to have it.

Q. But that does not apply to his employment in private cases?

A. No, sir; I believe that the head of a great institution like that — the head of the medical department — should be required to devote his entire attention to that department; I have a very high opinion of

Doctor Gray in some respects; I think he is a man of wonderful executive ability, and it seems to me that the State is fortunate in having him at the head of the medical department of that institution.

Q. Do you know what other duties occupy his time besides that, irrespective of visitors, hearing their statements and consultations with physicians in charge of the hospital?

A. Yes, sir.

Q. For example, what other duties?

A. His duties as superintendent of the institution gives him entire charge of the farm, the running of the farm and the purchasing of supplies for the institution — in a word, he has charge of the financial and the medical department, subject to the orders of the board of managers.

Q. To what extent does he purchase the supplies for the institution?

A. He has a steward who makes the purchases by his orders.

Q. Where are the purchases generally made?

A. Mostly in Utica — stock and animals — beef is bought outside of Utica, but the principal supplies of the Asylum, groceries, etc., I think it is fair to say are purchased in Utica.

Q. Are they purchased at wholesale?

A. Not all of them.

Q. Are they purchased at wholesale or retail?

A. Some of them are purchased at wholesale stores, and some at retail stores.

Q. Where are the groceries purchased?

A. I think Butler & Hamilton supply the groceries.

Q. Does the Asylum have any understanding with that firm in regard to prices?

A. Yes, sir.

Q. Please state what?

A. Oh, certain things; the Asylum makes the purchase, or the goods are sold to the Asylum by adding five per cent to invoice prices; that is an understanding between the managers of the Asylum and Butler & Hamilton.

Q. What articles does that understanding cover?

A. I never saw the contract; I have seen a bill, and my best recollection is, that it included coffees, teas, spices, and such things.

Q. Is it regulated by any agreement in writing?

A. I so understand it, but I have never seen the agreement.

Q. In whose custody would the agreement be?

A. I should think it would be with the treasurer, for he keeps most of the papers of the institution.

Q. Does the board audit the bills of Butler & Hamilton?

A. The auditing committee look them over, and if they are satisfied, they submit them to the board.

Q. Do they check them over before they are paid?

A. No, sir; not always, not before they are paid.

Q. Or do they compare them with the checks for which they are vouchers?

A. They are supposed to do so.

Q. What is the usual method of auditing such bills?

A. The ordinary method is by looking over the bills after they have been paid; I have heard the reasons for that stated why —

Q. Please state your opinion of this method or practice of auditing them after the bills are paid?

A. I took occasion to raise the question that they ought to be audited before being paid, and the explanation was that they could not always get the committee together, and the people who sold goods could not wait two or three months for their pay; that they were dealing with honorable merchants who would make any thing right that was discovered to be wrong, and that it would not be practicable to audit the bills before they were paid.

Q. Are you connected with any other institution as a director or manager?

A. I am connected with the Utica Mechanics' Association, and I have been manager and president for the last sixteen or seventeen years, and president five or six years.

Q. What method of auditing bills is there practiced?

A. We always insist upon having the bills audited before being paid either by the finance committee or otherwise; I think that it would be well to have such a practice in this institution.

Q. Has there been any inconvenience resulting to those associations from practicing that method you refer to?

A. No, sir.

Q. Is it, in your opinion, a better way of examining the accounts of the institution by the bills being compared by some member thereof prior to payment?

A. Yes.

Q. Would you recommend that there should be a change in that respect at the Asylum; has such recommendation been made by you to the board?

A. My recollection is that I was the first to suggest that we should audit the bills; possibly some other manager may have first mentioned it.

Q. But you say that it was objected to as being practically inconvenient?

A. That was the reason given for having the bills audited in that way, and I was somewhat surprised that the bills were paid in that way before audit.

Q. Who raised that objection?

A. I cannot say positively, but I think it was a member of the auditing committee.

Q. Was Dr. Gray present during the discussion?

A. Yes, sir.

Q. What were his views on the subject?

A. I think he did not take part in the discussion.

Q. Have you had reason to criticise any bills paid by the institution since your membership?

A. Yes, sir.

Q. What bills have you ever criticised?

A. I criticised a bill that was shown me of Butler & Hamilton's.

Q. Have you had any occasion to criticise the bills of any other firm or dealer?

A. I think not.

Q. Have you examined the bills of any other firm or dealer?

A. I think not.

Q. Can you give the names of any other dealer from whom the Asylum purchased their supplies?

A. Yes, sir.

Q. Please name several?

A. They made some purchases at Head & Winston, purchases of flour; occasionally at Mr. Owen's, of Utica, on Liberty street; there are about one hundred and twenty-four names in Utica with whom the Asylum trades.

Q. Is Mr. Winston, of Head & Winston, a member of the board?

A. Yes, sir.

Q. To what extent are purchases made of his establishment?

A. I think to a very small extent only.

Q. Have you any idea to what amount?

A. I have not.

Q. Do you know whether purchases are made at the establishments of any other members of the board?

A. I think I should say not; I think Mr. Winston is the only manager who is in the business where supplies could be furnished to the Asylum.

Q. Have you ever furnished any supplies to the Asylum?

A. I have sold small bills, $20 or $25, to the Asylum.

Q. But since your membership in the board?

A. No, sir.

Q. What is your business?

A. Manufacturer of underwear and knit goods.

Q. To return to the bill of Butler & Hamilton; what criticism have you made on that bill?

A. My criticism was from information gained from a member of the auditing committee.

Q. What member?

A. Mr. Winston, who is supposed to be an expert in the knowledge of that kind of goods.

Q. Did you then examine the bill with him?

A. Yes, sir.

Q. Do you know what time the bill covered?

A. I think three months, and I think it was about $4,000 in amount.

Q. Was it three or four months occurring during your membership of the board?

A. I think this bill began before I became a member of the bo ard;

it was a bill that has been audited within a few months; I think it was five or six months since my attention was called to it.

Q. The two bills now shown you (Exhibits 10, 11) are for a period of six months, showing a total of about $4,000; is that to what you refer? Were those the accounts to which you referred?

A. Without having marked them my impression would be that they are.

Q. From your own observations of these bills what conclusion have you reached as to the prices charged the Asylum?

A. From my own observation I was not able to reach a correct conclusion.

Q. But from the information given you by Mr. Winston, what was your conclusion of the prices charged?

A. That they might have been duplicated for from $200 to $250 lsss from the aggregate of the two bills of $4,000, at some other establishments; I arrived at my conclusions from the information received from Mr. Winston, whom I considered an exper in that line of—

Q. When was your attention first called to these bills?

A. I think about three months ago, yet I must say it is only from recollection.

Q. Was it at a meeting of the board or privately?

A. Privately.

Q. What steps did you take in reference to the matter?

A. I advised that Mr. Winston call the attention of the full board to the bill at our next meeting — at our next meeting to be held.

Q. Was such advice followed?

A. Mr. Winston mentioned something at the next meeting of the board that were charged too much for in his opinion.

Q. What action did the board take upon this statement?

A. The board passed a resolution instructing the auditing committee to take the whole matter of purchases into consideration and show to the next meeting of the board — the next full meeting — any changes which they, in their judgment, may think best.

Q. At what meeting was that when this discussion was had?

A. My impression would be that it was in September last — I may be mistaken; I think it was not at the regular quarterly meeting; I think it was at a special meeting that was called.

Q. Was Dr. Gray present at such discussion?

A. He was.

Q. Did he make any remarks upon the subject?

A. I think he did.

Q. Can you recollect what position he took in the matter?

A. The doctor's position is that by buying some things in small quantities they have them fresh at the Asylum; such as roasted coffee and some things which, perhaps, are perishable if bought in large quantities; a portion of the commodities might spoil before being used up; and that it was better for the patients; and that we lost no money in buying some things in small quantities, coffee, par-

ticularly, he mentioned; some of us thought that it might be purchased at first hand in larger quantities, and we favored competition among dealers, allowing dealers to compete for the sale of flour, for instance, which we buy in large quantities, a hundred barrels a month, I think, is about our consumption. It was the judgment of some of the members of the board that we could save money by allowing competition; I think as soon as that discussion that the purchases have been distributed more than they were.

Q. If this meeting was September, the board has held several meetings since?

A. Yes, sir.

Q. Has the subject been renewed at any of those meetings?

A. No, sir; it is in the hands of the auditing committee; the chairman of that committee has been away some time, and is now away I think; was quite ill part of the time; that is General McQuaid, and we are waiting for that report.

Q. Is it not the general opinion of the board that a change would be desirable?

A. The members did not all express their opinion, but I think that every member of the board is very desirous of saving money in purchases; I think the majority will be guided by the recommendation of the auditing committee as to any change that they may think best to be made.

Q. Have the members of the board any personal knowledge from time to time connected with the purchasing of supplies?

A. Not necessarily.

Q. Who makes these purchases usually?

A. The steward, Dr. Dryer.

Q. Is there any supervision whatever by the board over those purchases, or is it left to him?

A. It is left to him through the superintendent.

Q. Who appoints the steward?

A. The board of managers on the recommendation of the superintendent.

Q. Has Dr. Gray at any time during the membership on the board made any recommendations concerning any change or improvement in the business and domestic management of the institution as distinguished from the scientific management?

A. I have no recollection of any.

Q. Have you any information as to a request made of your board by the State Board of Charities for information concerning the property of the institution?

A. I have information that such a request was made three or four years ago; I have seen a blank which they sent up to the Asylum.

Q. What was the nature of the information desired by them?

A. The nature of the information was that we should classify all purchases, and it seems to me that they wanted to know exactly what each patient was paying, who he was, and the names of all the patients and all that; I was not a member of the board at the time.

Q. Did they make any inquiries as to the manner of purchasing supplies?

A. Not since my time.

Q. On this occasion, did the information asked for cover that point?

A. Yes, sir; I read the blank the other day that covered those matters.

Q. As to the purchase of supplies?

A. Yes, sir; very fully.

Q. What kind of supplies and how much?

A. It was very full, I noticed, very full indeed.

Q. What answer was made by the institution to such inquiries? Was the information given?

A. No, sir; I believe not.

Q. Do you know for what reason it was withheld?

A. One of the reasons given, or one of the reasons is, as I understand it, that it was not considered wise to have in a public document the names of parties who were so afflicted; that there was some information asked for which it would not be for the best interest of the institution to have known publicly.

Q. Does that apply to the inquiries as to the purchasing of supplies?

A. I think not.

Q. Do you think such information should be given?

A. I think it would be well enough to give it.

Q. Are you willing that the board should now give it to the State Board of Charities?

A. I am willing that the board should give any information to any party authorized to receive it; any information which will not have a tendency to injure the Asylum or the patients intrusted to the care of the management, or to wound the feelings of the relatives.

Q. Are you willing to give to the State Board of Charities full information concerning the matter of purchase and supplies for the institution their cost and character?

A. Speaking for myself I should be perfectly willing; I do not think there would be any objection to that.

Q. Are you aware that such information is generally given by other institutions upon the request of the State Board of Charities?

A. I have been so informed that some of the charitable institutions have furnished such information; it is only by hearsay.

Q. Are you aware that it has been publicly stated that the only two institutions in the State which have declined to answer any such inquiries are the State Lunatic Asylum at Utica, and the Asylum at Buffalo?

A. I have heard it so stated.

Q. Have you any reason to doubt the correctness of that statement?

A. No, sir.

Q. Can you suggest any reason why such information should not be given by the Utica Asylum?

A. I can see no reason for not giving the information concerning the purchase of supplies.

Q. Has this matter been a subject of discussion with any of the members of the board since your membership of it?

A. It has been casually alluded to since this investigation, but has not been discussed; it was a thing that came up long before my connection with the Asylum.

Q. Do you know whether the inquiry has been repeated by the State Board of Charities to the Asylum since your membership?

A. Not to my own knowledge.

Q. Do you know what the views of Dr. Gray are on the subject?

A. I think he is opposed to giving all the information that is asked for; that is my impression.

Q. Does that objection extend to the matter of supplies?

A. I think not; of course he can state that for himself better than I can.

Q. Have you had any conversation with the doctor upon the subject?

A. No, sir; not directly.

Q. Have you been informed as to his views on the subject?

A. Partially.

Q. By whom?

A. Some members of the board.

Q. Will you name them?

A. It has been discussed informally by Senator Campbell, Mr. Swan, and I think I read a letter that Senator Campbell wrote to the chairman of the State Board of Charities, giving his reasons for declining to give the information required; the reasons of the board for declining it; the date of that letter I am not able to give, but I think it was about 1882, possibly 1881; we have a copy of the letter at the Asylum.

Q. Have you made any examination of the books and records kept in the Asylum concerning the treatment of the cases?

A. Yes, sir.

Q. To what extent have you familiarized yourself with it?

A. Not to any great extent; I have read a number of cases over to see how the doctors keep the history of the cases, from the entrance of a patient until he is discharged, perhaps clear through half a dozen cases, with a view of getting that information.

Q. Do you know certain books known as "injury books?"

A. I think there are such books.

Q. Small books kept on the wards by the supervisors?

A. There are such books, and I have seen them, but I have not examined them with any care.

By Mr. HASKELL.

Q. As I understand it you have not given any personal attention to the care of the patients in the institution?

A. No more than as my attention has been called to patients by their friends, I sometimes look them up and talk with them; of course casually passing through, we cannot make any prolonged examination.

Q. You make no personal examination yourself?

A. Oh yes, I have been through a great many times during my membership.

Q. With a view of ascertaining how the members were treated?

A. Yes, sir; and with a view of seeing how the patients are cared for generally; how the beds are and the rooms, etc.; how many patients are confined and all that, but it is impossible for eight or nine gentlemen who have businesses — a daily business — to give very much attention to a public institution of that kind; we know by hearsay, frequently, what is going on.

Q. When did you learn of the injury to Mr. Hughes?

A. I think I learned of it the next day.

Q. After he was injured, or after he died?

A. My impression is that he was dead before I heard of it; some of the managers were advised immediately; I was not, and I am not sure but I was out of town, in New York city.

Q. And you did not learn of the case until after the death?

A. No, sir.

Q. What, if any, action was taken by you as a member of the board of managers in reference to the case?

A. I telephoned Dr. Gray and I went up and made some inquiries, I think, in the afternoon of the same day; I asked Dr. Gray to come down street and meet me at Mr. Winston's office; I insisted that these three men must be immediately discharged from the Asylum.

Q. You so insisted?

A. Yes, sir; and Mr. Winston also insisted so, and I presume other of the managers; it was an informal meeting, composed of Dr. Gray, Mr. Winston and myself.

Q. And what day was that with reference to the death of Mr. Hughes?

A. It may have been a couple of days after the death of Mr. Hughes; I am not sure, but very soon.

Q. How long was it before the men were discharged?

A. They were discharged in the afternoon of that day, on the meeting in Mr. Winston's office; my present impression is that they held their places until after the result of the coroner's investigation and the day after that result — the day that we first knew of the findings of the coroner's jury, that this informal meeting was held to which I have referred, and then the men were discharged.

Q. When do you now say this meeting was held with reference to your being informed of knowing of the injury to Mr. Hughes?

A. My recollection is that it was held the next day after the finding of the coroner's jury.

Q. You said it was a few days after his death?

A. Yes, sir; I think I heard of his death immediately after the newspaper came out.

Q. Then I ask you what action did you take as a member of the board of managers, on learning of the death of Mr. Hughes?

A. With one or two of the other managers I attended to the sittings of the coroner's jury and listened to the evidence; and I think I ventured to ask the coroner to let me say a word upon one occasion, and I stated the position of the managers.

Q. Did you go to the Asylum with reference to this matter yourself?

A. Yes, sir.

Q. Did you make any inquiries yourself with regard to that matter?

A. Yes, sir.

Q. Of the attendants?

A. Yes, sir; I inquired of them.

Q. Before the inquest?

A. Yes, sir; and during that time.

Q. Do you know why these three men were allowed to remain in the institution as attendants from the date of the injury to Mr. Hughes until after the verdict of the coroner's jury?

A. I should give as reason that there was no positive evidence that those men had inflicted the injuries until the sitting of the coroner's jury, or until they confessed; one man, Brown, confessed himself that he struck the man — fell upon him — that was the first we knew that they had inflicted the injuries.

Q. Are you aware that Mr. Brown informed the supervisor of that department and one of the physicians within two days after the occurrence to Mr. Hughes, and his being injured, that he—Brown — had struck the patient?

A. My recollection is that I heard Mr. Brown's evidence that he said so.

Q. You do not know it as a fact?

A. No.

Q. And that is the only reason that you know how that these men were retained in the institution as long as they were, is that there was no positive evidence of their having done any thing out of the way?

A. That is the only reason.

Q. Now you say that, at the meeting at Mr. Winston's office, you insisted upon the discharge of these men — was there any opposition?

A. No, sir; no opposition there.

Q. Dr. Gray did not take any position against the matter?

A. No, sir; I think he told me then that their pay-roll was made out.

Q. Was there any meeting of the board called at the time of the injuries to Mr. Hughes, or immediately upon his death, to consider the matter; or was there any such meeting?

A. My impression is that there was.

Q. Did you attend that?

A. I think I was not at home; the record will show; I think that there was a meeting called immediately; if it was not called, there was an informal meeting of the managers.

Q. And not being present, of course you do not know what action was taken?

A. No, sir, I do not.

By Mr. Olin:

Q. This meeting at Mr. Winston's office was where you had the first conversation with Dr. Gray about the discharge of these men — Brown, Bills and Weir?

A. Yes, sir, the first conversation; I may have outlined to the doctor my views before seeing him; I think possibly I did.

Q. You inquired of him why he did not discharge them, did you not?

A. No, sir, I did not inquire; I said, "these men must be discharged promptly; they have violated the rules of the institution, and must be discharged at once."

Q. Did he make any claim that they ought to stay, or explain why they had stayed since the occurrence?

A. No, sir; my recollection is that the doctor said that their pay-roll was all made out; I think the only reason why these men were kept so long after the death of Mr. Hughes was that there was no positive evidence until after the finding of the coroner's jury, or after they had given evidence themselves.

Q. Do you think the doctor stated that as a reason?

A. I don't know; I never heard it.

Q. You never heard the doctor state any reason why he kept them there?

A. No, sir.

By Mr. Haskell:

Q. And I understand you did not inquire of the doctor why he had kept them as long as he had?

A. No.

Q. Were you surprised at their being retained as long as they were?

A. No, sir; I thought it was fair to them.

Q. Fair to who — the attendants or the patients?

A. I think it was fair to the attendants to wait until an investigation was made; I understood the attendants denied having struck the man until they were put under oath, then they confessed to striking Mr. Hughes, and until we had positive evidence of that I did not think we would be justified in discharging them.

By Mr. Rice:

Q. You received no pay as a member of the institution?

A. No, sir.

Q. How was your appointment brought about, upon whose recommendation did you go?

A. I do not know; I asked Governor Cleveland's private secretary while I was calling upon the Governor to thank him for the courtesy of my appointment; I certainly did not want the position, and I certainly knew of no friends who had asked the Governor to appoint me; I asked the private secretary of the Governor and he told me that I was indebted to the Governor; it was a surprise to me, being a pretty strong Republican.

Q. I supposed that your name had been recommended to the Governor?

A. I do not know that it ever was.

Q. You have no knowledge of that kind?

A. No, sir; I asked Senator Kernan if he recommended me, and he said no; the first intimation that I had of the appointment was through the newspaper when I saw that I had been appointed; that was the first intelligence I had about it.

CHARLES W. PILGRIM,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?

A. Twenty-nine.

Q. What is your residence, apart from the Asylum?

A. I have sisters living in Jersey City, but I have no other residence.

Q. What is your position in the Asylum?

A. I am now acting second assistant physician.

Q. What other positions have you held there?

A. I have been fourth assistant, and I am really third now; the second assistant physician, Dr. Bloomer, is absent in Europe.

Q. How long have you been connected with the institution?

A. Since the 1st of December, 1882.

Q. What are your present duties?

A. I now have charge of the male side of the house.

Q. Please state more specifically the nature of your daily duties?

A. I generally begin my rounds about 10 o'clock in the morning, and I go through the house at least once a day and generally twice; after finishing the rounds, some time during the morning, I then attend to the visitors — the friends of the patients, the admitting of patients and the writing of letters about the condition of the patients, etc., until about 4 o'clock, then I generally go into the wards again, although I do not always go on twice a day, but as a general thing I do.

Q. With which department are you specially connected?

A. The men's department.

Q. And you have general charge at present of the male wards of the institution?

A. Yes, sir.

Q. How many in number?

A. Twelve.

Q. And containing how many patients?

A. Three hundred and thirty-four, I think.

Q. How frequently are you called to attend the patients at night?

A. That varies of course; sometimes I have as many as three calls a night, or four; I do not know but I have had more than that; the night watchman always reports either to Doctor Backus or myself at ten o'clock; night watchman begins his work at eight o'clock, and about ten o'clock he comes and reports the condition of the patients and those who are noisy or who need special attention.

Q. Does he report verbally?

A. Yes, sir.

Q. Do you make any memorandum of that?

A. No, sir; he keeps a book of his own, and then, after that, I am frequently called two or three times, between twelve o'clock at night and morning.

Q. What is your practice upon receiving such calls, do you visit the patient?

A. If it is necessary, yes, sir.

Q. If it is not necessary, how is it?

A. If not, I send medicine; if they are merely noisy or restless.

Q. How do you determine as to the necessity?

A. I keep thoroughly posted as to the condition of the patients; I have to make such frequent visits that I have a very good knowledge of what condition they are in.

Q. What is your observation concerning the character of the attendants, as to their fitness and adaptability to their positions?

A. As a general thing, I think they perform their duties satisfactorily; of course occasionally we have one who does not.

Q. What is the pay of the attendants?

A. I think the male attendants begin at $20 a month, the females at $12.

Q. And what are their hours?

A. They are supposed to be on duty all the time.

Q. From what time in the morning until what time at night?

A. It varies at different seasons of course; in the summer I think they get up about half-past five, and they have two evenings off a week and a half a day a month and every third Sunday, but they are there in the wards continually with that exception, unless they may be out by special permission.

Q. Do you think that the average attendants of those grades are men who are sufficiently intelligent and capable of performing their duties?

A. I think the majority are.

Q. Do you think that an increase in pay as a diminution in the hours of work would have a tendency to produce a better grade of men for such purposes?

A. I think an increase of pay would; I think that if more and better inducements were offered that we could get a better class of attendants.

Q. Do you think a better class would be desirable?

A. Well with few exceptions we have very good attendants.

Q. What knowledge have you of the case of Mr. Hughes, who was injured there?

A. I did not see him until after he was injured.

Q. Where did you then see him?

A. On the fourth ward.

Q. What was his condition?

A. He was sitting in a chair with a strap around him; and his pulse was weak.

Q. Who was there with him?

A. Attendants Brown and Weir.

Q. Was any other physician present?

A. Dr. Brush and Dr. Backus followed me in; they were a few steps behind me; not more than a second or two.

Q. What did you do about it?

A. We were all together, and I do not know that I can tell you what I did personally; we had the strap removed, and he was taken into an attendant's room which was quite near, and his shirts were lifted and we discovered the nature of his injuries; Dr. Backus reported at first at the office, and Dr. Brush and I went in immediately, or just as soon as Dr. Gray was informed.

Q. What opinion did you form then as to the cause of the injuries and as to how the accident happened?

A. I did not form any opinion immediately; I asked Weir: "How did this happen?" and he replied, "I don't know, doctor;" and I made no further inquiry then at that time, because the patient's condition was such that it demanded our instant attention and I thought the inquiry could wait until we had done what we could to relieve Mr. Hughes.

Q. What is your present opinion as to the cause of the injury?

A. I have no further knowledge than that obtained by the coroner's jury.

Q. Have you conversed with the attendants about it?

A. I did; and the conversation that I had with them that afternoon was reduced to writing by a stenographer, and it was put in as evidence before the coroner's jury.

Q. What impression did the story told by the attendants make upon you as to its probable truthfulness?

A. At the time?

Q. Yes.

A. Well, an explanation was not necessary at the time.

Q. Did you suspect any of them of manufacturing an untruthful account of the occurrence?

A. I suspected that they had not told all.

Q. Did you subsequently learn any thing to confirm that impression?

A. Yes, sir; that they did not tell me all at that examination of Saturday afternoon; the examination which was afterward conducted by Dr. Gray revealed some additional facts, and the same things were also told me by attendant Brown afterward; either afterward or before, I cannot remember when it was.

Q. What is your present impression as to how the injuries could have occurred?

A. I think they occurred in a struggle between the patient and an attendant or attendants.

Q. Do you, or do you not, believe that the patient was struck by one or more of the attendants at that time?

A. Yes, sir; I do believe it; and they have so testified.

Q. And your present belief is that the injuries which led to the death of Mr. Hughes were caused in part by such blows?

A. No, sir; I do not know that the blows had any thing to do with it.

Q. Do you still believe that the injuries to his ribs were caused by the fall?

A. Yes, sir.

Q. How about the injuries to the jaw?

A. I cannot account for the injuries to the jaw, unless his face struck the chair as he fell; it might have been produced by a blow, although judging from the testimony given in regard to the blows, I do not think they were sufficient to produce it; but as to the ribs, I do not think they could have been produced by a blow.

By Mr. Rice:

Q. Could they have been the result of a kick?

A. I do not think they could have, but I think they could have been caused by an attendant falling upon him; of course a fractured rib might be occasioned by a kick, but one kick would not have fractured so many ribs.

Q. In your visits to the wards have you ever observed patients with bruises or other injuries?

A. Yes, sir.

Q. Are those a matter of frequent occurrence?

A. Well, not frequent, taking into consideration the number of patients we have, and the character of the patients.

Q. Is it not a somewhat usual occurrence?

A. No, sir; on an average, the highest number of black eyes in the past five years has been twenty-five in any one year, and they have been caused by blows from patients in a great majority of instances.

Q. How do you know they have been blows from patients?
A. From investigation at the time.
Q. What kind of investigation did you make?
A. I inquired of the attendants and the patient who was so injured, and also of the patient who is accused of having struck the blow, and of any patient who may have seen it.
Q. Do the patients at times charge that they have been struck by an attendant?
A. Yes, sir.
Q. What weight do you give to such charges?
A. It depends upon the mental condition of the patient; some patients are reliable while others are wholly untrustworthy.
Q. Have you ever received such statements that you doubted the reliability of?
A. Yes, sir.
Q. And what have you done in such instances? Have you ever received such statements from patients that you did rely on?
A. Yes, sir.
Q. And what have you done in cases of that kind?
A. The attendant has been discharged.
Q. How many attendants have been so discharged within your present recollection during the time you have been there?
A. Up to the first of October I was on the female side of the house, and of course they are not so frequent there; I can now only recall one instance on the female side; I have only been on the male side of the institution since the first of October.
Q. Have you had any complaints on the female side?
A. Yes, sir, there have been complaints.
Q. From patients as to bad treatment by attendants?
A. Yes, sir.
Q. What has been the nature of the complaints on that side?
A. Well, they are various, such as taking hold of them by the wrists and causing them black and blue marks, and things of that kind.
Q. Do they ever complain that they have been scratched by attendants?
A. Yes, sir; but the attendants are scratched much more frequently than the patients.
Q. Are there women attendants on the female side of the institution?
A. Yes, sir; I have seen much more abuse given by patients to attendants and physicians than I have ever seen given by attendants to patients.
Q. What are the ages of the attendants on the female side; about how do they run?
A. The majority are above twenty.
Q. Can you state how they run on the male side as to age?
A. I think the majority are about twenty-five on that side.
Q. Have you ever had occasion to inquire as to black eyes or other

injuries, and found that the testimony to be obtained was that of attendants only?

A. Usually there is somebody who has seen it.

Q. And in that case you always ask the patient?

A. Yes, sir.

Q. How is it about reports made by attendants when a patient is found in bed in the morning with a black eye, or when an attendant said the black eye was caused by tumbling out of bed? Do you know of any such reports being made?

A. Yes, sir.

Q. What do you do in those cases?

A. Those reports are concerning patients who are too much demented to know any thing about their injuries, feeble and demented patients; if the patient is in a condition to know, it is always investigated, but the majority of those cases are of old and feeble patients, so demented that they cannot answer any thing; patients who sit around all day with arms folded and head down, who do not pay attention to any thing, and with such patients it would be very difficult to investigate a case of that kind.

Q. Might not injuries be caused in such cases by the attendants striking them?

A. They might, but I cannot conceive of any reason for striking a patient in that condition.

Q. From your knowledge of attendants, do you think it is unlikely?

A. Yes, sir.

Q. Have you ever had occasion to suspect an attendant of striking a patient?

A. Yes, sir; one case on the female side I remember which occurred last summer; that is the only one I now recollect aside from the case of Mr. Hughes.

Q. How often do you see the injury books?

A. We have something now which takes the place of the injury books — a morning report which gives the statistics. The attendants who are to be out; the patients who are found wet, or dirty during the night; the accident which may have occurred, and the repairs that are desired upon those wards.

Q. How long has that series of reports been made?

A. More than a year; ever since I have been there.

Q. Prior to that time, did you obtain your knowledge as to the cause of such injuries from the attendants personally, or from that book?

A. Ever since I have been there these reports have been in vogue.

Q. Have you any suggestions to offer or recommendations to make which in your judgment would improve the condition of affairs at the Asylum in any respect?

A. No, sir; I don't know that I have, except that already spoken of as to the amount of compensation, etc.

Q. How often does Dr. Gray visit the wards?

A. I don't know as I could tell you.

Q. How often have you seen him on the wards during the time you have been connected with the institution?

A. I do not think I can answer that question satisfactorily, because he goes on alone at times, and I have seen him on the wards when I have not been with him, and on some occasions I have gone on to the wards to see him.

Q. Does he make any regular and thorough visitation at fixed times?

A. I do not think so; he has gone through the whole of the house with me.

Q. But he makes no visits at regular periods?

A. Not that I know of, but he is consulted daily a number of times in regard to patients, and he has a thorough knowledge of them in every way.

Q. How long has Dr. Gray been absent during your connection with the Asylum?

A. I do not know that I could tell that.

Q. Would you notice his absence if he were away?

A. Yes, sir; but I could not tell how many times he was absent during the summer, and he has been absent three or four times since for a short period; there is a record kept of all that, which you could obtain; we have a "weather book," showing the absences of the doctors, who goes away and what for, and of visitors at the Asylum — visitors of importance — such as the State Commissioner in Lunacy, etc.; that would be more reliable than any information I can give you.

Q. How often does the State Commissioner in Lunacy visit the Asylum?

A. Three or four times a year.

Q. How extensive an investigation does he make?

A. He visits all the wards during the night and day; he sees any patients who have complaints to make; I think his visits are very thorough.

Q. Do you know whether he has suggested any changes or improvements?

A. I do not; his last year's report I have not read thoroughly, I have glanced over it, I do not think he recommends any thing in regard to the Utica Asylum.

Q. Do you know whether the State Board of Charities have made any examination of the Asylum during your term of office?

A. Yes, sir; some of the members have been there.

Q. Have they gone over the wards?

A. Yes, sir; I think so.

Q. Do you know any thing about the method of purchasing medicines for the institution?

A. No, sir.

Q. How do you obtain such drugs as you may need?

A. I suppose they are purchased by the steward; I do not know;

the apothecary attends to that, he makes out a list monthly, and presents it to Dr. Gray for his approval.

Q. What is his name?

A. John M. Semple; I know very little about the financial management of the institution.

Q. Do you ever see any of the managers there in the institution?

A. Yes, sir.

Q. In the office?

A. Yes, sir.

Q. On the wards?

A. Yes, sir.

Q. To what extent?

A. They generally go on to the wards after their quarterly meeting, and sometimes in the intervening period, some of them, not all of them.

Q. Is there any regular visitation of the wards by any of them?

A. Not that I know of, except at their quarterly meetings.

Q. Who comes to the Asylum most frequently among the managers, as you recollect?

A. I think probably I have seen the president there oftener than anybody else.

Q. Upon what occasions does he come there?

A. I do not know, I see him there.

Q. Does he come there on Sundays?

A. He has been there on Sundays.

Q. Do you know whether he comes regularly on Sundays or not?

A. No, sir; I do not think he comes regularly on Sundays; I have seen him there on Sunday, probably not more than one Sunday, but it may have been more.

Q. Would you be likely to see him if he was there?

A. I might see him and I might not; I might be in the office or on the wards, or anywhere else, and might not see him; it often has happened that they have been here and I have not seen them.

By Mr. Haskell:

Q. You made an investigation at the time of the injury to Mr Hughes, at the request of Dr. Gray?

A. Yes, sir.

Q. And conducted it on the day of the injury?

A. Yes, sir.

Q. Do I understand you to say that the answers the attendants made to your inquiries were not satisfactory?

A. I mean at the time of the injury, when we first commenced the examination of Mr. Hughes.

Q. The conversation in regard to it was this: I said to Mr. Weir, how did this happen, and he said, "Doctor, I don't know."

Q. But you made a formal examination after that?

A. Yes, after we had taken care of the patient; then I took the stenographer in and made as thorough an examination as I could.

Q. Of whom?

A. Mr. Weir, Mr. Brown and Mr. Bills, and one or two of the patients.

Q. And what conclusion did you come to from that investigation?

A. I concluded that he had been injured in a struggle.

Q. Did you attach any blame to the attendants, in your mind?

A. I cannot say that I did at that time on Saturday.

Q. Did you report the result of your inquiries to Dr. Gray?

A. Yes, sir.

Q. And did you report to him in writing, or verbally?

A. In writing; the stenographer transcribed the notes.

Q. Did you make any other reports except the transcription of the notes?

A. I would like to correct that; I do not know whether the stenographer transcribed my notes or whether he read his own notes, that is, his shorthand notes; but Dr. Gray himself made another examination, which was more complete and in which some additional facts were elicited.

Q. When did he make his examination?

A. A day or two afterward, I don't remember the exact date.

Q. Do I understand you that you made a written report of your judgment or conclusions from the investigation?

A. No, sir, merely the facts.

Q. As you elicited them?

A. Yes, sir.

Q. Did you give Dr. Gray your opinion as to whether or not the attendants were to blame or not?

A. No, sir.

Q. After this did you have a further conversation with either of the attendants?

A. Yes, sir, I did, with Mr. Brown.

Q. Was that reduced to writing?

A. No, sir; not that I know of.

Q. You did not reduce it to writing at the time?

A. No, sir.

Q. Give me the conversation briefly?

A. I felt that all had not been told, and about three days after the injury, when I was pretty well satisfied as to how the case would terminate, I saw Mr. Brown and asked him if he had told all, and he said, "yes, sir, I think I have;" I said, "in case this man should die, are you willing that your testimony should stand as it is?" he said, "no; if he should die I have something to add, because I can easily clear myself;" I said, "what do you mean; was the patient struck?" and he said, "yes, sir;" and then I questioned him further, and learned more; I said, "was the patient struck?" and he said, "yes, sir;" I said, "by whom?" and he said, "by Mr. Weir;" I said, "did you strike him yourself?" and he said, "yes, sir; I struck him in the stomach;" I said, "what do you mean by the stomach?" and he pointed down here to the lower part of the abdomen; then I said, "was that before he fell?" and he said, "yes, sir;" then I

said, "are you sure that when he fell your knees did not strike him; that you did not fall upon him with your knees?" and he said, "I am quite sure of it;" that is the substance of the whole conversation.

Q. Mr. Weir was the other attendant?

A. Yes, sir.

Q. Did he say any thing else?

A. He said nothing about anybody else striking him but himself and Weir; that was all.

Q. Did you have any conversation with Mr. Weir as to his striking him?

A. No, sir.

Q. When did you inform Dr. Gray, if at all, what Brown had told you?

A. Yes, sir, I did inform Dr. Gray.

Q. When did you inform him; immediately, the same day?

A. I think it was shortly afterward: this was at night, the conversation with Brown, and the next morning, I think, or sometime during the next day, I told Dr. Gray.

Q. Now, as near as you can fix it, give me the day, as near as you can, that this conversation with Brown occurred upon?

A. It was about the middle of the following week after Mr. Hughes was injured on Saturday; perhaps it was on Wednesday or Thursday in the middle or latter part of the next week.

Q. When did you make up your mind, or decide in your own mind, that the injuries to Mr. Hughes would prove fatal?

A. I knew from the beginning that the injuries were serious.

Q. When did you come to the conclusion that they would prove fatal?

Q. I don't know as I could tell you; the case was very serious from the beginning, and he kept failing; I regarded it as a very serious case.

Q. You ascertained immediately that the ribs had punctured the lungs?

A. Well, that one had; the puncture of the lungs by one rib would have produced the same physical symptoms as if the lung were punctured by more than one rib; we discovered by feeling that there was what is known as crepitation, and at the time we were satisfied that the lung had been penetrated.

Q. You immediately made an examination and found that some of the ribs were broken?

A. Yes, sir.

Q. Was there any examination made after that to ascertain how many?

A. No, sir; he was immediately put under treatment, that is, his chest was strapped and surrounded by adhesive plasters, to keep the chest immovable, or nearly so.

Q. Was there any examination made at the Asylum after his death to ascertain how many ribs were broken?

A. Not that I am aware of.

Q. So that you do not know from any personal examination of the body how many ribs were broken?

A. No, sir; I made no examination except at that time; the treatment would have been the same any way, so that it was not a matter of very great importance to ascertain as to the number.

Q. Describe what bruises or marks indicating any injury or violence appeared on any portion of Mr. Hughes?

A. Aside from the fractured jaw and broken ribs, there were one or two scratches on the right temple; there was a small lump behind one of the ears; and there was some bruises about the chest or the side of the fractured ribs.

Q. The lump on the back of the head, was it a swelling?

A. A very small swelling.

Q. Caused by contusion?

A. Yes, sir, I should think so.

Q. You discovered no other marks?

A. No, sir.

Q. Did you examine the face for other bruises?

A. Yes, sir.

Q. And found none?

A. Found none; he had a beard which might have hidden some little bruises.

Q. Was there any examination made of the body, either before or after he died, to discover any other marks?

A. Not that I know of.

Q. You made none?

A. No, sir.

Q. Will you state to me whereabouts, as near as you can, where those ribs were fractured?

A. They were on the left side; they were about the seventh, eighth and ninth.

Q. And the fracture occurred half way between the spine and the sternum?

A. Yes, sir, right at the side, about half way.

Q. And they were crushed in, were they?

A. Of course, that would be impossible; we felt that they were broken, and there was air in the tissues, which could only have occurred by a rib having punctured the lung.

Q. You say this injury could not have been caused by a single kick. Could it have been caused by several kicks?

A. I don't think it could and leave no more bruises than there were upon the body; my impression is that no kicks or blows had any thing to do with the fractured ribs, but that is only an impression.

Q. It might have been so caused?

A. Well, to the best of my knowledge and belief I do not believe they were.

Q. Might it have been so caused?

A. The ribs could have been fractured by kicks, but, as I said, there would have been more external evidence of it, I should say.

Q. How soon after the injury were the plasters put on?

A. Within an hour and a half, I think.

Q. And those plasters remained on?

A. Yes, sir, until the time of his death; I do not know whether they were left on after his body was removed or not.

Q. So that you could hardly tell how much evidence of bruises would ultimately have developed there?

A. No, sir; there might have been discoloration taken place afterward.

Q. It was too short a time for very much discoloration to have taken place?

A. Yes, sir; but scratches would have shown; if there had been scratches from a kick or any thing of the kind they would have shown; it takes some time for a discoloration to take place.

Q. Have you authority to discharge attendants?

A No, sir; I have no authority except to recommend their discharge.

Q. After your investigation into the causes which led to Mr. Hughes' injury, did you recommend the discharge of those attendants, or either of them?

A. I don't know that I did.

Q. Do you know whether you did or not make such a recommendation to Dr. Gray?

A. I don't think I did to him.

Q. Did you to anybody else?

A. I think I did to Dr. Brush.

Q. Dr. Brush had no more authority to discharge than you had?

A. No, sir; he is the first assistant superintendent.

Q. You did not recommend their discharge?

A. No, sir; Dr. Gray knew all about the case and I did not think any such recommendation called for; Dr. Gray knew all about it, and it would have been presumptuous on my part to have recommended any course for him to pursue; I had no doubt but what he would do what was best.

Q. Is that the reason why you did not recommend the immediate discharge of those men?

A. Yes, sir.

Q. Did you then think they should have been discharged?

A. Yes, sir; I thought that they would and felt that they would.

Q. Did you, subsequently to making this examination, at any time, recommend their discharge?

A. No, sir; for the same reason.

By Mr. RICE:

Q. Do you see these injury books from time to time?

A No sir; not since the daily report has taken the place of the

injury books; we have a daily report and the injuries are reported in those daily reports; the daily reports come in early in the morning.

Q. Do you mean to say that no injury book is kept now?

A. Yes, sir; the injury book is kept.

Q. What for?

A. I don't know, unless it is to have a more permanent record where the injuries can be easily got at without looking over the daily reports.

Q. The daily reports are made by the supervisors?

A. Yes, sir; they make a written daily report.

Q. Does that report show the injuries that happen to patients?

A. Yes, sir; there is a place on the back for injuries; Dr. Brush introduced those reports.

Q. Why do they keep up the injury books?

A. I don't know, unless it is that they can the more easily get at the injuries by looking through the injury books than by hunting over 365 reports for each department, making 2,000 reports.

Q. These reports are made by the supervisors?

A. Yes, sir.

Q. And they detail all the injuries received by the patients?

A. Yes, sir.

Q. And that is accepted by you ordinarily as a true condition of affairs?

A. Well, they are always investigated afterward, that is, more especially to call our attention to the fact that an injury has occurred.

Q. And then do you, in each case, make an investigation as to the cause of the injury?

A. Yes, sir; I always inquire as to how it occurred.

Q. Of whom do you inquire — patients or attendants?

A. Of patients who may have seen it.

Q. Were there any patients present at the time of the injury to Mr. Hughes?

A. Yes, sir; I think there must have been a dozen or more.

Q. Were they in such a mental condition as to make their testimony of any value?

A. I do not know; I tried to obtain statements from some of them, but they were very contradictory.

By the CHAIRMAN:

Q. As to the duties of the attendants and their efficiency whether, in your judgment, it would be desirable to have attendants charged solely with the duty of attending to the patients, and have the menial duties about the wards performed by another set of servants?

A. I do not think that would be any advantage.

Q. Would it not relieve the attendants from much work that must necessarily keep them from their supervision over the patients?

A. Yes, sir, it probably would; it would very greatly increase the expense though to the State?

Q. Would it not, in your opinion, improve the grade of attendants?

A. I think it probably would, if inducements enough were offered.

Q. That is to say a separation of their duties?

A. Yes, sir.

Q. You think you would get a better grade of attendants?

A. Yes, sir; I think there is some part of the work that could be done by persons less skilled.

By Mr. OLIN:

Q. State whether you know of any ribs having been broken in that Asylum besides this case of Mr. Hughes?

A. Yes, sir; there was a rib broken last summer by another patient; a patient broke another patient's rib, but I did not have charge of that side of the house at that time.

Q. Was it a male patient?

A. Yes, sir; his name was J. S.

Q. Did you know any one named McF. being in there?

A. I know it by hearsay that there was such a patient.

Q. He had some loose ribs, did he not?

A. I don't know about that from my own knowledge, only from the testimony of last year's investigation.

By the CHAIRMAN:

Q. Have you any statement concerning this investigation other than you have testified that you may wish to volunteer?

A. No; only as to the condition of the patient Hughes; when he was admitted, I did not see him; at the time of his admission I was away preparing the medicines and taking the place of the apothecary; I did not see him until after his injury, bnt the statement of his condition, as I understand it, was not full; the history of his case was not a reliable and correct one; I do not state this of my own knowledge, because I was not present, but the history which Dr. Backus obtained was not a complete one.

Q. In what respect was it incomplete?

A. In respect to the patient's violence.

By Mr. HASKELL:

Q. From whom did you learn this?

A. From the testimony of the son after the injury, or the statements of the son.

Q. And what Dr. Backus told you also?

A. I have read the case; yes, sir; Dr. Backus said that was all the information he got, and there was no mention of any extreme violence made by the son.

Q. Did you understand from Dr. Backus that the failure to give him the information in regard to the violent tendencies of Mr.

Hughes at all contributed to the unfortunate results, or to the disposition of the patient?

A. No, sir; I do not mean to say it had any direct connection with the result.

Q. Does it have any connection with the disposition of the patient, as you understand it?

A. You can readily see that it would, as just as soon as the patient's violent condition was made known he was sent to another ward.

Q. What idea do you desire or intend to convey in making the statement you have just made?

A. Simply that the friends did wrong in concealing his true condition.

Q. And thereby rendered the subsequent injury more liable?

A. No, sir, I don't know that it did that, but if we had known, we could have been on our guard and put the attendants on their guard; but I do not mean to say that the injury would not have occurred even if we had known it; Dr. Backus put the patient where any of us would have sent him under the circumstances.

Q. In sending him where?

A. On to the ninth ward.

Q. His being sent to the ninth ward, did that in any way contribute to his subsequent injuries, do you think?

A. No, sir; but some of the newspapers have commented upon the removal of the patient from the ninth ward to the fourth.

Q. Do you understand that he would have been sent to the ninth ward any way, even if it had been disclosed to Dr. Backus the fact that he had violent tendencies?

A. If the fact were known that he had violent tendencies — homicidal tendencies — which were greater than his suicidal tendencies, he would not have been sent there.

Q. Do you not understand that he would have been sent there any way?

A. If his true condition had been made known —

Q. Can you not answer that "yes" or "no"?

A. I cannot, because you will not give me a chance to explain; if you will let me explain I will try and make it as clear as I can.

Q. You either understand that he would or would not have been sent there?

A. Have I not answered the question? Had it been known that his homicidal tendencies —

Q. (Interrupting) If the fact that he had violent tendencies had been disclosed to Dr. Backus, in your judgment, he would not have been sent to the ninth ward?

A. If it had been known that he was as violent as he was he would not have been sent to the ninth ward; but that had nothing to do with his injury; Dr. Backus did as any one would have done under the circumstances.

Q. You testified that you did not make any suggestion to Dr.

Gray in regard to the discharge of those attendants on the score of delicacy, is that so?

A. Yes, sir, and because I knew that the proper course would be pursued by Dr. Gray.

Q. Are you restrained by that same sense of delicacy in making any other suggestion in regard to the conduct of the institution?

A. No, sir.

Q. Is that the only instance, since you have been there, where you have refrained from making any suggestion that you deemed wise?

A. Yes, sir; and that case was of such magnitude that I knew the proper course would be pursued by the authorities.

Adjourned to meet at Baggs' Hotel, Utica, to-morrow evening at 8 o'clock, P. M.

UTICA, *February* 28, 1884.

At 7:30 this P. M., the committee went into executive session in their room "48," Baggs' Hotel, all the members being present.

A question arising as to the propriety of allowing a representative of the Asylum to be present, together with one or more of the physicians, or officers of the Asylum, for the purpose of cross-examination, it was moved that a manager of the association, member of the board of managers of the Asylum, or some representative to be named by them, be alone admitted, to hear all the testimony taken, to make suggestions to the committee as to questions to be put, without the presence of any of the physicians of the Asylum; and that such representative of the Asylum shall be further permitted to suggest to the committee the names of witnesses whom it is desired to call on behalf of the Asylum, for the purposes of rebutting or explaining any testimony taken by the committee, it being understood that this motion is intended to apply to testimony other than that of the physicians, servants, or attendants of the Asylum.

Mr. HASKELL — I vote no, and will briefly say that I do so because I believe that, in regard to the evidence covered by this motion, the Asylum and the public should both have the fullest possible opportunity of knowing what is taking place before the committee to the end that all evidence may be given, and witnesses heard by the committee, that may throw any light upon the affairs and management of the Utica Insane Asylum, and that the doors should be open both to the Asylum authorities and the public.

Mr. OLIN — I am in favor of the motion; I do not care to state my reasons now.

Mr. RICE — I vote aye.

Mr. BROWN — I vote aye.

Mr. CHAIRMAN — I vote no; only for the reason that inasmuch as a representative of the Asylum has requested that he might have the attendance of one of the physicians to guide him, and that he desires to cross-examine witnesses; I think the request is not unreasonable and should be granted. I am in favor, as a matter of justice to the Asylum, however, that the investigation should be continued without the presence of the public, so that the testimony, when concluded, may go before the public as a whole at one time.

Motion carried.

It was also further moved that inasmuch as the testimony has heretofore been taken privately, that it is the judgment of the committee that it would be fairer to both the public and the Asylum that it should continue to be so taken and go to the public with the report of the committee.

Mr. HASKELL — I vote no, for the reasons stated to the other motion, and because I believe that the reason for closed doors ceases the moment we commence to take other testimony than that of the officers of the Asylum.

Messrs. OLIN, RICE, and BROWN, and Mr. CHAIRMAN, voted aye, and the motion was carried.

JOHN CHARLES HUGHES,

Sworn and examined, testified as follows:

By Mr. HASKELL:

Q. Where do you reside?

A. Nelson, Madison county.

Q. And you are a son of Evan D. Hughes who met his death recently from injuries received at Utica Insane Asylum?

A. Yes, sir.

Q. State your age?

A. Twenty-four years.

Q. State what your father's age was?

A. Fifty-four.

Q. Did you reside with your father, and he with you?

Q. Yes, sir.

Q. State how long before he was brought to the Asylum, it was that you discovered, or that the family discovered, any thing the matter with his mind?

A. On Monday previous to the Friday that he was brought here to Utica.

Q. You may state briefly your father's condition from the Thursday until you started with him for the Asylum?

A. Six o'clock Monday evening we discovered something was the matter, that was the first time that we found out that any thing was wrong; at that time in the house he said that some thing was going to happen before the morning. I asked him what; he said that he was going to die, and on Tuesday, or during that night, he was restless and did not sleep any, and kept talking with mother all night. Tuesday afternoon he was more violent and cross, and he attempted to leave the house. Tuesday night we had watchers in the night; they were watching father in the house.

Q. Who were they, and how many of them?

A. There was one of the neighbors.

Q. Who was that?

A. David H. Howell.

Q. How did he pass the night?

A. He was quiet during the night, but did not sleep much, if he did any.

Q. Had you up to this time had a physician?

A. On Tuesday I went down to Morrisville to consult with the doctor.

Q. When did the doctor come, if he came at all?

A. The doctor came there on Thursday.

Q. Previous to this, your father had had an attack of insanity; state about how long before?

A. It was in the year 1878.

Q. And he was sent away to the Utica Insane Asylum?

A. Yes, sir.

Q. State how long?

A. He was brought here on the 25th of July, and was taken away the 25th day of October.

Q. Was he discharged as cured?

A. Yes, sir.

Q. Now that brings you down to Wednesday morning; state in regard to Wednesday.

A. On Wednesday I went to Cazenovia.

Q. You may state who composed your family at this time.

A. Of the family there was my mother, myself, and father; on Wednesday I went after my brother; he was at school at Cazenovia; during Wednesday we had one of our neighbors, a son of Mr. Howell's; he came there and I think father showed signs of violence on Wednesday, and mother was very much frightened at that, and from that hour we had two persons in the house with father.

Q. From Wednesday evening?

A. Yes, sir; two watchers through Wednesday night.

Q. Who were the two watchers that you had on Wednesday night?

A. I don't know that I can tell, but they were — they were neighbors.

Q. Now state as to Thursday.

A. On Thursday there were four men in the house; on Wednesday night we had four watchers there.

Q. Who were they?

A. They were our neighbors; I cannot recollect their names.

Q. You say that the doctor came there on Thursday?

A. Yes, sir; and he gave father some chloral.

Q. When were the papers made out for sending your father back to the Asylum?

A. They were made out on Friday evening.

Q. Did the doctor bring them to you?

A. The doctor came up there; he had seen father on Monday; he said that from what he had noticed of him that there was sufficient evidence to him that he was not right.

Q. Then your father was seen on Monday by Dr. Mead?

A. Yes, sir.

Q. Did Dr. Chase bring you the papers?

A. No, sir; he never brought any papers.

Q. When did you make application for the papers to send your father to the Asylum?

A. I think with Dr. Chase on Tuesday, he said that a patient who had been in the Asylum, that it was not likely that he would get well without going through the same treatment.

Q. So the arrangement was made on Tuesday for sending him to the Asylum?

A. Yes, sir.

Q. When did you start to bring your father to the Asylum?

A. Dr. Chase gave me the letter to show that the papers would be sent here all right; they were not ready and they were not sent there and I did not bring them with me; he gave me that order on Friday morning.

Q. Give us a brief description of your father's condition Thursday and Thursday night?

A. On Thursday night I think he was, I don't know whether he was violent that night or not; I know that Dr. Chase gave him some chloral, I cannot remember positively whether he was under the effects of it or not, but on Friday he was and was quiet.

Q. When was the time your father started to go out of the house and they stopped him?

A. That was either on Wednesday night or Thursday night.

Q. Is that the time that he got up out of the bed?

A. Yes, sir.

Q. Describe that incident?

A. I was not in the room at the time, I was only told of that.

Q. Who were you told by?

A. By one of the watchers; I do not recollect who told me; I was told by one or all of them at different times.

Q. The matter was spoken about by them?

A. Yes, sir.

Q. What information was it you had, and what did they tell you?

A. They told me that father was lying on the bed, and that he had been trying to get up, and that two of them went one on each side of him, that is, one on each side of the bed and held father by the arm, one had hold of each arm, then father all of a sudden closed his eyes and laid down on the side of the bed, and after he closed his eyes long enough to deceive them he jumped right up and got away from them and got out of the bedroom, and if it had not been for those two men in the other room he would have got out of the house; they grabbed him and the two men from the bedrom came in, and then the four men carried him back to bed.

Q. When was it he talked about the axe, or something of that kind?

A. That was on Wednesday; he said: "You have kept the axe, and the razor, and knives, and every thing;" says he: "If I had them, I would cut myself." That was on Wednesday, I think.

Q. Do you recollect that your father was reasonably quiet after the doctor gave him medicine on Thursday and during Thursday night?

A. I cannot be positive whether he was quiet or not; I was not with him either of those nights.

Q. Friday morning you started to take your father to the Utica Insane Asylum?

A. Yes, sir; I was along with father, and went with him to the Asylum, and two of our neighbors went with me.

Q. Who were they?

A. D. H. Howell and A. N. Hickox.

Q. You stopped at Morrisville and got an order from Dr. Chase?
A. Yes, sir.
Q. Did he then see your father?
A. Yes, sir.
Q. Did he give him any medicine of any kind then?
A. No, sir.
Q. When was the last time your father took medicine before starting to the Asylum?
A. I think it was on Friday morning; I think they gave him medicine; I did not give him any myself.
Q. You understood it to be chloral ; the same as Dr. Chase gave to him on Thursday?
A. Yes, sir; it was most night when Dr. Chase came to our house on Thursday; it was late in the afternoon.
Q. How did you come away?
A. With the train, from Boutville.
Q. And you drove from your house in Nelson to Boutville?
A. Yes, sir.
Q. About how many miles is that?
A. It is four miles from our house to Morrisville and it is about nine miles from there to Boutville.
Q. You got your father here and took him to the Asylum?
A. Yes, sir.
Q. Three of you?
A. Yes, sir.
Q. After you got to the Asylum who did you see?
A. There was a young man who came and opened the door and admitted us into the office, and then Dr. Backus came in.
Q. Give me your conversation with Dr. Backus and carefully relate what took place between you and Dr. Backus; give all that was said between you?
A. In the first place Dr. Backus entered father's name as a patient, taking his age and all that they do take in this book that they make the entries in; then Dr. Backus began to question me as to what father's actions were before we brought him here, and at the same time says he, "we had better step into the other room, it may not be very pleasant for your father here."
Q. Who was present at that time?
A. The stenographer, he was in the room, and Mr. Hickox and Mr. Howell and father, that was in the first room, we were all together there.
Q. And Dr. Backus and yourself?
A. Yes, sir.
Q. Did you at this time give Doctor Backus the order from Dr. Chase?
A. Yes, sir.
Q. And Dr. Backus went into another room?
A. Yes, sir.
Q. Alone?

A. Yes, sir.

Q. Now go on and state what occurred between you and Dr. Backus, giving his questions and your answers as nearly as you can recollect them?

A. Dr. Backus asked me how long father had been so, and how long it was since I noticed any thing out of the way. I told him since Monday. He asked me how he acted and what he had done, and I told him, as near as I could remember, as I have told you.

Q. State what you do recollect that you told him?

A. I told him that father was violent and I told him that he had tried to leave the house; I told him that he had said that if he had an axe or a knife, or a razor, that he would cut himself, and Dr. Backus asked me if he tried to hurt others, and I told him that he was trying to kick at others who had tried to hold him, and that he had tried to strike, and that when they held his hands and feet that he would spit at them. Doctor Backus said he was very sorry to hear that, and that they would have to put him on the ward with suicides, and watch him. I told Dr. Backus that we were advised by Dr. Chase to bring him there that day, as he was under the effects of chloral because if we had waited long, the medicine would lose its effect and he would become more violent, and I do not remember any more. Yes, I do. I told Dr. Backus that I thought father had been ill-treated some or misused when he was here the other time, and that he remembered a great many things that had happened. Dr. Backus moved up to me at that, nearer in his chair, and said to me: "What do they remember? I would like to hear what patients do say after they go away from here." I cannot give the words just as they came, but that is as near as I can give them, it has passed off from my mind. I never told Dr. Backus what father did say after he came home the first time.

Q. Why did you not tell him?

A. It came to my mind that Dr. Backus was very anxious to hear about that, and I thought it might hurt father in one sense, so I stopped and did not say any more.

Q. State what had occurred between your father and you, if any thing, in regard to that very subject?

A. Of his ill-treatment the first time?

Q. Yes; state what he said in regard to the Asylum, if he said any thing about it?

A. One thing he said was this: "I would much rather die than be compelled to go back to that institution and suffer what I have suffered;" and he said "I have not told you all;" says he "what I have been through, and if I had told you, you would be surprised."

Q. What else did he tell, if any thing

A. He told me at one time, "they used to put me in the bath-tub and hold me there until I would think that I would be 'drownded;'" he told me that at one time.

Q. That is, held his head under the water?

A. He didn't say held *his* head under the water, but, "held me there until I thought I would be 'drownded.'"

Q. What else did he say, if any thing?

A. I don't remember that he said any thing else what had happened, only that he referred to that matter.

Q. What did he say, if any thing, about not giving you more particulars?

A. He said, "I don't think it is best," says he, "to tell many things for fear it might get out of the family," and he thought if it got out of the family that it might get back to the institution; he said if it should get out of the family it might get back to the institution, and if I am ever taken back there, they may revenge on me," he says, and that was his excuse for not telling more.

Q. State as to whether that was the reason you did not go into more particulars with Dr. Backus, that your father had made that suggestion to you?

A. Yes, sir, it was; it came into my mind what father had said, and I noticed that Dr. Backus was very anxious to hear, and so I dropped the thing.

Q. That is it came into your mind what your father had said?

A. Yes, sir, that they would hear in the institution that he had said he had been maltreated there.

Q. And that it would make a difference in his treatment if he ever went back?

A. Yes, sir.

Q. State why you allowed your father to go back to the institution after hearing this complaint in that respect?

A. In the first place I consulted Dr. Chase, and he said patients after they had been in the institution, that there was no hopes for their recovery without their going through as they had been through, and our faith was such in the institution that he had been cured in so short a time the other time that we would almost rather that he should go through some things and be cured than to keep him at home, and feel that he would be out of his mind always.

Q. Have you now given all that passed between you and Dr. Backus at that time?

A. Yes, sir.

Q. Was the stenographer present, or any other person present, during this interview between you and Dr. Backus?

A. No, sir.

Q. You may state whether any thing was said between Dr. Backus and yourself as to your father having been in the institution previously — his having been there before?

A. There was no more said than I have stated in the evidence that I have given here.

Q. Did you tell Dr. Backus, or did Dr. Backus say any thing about your father having been in the institution before?

A. Yes, sir; in this first office where he entered father's name he asked if he had been in there before, and I told him, and he went and looked in the old book where his name was entered before.

Q. What was said about your father having been in the institution before; what took place before you and Dr. Backus went into the little room, except so far as you have stated?

A. He did not ask me any questions, but he opened the book at the page where it was recorded when father was in before — the old book that had the entry in when father was there before.

Q. Was that before you went into the little room?

A. It was before we went in by ourselves.

Q. Did he take this book into the room?

A. No, sir, he did not take any thing into the room.

Q. Did he have any paper with him, and did he make any minutes of your conversation while in the little room?

A. He began to, but he left it off.

Q. You may state as fully as you can what you told Dr. Backus; I call your attention particularly to what you told him in regard to your father's being violent at all?

A. I told him that father was violent at home; that we were afraid, and afraid that something would happen to him, and that he might injure others; and for his safety and our safety we made up our minds to bring him there.

Q. Did you mention to him the incident of his lying on the bed, and getting away from the two men?

A. Yes, sir.

Q. State about that, and what you told him in regard to that?

A. I told him that father was violent, trying to get away, and about his lying still and closing his eyes to deceive those with him.

Q. Did you tell how many were with him?

A. Yes, sir.

Q. What about that?

A. I told Dr. Backus there were two men in the room — one each side of him — having hold of father, and that they had hold of father, and that then he closed his eyes to deceive them, and all of a sudden that he jumped up away from them, and out of bed and out of the room, and these other two men grabbed hold of him; then the two men in the bedroom took hold of him, and the four men took him back into the room.

Q. Did you state to Dr. Backus any thing about the causes that you thought led to your father's insanity?

A. Yes, sir.

Q. In this little room?

A. Yes, sir; by ourselves.

Q. State what you told in regard to that?

A. Dr. Backus asked me what was the cause of this insanity; I told him it was business trouble; I told him we had had a lawsuit, and that we were beat, and that we persuaded father to settle, rather than carry it up, and then it went into the church, and this other man took the advantage of settling the law suit, and told father that he had a right to put him into State's prison for swearing falsely, for committing perjury, and father was so affected by that, that he

thought they were trying to break his word, and he took it so badly that it worried him considerably.

Q. What did you tell Dr. Backus about "taking it into the church"?

A. I told him what I stated to you just now.

Q. Have you stated to us now all that you told him about taking it into the church?

A. Yes, sir.

Q. After having this conversation with Dr. Backus, what was done?

A. I asked Dr. Backus if he would call Mr. J. R. Jones to take father on to the ward.

Q. You went back where your father was after you had this conversation about your father with Dr. Backus — did you and Dr. Backus go back into the room where your father was?

A. I don't know whether we went back, but father and our neighbors came into the room where we were, and supervisor Jones came in, I think, and asked father to go with him, and father refused to go; finally Mr. J. R. Jones came in.

Q. State whether he was a man that you knew?

A. Yes, sir; he was one of our neighbors.

Q. You say J. R. Jones came in?

A. Yes, sir; and father was going out of the room; Dr. Gray came in and shook hands with father; and Dr. Gray asked me, "how long has your father been in this condition?" says I, "since last Monday." "Is that all," says he? "yes, says I." "Well," says he, "I am glad of it." "Do you think that he will be cured," says I? "why, we cannot tell," says Dr. Gray; "his age is a little against him;" that was all that was said, and father was taken out of my sight, and I left the institution with these two men.

Q. Your father went willingly with J. R. Jones?

A. Yes, sir.

Q. State, if you will, of your father's height, general build, and weight, if you can.

A. I think he was a man about five feet nine in height, and in weight, about one hundred and sixty pounds.

Q. State what you next heard about your father?

A. The next we heard was on the following Monday; we had a dispatch from Morrisville; it came from the Asylum to Morrisville and was sent to us from there.

Q. And it was sent from Morrisville to your place?

A. Yes, sir; and the dispatch read: "Your father very low; come at once;" and I went and came to Morrisville with Mr. B.; and he brought up the dispatch.

Q. Who was the dispatch signed by?

A. I forget; I could not tell who signed the dispatch.

Q. How did you know it was from the Asylum?

A. It had "State Lunatic Asylum" on it.

Q. That is where it was dated?

A. Yes, sir.

Q. This, you say, was on Monday?

A. Yes, sir.

Q. When did you get to Utica?
A. I think I arrived at the Asylum about 6:30 P. M.
Q. Where did you find your father?
A. I was called into Dr. Gray's office before I saw father.
Q. State if you had any conversation with Dr. Gray?
A. Yes, sir.
Q. Give us the conversation with Dr. Gray?
A. Dr. Gray told me what father's injuries were.
Q. Try and give us, as near as you can, Dr. Gray's language?
A. Dr. Gray talked so long and went around so much that it would be very difficult for me to tell what he did say; he said so much that I was very anxious to come to the matter about my father, which he did not seem to want to do.

By Mr. RICE:

Q. State it as near as you can?
A. He said that father and the attendants had had a scuffle and, from what he could find, they fell to the floor; one or two patients he said, and making in all four, and that the four fell to the floor, and in this fall Dr. Gray, from what he could learn, he said father received his injuries, but how he could not tell; that he had examined the attendants and patients and had no satisfaction; he said his jaw was fractured, and that there was three of his ribs fractured; I asked if the injuries were fatal, and he said he could not tell at the time; and the rest I don't think would amount to any thing that he said.
Q. Tell any thing you recollect?
A. I don't recollect any thing else; one of the attendants came in and escorted me to a room that father was in.
Q. Did he tell you that one or more of the fractured ribs had punctured the lungs?
A. No, sir, he never said they were broken, any more than that they were fractured.
Q. And there was nothing said about your father's lungs?
A. No, sir.
Q. Or that one or more of the ribs had punctured the lungs?
A. No, sir.
Q. You say that then an attendant came in and you were taken to your father's bedside?
A. Yes, sir.
Q. You may state what occurred at the bedside?
A. Father was lying back in bed, and his mouth was open, and his lower jaw turned to one side, and his lower lip was drawn over his teeth; I could not see; I did not notice that the jaw had been fractured, because I could not see where the fracture had taken place; father, he did not notice me at the time; he was talking; seemed to be talking most of the time.
Q. Could you understand what your father said?
A. Yes, sir; but he said nothing rational.
Q. What did he say?
A. I did not pay any attention to what he did say, that is, to remember it; it was not rational talk.

Q. Was he talking in English or Welsh?

A. Sometimes in English, sometimes in Welsh.

Q. Do you understand Welsh?

A. Yes, sir; I do.

Q. Did you try to talk with your father?

A. Yes, sir.

Q. With what success?

A. I asked him if he was hurt first, and he said yes; I asked him how, and he said he did not know; then I asked him if he was thrown down, and he said yes; I did not ask him any more questions then.

Q. Did he know you?

A. He did not seem to know me at the time; Dr. Backus came in during the evening and said: Mr. Hughes, do you know who this young man is, and father took my hand at that time and said, yes, this is Johnnie's hand.

Q. So that he did know you were there?

A. Yes, sir; he must have known from what he said.

Q. Was that the first time that you discovered that he knew you were present?

A. Yes, sir.

Q. Were you, at any time, able to have any conversation with your father in regard to how the injury happened?

A. No, sir; nothing further than that.

Q. And was there any other evidence after that that led you to believe that your father knew you were present?

A. No, sir; not that I know of.

Q. Did you stay in the Asylum until your father died?

A. I went home on Thursday, in the morning, and returned in the evening; with that exception I was there about the Asylum and slept in the Asylum.

Q. And you were with your father as much as possible?

A. Yes, sir; Tuesday morning he opened his mouth a little wider, and his lip came back, and I could see his teeth, and at that time I put my finger on his lip and pushed it down a little, and I saw his jaw was broken, and the bone was separted. I should think from the lips so that any one could put their finger down upon the bone.

Q. Was the flesh separated; describe what you mean by your last answer?

A. What I mean is that the teeth were all there, but the bone and the teeth were separated, so that, taking from the top of the teeth down, you could put your finger right in there.

Q. Describe what part of the jaw that was?

A. It was here (indicating); it was a little to the right of the center.

Q. How far from the center of the jaw was it?

A. About two teeth from the center; I could not be certain about the matter, but it was one or two teeth from the center; I should not think it would be more than two teeth.

Q. When did your father die?

A. He died at 8:40 o'clock on Friday evening, February the first.

Q. What other conversations did you have with Dr. Gray or any of the physicians in regard to the matter of your father's injuries, than what you have stated you had with Dr. Gray on the first night?

A. On Friday evening at seven o'clock I had a conversation with Dr. Gray.

Q. Go on and state that conversation?

A. I had found out for certain that father would die soon; about four o'clock he changed.

Q. How did you find that out?

A. By the doctors that had been up there; I think Dr. Gray had been up to see him about three or four o'clock, and he said in his room, it is just as I expected, you can see the veins on his forehead; and we knew from that that the change was for the worse; I was called into Dr. Gray's office at seven o'clock in the evening; I asked him how long patients in that condition lived; he said he had seen them live six, twelve, forty-eight, and even seventy-two hours; I said: Do you think father will die soon, says I, right away? Well, no, says he, I don't know that he will die very soon, says he, we may look for a change about two o'clock in the morning, or four o'clock; doctor, says I, are you certain there are only three ribs broken; well, says he, I cannot be certain about that, but we will have an examination that will give you satisfaction.

Q. What time did your father die, with reference to the time of this talk?

A. This was about seven o'clock in the evening; I stayed there with Dr. Gray until 9:30, and father died at 8:40, I think it was.

Q. Is that all the conversation that took place between you and Dr. Gray at seven o'clock?

A. Yes, sir; and at eleven o'clock we had another conversation.

Q. Now give the conversation that took place at eleven o'clock.

A. Dr. Gray asked me if I thought it was best to have an inquest, and before I could answer the question he said he would call the coroner in the morning and see what was best to be done.

Q. This conversation at eleven o'clock, was that after your father died that night?

A. Yes, sir; and the conversation in regard to father, I think we began to talk about the undertaker and taking the remains home; I told Dr. Gray that I wanted to leave as soon as possible in the morning with the remains, as it was Saturday, so as to be home before night for them to have an inquest; says Dr. Gray we will have it early in the morning and have it so that you can leave to-morrow, and with regard to the undertaker, he said, he would advise me to go to Whitney's; at that time I was with Dr. Gray; and I went with Dr. Brush down to Whitney's undertaking rooms.

Q. That night?

A. Yes, sir; and there was nothing more said.

Q. When was the first time that Dr. Gray told you he did not think your father would recover?

A. He told me on Monday evening, when I first saw him, that if he was a sane man that the injuries he had received would be nothing; that he would be willing — that there would not have been any doubt about it whatever.

Q. About what?

A. About his injuries as to their being fatal or not; he said that he was an insane person, had acute mania, a disease which of itself was liable to kill a person, and in addition to that he had these injuries — these fractured ribs; that he might have infusion of blood on the brain or to the brain which would cause his death.

Q. Do you mean to say that the doctor told you that if your father had been a sane man, there would be no doubt about his recovery?

A. Yes, sir; that there was no doubt he would recover.

Q. Is that all that you recollect in regard to the Monday evening conversation, besides what you have already given us?

A. I think that is all.

Q. What other talk that Monday evening and before Friday evening did you have with Dr. Gray about your father's injuries?

A. Not any.

Q. Did you have any talk at the bedside of your father with Dr. Gray about your father's injuries?

A. I asked him how father was, and he said: "your father is a very sick man;" several times he said that to me.

Q. What talk did you have with Dr. Gray in regard to the fracture of your father's jaw?

A. Friday evening at seven o'clock I did.

Q. Now state that conversation and tell us what Dr. Gray said?

A. I said to Dr. Gray, "there is a great mystery about father having his jaw fractured; how could it have happened?" "well," said he, "it could have happened in many ways, he might have fallen against a chair, or even against a door, or he might have had a blow;" says I, "if he had fallen against a chair or a door, or had a blow there would naturally have been a bruise on the outside to indicate it, and I have not seen any such bruise; "well," says he, "if he had received a blow the bruise would naturally be on the other side;" I said, "here there is no bruise on the opposite side;" Dr. Gray spoke up and says: "did you notice that there was a bruise on his left temple, here;" I said "yes; "well, he might have struck there," says he; I said "he would not be very apt to fracture his jaw by having a blow on the temple;" I felt as though Dr. Gray was at that time trying to get me off with simply no explanation at all.

Q. If there was any thing more said at that time about your father's injuries please state what it was?

A. Dr. Gray tried to explain to me how he might have had his ribs broken by an attendant holding him in a chair.

Q. Go on and state what he said, and give us all that he said, that is what we want to know, and give us his language as near as you can ?

A. He said that father sat in a chair with arms to it, and the attendant had to hold him there, and he might have got down one side and in some way hurt his ribs, that he might have gotten down in this way (indicating) ; I do not know as I remember any thing else that was said at that time.

Q. Did Dr. Gray say any thing at that time as to whether or not it might have been caused by an attendant falling on to your father?

A. Yes, sir, I think he did ; I think he said that they might have gone down, and one have fallen on to the top of the other, that they might have fallen down on to the floor with father the lowest and the attendant on top, and that the fracture might have been caused in that way.

Q. Do you recollect any thing more that Dr. Gray said to you as to the manner in which he thought your father had received his injuries ?

A. I do not recall any thing further now.

Q. Do you think you have now given all that Dr. Gray said to you about your father's injuries at any time, and at all the conversations you had with him ?

A. I think I have.

Q. Did you have any talk with Dr. Backus as to how your father got hurt ?

A. No, sir; I did not have any talk with Dr. Backus about the matter.

Q. Did you have any conversation about the matter with either Dr. Pilgrim or Dr. Brush ?

A. No, sir, I did not.

Q. Did you yourself make any inquiries of either of the attendants as to how your father got hurt ?

A. No, sir ; I did not see either of the attendants off from the ward where father was hurt.

Q. What was the first you ever saw of either Mr. Weir, Bills or Brown ?

A. In Baggs' hotel last Saturday.

Q. The other day when you were here before us ?

A. Yes, sir.

Q. Then, as I understand you, all the talk of any account that you had with any person about your father's injuries, and how he received them, was with Dr. Gray ?

A. Yes, sir.

Q. Did Dr. Gray at any time tell you that the attendants, or either of them, had confessed to striking your father ?

A. No, sir.

Q. Did you make any inquiries of him as to whether they had struck your father any blows?

A. No, sir; I don't think I did.

Q. And you now think that you have given us all that Dr. Gray said?

A. I think I have.

Q. Did Dr. Gray tell you, either before or after your father died, in regard to the ribs having punctured the lung?

A. He did not.

Q. Did any of the physicians tell you that?

A. No, sir.

Q. You may state as to whether there was an occurrence in regard to your father spitting blood; state whether or not there was any such thing as that?

A. Yes; Monday evening or Tuesday evening after I went there, Dr. Pilgrim and Dr. Backus were in the room examining father, and he was trying to throw up some matter, and after making many efforts he succeeded in getting something into his mouth from his throat; and it seemed to me to come from his stomach or down in his lungs; and the doctor told him to spit into the towel, and just as the towel was passed back to the doctor I saw it, and that matter on that towel was dark, thick blood, and Dr. Pilgrim, as I was looking at it, he kind of threw the towel over, and I did not see any more of it.

Q. Did the physicians look at it and have any talk over the character of what your father had spit up from his mouth?

A. No, sir, not in that room; I don't know what they did away from there; they talked very little in my hearing about the case.

Q. Was any thing said by you to them about the blood?

A. Yes, sir.

Q. State what it was?

A. I told them that I believed father was injured very much inside from what he was throwing up; Oh! that comes from his mouth says the doctor — from his mouth.

Q. Did you make any objection to there being an inquest held upon the body of your father?

A. I did not.

Q. Have you told us all that was said about taking your father's body home?

A. I think I have.

Q. What, if any, objections were made to your taking the body home?

A. Dr. Gray told me that — in the first place I asked Dr. Gray if I could have the remains to go with on the 8:30 train in the morning on the Central; he said that would be too soon, on account of cooling the body gradually; it always took so long a time for the remains to cool gradually, and that the time was too short.

Q. When did you take the body away from Utica?

A. I think I left very early in the morning of Saturday, about two or three o'clock in the morning.

Q. Were you present at the inquest?

A. I was present on Saturday, at the beginning of the inquest; after that time I was sick and unable to attend.

Q. State what was done when you were there?

A. They told me that the inquest was to begin at twelve o'clock, but they began it sooner, and by the time I got in there Dr. Backus was almost through giving his testimony.

Q. Were you there when the jury viewed your father's remains?

A. No, sir; they had done that; I went to the Asylum, and I saw Dr. Brush; I asked him if they had begun the inquest; he said yes, and he told me to wait a few moments.

Q. Did Dr. Gray say to you: Mr. Hughes, we have been very frank with you and concealed nothing, and notified you as soon as possible of the injury, and we want equal frankness from you? Did he tell you that, or that in substance, on Friday evening?

A. He told me the beginning of that, but not the last.

Q. What did he tell you; please state?

A. He told me that they had been frank and concealed nothing; they wanted that we should know the whole of the matter from beginning to the end.

Q. Did you say that you did not blame the doctors, but did blame the attendants?

A. I do not know whether I said that or not — to Dr. Gray do you mean?

Q. Yes; on this Friday evening after your father's death?

A. I do not remember telling him that; I might have said that and I might not; I do not remember.

Q. Did Dr. Gray tell you they found the condition of your father very different from what you first stated in regard to his being violent? A. I do not remember that he said any thing to that effect.

Q. Did he tell you that you had not told Dr. Backus the true condition of your father?

A. He did not; I am quite positive he did not say any thing like that to me.

Q. Was there any conversation between you and Dr. Gray this Friday evening in regard to what you told Dr. Backus in regard to the condition of your father?

A. I do not remember of any.

Q. Can you say whether Dr. Gray at that time found fault with you for not having told Dr. Backus that your father was violent?

A. I think Dr. Gray found no fault about that; he never mentioned the matter to me.

Q. Then you say that nothing was said between you and Dr. Gray on this Friday evening in regard to this statement by you about your father at the time you brought him to the asylum?

A. I did not.

Q. I also understand you to say that when you left the Asylum with your father's remains at three o'clock that you then knew nothing of the fact that the ribs had punctured the lungs?

A. The inquest so disclosed it, but I went to one of the jurors after it was adjourned; says I, do you ascertain to know what the injuries are; he said, no, sir; we did not; we only viewed the remains.

Q. Whether you had been informed by Dr. Gray or any person connected with the institution that the broken ribs, or any one of them, had punctured your father's lungs?

A. No, sir; no one ever mentioned that matter to me.

Q. State what was done with the body when you got it home?

A. It was taken into the house, and on Saturday night I told our neighbors how the inquest had been begun here at Utica and how the doctors said the injuries were; what they said about them, and that Dr. Gray said three of the ribs were fractured, and that Dr. Backus gave in his evidence that two or more had been fractured, but he did not know how many; and they said that they should see the coroner on Sunday morning, and Mr. A. N. Hickox went to see the coroner on Monday morning — Coroner Ransom.

Q. When you saw your father on Monday, whether or not you observed any marks upon his head, and if so, state what you noticed in that respect?

A. Yes, sir; I first noticed that over his left temple, or on the bone here — the cheek bone — there was a large black and blue bruise, and a large one on his forehead here; on the top of his head there were three or four scratches, the skin had not been broken, but it seemed to have been bruised; the scratch was severe enough to turn the color of the skin without cutting it; it was bald where this was; father was bald on that side, where the scratches were.

Q. What do you mean by "scratches"?

A. I have not just the right word, I suppose; I mean that it had been bruised, like, on his head, and that there were long marks on his scalp, and the marks were of such character that the skin was turned in color.

Q. How many of those marks were there?

A. Three or four.

Q. Did you notice any other marks?

A. Yes, sir; on his right leg there was a black and blue spot.

Q. Whereabouts on his leg?

A. Between his knee and ankle.

Q. When did you notice this mark on his leg?

A. I think I noticed that either on Tuesday or Wednesday.

Q. Here at the Asylum?

A. Yes, sir.

Q. Did you notice any marks of violence on the back of your father's head?

A. No, sir; I never examined the back of his head; he laid on

his back from the moment I saw him until I left him, and until he died.

Q. State briefly what occurred in our county (Madison) now?

A. The coroner came on Monday forenoon; Dr. Chase also came.

Q. Who sent for Dr. Chase?

A. Some of the neighbors.

Q. State what was done; did they have an inquest?

A. No, sir; not then.

Q. Did they summon a jury?

A. No, sir; not on Monday.

Q. Did Dr. Chase then make an examination of your father's injuries?

A. No, sir; not on Monday; they made an arrangement to have an investigation on Tuesday morning, before the funeral; they were to meet in our house on Tuesday morning before the funeral, at eight o'clock; they impaneled a jury; they notified a certain number of men the day before to be there at that time.

Q. Did the doctors make a *post mortem* examination?

A. Drs. Chase and Ransom.

Q. Whether, after the making of this examination, you were informed that your father's lungs had been penetrated by these broken ribs?

A. Yes, sir; I was informed by Dr. Chase.

Q. Was that the first information that you had received of that fact?

A. It was; Dr. Chase told me that the rib had punctured the lung, and that that was sufficient cause for his death; he also told me that three of the large ribs had been broken and all the small ones on the left side. I was also told that on his back, from his shoulder blade down, he was bruised and his skin was discolored.

Q. After the doctors had made an examination and the jury had viewed your father's remains, was any evidence taken?

A. I could not tell you; I was sick in bed at that time.

Q. And the funeral took place on Tuesday as you have stated?

A. Yes, sir.

Q. Is there any thing else about this matter that you desire to state to the committee?

A. Do you mean about when father was first in the Asylum?

Q. You stated that in July, 1878, your father was sent to the Asylum?

A. Yes, sir.

Q. State briefly in regard to his form of insanity at that time?

A. He was very violent at that time as he was this, something of the very same nature, and very much the same thing brought it on, a little trouble and excitement at home, and he worried about it until he became insane and violent, so violent that we could not control him at home any more than we could this time, and so we took him there; after he was taken there I would write letters to Dr. Gray, and the first letter from Dr. Gray stated that father was a very sick and feeble man.

Q. That was the first time?

A. Yes, sir, the first time he was in the Asylum; this is the first letter I received, on the 23d July; I wrote to him asking if we could come and see father, and he advised against any visit; I wrote him again and he still advised against any visit; and the third time I received a letter I do not know whether Dr. Gray authorized the writing of it, but it said in substance: "Your father a very sick and feeble man, and advise against a visit at this time." That is the substance of it. On August 30th, Dr. Gray advised against a visit; on August, father writes a letter home; he was taken there the 15th July, and on the 25th August, he wrote a letter; he says in this letter, substantially: "It is difficult to write; I have many things to tell you;" he does not say any thing about his treatment, but he told me afterward that the letters were examined before they went out, and he was not allowed to put any thing in about how he was treated; "I would give all I have for coming home," he says in that letter; he was there three months at that time; we had a friend here in the city of Utica, Robert R. Jones, a former resident of Nelson; we requested him to call at the Asylum and see father and see how he was doing, and on September 12th, Mr. Jones writes us a letter and tells us that he has been to the Asylum and was not permitted to see father; and the excuse made to him was that we had been there a day or two before that.

Q. When did you first see your father, when he was there the first time?

A. About the last of July.

Q. Did you go alone at that time, the last of July, to see your father?

A. Yes, sir; mother and I went; Mr. Jones says in his letter, "I have not seen your father once; I called twice; the excuses were the last time, that the doctor was too busy to talk with me, and he said that he had very hard work not to feel hard against the doctor, since he had made such an effort to see father, and after the doctor had turned him off with so little notice." The letter is in Welsh. September 12, of that year, father writes: "It is a very strange place in this institution." Previous to October 10, he writes a letter and says: "My voice is better to-day and yesterday." Something happened to his voice in the institution, and after he was there he was never able to speak as plain as he did before he went into the Asylum; we questioned him many times about it, and he told us about how they forced this tube down his throat, into his stomach, with food; they locked him in a room he said, and would not give him any medicine, and he would be kept in the room quite a long time, and he would holler and scream in there; he said he could remember how he was hollering; when he came to himself he could remember it; he said he thought, too, that he hurt his voice a good deal in that institution by calling and yelling so much; father found fault with them in not quieting him at the time, so that he would not hurt his voice; he thought also that his voice was hurt by the tube. In another letter he says: "Keep my letters if you are so brutal as

to keep me here long," and he describes the attendants of the Asylum. He says: "Why did you send me so far among mean, uncivilized men." On October 3, he writes a letter and says that he is removed on to a better hall, and on a good hall, and he says that he receives good care, that they are very kind to him, and his room is well furnished; he says there are two chairs in there, and a bureau and looking-glass, and every thing is comfortable.

By Mr. MORGAN:

Q. Does he say on what ward he was when he wrote that letter?

A. No, sir; at another date in October he writes "to come home is best for many reasons, I will not write down; I take only one pill after meals, three times a day." October 18, he says: "My voice remains quite weak, but I am in a good hall."

Q. How many times do you say any one visited your father when he was at the Asylum?

A. Three times; the last of July we called at the Asylum and visited father; I think that they were against our seeing him at that time, but I insisted upon seeing him; they said "if you must see your father"—I do not remember who it was I talked with at that time; I do not think it was Dr. Gray; I do not remember talking with Dr. Gray at the time my father was in there the first time; I do not remember seeing him there at all during that time.

Q. It was one of the physicians that you saw and talked with?

A. Yes, sir; I saw Dr. Andrews, I think, several times, and Dr. Brush; I talked with Dr. Brush more at that time than I have at this; at the time that I speak of when we went to visit father, we went there in the morning and had to wait nearly all day; it was not until three o'clock in the afternoon before we were allowed to see father, and then an attendant escorted us into the sleeping-room and father was sitting in a chair; he looked very weak and feeble, and he looked so sleepy; he looked as though he had not slept in a week, and he did not want to talk to us; he looked stupid and looked as if he was going to faint; and ever since we have been under the impression that that man had been drugged in there, and that he was under the effects of that when we saw him, and that has been my impression ever since.

Q. Do you know whether at that time he was upon the same ward as he was placed upon this time?

A. No, sir; I do not know about that.

Q. You did not go upon the ward?

A. No, sir; I do not remember of being on the wards and seeing father on the ward, he was brought into the sleeping-room.

Q. Did your father make any complaint to you at that time?

A. As I say, he was so sleepy that he could not complain of any thing if he had wanted to.

Q. Was he able to talk to you?

A. He talked very little, if I remember right.

Q. How long were you with him upon that occasion?
A. Fifteen minutes; I made a note of it in my book.
Q. When did you next see your father?
A. I think it was not until some time in September that I saw him again.
Q. Did you go alone?
A. My brother and I went down.
Q. And who did you see at that time when you went to the Asylum?
A. I don't remember who I saw then; I remember that father was very glad to see us, and he said that he could not tell exactly how he came in there or for what reason; he asked us that question — what was the reason that he was brought there to the Asylum, and when and who brought him.
Q. Then he appeared very different at this time than what he did in July?
A. Yes, sir, very different.
Q. Did he make any complaint at that time about the treatment he had received at the Asylum?
A. I don't remember that he did at that time.
Q. How long an interview did you have at that time?
A. I cannot tell you, it was a short visit.
Q. Was it as long as an hour, do you think?
A. No, sir; I don't think it was an hour.
Q. Did you see Dr. Brush or Dr. Pilgrim or Dr. Backus at that time?
A. I don't remember seeing them; I don't remember of knowing Dr. Pilgrim the first time that father was in the Asylum.
Q. Or Dr. Backus?
A. No, sir; I do not remember seeing him either, at that time.
Q. Or Dr. Andrews?
A. No, sir, I do not recollect him, in particular.
Q. When did you next go to the Asylum?
A. I could not tell, it was between that time and the 25th of October.
Q. Who brought your father home the first time he was at the Asylum?
A. I brought him home myself.
Q. You went to get him home at that time?
A. Yes, sir; that is what I went for on that occasion.
Q. Did you go alone on that visit?
A. No; mother and I went.
Q. In the second visit were you kept waiting any length of time before you saw your father?
A. No, sir; as I stated, we went three times to visit him, but I do not remember about the third visit; there were three visits, and I think that mother was one of the parties who went down, and I think I was the other one.
Q. Have you told us all of the things about which your father

complained as to his treatment during the first time he was in the institution ?

A. He has told us of things he had seen there, not happening to himself, and what he had to do in there ; he said that one day he saw in the hall a violent patient, and there was only one attendant on the hall at the time, and the attendant tried to quiet this patient, but he was violent all the time, and the attendant went up behind him and struck him back of the head ; I do not remember whether father said he fell to the floor, or whether the attendant got the patient on his back on the floor, but any way the patient was on the floor, and that then the attendant choked him until he was black in the face ; father said he thought he had killed him, and he called on father to assist him carry the patient into another room, and he told me at other times that he had often seen patients struck there if they did not behave ; that they had a habit of striking them in the head.

Mr. SWAN — I would like the privilege of asking a few questions of this witness ?

The CHAIRMAN — Certainly.

By Mr. SWAN :

Q. When did they first employ two men to take care of your father at home ?

A. I think it was on Wednesday evening ; Wednesday night we had two men stay in the house.

Q. Why did you employ those two men ?

A. For fear that these spells might come on.

Q. What spells ?

A. They were violent, when he wanted to get up, and when he was not allowed —

Q. What did he do ?

A. If they would restrain him — hold his arms he would —

Q. Suppose you had not restrained him — what were you afraid of ?

A. We did not know what he might do, we guarded against him all the time, we knew what he did do when he was restrained ; we had two persons to take care of him all the time he was there.

Q. What acts of violence did he use that caused you to have four men to take care of him ?

A. In the first place we did not want to have father leave the house.

Q. Any thing else besides that ?

A. Yes, sir ; we did not know but if one of us had undertaken to keep him in the house he might turn upon us as he did if we did restrain him.

Q. What did he do in the way of showing his violence ?

A. While he was in the bed I have stated that he got up, and got away suddenly from the two watchers, and got out into the other

room, and the other two men were there, and they grabbed him and the four men took him back.

Q. Did four men stay with him?

A. At times they did.

Q. And you considered it necessary at that time to have four men watching your father?

A. No, sir, we did not consider it was necessary to have four men, but we considered it necessary to have some one in the house, the four men happened to be in the house for fear something might come up. There were only two men with father, but they changed round; when the two got tired the other two would go in there; when his hands and feet were both held, the only thing he could do was to spit at them.

Q. You say that when your father was taken to the Asylum you told Dr. Backus about your father's violence?

A. Yes, sir.

Q. Did you testify before the coroner's jury?

A. Yes, sir.

Q. Did you say any thing about that there?

A. I think I did.

Q. Do you recollect whether you did or not?

A. I am quite certain that I did.

Q. At the coroner's inquest you said that you told Dr. Backus about your father's violence?

A. Yes, sir.

Q. How often was chloral given to your father before going there?

A. I think it was given — I can't be certain how often it was given.

Q. How often as near as you can recollect?

A. It struck me that it was every half hour, but now it comes to my mind that it was every two hours; I cannot really tell how often it was, but it was between half an hour and two hours.

Q. Did he tell you how much to give?

A. Yes, sir; but I do not remember now what it was.

Q. Do you know how much of your conversation Dr. Backus took down when you and he were alone?

A. I know he took down only a very little in the beginning.

Q. Do you know what he took down?

A. I know when I said to Dr. Backus about what father said about the axe that he had said you take the axe, and knife, and razor away from me; I was telling him that, and — "that is no matter," said he, and he put his paper by and used those words: He had one of those pads, and he wrote about two lines, no more, and he had begun on the third; that is the best of my recollection.

Q. When did you have this conversation with your father in which he told you not to say any thing about his treatment in the Asylum, because in case if he ever went back there, etc. —

A. That they might be revenged on him — yes, sir; that was

soon after he came back from the Asylum the first time he was there; he did not want the family to know much.

Q. For fear that he would be sent back?

A. For fear that he might some time have another attack and be sent back there.

Q. Was your father a pay patient or a pauper patient?

A. He was a pay patient the first time he was there; the second time he was brought in by the county superintendent's arrangement that we should pay the county.

By Mr. MORGAN:

Q. You say that the second time that your father went there you thought it was in consequence of a lawsuit; what was the cause of his first insanity?

A. I do not think the lawsuit itself brought on the insanity, but it was thought that this man was going to break his word and make it a church matter.

Q. What was the immediate cause of his insanity in 1878?

A. I could not tell you.

Q. Did he have any trouble then?

A. No, sir, he had no business trouble at that time; I stated before that it was some trouble; it was some excitement that brought it on the other time.

Q. Do you know what that was?

A. No, sir, I don't remember.

Q. What was your father's physical strength, as to whether he was a powerful man, or otherwise, when he came the second time to the Asylum?

A. He was a healthy man; he came, as you may say, from his work; he had worked every day.

Q. What as to his being a powerful, strong man; how was it in that respect?

A. He was quite strong.

Q. He was a heavier man than you, considerably?

A. Yes, sir, and he had a good constitution. [The weight of the witness would be about one hundred and forty-three pounds.]

Q. In his work was he a powerful man in lifting?

A. No, sir, he was not.

Q. Did you ever see him have scuffles to see what his ability was to handle other persons?

A. No, sir.

Q. Did you see him have the scuffle with the four men in your house?

A. No, sir.

Q. When you went into the Asylum the last time with your father, you said you went into a room and you and Dr. Backus went in together?

A. Yes, sir.

Q. Did you go into the room at the left or right?

A. We went into the Asylum; we went to our right, then turned again on our right to the office.

Q. When you and Dr. Backus went out together where did you go?

A. We went through the first office into the further office where the stenographer is; the little room between the reception room—

Q. And Dr. Gray's office?

A. Yes, sir.

Q. And your father and the neighbors were in the room next to Dr. Gray's?

A. Yes, sir, and there was a door between us.

Q. Did your father at any time complain of your treatment of him while he was insane at home; that you were too harsh with him?

A. No, sir.

Q. Did he complain that those neighbors who were watching him, that they treated him harshly?

A. No, sir.

Recess until to-morrow morning.

FRIDAY, 9 O'CLOCK, A. M., *Feb.* 29, 1884.

Present — The whole committee.

Proceedings continued, as follows:

Mr. MORGAN suggested to the committee that he was desirous of taking the testimony of the three attendants Weir, Brown and Bills.

Ex-Senator GOODWIN, of Utica, appeared for Mr. Weir, and made the following statement:

GENTLEMEN OF THE COMMITTEE — I desire to interpose an objection to the examination of Mr. Weir. Mr. Weir together with his associate attendants — Brown and Bills — stands here under the charge of a crime—murder in the second degree; I think any examination of these men by this committee might affect their interests on trial if they should be indicted and brought to trial upon the charge against them; it has been suggested that these men will not be examined upon the specific charges touching the death of Mr. Hughes, and that they will only be inquired of as to the general management of the Asylum, as far as their observation and experience enables them to say any thing about the matter. It seems to me that any light the committee desire to obtain upon that subject can better be obtained from the ninety odd additional attendants and employees, who have been there more less for a considerable time. Now I appeal to the committee under the circumstances that even upon that branch of the institution investigation it is placing these men in a very peculiar, and it may be, unfavorable position; some testimony may come out that might be used to the disadvantage of these men by the prosecution. These men are now discharged employees of the Asylum, and without going further into the matter it seems to me that neither public justice nor the facts to be investigated by this legislative committee would require this examination, and therefore I submit that under the circumstances they ought not to be required to be sworn, or to give any evidence whatever upon this matter. I will only add that with regard to the matters touching the death of Mr. Hughes, these men may avail themselves of their privilege to decline to answer any questions upon that subject.

Mr. MORGAN — Let me ask Mr. Weir one question.

Mr. MORGAN — Mr. Weir, suppose we examine you in reference to the general management of the Asylum, the surplusage or shortage of help, the labor required of attendants, their hours, etc., without touching at all upon the case of Mr. Hughes, are you willing to give us, under oath, such statements?

Mr. WEIR — Yes, sir, I am.

Mr. MORGAN — Leaving out the Hughes matter entirely?

Mr. WEIR — Yes, sir.

The CHAIRMAN — I will say that the committee last night considered this question and recognized the force of the objection that is now raised by Mr. Goodwin. In regard to the matters suggested

by Mr. Morgan, about which the witness expresses his willingness to answer, we think there can be no impropriety in such line of inquiry. The examination may proceed, and if during its progress any question is asked that touches the privileged ground of the witness, an objection can be made and the committee will pass upon such objections specifically. In view of the position taken by the counsel, the committee will ask the witness no questions concerning the injuries or death of Mr. Hughes.

Thereupon —

A. G. WEIR

Was sworn and examined, and testified as follows:

By Mr. MORGAN:

Q. What is your age?
A. Forty-seven.
Q. Where were you born?
A. Nova Scotia.
Q. When did you come to this country?
A. When I was nine years of age.
Q. Did you come to New York State?
A. No, sir, I came to Massachusetts.
Q. From Massachusetts where did you go?
A. In the army.
Q. When did you enlist?
A. April, 1861.
Q. At the outbreak of the war?
A. Yes, sir.
Q. How long were you in the army?
A. Three years.
Q. Were you honorably discharged from the army?
A. I was.
Q. Did you ever re-enlist?
A. No, sir, I did not.
Q. From the army where did you go?
A. I came to Oneida county.
Q. Have you remained in Oneida county ever since.
A. Not all the time.
Q. Where else have you resided other than in Oneida county?
A. I worked in Chenango county, and also in Pennsylvania.
Q. When did you return to Oneida county?
A. In 1880.
Q. You have since then resided in Oneida county?
A. I have.
Q. What business did you go into when you came to Oneida county in 1880?

A. The business that I went into was into the Asylum.

Q. When did you enter the Asylum?

A. I entered the Asylum September 3, 1881.

Q. In what capacity?

A. Employee.

Q. Did you go into the Asylum then?

A. Yes, into the Asylum.

Q. What was your business in the Asylum?

A. I was given a rule-book, and I was placed on the ward where I always remained. A book of instructions was given to me, and in that rule-book also blanks for writing out cases, making a memorandum of cases.

Q. Who interceded for you to get a situation there?

A. Mr. John B. Orendorf; he is now an employee in the Asylum.

Q. What examination did you pass through before being employed in the Asylum, by the authorities of the Asylum in reference to your qualifications or ability to fill the position?

A. When I went to the Asylum for employment, I had a letter from Mr. Dwyer to the doctors; I came into the sitting-room, Mr. Dwyer talked with me a while — two of the doctors came in.

Q. What two doctors?

A. Dr. Russell and Dr. Josselyn.

Q. And what inquiries did they make to you in reference to your former business or qualifications?

A. I could not tell just now the conversation that passed.

Q. Give us the substance of it?

A. I showed them a writing that I had from a man I was employed with five years, as superintendent of his tannery; that was in Pennsylvania.

Q. And you gave them a letter — a recommend that you received from the proprietor of that tannery?

A. Yes, sir, Mr. William B. Guile of Susquehanna county, Penn.

Q. You were in Mr. Guile's employ for six years?

A. Yes, sir.

Q. And the letter from him you gave to the physicians at the time they examined you, or did you give them to Mr. Dryer?

A. To Mr. Dryer.

Q. How much were you to have a month?

A. Twenty dollars.

Q. And any arrangement by which that was to be increased?

A. There was.

Q. What increase was there to be made of the wages?

A. In the first six months, two dollars a month.

Q. During your time there, were your wages advanced beyond the twenty-two dollars?

A. Yes, sir; it was.

Q. And what amount was it advanced?

A. After I was there I was given charge of the ward, and increased to twenty-eight dollars.

Q. Of what ward were you given the charge?
A. Ward four.
Q. Do you mean you were supervisor of that ward?
A. No, sir; I was head attendant.
Q. When did you take the position of head attendant?
A. First of April, 1882.
Q. What attendants did you have under you?
A. I had three others.
Q. Who were they?
A. I do not know as I can call the names now, because we had so many changes.
Q. Who were the attendants under you on the first of January, 1884?
A. Mr. Brown, Mr. Bills, and Mr. Hoffman.
Q. On what ward was that?
A. On ward four.
Q. Will you state the number of attendants that you had upon that ward, the time that you were required to go on to work in the morning, and the time you were permitted to retire from duty, and what was required of you between the time of retiring from active duty till you go on in the morning, and the amount of work that you had to do, and the number of patients that that ward averaged?
A. The accommodations for the number of patients is twenty-two, and I had on twenty-nine when I was relieved from the institution.
Q. What time in the morning were you required to go on duty?
A. In the summer at five o'clock.
Q. What time in the winter?
A. Six o'clock.
Q. Before going on duty, did you have your breakfast?
A. No, sir.
Q. At what time did you have your breakfast?
A. Seven o'clock.
Q. While you are at breakfast, who takes your place?
A. Not anybody in particular.
Q. The attendants under you, do they take breakfast at the same time as you do?
A. They did when the patients were all suitable to go down stairs into the dining-room.
Q. Did you and the attendants eat at the same table with the patients?
A. We did not.
Q. In the same room?
A. Yes, sir.
Q. If the patients were all in condition to go into the dining-room, they were marched in, and you all took your breakfast at the same time?
A. Yes, sir.
Q. Suppose there were patients that could not be taken to the dining-room. Did that occur occasionally?

A. Yes, sir.

Q. What was done?

A. One attendant was left to see to them.

Q. At what time in the day did you have your dinner?

A. Twelve o'clock.

Q. And the rule was the same in reference to your dinner and breakfast?

A. Yes, sir.

Q. What time did you have supper?

A. Six o'clock.

Q. Was there any given number of minutes' time that you were to be allowed in which to take your meals?

A. Oh, no.

Q. You had your supper at six o'clock, and the same rule applied to the breakfast and dinner?

A. Yes, sir.

Q. At what time in the evening were you to be relieved from active duty?

A. Never relieved, with the exception of two nights in the week, from half-past six to ten, that was the evening out.

Q. From half-past six to ten o'clock you were permitted to leave the institution?

A. Yes, sir.

Q. I suppose there is an hour in which you are permitted to retire to bed?

A. Well, about nine o'clock.

Q. Then, what are your duties during the night?

A. We are held subject to orders to take care of patients any hour in the night that they may come out on the ward.

Q. Do you mean by coming out on the ward, leaving their rooms and coming out?

A. Yes, sir; disturbed patients coming out, or new patients being admitted; the patients sometimes come out into the ward.

Q. Do they take patients in as late as nine o'clock at night?

A. Yes, sir, at all hours.

Q. Whenever they reached there?

A. Yes, sir.

Q. Describe generally your duties during the time you are on the ward?

A. At any time during the night, there were very few nights that we could remain in bed all night; on frequent occasions we would have to get up and keep violent patients from breaking the doors and windows; they would keep us awake all night until we would be so sleepy sometimes in the day time — or so sleepy that, if the building was afire all around us, we should have to sleep, because we were so tired.

Q. In cases where you are called up in the night, and spend a great deal of the night in attendance upon patients, are there any arrangements by which you can be relieved during the day time?

A. Not any.

Q. No one to take your place to give you a sleep during the day, or rest?

A. No, sir.

Q. And was that the same with the other attendants in that ward?

A. It was.

Q. What were your duties during the day time?

A. In the summer time we had orders to get out sharp at eight o'clock to work.

Q. Out where?

A. Out on the farm and in the garden.

Q. That was, to go out yourself; and who with you?

A. Take the patients — all them that was able to work — out with us.

Q. Now what did you have to do upon the farm?

A. Did the work in the garden and set the patients to work.

Q. Did you have to use the hoe yourself; that is, the attendants?

A. Yes, sir.

Q. And at the same time look after the patients?

A. Yes, sir.

Q. Take it during the past summer, how many would the average be of patients that came out on to the farm or garden to work, from your ward?

A. They would average about five off my ward.

Q. When the five were out, that would leave an average of twenty on the ward?

A. It was about eighteen or twenty — not on the ward, they would go out into the exercise yard.

Q. Would there be some who could not go out to exercise?

A. Yes, sir; once in a while one would be sick a bed.

Q. When you were out on the farm, and a portion of the patients out exercising, and others that did not go out, then how were the attendants distributed among them?

A. There was one put in the exercise yard, and one or two had to stay in the ward and take care of the sick; I had to do that myself, or some one else had to, and the others would go out on to the farm, or into the garden with those that were able to go out to work there.

Q. At eight o'clock in the morning you had to go out?

A. Yes, sir.

Q. And when would they be brought back into the Asylum?

A. At eleven o'clock, when the bell rang.

Q. And remained how long?

A. Until one o'clock.

Q. And then you go out again in the same way?

A. Yes, sir.

Q. And remained until what time?

A. Five o'clock.

Q. The ringing of the bell?

A. Yes, sir.

Q. In cases of storm, then I suppose you did not go out?

A. No, sir; remained on the ward.

Q. In your own way, describe to the committee the labor that you had to perform in taking care of these patients; the conduct of the attendants toward the patients, and of the patients toward the attendants, down to the 15th of January — that is, as to the violence of the patients; how much labor it was to take care of them, and how much strength was required in taking care of them.

A. There were some patients on that ward who were very easily managed without much trouble, and others were difficult to manage; sometimes it was all that four of us could do for to manage them; of course we were not allowed to use any mechanical restraint, and of course we had to use physical.

Q. Were you permitted to put restraints upon the patients without first reporting and getting authority to do it from the physicians?

A. Once in a while we put on a restraint, and at once reported it.

Q. When you reported that you had been compelled to put on restraint without first getting permission, what would be done; you reported to the physician, did you not?

A. To the supervisor.

Q. And he to the physician?

A. Yes, sir.

Q. After you had reported to the physician what would you do with regard to the restraint?

A. The restraint would be left on till the physician would come on and make his round.

Q. Then what would he do in the way of giving directions?

A. Sometimes he would order them to remain on, and at others he would order them to be taken off.

Q. Now you describe, in your own way, the different restraints that were used?

A. Of the different restraints we have what is called a straight jacket.

Q. Describe them?

A. The straight jacket was made of canvas, laced up behind, and the arms fastened together in the center.

Q. Something like what they call a camisole?

A. Yes, sir; and a belt put around them so that it fastens the hands in this position (indicating by crossing the hands in front of the stomach); the next was a strap with wristlets put on; it was a common strap, put through and buckled behind.

Q. With a ring to the strap that went around them, and that ring went into the strap on the arm?

A. Yes, sir.

Q. So that they could move their arms in this way (indicating)?

A. Yes, sir.

Q. And could the patient hurt himself with that on?

A. No, sir; he could not.

Q. Something has been said here in reference to the camisole

wont you describe it more fully; its construction, and the manner in which the patient is confined or restrained, and also the tendency that it would have to injure the patient?

A. I should say the camisole was a very nice restraint for to use — very good indeed; it is just the same as if the sleeves of the coat were sewn together and the straps put around them in here, that is, round the wrist — the camisole at the wrist — then the strap through on this other side, and then it is buckled behind.

Q. Describe that buckle behind?

A. The two ends of the strap — it was an ordinary buckle with a lock on it so that it can lock the strap when necessary.

Q. So that another patient could not take it off?

A. No, sir; could not release them.

Q. How is the back protected from that buckle, so that that buckle shall not injure the back?

A. It fits on the outside of the camisole.

Q. Then the canvas cloth protects it?

A. Yes, sir; heavy canvas cloth.

Q. And the buckle is between that and the clothing of the skin?

A. Yes, sir; and also his shirt is between.

Q. Have you ever known of a case where that buckle shifted to the back of the patient, so as to injure him?

A. No, sir; not in any respect.

Q. Have you ever known of any complaint by any patient of the buckle injuring their back?

A. No, sir.

Q. How about the hands, are they not drawn in toward the stomach, so as to make it very uncomfortable?

A. We put on that restraint to see how tight it is, and we will make it comfortable for them; that used to be my way of doing; and it was so loose that he could move his hands inside.

Q. Was there any danger of the hands being turned in toward the stomach, and pressing against the stomach, so as to injure or make it uncomfortable to the patient?

A. No, sir; there was six or eight inches space between the two hands.

Q. What complaint do the patients make, if any, when they are in the camisole?

A. They do not seem to make any complaint.

Q. Have you ever known an instance of any patients complaining of the camisole injuring them, or of confining their hands and arms so as to injure them?

A. I have not.

Q. Or so as to be uncomfortable for them?

A. No, sir; I have not; I would hear them say that they would like to have it taken off, but it ought to be on under the circumstances of their case.

By Mr. HASKELL:

Q. When the strap is put round in addition to the camisole, and is drawn as tight as you have ever drawn it, how much freedom could the patient's hands have; would it draw the hands snug together?

A. No, sir; it would leave them out that far from the body (indicating).

Q. About four inches?

A. Yes, sir; four or six inches from the body.

Q. Upon what class of patients do they place the camisole?

A. Them that are very violent and destructive — destructive in their clothing.

Q. State whether or not, in your judgment, it was necessary to use that restraint upon many of the patients?

A. It was, and a great many more ought to have it on than do have.

Q. You think they do not resort to that treatment in as many cases as they ought to do?

A. I do.

Q. If it is necessary, why do you not place the camisole upon others?

A. Because we do not want to be found fault with.

Q. Name an instance where fault was found with you for pacing a camisole upon a patient, if you can give the name of one.

[Objected to by Mr. Goodwin.]

Q. That is before the 15th of January?

[Objected to.]

The CHAIRMAN — Do you put that objection upon the ground of the privilege of the witness?

Mr. GOODWIN — Yes, sir; I do.

The CHAIRMAN — Then the objection is sustained.

Q. You may describe the strap and the wristlet a little more fully?

A. The strap and wristlets is used when patients come in that are very violent and struggling and striking the attendants and the other patients, then we have to use that.

Q. How is that in reference to the liability of its injuring a patient, if there is any such liability?

A. The patient cannot be injured; it is a very easy mechanical restraint.

Q. Did you know the patient P.?

A. Yes, sir; I did, very well.

Q. Was he in the habit of wearing that strap and wristlet?

A. After he killed Mr. B., he wore it for one year, and he wears it now, I believe.

Q. Did you ever know of a patient's being injured by that restraint?

A. I never did.

Q. I think you said you knew of no instance where a patient was injured by the camisole?

A. No injury that I remember; I do not think they could be injured by it.

Q. What other restraints did they use on the patients?

A. They use a kind of glove called the "muff;" that is made out of strong leather, and the wristlets is put on first, and then the muff is put over the hands so that they are in this shape (indicating) in front of the stomach; the fingers are nearly together, but not touching each other; then the strap is put on, and the leather covers the hands, and the arms are put in this position, that is, at about right angles.

Q. Bringing the arms about the waist?

A. Yes, sir.

Q. In that muff patients do not have the use of their hands then?

A. No, sir, they do not.

Q. In what cases do they use the muff?

A. In patients that are very violent and dangerous they use the muff upon.

Q. And that strap fastened to the back is very much like the other strap that you described, only that it goes around the wrist?

A. The straps are all the same and are all fastened with a buckle, and locked, if it is necessary to be locked.

Q. Have you ever known of an instance of a patient's being injured by the muff?

A. No, sir, I have not.

Q. Can you see any way in which they could be injured by it?

A. They could not be injured by any restraint that is used, if it was put on properly; sometimes it might be put on a little tight if the man did not look close to see, and it would be a little inconvenient, but it could not injure a patient in any way.

Q. Describe the difference between the patients as to their violence; which requires the different restraints — that is, the camisole, the muff, and the straps; state first what class of patients take the camisole?

A. Some of the violent patients; the camisole is used for different purposes; sometimes when patients are very violent, and cannot be controlled without restraint, it is used, and at other times when it is thought best to keep their hands in control, or they would badly abuse themselves.

Q. What class of patients are strapped around the wrists with the ring in the straps that go round the wrists?

A. The violent patients.

Q. The same class of patients?

A. Yes, sir; something similar.

Q. And the muff, what class of patients take that?

A. The same class; the reason why they use the different ones is that they do not always have a camisole to put on when necessary; sometimes it is not necessary to use it.

Q. What other restraints are used, if you remember of any others?

A. Not any.

Q. Do they restrain the feet in any cases?

A. No, sir.

Q. How about putting patients in a chair, how is that done?

A. By using the waist buckle, put around their waist and buckled round the back of a chair.

Q. When that is done can the patient get out of the chair?

A. He cannot.

Q. Describe that a little more fully, whether it is liable to injure a patient, or whether it is not so liable?

[Objected to by counsel for Weir.]

Q. Before the first of January last?

[Same objection.]

The CHAIRMAN — Suppose you ask him if any patient was injured, suffered any injury from being fastened in a chair prior to the 15th of January, within his knowledge?

A. I have never known any to be injured in that way.

Mr. GOODWIN — I object to this testimony.

The CHAIRMAN — Do you put it upon the ground of the privilege of the witness?

Mr. GOODWIN — Yes, sir, I put it upon that ground.

The CHAIRMAN — Then it must be excluded.

Mr. MORGAN — I propose to acquit myself fully in this respect, it has been charged by one of the papers of this city with being favorable to the interests of the Asylum; I want it to go on record, that I claim it cannot possibly reach the case in question, for the reason that Mr. Hughes was not an inmate at the time the question refers to; nor is it charged that he had any such restraint upon him when injured; it seems to me that this committee should be put in possession of evidence, that they may pass upon the question of restraint and its liability to injure patients.

The CHAIRMAN — The committee consider that the testimony now sought can be obtained from other witnesses, and for that reason and in view of the objection, they will exclude the testimony upon this matter. The objection is sustained.

Q. State as to the number of attendants in the institution compared to what, in your judgment, the necesssity of the case demands?

A. On a hall of that kind where there are so many disturbed patients there ought to be four attendants on the ward at least.

Q. State whether at any time while you were there you asked for more help?

A. I have, several times.

Q. And what answer would be made to your request?

A. Sometimes they would answer, we expect one soon.

Q. Take it before the 15th of January can you name any time when you called for more help and what the result was?

A. On different occasions when an attendant would give notice to leave we would be for several days short.

Q. Can you name any other instance?

A. I know one instance when we were two weeks short of help.
Q. Short of the usual amount of help do you mean?
A. Yes, sir.
Q. Do you remember any instance when you were short of help prior to the 15th of January?
A. Yes, sir, I do, but I could not give the dates when the attendants left.
Q. Can you state about when it was?
A. In July, 1883, I think.
Q. Was that on ward four?
A. Yes, sir.
Q. How many attendants do you have upon ward four?
A. Our usual number was four.
Q. How many did you have when you were short?
A. Only three.
Q. And in your judgment that was not sufficient help to control and care for the number of patients on the ward at the time?
A. No, sir; I say so.
Q. Through what time did it extend when you were short of help, in July?
A. Several days; I could not tell the number; we had quite a number of changes of attendants that left, and then we would always be short a few days after they went away.
Q. Is it not the rule there that an attendant who desires to leave must give notice a certain number of days in advance of leaving?
A. There is such a rule.
Q. And would attendants leave without giving that notice?
A. No, sir; they must always give that notice.
Q. And when the time of the notice expired and they left their places had not yet been filled?
A. Yes, sir; they were not filled; in many instances attendants were discharged; it would be several days before we got another.
Q. When a discharge occurs it is without any notice?
A. Yes.
Q. And it leaves the wards short of attendants?
A. Yes, sir.
Q. Who were the physicians in charge of ward four for the last six months prior to the 15th of January?
A. Dr. Josselyn, Dr. Pilgrim and Dr. Backus, prior to the 15th of January.
Q. How often did the physicians visit ward four?
A. Mostly twice a day, with a few exceptions.
Q. And which physician was in the habit of making a visit to the ward twice a day?
A. Sometimes Dr. Josselyn and Dr. Pilgrim both, and sometimes Dr. Pilgrim.
Q. When upon that ward, what did they do when they were visiting the ward? What did they do and what inquiries did they make?
A. They would go on to the ward and walk through and ask how

things was generally, and go off again in the course of five or ten minutes; if there was a patient sick in bed they would look at him or I would report his condition to them.

Q. How often was Dr. Gray upon that ward?

A. During my stay there?

Q. Yes, down to the 15th of January?

A. I think five times.

Q. Did you go there in 1881?

A. Yes, sir, in September.

Q. Between September, 1881, and the 15th of January last, he was on there five times you say; was that all he was there, was that the full number of times?

A. I could not say as to that, he might have been there once when I was away.

Q. But that was all when you were on duty?

A. Yes.

Q. When you had patients out at work, did the physicians make a practice of coming out and looking after them any?

A. They did.

Q. When out on exercise, how was it then about the physicians coming then?

A. They would come out and walk through the yard and talk to them.

Q. How about Dr. Gray, did he come out and look them over when they were out there?

A. I have never seen him do so but once.

Q. You had a habit of taking them out in the yard for exercise—out for a walk in the winter time, they were taken out into the city, but not in the summer time?

A. Yes, sir; them that could go they went out walking in the winter time.

Q. And sometimes they were taken out for a ride?

A. Yes, sir; once during the winter season.

Q. Do you know of any instance of a patient's getting injured when they were out for a walk and out for exercise?

A. I have.

Q. How would that occur?

A. By a violent patient striking a milder patient with their fists or with stones.

Q. Describe some of the instances where one patient has thus injured another patient?

A. When a man is very violent, and you can't control him without your holding him he is liable to strike the first man that is near him; or, to run up to a man and strike him; you can't tell what they are going to do; it may be that after one of them has run round a little while, and then may be he will come up and strike one of the other patients, or perhaps strikes an attendant with his fist or with a stone.

Q. Does that occur when they are out taking a walk or taking exercise?

A. It occurs when they are in the yard.

Q. How is it when they are out taking a walk in the winter?

A. There is none of the violent ones that is allowed to go out, it is the convalescents that go out; they will not run away or get into trouble outside.

Q. Did you go out with patients on the walk outside of the inclosure at any time?

A. In the winter of 1883, I did.

Q. Do you know any rule required to be observed for prohibiting the patients from looking over into the yards of the people who live in the streets where the patients are walking?

A. No, sir; I do not.

Q. Do you know any of the managers of the Asylum?

A. I know some of them by sight.

Q. Can you name some of them that you know by sight?

A. Mr. Winston, Mr. Lowery and Mr. Campbell.

Q. Mr. Campbell is the president of the board of managers?

A. Yes, sir; and Mr. Swan; I have seen him quite often without knowing who he was, but I learned this morning that he was Mr. Swan; I learned it when he came in here to the hotel.

Q. How often has Mr. Campbell, the president of the board, been in the habit of visiting the institution?

A. I could not tell you.

Q. How often have you seen him upon ward four?

A. I think I have seen him there on one or two occasions with the board of managers, when they have gone through the Asylum.

Q. Of course he could be there in the institution and you not know it, unless he came upon your ward?

A. Yes, sir; he might.

Q. How often was Mr. Winston there? How many times have you seen him there since you have been there?

A. That I could not answer; I could not say when they came through, as I was not acquainted with them, but after hearing their names, I knew who they were by hearing them spoken of; they generally came through when they met there.

Q. Do you know about how often that was?

A. I think twice a year.

Q. When the managers passed through your ward and you saw them, did they ever make their business known to you?

A. No, sir; they did not.

Q. Did they ever talk with you about the management or affairs of the institution?

A. No, sir; they did not.

Q. Or make any inquiries of you about the condition of the patient?

A. No, sir.

Q. Or at any time ask you if you could suggest any thing in the way of improvements?

A. Never.

Q. On any occasion while you were there down to the 15th of January last, did either one of the managers ever make any inquiry of you in reference to the management of the institution, or the treatment of the patients; or in reference to the patients any way?

A. The physicians are with them generally when they come through, they done the talking.

Q. Did the physicians at any time make any inquiry of you for the purpose of getting any suggestions of you, as to any improvements that might be made in the way of treating or managing the patients?

A. No, sir; they did not.

Q. Has Dr. Gray at any time made any such inquiry?

A. No, sir.

Q. During the time that you were there, and down to the 15th of January last, were you ever called into Dr. Gray's office?

A. Yes, sir, I was.

Q. What would be the object of that?

A. In regard to the abuse of patients.

Q. Did he make inquiries as to the treatment of patients?

A. Yes, in regard to the abuse of them.

Q. Taking it back of the 15th of January, can you name any instance?

A. I can.

Mr. Goodwin — This is pretty close to the line.

Mr. Morgan — Do you object to my pursuing it any further?

Mr. Goodwin — Yes, sir, I object to that.

The Chairman — For the same reason?

Mr. Goodwin — Yes, sir.

The Chairman — Then the objection is sustained.

Q. Do you know of any other attendants having been called into Dr. Gray's office within the period mentioned, other than yourself?

A I do.

Q. Without asking why they were called there, can you give the names of any other attendants that were called into Dr. Gray's office for the same purpose; I will not ask the purpose?

A. Yes, sir.

Q. Name the attendant?

A. John House.

Q. Do you know for what purpose John House was called in?

A. I do.

Q. John H. House is a resident of Miller's Mills, Herkimer county?

A. He is.

Q. What was he called before Dr. Gray for?

A. For to tell in regard to the patients that came on to my ward, that had been misused before they came there on to my ward.

Q. Do you know who the patient was that it was claimed was misused?

A. I do; it was G. W. B.

Q. Where was he from?
A. Somewhere near G., somewhere back of G.
Q. Is he in the Asylum at the present time?
A. Yes, sir, he is.
Q. Was it reported that he had been misused on some other ward?
A. Yes, sir.
Q. On some other ward than yours?
A. Yes, sir.
Q. On which ward?
A. On the twelfth ward.
Q. Who were the attendants on ward twelve?
A. Dr. John Sage was head attendant at the time.
Q. Who were the under attendants? Was House on ward twelve?
A. No, sir; he was on ward four.
Q. Of course what took place between him and Dr. Gray you don't know only by report?
A. That is all.
Q. When the patient came on to your ward what was his condition?
A. He had been very badly misused.
Q. Describe his condition?
A. It was black and blue from his hips up to under his arms, all the way round.
Q. How could you account for that?
A. I think it was because he had been roughly handled.
Q. State whether or not he was apparently lame in consequence of the bruises?
A. He was a very crazy, sick man, and could not give any account of it himself.
Q. Did you learn from any of the attendants on ward twelve how he came by his injuries, and if so, give us the name of the attendant who informed you?
A. I did; it was Mr. Quine; he is now in the Isle of Man in the old country.
Q. Was he discharged from the Asylum?
A. He was not.
Q. How long did he remain in the employ of the Asylum after this injury occurred?
A. I think about five or six months.
Q. Do you know of any other circumstances that were reported to you of injuries to patients?
A. Yes, sir.
Q. What other?
A. It was what I see in regard to the conditions of the patients when they came on to my ward?
Q. To whom did Quine report, of his having inflicted the injury?
A. Mr. Sage.
Q. The attendant on ward number twelve?
A. Yes, sir.

Q. Where does Sage now reside?
A. I think here in the city.
Q. Do you know his given name?
A. John.
Q. Where is he now?
A. In Cory, Pennsylvania.
Q. How long did Mr. Sage remain as an attendant there after this injury was reported?
A. He remained until about the 1st of February, 1884.
Q. And when were these injuries inflicted, or about when?
A. In April, 1883.
Q. Do you know whether there was any investigation instituted by the authorities of the Asylum as to the manner in which the patient received those injuries?
A. There was.
Q. And were you called upon to make any statement in reference to the condition in which you found him when he came upon your ward?
A. Yes, sir; I was called, and so were others.
Q. Do you know what the result of that investigation was?
A. I never heard.
Q. Who was the investigation conducted by?
A. It was conducted — Dr. Bloomer called me into his office to make a statement as to how I found the patient, and Dr. Gray at another time; I was in there several times.
Q. Give the manner in which that would be done; were you called into the doctor's office to state the condition of this patient when he came upon your ward?
A. Yes, sir.
Q. Did you inform the doctor of what Mr. Quine had said to you in reference to the manner in which this man was injured?
A. I did.
Q. State generally, as near as you can remember, the extent of that investigation; state what was said by the doctors; the questions put to you and your answers; give it all as you remember it?
A. I could not give the dates.
Q. State the particulars as near as you can?
A. When patients came on to my ward I always examined them to see if there were any injuries upon them any way.
Q. When you found any injuries upon them what did you do?
A. I would report it, if I durst, as far as I dared to.
Q. Would you report to the supervisor of the ward?
A. To the doctor.
Q. Is there any rule that you are to report to the supervisor?
A. I could report to the doctor or to the supervisor.
Q. Would you report and show him the man?
A. Yes, sir.
Q. You say you would report as far as you durst; what do you mean by that?

A. Well, I will state in this way: that I expected to be discharged for making such reports.

Q. What caused you to think you would be discharged for making a truthful report?

A. When I would report I perceived the actions were such that I did not think it was right toward me for making the report.

Q. That is, the actions of the doctors, do you mean?

A. From the physicians; yes, sir.

Q. Would they appear to be displeased at the report you would make?

A. He would.

Q. What physician appeared to be displeased at the reports so made?

A. Dr. Josselyn.

Q. What remark would be made, if any, if you could remember, to you by the physician when you made such reports?

A. Well, it was as though my word was not reliable; I said to the doctor in this case of Mr. House, I said: "Is not he reliable? Is not Mr. Roberts another reliable man? and as good attendants as there are in the house?" Well, he thought they were reliable, but he says: "They did not see the injury done; they were not on the ward."

Q. Mr. House is a very reliable man in your opinion?

A. Yes, sir, very; he was one of my best attendants at the time; Mr. House has said to me before: "Mr. Weir, there ought to be something done to abate this cruelty to patients, but he did not durst report it, because there were some things it was of no use to mention."

Q. You mean cruelty by the attendants toward the patients?

A. Yes, sir.

Q. Any other instance you can remember where the physician seemed to doubt the report that you made of injuries or unkind treatment of patients by attendants?

A. There was the case of Mr. S. he came on to my ward very badly injured; he came from the same ward — twelve.

Q. Describe his injuries?

A. His chest was in a very bad condition; he was spitting blood he was a patient that had fits and when he was over the fits he could talk very rationally.

Q. And you say he was a patient that was brought to your ward from the twelfth ward?

A. Yes, sir.

Q. What is the character of ward twelve as compared with the other wards, and what class of patients are on that ward?

A. The disturbed X class.

Q. And when he came on to your ward, who brought him there?

A. The supervisor.

Q. The supervisor of what ward — of your ward?

A. No, of the third department.

Q. What report was made in reference to that patient?

A. When he was fetched on to the ward?

Q. Yes.

A. Not any that I recollect of.

Q. Did you ascertain how he got injured?

A. I did.

Q. How did you ascertain that — from what source?

A. I asked him how it was done.

Q. Asked the patient? At that time did the patient appear to be rational?

A. Yes, sir.

Q. What did he say?

A. He said that Mr. Sage had put him into the bath tub and had jumped on to his chest while he was in the bath tub.

Q. Any further description did he give you as to the manner in which the injuries were inflicted?

A. Yes, sir; he said that his chest troubled him very much, that he was very sore.

Q. How long did the patient seem to be laboring under the effects of his injury?

A. He was laboring under that injury until he went to Ovid, he lived a week after he went there, he labored under that difficulty all the time he was with me.

Q. Do you know where that patient was from?

A. Not far from Constableville, somewhere in that direction, somewhere up there.

Q. Can you give about the time when this occurred?

A. It was in April or May, 1883.

Q. About what time was the patient sent to Ovid?

A. In September.

Q. Can you give any other instance of a patient being brought to your ward who had the appearance of being injured?

A. I can — the case of Mr. G., his initials are C. O.

Q. What appeared to be the difficulty with him?

A. I should say that one of his ribs were broken.

Q. Can you tell upon which side?

A. Yes, sir, on the left side.

Q. Describe a little more fully the injury to the patient when he came on to your ward?

A. When he came on to my ward, before he went to bed that night I had him take off his clothes and called my attendants to help examine him to see his injuries; I had known previously of his having some before he came there, and we found a bunch about the size of a hen's egg, I should think, on his second or third rib on the left side.

Q. Did the patient appear to be sufficiently rational to talk about it himself?

A. He was.

Q. What did he say in reference to the injury?

A. He told me how it was done, and the man who done it.

Q. State what he told you?

A. He stated that he had been stamped on by Mr. Sage. That he stamped on him and broke that rib.

Q. That was the same man that had handled the other patient?

A. Yes, sir.

Q. What did you do in reference to that injury?

A. There was nothing that could be done for it at that time; there merely seemed to be a hard lump there at that time; I did not think there could be any thing done about him.

Q. Did you report the injury to the physician in charge?

A. Yes, sir; I made a statement to the physician in charge.

Q. Do you know whether he examined the man or not?

A. I think he was taken to the office and made a statement himself; I think he was examined down there.

Q. What office was he taken to, the doctor's or superintendent's?

A. It was down to the doctor's office.

Q. You did not go down with him?

A. No, sir.

Q. What was done, if any thing, by the doctor for this injury?

A. There was nothing done for him until after he came on to my ward.

Q. Do they not sometimes put on a bandage or something around them in case of a broken rib?

A. I believe they do.

Q. Was there any thing of that kind done for him?

A. No, sir, not after he came out of my ward.

Q. How long did he remain on your ward?

A. He remained there several months.

Q. Do you know what became of him?

A. He was put on to a quiet ward, and he is in the building now; he was on ward four when I was there a few days ago; he came on there about a week before I was relieved.

Q. Do you know yourself whether or not Mr. Sage was called upon to account for that injury?

A. He was to the office.

Q. Do you know what the result was?

A. No, sir, I do not.

Q. Do you remember any other case of a patient's being brought to your ward who bore the evidences of injuries received before coming on to your ward?

A. That is all.

Q. How was it as to seeing patients with black eyes and bruises upon their faces?

A. That is very frequently the case, and it cannot be any otherwise.

Q. How do you account for those?

A. They strike each other.

Q. And sometimes it occurs, I suppose, by their injuring themselves?

A. Yes, sir.

Q. Did you ever see a patient walk up to the wall and pound his head pretty severely?

A. I have, and have strapped him to a chair.

Q. And what other actions have you seen, if any, whereby a patient would injure himself?

A. They would not injure themselves when strapped in a chair.

Q. Is there any way that a patient can injure himself when strapped in that chair, that you know of?

A. Not very easily.

Q. The chair is set far enough from the wall so that they cannot strike themselves on the wall?

A. Yes, sir, it is.

Q. Have you ever known of a case where a patient strapped in the chair has been injured by another patient striking him?

A. I have.

Q. Sometimes a patient will redress an imaginary grievance by setting on to another patient?

A. Yes, sir.

Q. Attached to your wards were there any covered beds?

A. Yes, there were four covered beds.

Q. What class of patients are put into the covered bed?

A. The class of patients that cannot be controlled on the wards.

Q. Do you know of any instance where a patient has been put into a covered bed where you did not think it necessary that he should be placed?

A. I never knew of any case but what it was necessary.

Q. You never knew of any case of any patient being put into the covered bed, but what it was absolutely necessary for him to be put there either for his own protection or for the protection of the other patients?

A. For his own benefit.

Q. Have you ever known of a patient injuring himself in the covered bed?

A. Slightly; not very seriously; perhaps he might knock the skin off his hands or off of his elbows, but only such slight injuries at that.

Q. How long have you known of a patient to be kept in a covered bed without being taken out; how long is the greatest length of time that you know of between the time of putting a patient into the covered bed and taking him out of it?

A. They are taken out half a dozen times a day; every time it is necessary to change them they are taken out for such purposes.

Q. Have you ever known of an instance of a patient being kept in the covered bed as long as twenty-four hours — without being taken out, I mean?

A. No, sir; I have not.

Q. Your opinion is that patients have not been kept longer in the covered bed than it was necessary, in your judgment, to keep him there?

A. No, sir; I have known of a good many who ought to have been kept there a little longer for our benefit and their own.

Q. By your benefit, or "our" benefit, whom do you refer to?

A. Because, when he got up, in the condition he was in, we would have to hold him to keep him there from injuring other patients, or other patients from injuring him; and if he had been left in bed a little longer, in my judgment, it would have been better for him.

Q. When he was taken out of bed, at whose orders was he taken out in such case?

A. The doctor would order him out.

Q. Usually, in the bed, they are undressed, I suppose?

A. Yes, sir; in all cases.

Q. And when taken out and dressed, what was the practice in reference to bathing them?

A. The general rule was to bathe the patients once a week, and then keep them bathed as often as necessary; some of them we had to wash two or three times a day.

Q. In consequence of their filthiness?

A. Yes, sir.

Q. Now, have you known of any cases where attendants have been injured by patients?

A. I have; very severely.

Mr. Morgan — Is there any objection to his stating about the attendants having being injured by patients prior to the 15th January?

Mr. Goodwin — Yes; I shall object to that; I do not think it is material one way or the other, but I shall object to it.

The Chairman — What can be the objection to that?

Mr. Goodwin — The question might arise as to what he did in the case of Mr. Hughes, if any thing, in view of the fact of his knowledge that attendants had been injured by patients.

The Chairman — And do you think that could affect his defense any way?

Mr. Goodwin — Yes, sir.

The Chairman — Do you put your objection upon the same ground? That of the privilege of the witness?

Mr. Goodwin — I do.

The Chairman — In accordance with the previous ruling, then the evidence will be excluded.

Q. Have you known of any instances of the doctors in charge being injured by any of the patients, prior to the 15th of January?

A. I have.

Q. What doctor?

A. Dr. Josselyn for one.

Q. What other doctor, if any?

A. Dr. Bloomer; I have known of his being injured in that way.

Q. How did that occur?

A. He was walking down the hall when a patient came toward him, and just when he got about to him he struck him so that he was laid in bed for three days.

Q. Struck whom?

A. Struck Dr. Josselyn, the patient did.

Q. Any other instance? What was the cause of Dr. Bloomer's injury?

A. A patient kicked him.

Q. Where?

A. In the privates.

Q. Do you know the name of the patient?

A. Yes, sir, it was Mr. W.

Q. Is he there now?

A. No, sir, he is at home; he went home discharged.

Q. Where was he from?

A. I think he was from Fort Edward.

Q. How serious was the injury to Dr. Bloomer?

A. Well, not very serious, because he was a little out of his reach, but he felt it for several days; if he had been three or four inches nearer he would have received more severe — perhaps very severe — injuries.

Q. Describe the manner in which you have to keep yourself guarded against assaults from patients there?

A. When patients come on there violent, and it takes five or six men to bring them on to the ward, we have to do the best we can if they tackle us.

Q. Well, is it necessary to keep yourself watchful all the time so that you are not attacked unawares, and thus get injured?

A. Yes, sir, we have to keep a watch all the time.

Q. Have you known of any instances where it took five or six men to bring a patient on to your ward?

A. I have.

Q. And a severe struggle to get him there?

A. Yes, sir.

Q. And when that was done he was left with the other patients on the ward?

A. Yes, sir.

Q. How many attendants would there be on the ward to take care of him?

A. There would be four attendants, but they could not always be there, all of them, one might be in the dining-room and would be gone perhaps an hour and a half three times a day.

Q. Three times a day you had to detail one of the attendants to be in on duty at the dining-room?

A. Yes, sir.

Q. And at that time there would not be to exceed three men in charge of the ward?

A. Sometimes not three, one would sometimes have to go out and get in the clothes of the ward — the washing, and that would only leave but two on the ward.

Q. Were two attendants sufficient to take charge of the number of patients you had on the ward?

A. They were not.

Q. And ordinarily would three be sufficient?

A. It would be if they could all be three together at a time, but they were not.

Q. But you think that three attendants actually on duty would be sufficient for all practical purposes?

A. Sometimes it would take three or four patients to control them, sometimes four.

Q. What do you say in regard to the hours an attendant is required to be on duty — as to whether or not they are overworked?

A. There is no time at all that they can call their own, except two evenings they are out in the week, and every third Sunday in the month, and one-half day; the other times they are locked right in there the same as the patients.

Q. What effect does it have upon the attendants to perform that amount of labor and be upon duty that length of time?

A. It is very injurious to them.

Q. Whether an attendant is liable to get nervous?

A. There has been several cases that went out that was very ill, and had to be relieved, it affected their heads so.

Q. What suggestions, if any, would you make in reference to remedying that difficulty?

A. I would suggest that they have more help and more restraint used for to control these violent patients, either by using mechanical restraints or having a room to put them into when they are so very violent, by so doing, many times a patient would not get injured, and the attendants would not receive injuries.

Q. Would you suggest that the help be increased so as to relieve those who are on duty more often and with a longer relief?

A. Yes, sir, a longer relief.

Q. Give them more time to rest?

A. Yes, sir, more time to themselves.

Q. Would there not be danger in putting a violent patient into a room by himself without restraint; would there not be danger of that patient injuring himself in that room?

A. Not if the room was suitably prepared; in that case it might not be necessary to put on any restraint — suppose it was a well padded room.

Q. Suppose he were put into a room where it was solid walls, would not the patient be apt to injure himself?

A. In some instances they have rooms purposely for that thing, then they can be on the wards with quieter patients.

Q. Have you known of instances of patients having been kept in restraint when they ought not to be?

A. Never.

Q. And that you said you never knew, and I think you stated that you never knew where it had been kept too long, but you did of instances where you thought they ought to have been retained longer?

A. Yes, sir; no one has a better chance to know about taking care of patients, and what is wanted than those who are with them all the time.

Q. You think that there ought to be more discretionary power lodged with the attendants in reference to the use of restraint on the patients?

A. Yes, sir, I do.

Q. Do you think such a man as this Sage that you spoke of would be a proper man to lodge discretion in?

A. Well, he was a man that never ought to have been allowed there at all.

Q. What was your judgment about Sage as an attendant there?

A. He was very brutal and a man of poor judgment, not a fit man to take care of sick men.

Q. Was he a very passionate man?

A. Yes, sir; known to be so.

Q. Do you say that he was known as a violent and passionate man?

A. Yes, sir, I do.

Q. And was he retained there at the Asylum after that reputation became known?

A. Yes, sir.

Q. For how long was he so retained?

A. He was retained up to about the 1st of February.

Q. How many months after it was known?

A. When I made the matter known that a patient was so badly misused, he was kept there from April, 1883, until February 1, 1884.

Q. Do you know of any other injuries having been inflicted on patients by this Sage, except the cases you have mentioned?

A. I know those cases that came on to my ward.

Q. Did you learn of any that did not come on to your ward?

A. I did.

Q. State what cases came to your knowledge that did not come on to your ward; state the names of the patients, and give the particulars as far as you can?

A. The first one was a patient that went from my ward to his.

Q. Who was he?

A. H. C——.; he belonged in Canada, but I think he was fetched here from Syracuse to this Asylum.

Q. Do you know whether he is there now or not?

A. I think he is in Binghamton now; that he has been transferred.

Q. What did you learn in reference to him after he left your ward?

A. I saw him the next day when he came out into the yard; he looked as though he had went through a mill.

Q. Describe his condition?

A. I see him with his clothes on in the yard, and his eyes were black, and the difference between him and the time he left the day before — when he left my ward — there was quite a difference in his appearance and actions.

Q. Did he have the appearance of having been severely injured?
A. Yes, sir.
Q. Did you talk with him?
A. I did.
Q. What did he say about the matter to you?
A. He was so disturbed that he did not give much account of it.
Q. You did not regard him as sufficiently rational to give a satisfactory account?
A. No, sir.
Q. Mr. Giles Penny left the Asylum before the time you commenced your services there, did he not?
A. Yes, sir; he left before I came there.
Q. You did not know him as a patient?
A. No, sir.
Q. Is there any thing further that you can describe about this last case mentioned?
A. No, sir.

By Mr. OLIN:

Q. The ward that this patient C. went on was a quieter ward than yours?
A. Yes, sir.
Q. But it was the ward that Sage was attendant on?
A. Yes, sir.
Q. What do you mean by saying that patient was "disturbed" when you saw him in the yard?
A. I mean excited.
Q. Unusually excited?
A. Yes, sir, quite excited.

By the CHAIRMAN:

Q. State whether or not you learned if those injuries were self-inflicted or inflicted by some one else?
A. I ascertained that they were inflicted by somebody else.
Q. How did you ascertain that?
A. When I see a patient abused or had marks of violence about him, I would privately make inquiry about him.
Q. Of whom did you make inquiries in this case?
A. Of some of the attendants on that department. I do not know as I could tell the names, who they were.
Q. What did the attendants say to you in answer to such inquiry?
A. They stated that they had trouble with him; had a fight and received the injuries.
Q. How did they state the injuries were given?
A. I don't know as I could use the language that was passed.
Q. I only want the fact as to what was stated, about who inflicted them?
A. Mr. Sage.

Q. What did they say he did?

A. Maltreated him.

Q. In what manner?

A. I suppose with his feet or hands; I suppose he used either his feet or hands.

Q. Was his appearance such as to clearly indicate that his injuries were not self inflicted?

A. Yes, sir, they were; knowing the patient well.

Q. Are patients liable to give themselves black eyes?

A. In some cases they are liable to do so.

Q. Are they liable to blacken both their eyes?

A. Not very often; I don't know as I have ever seen them make both eyes black, it depends upon where a patient strikes; if they strike in the center, why very often both eyes are blackened.

By Mr. Rice:

Q. What is your height?

A. Five feet eleven inches in my stocking feet.

Q. What is your weight?

A. One hundred and seventy-five pounds.

Q. And what is your chest measure?

A. Forty-two inches.

By Mr. Morgan:

Q. In other words you are a pretty solid fellow?

A. I used to be; I aint now as much; my confinement has not improved me any.

Q. You say you reported to Dr. Josselyn as to injuries received by a patient, and that he (Dr. Josselyn) appeared displeased at your reports?

A. I should take it that way by his actions?

Q. What other physicians did you make reports to where you observed the same thing, if any others?

A. Dr. Bloomer.

Q. And any person else but Dr. Josselyn and Dr. Bloomer?

A. That is all; those two are the only ones.

Q. You say you talked to certain of the attendants in regard to the cruelties practiced upon the patients there — with what attendants did you have such conversation?

A. With attendants on my ward, and with others who came there occasionally.

Q. Will you give the names of all you recollect with whom you had such conversation?

A. Mr. House, Mr. Quine, Mr. Roberts: he is in the institution now, Roberts is; I do not know his initials, that is, I do not recollect them now; then there is Mr. David Linn; he is there now in the institution, Mr. Linn is; those were attendants that I called to examine patients that came on to my ward.

Q. Those are all the names you can recollect now?
A. Yes.
Q. Were there any others with whom you had such conversation that you do not recollect the names of now?
A. Yes, sir; there were others.
Q. Will you state the occasions or reasons for such conversations, other than those you have specified, other than the four cases that you have mentioned?
A. We would occasionally hear of a case where a patient received injuries that would be talked over, but we could not tell when it was done, or any thing of that kind, only it was talked over that such a thing occurred.
Q. How frequently did you have such conversations?
A. Very frequently.
Q. From what time, down to what time?
A. Down to July, 1883.
Q. Have you had any such conversations after July, 1883?
A. I do not think I have in particular.
Q. Do you recollect whether you have or not?
A. I might have had, but I do not recollect in particular now.
Q. Do you recollect what was the occasion, and with whom you had the conversation that you have last had?
A. With some of the attendants of the ward.
Q. In regard to what case?
A. In the case of Mr. M.
Q. Can you specify the particulars of that case?
A. Mr. M. complained of being misused and spoke to the doctors in the yard about it.
Q. Describe what there was to that?
A. My attendant was there when Mr. M.'s clothes were taken off, and he saw that Mr. M. showed marks of violence on his body, but I cannot tell just on what parts of his body, and I do not know that it was told me just what parts.
Q. Where they injuries inflicted by an attendant?
A. Yes, sir.
Q. By what attendant?
A. I do not know that.
Q. And when was this occurrence?
A. December.
Q. Of what year?
A. Last year — a year ago.
Q. In which ward was Mr. M. at that time?
A. The twelfth.
Q. Are there any other cases that you can now think of?
A. No, sir; I do not recollect any others just now — yes I do, there was one particular case, but I do not want his name to go into print.
Q. His name will not go into print, only the initials of his name,

but you may describe him in any way that you desire to — you may simple designate him as "a patient"?

A. He is there now.

Q. Describe what there was to his case, and as to his injury?

A. He received an injury from which he was laid up for several weeks.

Q. Describe the injury?

A. I could not exactly.

Q. You can give some idea of how the injury happened or of what it consisted?

A. One of his limbs was injured.

Q. State about when it was? What time?

A. It was in December, 1882.

Q. Was he on one of the wards at the time he was injured?

A. Yes, sir.

Q. On which ward?

A. On ward eight.

Q. And was he injured by an attendant?

A. I could not state so.

Q. Can you give me the attendant's name?

A. No, sir; I think not.

Q. Is the attendant still in the institution?

A. They are not.

Q. Was there more than one?

A. There were three.

Q. Three of them implicated in it.

A. There were three of them on the ward at the time.

Q. Is there any other instance that you can recollect now?

A. No, sir; I have a case that I do not want to go on record, but I will give the names so that you can inquire about it.

[The witness then detailed some facts and names to the committee.]

By Mr. Haskell:

Q. You say that you think Dr. Pilgrim is doing what he can for the patients?

A. Yes, sir; I think he does.

Q. You spoke just now about Dr. Pilgrim's hands being tied and that he could not do as much as he otherwise would; what do you mean by that expression?

A. In cases; in one case I remember in regard to patient P.; I took the doctor into the room and almost begged him to have something done, that something had to be done about it, that P. came very near killing me, which was a fact that he did nearly kill me, he tore my clothes off; when I saw Dr. Pilgrim, he says to me: I must see Dr. Gray about it; but nothing was ever done about the matter; that is why I think his hands are tied; I think if he had the power to do so he would have restrained that man right off; that man P. has killed one man there.

Q. Then you mean, in saying that Dr. Pilgrim's hands are tied, that he is not allowed to exercise his own judgment by Dr. Gray?

A. Well, I think he would do more than he does if he had the power so to do.

Q. What prevents him from having the power?

A. He has to take his orders from head-quarters.

Q. From Dr. Gray?

A. Yes, sir; from Dr. Gray, of course.

Q. Can you give us any other instances of patients receiving hard usage in the institution?

A. No, sir: I don't think I can.

Q. Have other cases, than those you have specified, come to your knowledge which you cannot now give us specific circumstances of?

A. There are cases that I cannot call up particularly to the point, that is as to days or dates; there are some that I think could have been avoided.

Q. Is there then, in your judgment, considerable unnecessary cruelty toward patients?

A. Yes, sir; I know there is.

Q. Does that occur upon all the wards, or is it only on some of the wards where there is unnecessary cruelty?

A. Mostly it is on the disturbed wards; it is not necessary with quiet patients; of course the patients are classed according to their condition.

Q. I mean in regard to the way that attendants treat them, as to whether it is on violent wards or convalescent wards that the cruelty treatment exists?

A. On the disturbed wards.

Q. You have spoken frequently of the removals from one ward to another. You may state why patients are removed from one ward to another.

A. Well, they are on a quiet ward and they become disturbed and violent, they are then put on to the disturbed ward; if they are very bad they go on to ward four, that is the worst.

Q. Is there a regular system in regard to the removal of patients from one ward to another; and has that system ever, to your knowledge, been broken; and are patients sometimes arbitrarily removed by way of punishment?

A. Yes, sir, I think they are.

Q. Can you give any instances where patients have been removed, not because of their condition, but by way of punishment?

A. Yes, when a patient is convalescent, and refuses to go out into the garden and work, for instance for some reason, when he refuses he is put in a disturbed ward again, put back for refusing, that is, he is put back again with the most violent patients for a punishment.

Q. How many instances of removal for punishment have come to your knowledge, approximately, during the past year?

A. Almost too numerous to mention, they are; it is so frequent.

Q. I would rather have you give us a better idea than that. Would you say that there have been as many as ten instances that have come to your knowledge, personally?

A. Yes, sir; more than ten.

Q. How many would you think; state some number that you can be sure about, in round numbers?

A. I should say twenty-five.

Q. Have all of those cases been where they were removed to your ward?

A. In all cases they would not be removed to my ward.

Q. But you think it has been twenty-five cases of removal as a punishment, that have come to your knowledge?

A. Yes, sir.

Q. You may describe if you please the fourth ward — how many different halls or rooms are there comprised on that ward?

A. There is five — the little hall on the further end where there is five beds and the attendants-room, then there is a large day room, then out of this main hall there is a short hall with three beds, then there is a short passage-way that leads from the hall just mentioned to the hall on the north side.

Q. This ward is not a continuous straight ward?

A. No, sir.

Q. But is it in the shape of a letter "L?"

A. Yes.

Q. You spoke of the accommodation on the four wards being for twenty-two patients?

A. Yes, sir; I mean that there is twenty-two sleeping-rooms on that ward.

Q. And for how long a time have the average number of patients on that ward been twenty-nine?

A. For about a month or two.

Q. How was it prior to that?

A. Not quite as many; we generally had one or two over, sometimes as many as four over; it got up to about twenty-nine somewhere about the 15th of February.

Q. And it had continued about twenty-nine for the two months previous to that?

A. Yes, sir.

Q. Do you recollect any time that you have been on the fourth ward that there have been more than twenty-nine patients, or is that the highest number you remember of?

A. That is the highest number I should say.

Q. When there are as many as twenty-nine, which number is more than you have rooms for — how are they all cared for?

A. There is one that sleeps on the floor, a number of the patients on that ward were suicidal and were sent on to the ward nine, they are sent on to ward nine to sleep, some of them; they are only on the ward in the day time; I have had only twenty-three in my ward at night.

Q. You say that one of them sleeps on the floor, what do you mean by that?

A. We make up a bed on the floor and generally put a quiet patient into it.

Q. And he sleeps out in the hall?

A. Yes, sir.

Q. Is there any thing further that you desire to give us in regard to the Asylum and its management in addition to what you have given us here?

A. Yes, sir, I think there is a little.

Q. Please give it?

A. I think on the disturbed wards that the attendants have to work too long hours; they are too much confined and do not receive compensation enough for the responsibility that is placed on them.

Q. Is that all you wish to state?

A. Yes, sir.

Q. Is there any thing which you desire to give us in explanation of the evidence given by you at the coroner's inquest?

Mr. GOODWIN — That I object to and upon the same ground.

The CHAIRMAN — The objection is sustained.

FRANKLIN P. BILLS, sworn:

Mr. Fred. B. Spriggs, counsel for Mr. Bills, appeared to represent Mr. Bills, and said: I desire, on behalf of Mr. Bills, to make the same objection that was made by Mr. Goodwin.

Mr. MORGAN — I will ask Mr. Bills the same question I asked Mr. Weir, provided we do not go later than January 15 — the time Mr. Hughes entered the Asylum; are you willing to give, under oath, a statement to the committee as to the management of the Asylum, the treatment of the patients, as far as it came under your observation, provided we do not touch upon the case of Mr. Hughes; are you willing to comply with that?

Mr. BILLS — Yes, sir.

Thereupon Mr. Bills was examined and testified as follows:

By Mr. MORGAN:

Q. What is your age?

A. Thirty.

Q. Where were you born?

A. Oneida county.

Q. What was your business or occupation before you went into the Asylum as attendant?

A. Farming.

Q. Who employed you when you went to the Asylum?

A. Mr. Dryer.

Q. Did you take testimonials with you, or by whose recommendation were you employed?

A. My uncle recommended me ; Wm. Mahew recommended me there.

Q. What other examination did they give you as to your qualifications and ability to discharge the duties of an attendant ?

A. They read the rules to me.

Q. What examination or inquiries, if any, did they make of you in reference to your ability to discharge the duties ?

A. Nothing in particular; they asked me what my business had been, but that is all.

Q. When did you enter the Asylum as an attendant ? The fourteenth of last February ?

A. A year ago last February ?

Q. What department were you put in ?

A. Fourth ward.

Q. Who was supervisor of that ward ?

A. Mr. Dillon.

Q. And who the head attendant ?

A. Mr. Weir.

Q. How many other attendants when you went there ?

A. Mr. Cline and Mr. House.

Q. Did you remain on the fourth ward all the time you were there?

A. Yes, sir.

Q. What time were you required to be on duty in the morning ?

A. Five o'clock in the summer time, and half-past five in the fall and spring and summer months, and six o'clock in the winter time.

Q. What were your duties upon the ward ?

A. My duties were to see that the patients were took care of and do my part ; each one had their particular part to take care of.

Q. What was your part ?

A. My part was to take care of the day room and five single rooms down at the lower end of the ward.

Q. And what in reference to looking after patient ?

A. To be in the day room and see that they were cared for.

Q. Was that all, to simply see that they were cared for ?

A. Yes, sir.

Q. Was it also to assist in seeing it done.

A. Yes, sir.

Q. There was no part of the ward that you were to look after the patients on ?

A. No, sir; I was to look after the patients in any part of the ward ?

Q. What was the greatest number of attendants on that ward when you were there ?

A. Four.

Q. And the least number at any time ?

A. Three, I think.

Q. How many patients had they upon your ward ?

A. Sometimes twenty-two ; from twenty-two to twenty-eight or twenty-nine ; twenty-nine was the most, I think, I ever saw on the ward.

Q. Is that the most disturbed ward in the Asylum ?

A. Yes, sir, they call it so.

Q. While you were there and about the 15th January, how often were new patients put upon the ward ?

A. Sometimes every day a new patient ; at other times it would run a week or two.

Q. How was it about transferring patients from that ward to other wards ?

A. Soon as they got quiet they would take them off to other wards.

Q. Is there ever a patient gets his discharge from the Asylum from that ward ?

A. No, sir, not while I was there.

Q. They have to go to other wards less disturbed ?

A. Yes, sir.

Q. During the time you were there were patients taken out to work?

A. Yes, sir.

Q. Did you go out with them to work ?

A. Yes, sir.

Q. What were your duties with reference to patients going out into the field or garden ?

A. To see that they did not run away or hurt others, and to work some.

Q. I suppose you had to see that they did not hurt one another ?

A. Yes, sir.

Q. There was more danger when out in the yard of one patient hurting another, than of a patient hurting himself ?

A. Yes, sir.

Q. State what the danger was of their injuring themselves ; that is, the manner in which it would occur when out in the field ?

A. Some of them had tools sometimes that they could hurt themselves with ; and we had to watch them and see that they did not injure themselves ; and to see that they did not get fighting between themselves, which they did sometimes ; sometimes they would pick sones up and be liable to throw them.

Q. During the time that you were out in the field, or garden, did you work or not yourselves ?

A. Sometimes we would.

Q. What work did you have to do ?

A. Hoeing or pulling up weeds, or something like that.

Q. Under whose authority did you go to the garden, or field, with the patients ?

A. The official's.

Q. Who was the official who directed you to go to the field or garden to work last summer ?

A. Dr. Josselyn, Dr. Bloomer or the supervisor, they would tell him, and he told us.

Q. Your authority came from the supervisor ?

A. Yes, sir.
Q. What time in the morning did you go to the field to work?
A. Between eight and nine o'clock.
Q. And what time came in?
A. Eleven in the forenoon.
Q. That was for dinner?
A. Yes, sir.
Q. Came out at what time?
A. At half-past one and returned at five.
Q. What time in the evening were you relieved from active duty?
A. Patients went to bed generally at about half-past six or seven o'clock, then we stayed up until the medicine came around, at half-past seven.
Q. Who brought the medicine?
A. The supervisor, he would deliver it to us, and we would give it to the patients.
Q. And after you had given the medicine to the patients what were your duties?
A. Generally there were some patients that used to go up on nine, the suicidal ward, and did not go until eight o'clock in the evening, we took them up and then after that we could go to bed, sometimes we had to sit up later.
Q. Any time in the week after you were relieved from duty?
A. We used to go out every third evening and go away at six o'clock and get back at ten.
Q. Two evenings in the week?
A. Yes, sir.
Q. Was there any part of the day that you were relieved?
A. No, sir, only half a day every month.
Q. Who designated half day that you would have?
A. The supervisor would tell us whether we could go or not.
Q. When you were absent who took your place?
A. Sometimes they would send down a man fron another ward to take our place, sometimes they would not, sometimes the ward would be with three men on when there was one man away.
Q. Were you sick any time you were there?
A. No, sir, not to be laid up.
Q. What did they do if a man was sick for a day or two?
A. Generally send another man down in his place.
Q. From some other ward?
A. Yes, sir.
Q. During the time you were an attendant there, how often did you see Dr Gray on the ward?
A. I did not see him on the ward only three times when I was there.
Q. How often did the physicians having charge of that ward come upon the ward?
A. Generally, twice a day, and some days not but once.

Q. Suppose a man became badly disturbed, what would you do?
A. I would report him to the head attendant, and it was his place to report to the supervisor, then the doctors would send word by the supervisor what to do with him.
Q. Do you remember of any case of that kind where the doctor came himself to see to it?
A. I think I do.
Q. Was it a frequent occurrence, in case of severe disturbance, that a doctor would come himself?
A. No, sir.
Q. When a case was reported to the doctor, did the supervisor sometimes come with medicine?
A. Sometimes with medicine.
Q. What was the medicine usually brought?
A. To quiet the patient, generally.
Q. Do you know what it was?
A. I cannot give the names.
Q. The quantity to be given was always put on to the bottle or phial?
A. On to the phial, yes, sir.
Q. Did you have any difficulty in giving medicine to a patient?
A. No, sir; not very often; sometimes new patients would refuse to take medicine.
Q. What was the rule in reference to the care of patients during the night?
A. The night watchman used to see to them during the night, sometimes used to call up any attendants to assist him, he would sometimes call up an attendant if it was necessary.
A. Did you ever know an attendant to refuse to give any assistance?
A. No, sir, I never did.
Q. How many night watchmen are there on ward four?
A. One night watchman goes through two wards, and one on the center goes through once or twice during the night.
Q. Is there any stationary watchman?
A. No, sir.
Q. Do you know of patients having been brought on to that ward with the appearance of having received injuries?
A. Yes, sir.
Q. From what ward were they brought?
A. Twelfth ward, I think.
Q. Do you know the name of any patients having been so brought there?
A. I cannot say as I do remember any names now.
Q. Do you remember any particular case where patients were brought from that ward with an appearance of injury?
A. No, sir.
Q. Or remember what the injury was?

A. I remember them being marked up some; one of the eyes black for instance.

Q. When a man came from ward twelve to ward four with an appearance of injury, what investigation was made to ascertain how that injury occurred?

A. Most of us see it on bathing day generally.

Q. What investigation was made to ascertain how that injury occurred?

A. The attendant always wrote down what marks were on him, and he gave it to the supervisor, and he took it to the physician.

Q. What did the physician do when it was reported to him?

A. Examined the patient to see.

Q. Would he go to the ward or take the patient to the office?

A. Go to the ward generally.

Q. Do you know of any instance where the patient was taken to the office?

A. No, sir; I don't.

Q. Was that examination made in your presence by the physicians?

A. Not generally made in my presence, they would most always take them into a room, and the head attendant would go in with him; I don't know as I ever went in with him.

Q. Do you know of any instance in which the patient was injured by wearing the camisole?

A. No, sir, I don't.

Q. Do you know of any case where a patient complained of injury — I suppose they complained of having it on, but would they complain of its bruising them any?

A. I have heard them complain of wearing it.

Q. But that it hurt them; did you ever hear them complain of that?

A. No, sir.

Q. Do you know of any case where a patient complained of injury from the strap and wristlets?

A. No, sir.

Q. Do you know of any case where a patient complained of any injury by the muff?

A. No, sir, I don't.

Q. Have you at any time seen sores upon the patient, apparently done by the buckle of the camisole, or strap?

A. No, sir.

Q. Do you know of any instance where patients have severely injured themselves while upon the ward?

A. Yes, sir, I think I do.

Q. Give the name of the patient, and what the injury was?

A. Mr. C., he used to strike himself, would hammer himself side of the head, and bruise himself very bad.

Q. In that case what did you do?

A. We stopped him, and quieted him down, if we could; he would have these spells for a few months perhaps.

Q. Quieted him down by talking to him I suppose you mean?

A. Yes, sir.

Q. What did you do if you could not quiet him down by talking to him?

A. Reported to the supervisors.

Q. Then what was done?

A. They would say they could not do any thing with him.

Q. In these cases did they put restraints on them?

A. No, sir.

Q. Do you know of any case where a man did injury to himself severely and they did not put restraint on him; the patient you speak of as pounding his head, did they ever put restraints on him?

A. No, sir; not in my presence.

Q. Do you know of any case where a patient was injured in the covered bed or where he injured himself in the covered bed?

A. I cannot say that I do.

A. Do you know of any patients being injured by being put into the covered bed?

A. No, sir.

Q. Do you think that there was attendants enough on ward four; for instance how many attendants should you say ward four required, in order to have the work well done, and a proper attention given to the patients?

A. Five I should say.

Q. And how long should you say they should be kept upon the ward, that is the attendant, how long should he continue on duty?

A. They should be on the ward from the time the patients get up in the morning until they went to bed; while the patients were on the ward.

Q. Suppose a patient was taken sick in the night, did that sometimes occur?

A. Yes, sir.

Q. What was done then?

A. Generally one of the attendants got up and sat up with him.

Q. Was that all that was done about it?

A. The night watchman would inform the doctor, and then would send him some medicine and sometimes come down and see him.

Q. In occasions of sickness what would be done, sickness in the night?

A. The night watchman would report to the doctor, sometimes the doctor would come and sometimes he would send medicine.

Q. Can you name an instance where a patient was taken violently sick in the night when a doctor did not come in person?

A. I have known of a patient being sick and the night watchman reporting him, and he got medicine, and could not give it alone and he would call up an attendant to give it to him.

Q. Can you name patients where that occurred?

A. Mr. McE.

Q. What was the apparent difficulty with Mr. McE.; what was his appearance — whether he appeared to be in great pain and suffering?

A. Yes, sir.

Q. And the physician did not come himself?

A. No, sir, not that I know of.

Q. How would the physician in that case know what medicine to send the man?

A. The night watchman would tell him how he was as soon as he could.

Q. The night watchmen are not physicians nor experts in cases of sickness are they?

A. No, sir.

Q. Do you know of cases of patients being injured on your ward prior to January 15th, either by attendants or patients?

A. Yes, sir.

Q. Name one?

A. Mr. S. kicked Mr. McE.

Q. How was Mr. McE. injured?

A. They got fighting and got injured before we could stop them.

Q. Was that in your presence?

A. Yes, sir.

Q. When you saw two patients getting to fighting what did you do?

A. I tried to part them as well as I could, sometimes I would be alone and sometimes there would be another attendant with me.

Q. And in that case have you sometimes got injured?

A. Yes, sir, you could not help it.

Q. Do you know of any case where a patient was injured by an attendant?

A. No, sir, I don't.

Q. Did you learn of any case where it was charged that an attendant injured a patient?

A. No, sir.

Q. And sometimes did patients come down from ward twelve to the fourth ward and report that they had been injured by an attendant on the twelfth ward?

A. No, sir; I cannot say that they did.

Q. Did you know Sage?

A. Yes, sir.

Q. He was on ward twelve?

A. Yes, sir.

Q. Did you learn of any injuries inflicted by him on patients, and then that he would have them sent down to your ward?

A. I have heard patients say he injured them.

Q. Have you ever heard mention of any patient who came into ward four apparently severely injured and complaining that Sage inflicted the injury; if so, please give the name of the patient and the injury you discovered?

A. Mr. S. was one.

Q. What was his injury?

A. He said he had been kicked.

Q. Who did he say kicked him ?
A. Mr. Sage.
Q. Did you examine him to see whether he had received injury ?
A. Yes, sir.
Q. What did you find ?
A. Found his side was bruised, and some black and blue round his body, and, I think, he had one black eye when he came to ward four.
Q. What was done in his case ?
A. What did the doctors do ?
Q. Yes ; what was done to investigate the truth of the charge ?
A. I don't think there was any thing done in particular ; it was reported to the supervisor.
Q. Do you know what the supervisor did ?
A. No, sir ; I don't.
Q. Do you know of any other case ?
A. No, sir ; I don't ; not that I can remember now ; such things slip anybody's mind, there was so much of it.
Q. Do you know of any case where a patient was injured on ward four, and then sent to some other ward ?
A. No, sir ; I don't.
Q. Do you know of any other case of injury on ward four where it was inflicted by an attendant ?
A. No, sir.
Q. Prior to January 15 did you see Mr. Weir inflict punishment on any patient ?
[Objection raised. Objection sustained.]
The CHAIRMAN — State the ground of the objection. We would allow any other witness to state what was done by Weir, but as I think these men are all in the same condition, it may affect their trial, perhaps, and as an objection is interposed, I think it is only fair to give them the benefit of it.
[Objection sustained.]
Mr. MORGAN — I will ask the witness whether he was sworn before the coroner's jury ?
[Same objection ; upon the ground of privilege. Objection sustained.]

JAMES BROWN
Sworn :
[Counsel for Mr. Brown raised the same objection as had been made on behalf of the other two attendants ; but subject to the same restriction as to testimony ; Mr. Brown consented to be, and was, examined as follows :]

By the CHAIRMAN:

Q. How long were you connected with the Utica Insane Asylum?
A. Six months.
Q. What position did you hold there?
A. An attendant.
Q. Where were you stationed?
A. Fourth ward.
Q. During the whole time that you were there?
A. Yes, sir.
Q. What were your duties?
A. To take care of the patients.
Q. How many patients were you in charge of?
A. Twenty-four to twenty-seven.
Q. Who was with you on that ward?
A. Mr. Weir, Mr. Bills and Mr. Hoffman.
Q. Have you ever seen patients on that ward showing marks of injuries?
A. I have.
Q. Have you ever seen patients injured on that ward prior to the 15th of January?
A. I have.
Q. Will you please state the names of any you now remember?
A. McE.
Q. Specify as to the circumstances attending that injury?
A. I saw another patient hit him.
Q. What did you do?
A. I came as quick as I could to protect him from further injuries.
Q. Was he severely injured?
A. Not very, no, sir.
Q. Have you not seen any other patients injured on there?
A. Not injured, I have seen them try to injure each other.
Q. Have you seen patients there with black eyes?
A. I have.
Q. Frequently?
A. Not frequently.
Q. Is it an unusual occurrence?
A. It is.
Q. What do you mean by unusual?
A. Not very often.
Q. Is there apt to be a patient or so with a black eye most of the time out of the twenty seven?
A. I do not understand that.
Q. Did you see a man with one black eye a day on that ward?
A. No, sir.
Q. Have you seen patients brought into that ward injured?
A. I have.
Q. Or bruised?

A. Well, injured in the face.
Q. Can you name any at present?
A. I cannot, I forget the names.
Q. Have such patients been brought in from other wards or directly into the institution?
A. Well, directly into the institution.
Q. Have you never seen patients brought in from other wards, bruised or injured?
A. Not that I can say.
Q. But you have seen them brought in directly into the institution?
A. I have.
Q. Please name any that you have so seen.
A. I don't believe I can name them
Q. How many such have you seen?
A. Two.
Q. How were they injured?
A. The factf that appeared that they were on the ward when they were injured, so the patient told us afterward.
Q. Do you happen to remember the names of the patients?
A. No, sir; I do not.
Q. Have you ever seen patients injured by attendants prior to the 15th of January?
A. I have.
Q. Can you specify any instances?
A. Why, no particular occasion.
Q. Can you name any attendant who has been so injured?
A. Mr. Weir.
Q. More than once?
A. He has been more than once, but I haven't seen him but once.
Q. Please state the circumstances of that occasion as to how he was injured?
A. The patient was in his room, and the patient was mopping the room, and Mr. Weir told him not to until it was swept out, and he took the mop and hit Mr. Weir.
Q. What did Weir do?
A. I guess he whistled for more help
Q. Who came?
A. I did.
Q. Any others?
A. Mr. Hoffman.
Q. What did you then do?
A. Tried to keep him from hurting Mr. Weir.
Q. Did you put any restraint upon him?
A. I did not.
Q. Did the patient make any further attempt to strike Mr. Weir?
A. Afterward he did.
Q. Did he attempt to strike any of the others?
A. He attempted to strike Mr. Bills but not the same day.

Q. I mean on the occasion you had of restraining him?

A. No, sir; not on that occasion; sometime afterward.

Q. Do you know of any other instances of patients striking attendants?

A. I do.

Q. Can you name them?

A. I was down at dinner one day, Mr. Bills told a patient to keep quiet; he was making a good deal of noise; Mr. P. got up and went for him.

Q. Do you recollect any other?

A. No, sir.

Q. Now about attendance of physicians; how often do the physicians come on ward four?

A. Sometimes twice and sometimes once a day.

Q. Do they come at regular hours?

A. They do not.

Q. About what hours do they generally come?

A. From ten to eleven in the forenoon and four to five in the afternoon.

Q. Are these all the usual hours of their attendance?

A. They are.

Q. Is it usual for them to call in those hours?

A. Sometimes they do.

Q. They do come sometimes on other hours?

A. Yes, sir.

Q. About what times do they come generally?

A. From ten to eleven o'clock in the forenoon and four or five in the afternoon.

Q. So that you expect them between ten and eleven, and between four and five o'clock?

A. Yes, sir.

Q. And at other times you don't expect them

A. No, sir, I don't.

Q. Do you know when they will come?

A. Yes, sir, we expect them.

Q. What physicians do you refer to now?

A. Dr. Pilgrim and Dr. Backus.

Q. Does Dr. Gray come sometimes?

A. Yes, sir, sometimes.

Q. Does he come frequently?

A. No, sir, he does not.

Q. How many times should you say you had seen him there on ward four since you were in the institution?

A. Two or three times.

Q. Do you think that is all?

A. I think that is all; I heard that he had been, but I did not see him.

Q. Do you know any of the managers by sight?

A. I do.

Q. Please state who you know by sight?
A. That is since this occurrence?
Q. No, at any time?
A. Mr. Lowery, Mr. Winston, Mr. Martin.
Q. Do you know Senator Campbell?
A. No, sir, I don't.
Q. Have you ever seen him?
A. Not as I know of.
Q. Have you ever seen any of the managers you have named on ward four?
A. I cannot say.
Q. Is he the only manager that you have seen on that ward?
A. Well, they may be there and I not know it.
Q. But he is the only one that you have known to be a manager, and whom you have seen on that ward?
A. That is all, sir.
Q. What are your hours of duty?
A. From six in the morning until eight or nine at night.
Q. Where do you then go?
A. We have to go into our room then.
Q. Are you then on duty or liable to be called on duty during the night?
A. Liable to be called at most any time.
Q. Are you frequently called up in the night?
A. Yes, sir, quite often.
Q. Is it your opinion that these hours of duty are too long?
A. I think they are.
Q. So far as you know is a subject of comment among the attendants as to the length of hours?
A. Yes, sir; they say it is too, and too long hours, and no privilege to get out.
Q. Were you examined by the coroner's jury?
[Objection raised upon the ground that it is a privileged question; objection sustained.]
Q Have you any complaint to make; or any statement concerning matters in the Asylum, that you think should be corrected?
A. Well, about having more help, I think they need more help there.
Q. Of what kind?
A. Attendants; and I think they should have more pay.
Q. Do you wish to add to or qualify the testimony you have given before the coroner?
[Objection raised upon the ground that it is privileged; objection sustained.]

By Mr. Rice:

Q. How old are you?
A. Twenty-six.

Q. What employment did occupy your time before going to the Asylum?

A. I was employed by Mr. Buckingham, here in the city.

Q. What to do?

A. To take care of a team and deliver pianos round the city.

Q. How much do you weigh?

A. About two hundred pounds.

Q. How tall are you?

A. Five feet ten or eleven.

WM. T. GIBSON

Sworn and examined, testified as follows:

Examined by Mr. MORGAN:

Q. What is your age?

A. Sixty-one.

Q. What is your calling?

A. Clergyman.

Q. How long have you been for ?

A. I was ordained in December, 1853.

Q. Where do you reside?

A. In this city.

Q. Are you chaplain of the Asylum?

A. I hold that position.

Q. For how long have you?

A. Since 1865.

Q. From whom did you get your appointment?

A. From the board of managers, as I understand it.

Q. What is your salary?

A. I commenced and for the largest portion of my time until a year ago at $100 a quarter; a year ago last January I gave up all other parochial works; gave up charge of a church; I had to devote myself to this chiefly; since then my compensation has been $200 a quarter.

Q. Eight hundred dollars a year?

A. Yes, sir.

Q. How often do you visit the Asylum, and how often have you for the last four years?

A. I have service there every Sunday, every Lord's day, and I make occasional visits during the week, I might make a visit sometimes one day, sometimes two or three days in the week.

Q. So that you visited it every week during the week days?

A. Yes, sir.

Q. And in addition to that on the Sabbath?

A. Yes, sir.

Q. When you are there on the Sabbath how much time do you occupy?

A. In the afternoon, usually, I go up at two o'clock and am there until five o'clock.

Q. Your services are held in the church?

A. Yes, sir.

Q. During the week day what is the time of your visit?

A. I generally go up some time during the afternoon; there is no direct communication from my residence; I go down town by one line of street cars, and I usually take another to go to the Asylum.

Q. What is the nature of your call; when you get there what do you do?

A. I go through the wards and find out if there are any sick persons who desire to see me especially, or if there has been any special inquiry for the purpose of conversing with a clergyman or minister; but I usually go through whether there is any such special call or not; I go through during the afternoon alone.

Q. What wards do you usually visit?

A. I visit all the wards, except perhaps the most disturbed ones; I have been in all of the wards of course; I have been in No. 4; I do not visit it as frequently as I do the wards where they are more amenable to conversation; I have recently made up my mind that the most disturbed wards I should not visit as often as I have, if I find it seems to do them no good; they are thoroughly incoherent, and utterly unable to follow any train of thought or ideas or conversation, or receive any such thing as comfort; I cannot reason with them to any extent, and I find that when I come out they seem to think that because I am chaplain, and they think I do not reside there, and think I have some means of taking them away, and they are very persistent in trying to go out with me and occasionally there will be a little disturbance or tussle or struggle after I go out; that is more particularly so on the women's side of the institution.

Q. Do you become acquainted with the patients somewhat?

A. Yes, sir.

Q. On ward two, who are you acquainted with on the men's side?

A. W., R., C., and quite a number of others; I have been in the habit of identifying patients with the particular number of wards until quite a recent period.

Q. When you go in there, do you talk with nearly all the patients in the various wards?

A. Not all, perhaps, but nearly all.

Q. You pass a word with most of them; merely time of day, I suppose?

A. Yes, sir.

Q. And some you talk with?

A. Yes, sir.

Q. Have you often met any there that were injured or that had the appearance of injury?

A. Of being hurt?

Q. Yes, sir?

A. Bodily?

Q. Yes?

A. Occasionally I find persons that would seem to have sores or bruises on their faces or head.

Q. Black eyes?

A. I don't recollect now whether I have ever seen one with black eyes; I think I must have though.

Q. Have you seen them with severe cuts on the head or face?

A. No, sir; I don't know that I ever saw that.

Q. Have you had them complain to you of injuries?

A. I don't recollect any particular case; I often hear a good many complain, but not of maltreatment, that is of bodily injuries.

Q. What is the principal complaint they make?

A. The general run of complaint they make is against the cruelty or wrong-doing of some one in placing them there, and that they are being detained there wrongfully.

Q. Do you know any of those there who are satisfied they ought to be?

A. Yes, sir.

Q. Then the number that think they ought not to be are much in excess of those who think they should be?

A. Yes, sir; the majority think they are unjustly confined.

Q. Since you have been chaplain of the institution, have you heard patients complain that they have been misused by the attendants or received injuries from the attendants?

A. I have heard them complain of being misused, ill-treated and all that, but never heard them say any thing of having suffered bodily injuries or blows; I don't remember now of any thing; of that I am positive; I have heard — if I stayed to think long enough to recollect some particular case — I have a distinct recollection, some three months ago of asking a patient that I always deemed a comparatively reasonable and intelligent man, whether he had ever observed any such thing, and wanted him to tell me confidentially if he had ever seen any cruelty or maltreatment on the part of patients; he said "no;" he said, "but I will tell you where there is cruelty to patients, it is before they are brought here;" he said, "I have seen them."

Q. Have you seen patients put in restraint there?

A. Yes, sir.

Q. Have you at any time noticed that the restraint was so severe, and for instance, the jacket so tight, or the belt as to injure the patient, so that they would complain it hurt them?

A. No, sir; I don't remember any such case of that kind.

Q. Do you remember seeing patients in the "camisole?"

A. Yes, sir.

Q. Did you ever have a patient complain to you that it hurt them?

A. No, sir.

Q. Or complain of the buckle in the back injuring them?

A. No, sir.

Q. Or that their hands were thrown or tied across them, as to hurt them?

A. No, sir; I don't remember any such thing.

Q. Have you at any time attempted to talk with the patient who was in the camisole?

A. Yes, sir, and it seems they are apt to be persons in that condition, who are apt to be so disturbed that you got no coherent answer and I dare say, if the apparatus were painful or bruising them they would hardly be conscious of it.

Q. Have you seen men, from your own examination, any time, that indicated to you that they were being injured by the restraint?

A. No, sir; I never have.

Q. You have seen the strap that they put around them; a strap they put around the wrists?

A. Yes, sir; "muffs" they call them.

Q. And have you seen the strap around the waist and wrists?

A. Yes, sir.

Q. With the hands at liberty?

A. Yes, sir.

Q. Have you ever seen such cases, when you thought the patient was being injured?

A. No, sir, I don't think I have.

Q. Is there any thing about the motion that would be likely to injure the patient?

A. No, sir; I never looked at the inside of the construction of one of these things to see, but I have seen them on the patients; and not so much of late years as formerly; there has been a steady diminution in that respect; occasions are much rarer now.

Q. They did not use such restraints as these a few years ago?

A. No, sir; there seems to have been a decrease in that respect.

Q. They have another restraint termed the straight jacket, pants, coat, and vest and all in one?

A. Yes, sir.

Q. And fastened back of the neck; you have seen those?

A. Yes, sir; I don't think I have seen more than two or three since I have been there.

Q. They haven't used these of late years much, have they?

A. No, sir; I have seen them on disturbed women in the rear wards; I recollect a case of Mrs. S. she suffered from maniacal tendencies and would denude herself in spite of every thing; would destroy her clothing and she had to wear one of these; I have seen her in the airing court in the rear; where they are not visible of course to the neighborhood; I never heard any complaint of them, though —

Q. Do you think the discontinuance of the restraint is beneficial?

A. You ask me my opinion?

Q. Yes.

A. The matter has been very much discussed in our psychological journals, both in Europe and in this country; I have had occasion to investigate the question a good deal as the result of discussions in

the French and German associations on the subject; they do not go so far as the English physicians; the English physicians and specialists seem to wish to get rid of the restraint entirely, to abolish it, and that has had its effect in this country; there is no doubt the medical men in this country are seeking to reduce the restraint to a minimum. Our institutions here haven't got above it altogether; they take the ground that restraint enough should be used when necessary, but they agree that it should be dispensed with if possible; if it is possible to get along without it. There is a great deal of difference of opinion in that respect. From my observation of a good many years, I have considered that restraint was preferable to another alternative that was likely to be substituted for it: there are many alternatives such as the use of drugs, and the use of seclusion, secluding them in a room, but for myself, I think that is very much more cruel and undesirable than any restraint.

Q. You think that shutting a patient in a room by themselves is less desirable than any other form?

A. Yes, sir, I think it is a form of punishment that is objectionable.

Q. Do you now recollect any instance in which you think that the restraint has been applied where it would have been better to have left it off?

A. No, sir, I don't recollect any instance now; I cannot remember of any case in which I think it would have been better — I can remember some occasion in which I think it would have been better to have used it than it would be to depend upon mere manual strength, physical appliance.

Q. In the absence of restraint or close confinement the physical force must be sufficient to restrain them?

A. Yes, sir.

Q. And in using that physical appliance what is the danger, if any?

A. The danger is that it cannot be uniform; it cannot be steady, it is apt to be spasmodic; it is liable to get the better of a person's judgment and temper, unless they are very well-disciplined persons indeed; and then again I think the personal handling and force applied to a patient is more resented by them, so far as my intercourse with them goes; it is very difficult for them to realize that they are in any condition requiring to be put under other persons.

Q. Has a patient ever made any demonstration against you when you have been in there — or attempted any violence upon you?

A. I have never been on very friendly terms with the patients, and for that reason I think they have always treated me with a great deal of deference and every respect.

Q. (Repeated.)

A. No, sir; one case in ward four, a man came up to me, claiming to be the devil, and he wanted to enter into a conflict there and then with me, as a minister, and he was going to suit the action to the word; he said the devil could knock me through my pulpit quicker than I could say Jack Robinson; I think he intended to

make an onslaughter on me, but a number of the patients took hold of him, and the impulse passed off in a moment. That is the only case I remember in the institution; at another time a patient once jumped up in the rear of the chapel, and ran down the aisle with all his might, with the intention of committing an assault upon me in the pulpit, but just before he reached the pulpit, and at the edge of the aisle, one of the other patients put his foot out and tripped him and he fell to the floor, then the attendants came up and took him, and carried him out.

Q. Did he get injured with the fall?

A. No, sir, I don't think so.

Q. How often have you seen Dr. Gray among the patients in the wards?

A. I very seldom happened to meet him, I have met him in the halls occasionally, and I have been with him with boards of supervisors, and other officers visiting the institution; last week I went to see a dying man on the number ten — an attendant told me he was dying; I found Dr. Gray there then holding his hands, and the father of the young man was present.

Q. Do you remember who the young man was that was dying?

A. Mr. B.

Q. How is it about the other physicians?

A. They came through the halls in the forenoon; I generally go alone in the afternoon.

Q. When you go there do you have a key to go where you wish?

A. Yes, sir, I get a key in the front office.

Q. Do you know of any abuses as between the attendants or physicians and the patients?

A. No, sir, I do not know of any, I have never seen any.

By the CHAIRMAN:

Q. If there were any abuses in that Asylum by the attendants of the patients, would you be likely to know it?

A. I don't think it would follow that I should know it, there may be and I not know it; they never know when I am coming or what day I am coming, I may come at different hours of the day to different wards, so that it would seem I should be likely to run upon something if it occured.

Q. How long do you stay on each visit?

A. All the afternoon until evening after tea.

Q. How much time have you spent on the violent ward — four?

A. Very little; I have passed through; in the summer the patients frequently find it pleasant weather and are out in the yard.

Q. How often have you seen Dr. Gray on any of the wards?

A. I cannot tell you how often; it is not very often.

Q. How often have you seen him there during the last year?

A. That is since his sickness.

Q. Yes?

A. I think that his duties have been a great deal interrupted since

that shock; I cannot say but what he has been off on meetings of the National Association of Medical Superintendents of Asylums; they met at Newport last year, I think; but I haven't kept track of his absences.

Q. How often have you seen him at the institution on the wards during the past year?

A. I do not believe I can tell you that.

Q. How often have you met him in your walks through the wards during the past year?

A. I cannot say how many times.

Q. Have you met him on the wards during the past year at all, outside of the office and in the wards?

A. Yes, sir.

Q. Do you recollect any wards that you have seen him on?

A. I havs seen him on the first ward.

Q. Any others?

A. I have seen him on the sixth and tenth wards, I think; and I think I have seen him over on the fourth ward, on the south side, but it is not very often; it was on a few occasions.

Q. Three or four times?

A. Yes, sir; I should say three or four times, and probably half a dozen times.

Q. Have you seen any of the other doctors on the ward, more frequently?

A. Yes, sir; they come at their regular hours in the forenoon, but they often slip through in the afternoon.

Q. Has your attention ever been called to the number of hours that the attendants are on duty in the Asylum?

A. No, sir; I have seen blank reports filled out, which shows it though.

Q. Do you know what hours of duty they have?

A. No, sir.

Q. Have you any idea?

A. They only have special leave occasionally, in the evening from six until ten; but that is only occasionally; I think.

Q. As often as once a week?

A. They have every other Sunday off and an evening in every week.

Q. How long are they on duty; as near as you know?

A. Every day; I should think the whole day.

Q. What do you call a whole day; from what hour in the morning, until what hour in the evening?

A. From six o'clock in the morning until the same hour at night?

Q. Are they not later in the evening?

A. Well, they have special changes, and alternations; I confess I don't know much about that.

Q. What is your judgment of the character of the attendants employed there?

A. Those who have been there a great length of time, are of a very superior character; I think as good as can be obtained.

Q. How about those who are more recently employed?

A. They don't seem to be quite as accustomed to the place, and are not up to the work as those who have been there a great length of time.

Q. If you knew when the attendants were on duty fourteen hours a day would you regard that as excessive?

A. I should think it a very severe tax.

Q. Would you recommend any change in that regard?

A. I have never heard any thing said on the subject, and I do not know that my attention has been called to it at any time; I should want to make comparisons of the present state of things, and know exactly what the figures are; I think fourteen hours a day is hard work, especially on the disturbed wards, and yet it might not be on the others — the quiet and convalescent wards and the hospital; it would not be; but on the disturbed wards, I think, it would be too much, I should say.

Q. And if you were informed that, after fourteen hours' duty, day time, they had to get up frequently to care for them during the night, would you think that the duties were excessive?

A. I think I should; think it would soon result in disturbing their own nervous system.

Q. Are you acquainted with members of the board of management?

A. Yes, sir.

Q. Do you see them on the wards frequently?

A. No, sir.

Q. Do you see them occasionally?

A. Yes, sir, occasionally, that is when they are on meeting.

Q. Do you ever see any of them on any of the wards, and can you name any member of the board that you have seen on the wards alone during the past year?

A. I don't recollect any case.

Q. Not a single one?

A. There may have been, but I haven't happened to meet them.

Q. Have you been there as often as three times a week during the past year?

A. I don't think it would average that, some weeks I have been there every day.

Q. But it would hardly average three times a week?

A. No, sir, twice it would average, and perhaps a little over; my visits extended there almost the whole of the afternoon and the last part of the forenoon sometimes.

[A paper produced by the witness and handed to counsel.]

Q. You produce some suggestions of your own for changes in the institution?

A. Well, changes in the system — some changes.

Q. Do they go to changes in the management of this particular institution?

A. They would of course affect this and others too.

Q. Do you recommend any changes in this institution?

A. I would recommend changes in the law, which would effect changes here too.

Q. Do you think any improvement is possible in this institution under the existing law?

A. Yes, sir, I do.

Q. Suggest any change that occurs to you, that you would recommend.

A. There are cases of persons who are convalescent, and it is very difficult to determine the precise point at which they ought to be allowed to go home; it seems to me that we ought to have the provision of the English law here, allowing them to go on trial and leave of absence, otherwise there is a great tendency or temptation to detain persons until they were beyond all dispute; well, and this I think should not be done.

Q. There is one suggestion here that I will call your attention to: Have you any suggestions to make as to putting the employees of the Asylum and attendants into uniform?

A. Yes, sir; I think there are those in the Asylum, as I said a few minutes ago, many persons who have been their own masters and are very slow to learn that any persons have any right to meddle or interfere with them much more to direct them, and it seems to me to be a prolific source of trouble between patients and attendants; it would be done away with to a great extent if the attendants were put in uniform; a simple uniform, I think, the greater number of patients would recognize the authority of the Asylum in a uniform on the attendants.

ALBERT SPENCER

Sworn.

Examined by Mr. R.

Q. You are one of the coroners of the county?

A. Yes, sir.

Q. What is your age?

A. Sixty-four.

Q. How long have you been coroner?

A. One year the first of last January.

Q. Since you have held that office, how many times have you been called to the Asylum in an official capacity?

A. Three times.

Q. What was the first?

A. The first was the case of a man working on a farm, a case of sunstroke.

Q. Do you remember his name?

A. Yes, sir; S.

Q. Was he a patient?

A. No, sir; he was working on a farm, by the day, in the hoeing season; the second case was a patient escaped from the grounds who drowned himself in the Erie canal; that was last summer some time.

Q. Upon an examination of that case did you learn how he effected his escape?

A. I think he was with the attendants in the grounds somewhere in the rear of the Asylum, and the gates being open he got away from them, and ran out of the grounds, and out down to the canal and jumped in.

Q. In the examination of that case was there any blame resting upon the attendants?

A. There did not appear to be any shown.

Q. Do you recollect the case of Mr. Hughes?

A. Yes, sir.

Q. When where you first notified of the death of Hughes?

A. I can tell by referring to my minutes February 2, 1884.

Q. Who called upon and gave you notice of the death of Hughes?

A. Dr. Gray sent me notice.

Q. By letter?

A. Yes, sir.

Q. And by hand of some messenger?

A. By his own handwriting and signed by himself; it was sent by an attendant or attache of the institution.

Q. What time in the day or night did you first arrive at the Asylum?

A. Between eight and nine o'clock in the morning of Saturday.

Q. What did you do?

A. The inquest commenced the taking of evidence.

Q. Did the jury and yourself view the body?

A. Yes, sir.

Q. Did you have a physician other than one from the Asylum to examine the body?

A. No, sir, I did not.

Q. Who made the *post mortem?*

A. Dr. Backus made the examination.

Q. Was there a *post mortem?*

A. No, sir, not at the Asylum.

Q. When did the inquest close?

A. Thirteenth of February.

Q. Have you a copy of the evidence?

A. Yes, sir.

Q. Have you a separate copy of evidence?

A. No, sir, I have not; I have the evidence taken up to the time that Mr. Matteson was in attendance there, and was taken by a stenographer and I could not follow it.

Q. Have the stenographer's minutes been transcribed?

A. No, sir, I think not; I don't know but they were delivered to the district-attorney.

Q. And the evidence that was taken by the coroner has not been taken off with a type-writer?

A. No, sir; it was to have been done, but I guess they did not finish it.

By Mr. HASKELL:

Q. You say you were sent for by Dr. Gray the same evening?

A. No, sir, the next morning after it happened, but I think the letter was written the same evening, and I understood Dr. Gray to say that.

Q. When did you see Dr. Gray, to have a conversation with him about the matter?

A. Between eight and nine o'clock Saturday morning after the man died.

Q. What did he say in regard to his death?

A. He said the man had died from some injury he supposed, he did not know; he was desirous that I should make a thorough investigation of the matter; he had sent for General McQuaid, and General McQuaid came in and also made investigation.

Q. What account did Dr. Gray give you in regard to the injuries received by you?

A. None.

Q. What examination was made of the body to ascertain the extent of the injuries?

A. I have the testimony or Dr. Backus in regard to that.

Q. There was no *post mortem?*

A. No, sir.

Q. And the body was removed on Saturday?

A. Yes, sir; on Saturday afternoon after the jury viewed the body.

Q. State why there was no *post mortem* examination of the body?

A. I didn't deem it necessary at the time, for I did not know what the man died of or what injuries he had received, or any thing about it.

Q. That was the reason why you didn't think it necessary?

A. That was the reason.

Q. Did Dr. Gray or any one on behalf of the institution suggest the necessity of a *post mortem?*

A. No, sir.

By Mr. MORGAN:

Q. Had you been familiar with any of the facts as disclosed by the evidence, would you have permitted that body to have been taken away until there had been a *post mortem?*

A. I think not.

Q. In order that you might have become entirely familiar with the condition of the body?

A. Yes, sir; we became more familiar after the evidence.

Q. And of the cause of the death?

A. Yes, sir.

Q. But at the time you permitted the body to be taken away, you had not been apprised by Dr. Gray or any other person, of the extent of the injuries?

A. I had not been informed of the amount of the injuries, in fact I had not been there at the time the body was taken away; I did not know what injuries the man had received, until Dr. Backus was sworn on the stand.

[It is understood that this witness is to furnish to the committee a copy of evidence taken before him, as coroner.]

THEODORE POMEROY,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Where do you reside?

A. Utica.

Q. What is your age?

A. Sixty-four; I was born in 1820.

Q. What is your business?

A. Oil cloth manufacturer.

Q. What position do you occupy with relation to the Utica Insane Asylum?

A. I am one of the board of managers.

Q. How long have you been one of the managers?

A. Since 1872.

Q. How often have you attended the meetings of the board?

A. I was looking over that matter; I supposed you would ask me that; I have attended all the meetings but four since I have been a manager — all the meetings special and regular.

Q. How many special meetings have there been in any one year?

A. Well, there have been sixty-nine meetings in all, and there are four regular ones in the year.

Q. Who made your appointment?

A. Governor Hoffman, I think.

Q. How did you come to be appointed?

A. I presume I was appointed on the recommendation of Senator Lowery who was then in the Senate; I think I am indebted to him without my knowledge or consent.

Q. Did you make any application for the appointment?

A. No, sir; I knew nothing about it until I saw it in the paper, and I have always been sorry that I was appointed; I had no idea of it.

Q. How much visitation have you made to the asylum?

A. We have generally at the quarterly meetings visited it; more or less of the board have visited portions of the asylum, perhaps not all of the wards at once, but we have always made a thorough visitation once a year, occupying two or three hours, and, as I have said, at all of the quarterly meetings more or less of the wards.

Q. Have you yourself visited the wards from time to time?

A. Not very often.

Q. How often in a year?

A. Perhaps I have been there once or twice?

Q. On those occasions have you ever gone all through?

A. No, sir, except at the annual meetings.

Q. On these extra occasions about how many wards have you gone through at a time?

Q. Usually we have gone through sometimes for the purpose of examining work that has been in progress in the way of repairs or additions.

Q. Mechanical work?

A. Yes, sir; those things have been looked after as they progressed, pretty generally.

Q. Have you made any examination from time to time as to the condition of the patients?

A. I should not feel qualified to make any examination any further than to inquire of the medical men.

Q. Have you ever made inquiries as to the general comfort, etc., of the patients?

A. I have in a general way.

Q. Of the patients themselves?

A. Yes, sir; I have often conversed with the patients themselves, and almost always talked with more or less of the patients as I would go through.

Q. Into what wards have you usually gone?

A. Usually into the more quiet wards, except on the occasion of a thorough visitation.

Q. Have you asked the patients at any time if they had any complaints to make?

A. They generally make them; we do not have to ask them much.

Q. Of what do they usually complain?

A. Most generally that they ought not to be detained there.

Q. That they are sane?

A. Yes, sir; and they have complained generally.

Q. Do they ever complain of the attendants?

Q. I have never heard any complaints made by them of the attendants.

Q. Have you ever heard any complaint from a patient of being struck by an attendant, or that an attendant had struck another patient?

A. No, sir; I never heard one of them say that, or complain of any ill-treatment; I do not remember that any of them have ever

spoken to me of ill-treatment, further than they have made complaints of the food.

Q. What attention does Dr. Gray give to the patients personally to your knowledge?

A. I do not think I should be able to answer very satisfactory on that point, not being there but seldom myself; I notice, however, that whenever Dr. Gray goes, as I have often been through with him, the patients seemed to be very familiar with him, and treat him with a great deal of consideration.

Q. How often do you think Dr. Gray visits the wards?

A. Well, I suppose Dr. Gray goes whenever it is necessary for him to give personal attention to any thing; I think I could say that much.

Q. How frequently, in point of time, do you suppose he would go there?

A. That, of course, would depend upon his own judgment as to the necessity of the case, very likely.

Q. What is your present impression as to about how often he would be likely to go there through the wards?

A. I do not believe the doctor would neglect any duty, that is all; I think he is a very conscientious man in the discharge of his duty, that is my experience from my knowledge of him and a long acquaintance.

Q. You really have no idea then, as to how often he goes into the wards?

A. No, sir; I have nothing to base an answer upon; I do not know; I could not tell you with any accuracy.

Q. How are the supplies for the institution purchased?

A. A bill is made out for the ordinary wants of the institution, and Mr. Dryer sees that they are purchased, I think they are made out by Dr. Gray himself mainly, but I don't know for certain.

Q. Where were the supplies for the institution usually purchased?

A. I think there are more than a hundred different places in the the city (Utica), I think I have heard that there were one hundred and twenty places in town; more than I supposed until I made special inquiry.

Q. Where are the bulk of the supplies purchased?

A. I suppose the larger bills are purchased of Butler & Hamilton, more than elsewhere, that is my supposition about it.

Q. How long have they purchased of that firm?

A. All the time that I have been there, and I do not know how much longer.

Q. They are retail grocers?

A. Yes, sir; I think they are — they may wholesale to some extent.

Q. Have you ever visited their establishment yourself?

A. Yes, sir; I have been there.

Q. On behalf of the Asylum?

A. No, sir.

Q. That you have never interfered with?

A. No, sir; it was a contract in operation when I went there; I think I never have seen any thing to lead me think, or feel that it was not faithfully carried out.

Q. Have you ever seen the contract?

A. I have not read the contract.

Q. Have you ever seen it?

A. No, sir.

Q. Have you any idea of its nature or contents?

A. I know there is a five per cent commission; it has been frequently talked of in the board.

Q. What is this five per cent commission upon — what class of goods?

A. I do not think it covers every thing, I am quite sure it does not.

Q. Generally speaking, what does it cover to your recollection?

A. I think it covers some kinds of sugar and molasses, and some of the more staple of the articles, those that are most used.

Q. And as to the other articles of goods in their line — what arrangement is there between the asylum and that firm on such other goods?

A. I do not think the five per cent covers every thing, but some of the specific articles that I have named.

Q. Except those is there any arrangement to your knowledge?

A. No, sir; not to my knowledge.

Q. What is the basis of the prices; simply a question of reasonable charge, or market price, or what?

A. Well, do you mean in regard to those not included in the — under the five per cent commission?

Q. Yes.

A. I think that they are charged at about the ordinary market prices.

Q. The ordinary wholesale or retail market prices do you mean?

A. They are not wholesale dealers.

Q. Would you, therefore, infer that the prices are retail?

A. I should infer that they were; I think that they would be very likely to be, but they would make them at a reasonable charge of profit, probably more than five per cent.

Q. But less than the ordinary retail profits?

A. I should think they would.

Q. Have you ever examined to see?

A. I have never been in that position, it has not come under my especial duty.

Q. Has it ever been a subject of inquiry by the board as to the method of purchasing?

A. Yes; they have talked about it a good deal.

Q. What steps have you taken to inform yourselves as to the closeness of prices and economy in purchasing?

A. The matter, I think, has been in the hands of the steward,

and I do not know that there have been; whether he goes round and ascertains about prices, I do not know.

Q. Then the board, so far as you know, have taken no steps to ascertain how close prices are obtained?

A. The auditing committee has that matter in charge, and they go over all these bills; and we expect the auditing committee, if they see any thing irregular that requires attention, that they will report it to the board.

Q. Then, so far as you know, none of the board, outside of the auditing committee, feel any responsibility about it?

A. I would not say that.

Q. So far as you know have any members of the board taken steps to ascertain whether the goods are purchased closely and economically or not?

A. I understand that they have; it has been a matter in which several of the members of the board have personally taken steps.

Q. Can you name those members of the board who have taken such steps?

A. I think that General McQuaid was one; I have talked with him on the subject myself more than once; I do not remember any others now.

Q. He is the only one?

A. Yes, sir; that I remember of.

Q. What time was it that he spoke on the subject when it has been up before the board?

A. At various times.

Q. Have you ever examined any of the bills of Butler & Hamilton?

A. Well, I have examined them with the other members of the board; I have examined them with all the care I could; I have also had the books of the treasurer and seen that they have tallied with the checks.

Q. Were such bills examined by the auditing committee before or after they were paid?

A. After they were paid; they do not come into the hands of the auditing committee until after they have been paid and have been through the secretary and treasurer's office.

Q. Then the auditing is not so much of the bills themselves as it is of the treasurer's accounts?

A. Yes; that is the truth about it; we wanted to see if they tallied; if the invoices tallied and to see that the business was done correctly.

Q. If you found that the prices charged were higher than the ordinary prices for the same articles at other stores, what would you do with regard to such items on the bills?

A. If they were charged at a higher price at Butler & Hamilton's than at any other store, do you mean?

Q. Yes?

A. I should buy them where I could buy at the lowest price, provided the quality was equal in both cases.

Q. Did you ever notice any such difference in price in their bills?

A. I do not remember; when I was a member of the auditing committee, I have questioned, but not on their bills so much as on one or two other bills; I have never thought that Butler & Hamilton overcharged; I had confidence in them; I supposed the rule was fixed and that the commission was little enough, as little as any body could afford to do the business upon.

Q. Has the board ever thought it expedient to make purchases of such staple articles themselves at wholesale?

A. No, sir; I do not think that they have; not to my knowledge.

Q. How much flour do they use there in a month?

A. I don't know that I could tell you; I have heard but it is out of my mind now

Q. Have you any idea?

A. I would not undertake to say from recollection, for I cannot remember.

Q. Could you say how many barrels of sugar they used in a year?

A. No, sir.

Q. Or how many boxes of tea?

A. No, sir.

Q. Have you any idea at all as to the amount of supplies?

A. I knew about the average cost in the year; our report shows the amount expended for provisions, etc.; I refer to the annual report.

Q. How much would you say was expended for provisions in the year?

A. My memory of figures is pretty poor; I have been looking over the reports recently but I could not remember them.

Q. Have you any idea how much is spent by the institution in the year in the way of provisions alone?

A. It must be over a hundred and —— well, I would not say; I have not charged myself with remembering those things.

Q. So that you have no idea of how much has been spent annually for provisions?

A. I would not undertake to tell you, no, sir.

Q. How are the drugs and medicines purchased?

A. By the medical authorities there; they would naturally do so.

Q. Are those bills audited in the same way?

A. Yes, sir.

Q. Where are the drugs purchased?

A. Largely in New York, I think; that is my impression about it.

Q. Do you know whether they are purchased at all in Utica?

A. I could not tell you.

Q. Do you know where they would be purchased in Utica if any were purchased there?

A. I think they would be purchased generally, some, I think, at

Kilgore's and, possibly, Blackie's; those two firms would furnish the larger proportion, and I rather think they do.

Q. So that you believe the drugs are purchased in Utica, some of them, at least?

A. Yes, sir; some of them are undoubtedly purchased here.

Q. Are you satisfied with the present system of purchasing supplies; do you think entirely by Dr. Gray and the steward the proper method of purchasing?

A. I have never doubted it but what it was, and yet I would not say that it could not be improved upon, especially in view of the general impression, if it be so, that there is looseness there.

Q. Is it your impression that there is looseness there?

A. No, sir, it is not; I have been there long enough, and watched it close enough to feel very well satisfied that it is a remarkably well managed institution, and well conducted.

Q. By that you refer to Dr. Gray's executive management?

A. I have a very good opinion of that.

Q. And the institution is largely controlled by him?

A. Why, certainly; and it should be — he is the responsible head of it.

Q Are you satisfied that it is wise that the duty of purchasing supplies and generally managing the domestic branch of the institution should be intrusted to Dr. Gray?

A. I think if a man can be found who is capable of doing it admirably, all through, that such a man should do it.

Q. Do you think he is capable of transacting that as well as conducting the scientific part of the institution?

A. I think so; I do; I may overrate him, but I have a very great confidence in his ability in all directions where he puts it forth.

Q. Do you not think that his time could be more profitably employed in the scientific department of the asylum — the professional part?

A. Well, it depends altogether upon how much time he would give to those details; I don't think it is necessary for one to give the time that would interfere with other and more important duties.

Q. That is to say, that you think that the purchases and supervision of the supplies would not take a great deal of time?

A. Well, there is a routine about that business, and it would not seem to me to be very difficult or take up a great deal of time of the doctor.

Q. Do you think his supervision of the farm and other outside work on the estate takes much of his time?

A. I should not think it did; I think he has got on well in good skillful management, and it seems to me to be a protective and valuable help.

Q. If you found that he did not very often visit the patients, and that it was urged in excuse that his time was much taken up with the executive management of the institution in other branches,

would you then think it was wise to release him from such outside work?

A. I think that the chief place for his active work is in the medical department of the institution.

Q. Would you be disposed to recommend that he be confined substantially to that branch of the asylum?

A. I would if the other branch did not suffer in consequence.

Q. Do you think that the managers could profitably spend more time in visiting the asylum itself?

A. I have not thought so.

Q. Have you preferred to leave that to the superintendent?

A. I may have erroneous notions about that, but I have noticed frequently that it produced great disturbance in many ways, and the patients it seems to me are injured by the excitement of members going through, you would say so yourself if you were there to see so much of it as I have.

Q. Would you think it would be unwise to have a single member of the board go through at intervals?

A. No, sir; but I don't think a single member would accomplish the result that a number would.

Q. Do you not think it would be wise to establish some such practice and regular form of visitation in each and every ward in the building by some member of the board?

A. It would be if any of the board were physicians, but where they are business men, I should say it would not as far as the patients are concerned; I never thought I was any help any more than the impression I got through my eyes and ears; I do think however that it would be probably an advantage and be very useful for the managers to visit the institution frequently.

Q. Do you think they are visited frequently enough at present?

A. I should not feel that there was any lack of duty so far as I have observed.

Q. Were you before the committee last year?

A. No, sir.

PUBLIUS V. ROGERS:

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Wat is your age?
A. Fifty-nine.
Q. What is your business?
A. Banker; I am president of the first national bank.
Q. What position do you hold with reference to the Asylum?
A. Manager.
Q. How long have you been a manager?
A. Since December, 1881.
Q. By whom were you appointed?
A. Governor Cornell.
Q. Please state the circumstances attending your appointment?
A. I was appointed to take the place of George B. Anderson, who resigned.
Q. Did you ask for the place?
A. No, sir; and I did not know I was in nomination for it until I found my name sent in, in the spring of 1881.
Q. How many meetings did they have at the asylum in that particular period?
A. Regular meetings? four each year.
Q. How frequently did they hold special meetings?
A. It is irregular; sometimes, I think, there have been half a dozen at my office.
Q. Roughly, how many meetings are there?
A. I think I have attended eighteen, regular and special, at the Asylum, not counting the half a dozen at my office.
Q. Since your appointment?
A. Yes, sir; in December, 1881.
Q. How often have you visited the Asylum for the purpose of inspecting the wards?
A. That would be impossible to state correctly; some of the time during the last summer I was there a good many times, growing out of the fact that I was on special committee connected with the building of an addition.
Q. On those occasions did you go about the wards pretty generally?
A. Not through all of them, but I took occasion to visit portions of them, and another portion afterward.
Q. So that in the course of a few visits you would go over the whole Asylum, in a few wards at the time?
A. Yes, sir.
Q. Did you go over the whole Asylum by such visit?
A. Yes, sir.

Q. How many times did you visit each ward during the whole year?

A. Take the whole Asylum right through, probably not over six or seven times, perhaps seven.

Q. You have visited each ward in the Asylum as much as six or seven times during the past year?

A. Yes, sir.

Q. Are you familiar with the duties of the attendants and servants in the Asylum?

A. No, sir, not perfectly.

Q. Do you know about what hours of service or duty they have each day?

A. The attendants have fifteen hours, I think.

Q. And are liable to be called on for duty at night besides?

A. Yes, sir.

Q. What pay do they get?

A. Their pay is regulated on the men's side.

Q. What is the lowest?

A. Twenty dollars, and I think it increased some two dollars every six months; I think in the more disturbed wards they have twenty-five dollars; that is my recollection.

Q. What has been your impression of the character of the attendants as far as you have seen them, from time to time?

A. Well, in their favor to a certain extent.

Q. Do you think they are as good men and women for the purpose as you could have for the Asylum?

A. I should have to qualify in reply to that by this: These attendants are quite sufficient; I cannot say they are *competent* men, for I am not skilled in judgment in the matter.

Q. Do you think their pay is sufficient for such duties?

A. I do not.

Q. Do you think there is a sufficient number of attendants?

A. My only judgment about that is that the only criticism I would make or change would be in reference to the disturbed wards.

Q. Would not an increase of attendants enable the other attendants to have fewer hours of duty?

A. Yes, sir.

Q. Should you think that would be desirable?

A. Well, they should be kept pretty closely to their position; the more they ate away from the Asylum, the less faithful work would be looked for, I think.

Q. Do you think their hours of duty are excessively long?

A. I think they are too long; that is, if they are as I understand, fifteen hours.

Q. Have you ever heard complaints against any attendants?

A. No, sir.

Q. Have you ever asked the patients as to their condition from time to time?

A. Yes, sir.

Q. Have they ever made complaints to you?

A. No, sir; the chief complaints that have been made to me, have been their detention there.

Q. Have you ever noticed patients with black eyes or bruised faces?

A. I think I have on one occasion, but I cannot tell under what circumstances.

Q. Have you ever noticed on more than one occasion?

A. I don't remember but one, and that is so indistinct, I would not be able to locate the ward or the time.

Q. How frequently does Dr. Gray visit the ward?

A. I cannot tell you.

Q. Have you any idea?

A. I have not.

Q. Do you suppose he visits the ward every day?

A. No, sir.

Q. Or as often as once a week?

A. He is at the Asylum; I suppose he does as often as once a week, and more frequently on some of the wards.

Q. What are his duties at the Asylum?

A. They are very comprehensive.

Q. Please state some of his duties?

A. He has the general care of the medical staff, and of the steward, and the general good order of the establishment; the review of the cases, and inspection of them as they become inmates of the Asylum, and a general oversight of these cases; and inquiry in reference to particular cases, and a general oversight of all work that is being done.

Q. Inside and outside?

A. Yes, sir.

Q. Receiving visitors?

A. No, sir; not visitors who were led here by curiosity.

Q. But to see the inmates?

A. Yes, sir.

Q. Does he also see those who come to inquire about their friends?

A. He does, sir, in some cases; he could not see them all, for there are about five thousand a year go to visit their friends.

Q. Have you any idea how many come for purposes of curiosity, on visits?

A. I think the statistics show, somewhat over eight thousand in all.

Q. Does he receive the patients on their arrival?

A. Probably, in some of the cases; perhaps not the large majority.

Q. Does he supervise the purchasing of supplies for the institution?

A. Yes, sir; in this view he looks at the supplies and at the steward's requisitions; he seems to be quite familiar with the prices of commodities.

Q. Where are supplies obtained for the institution?

A. Utica, Buffalo, some in Binghamton.

Q. How are they purchased, wholesale or retail?

A. I should say that staples, such as flour, would be called wholesale purchases; in the matter of clothing, they get a few garments at a time, but I understand that they have them at wholesale prices?

Q. What do you mean by wholesale purchases of flour; how many barrels do they have at a time?

A. Fifty to a hundred barrels.

Q. These purchases are made in Utica?

A. Yes, sir.

Q. How about sugar; that is purchased here in Utica?

A. Yes, sir.

Q. What quantities?

A. I have never been on the auditing committee and cannot answer that.

Q. How much flour is used there monthly, or annually?

A. I think it must be several thousand barrels a year.

Q. How much sugar would you say was used there a year; that is, how many barrels?

A. That would be mere guess work; the flour business is one that I have, in times past, spoken about.

Q. How much tea is used annually?

A. I have no idea; I know it must be a very large amount.

Q. Do they furnish it to the patients in considerable quantities?

A. Yes, sir.

Q. At what meals do they have it?

A. I cannot tell; I know from being in the store rooms and seeing the packages there.

Q. At what place in Utica are the supplies usually furnished from?

A. Groceries, at Butler & Hamilton's.

Q. Are they wholesalers or retailers?

A. I should say they would be classed as retailers.

Q. Are the groceries purchased upon any special arrangement, or do they purchase at market prices, from time to time?

A. There are four or five articles that Butler and Hamilton furnish on a percentage under an agreement which I have always understood was made by members of the board of management, some years since, before I became a member.

Q. What are the articles which have that percentage agreement?

A. As near as I can recollect, sugars, molasses, coffee and rice, I think.

Q. About flour, is that bought there?

A. I think not; it is possible they may buy some there; they sell flour.

Q. So that you do not know where the flour is bought?

A. No, sir; I suppose it is bought at various places.

Q. What do the provisions cost annually, as you recollect?

A. Over $50,000.

Q. Where are the drugs purchased?

A. I think, some of them are probably purchased at Butler & Hamiltons; some at Blackie's, and some at Kilgore's, and where else I don't know.

Q. Are they purchased at wholesale or retail?

A. I don't know.

Q. Would you not think that drugs for so large an establishment could as well be purchased at wholesale?

A. I should think it would be entirely safe to do it, although that is a very serious question as to drugs; there are some advantages that would suggest themselves to me that in getting them of an apothecary, so that if on testing them, they were not found satisfactory, they could be returned without any difficulty; I think, Mr. Chairman, that Blackie furnishes them on a percentage — what are bought such as Squibs' preparations, for instance; I think Mr. Blackie said so to me.

Q. What do you think would be a reasonable percentage on Squibs, preparations?

A. I do not know; I am not a merchant, but I suppose ten per cent would be a reasonable percentage.

Q. Would you think it desirable to have staple drugs purchased upon a percentage, in order to avoid the trouble of sending to New York or elsewhere for them?

A. That is a line of inquiry that I don't feel I have any definite opinions about.

Q. Who has attended to the part of purchasing of supplies in the Asylum?

A. The steward, by the regulations of the managers, makes all purchases, but under the direction of the superintendent.

Q. So that it is entirely left to the steward and superintendent?

A. Yes, sir.

Q. And the board do not interfere in that matter?

A. No, sir.

Q. Do you examine the bills from time to time?

A. I do not; I am not on the auditing committee; that is done by the auditing committee.

Q. Do you know whether they examine the bills before or after payment?

A. After payment.

Q. Don't you think it would be well to have the bills scrutinized, from time to time, to ascertain if goods are purchased at close prices?

A. Yes, sir.

Q. And you say it has not been the practice so to do?

A. No, sir, I think they are only examined by the auditing committee after payment has been made by the treasurer.

Q. In order to check off the vouchers?

A. Yes, sir; of course there would be a great many difficulties in the auditing committee examining bills before payment, unless they

were arranged for that purpose ; these men that come with supplies— for instance a man comes with ten tubs of butter, and he wants his money and it is paid ; that is how those bills are paid, except for such goods as are bought at the stores.

Q. How are the bills paid, usually !

A. The attendants' service bills are paid monthly.

Q. How about grocers' bills.

A. I think these are paid quarterly.

Q. How about the butchers' bills ?

A. My impression is they are paid as presented from day to day; that is, those who furnish supplies, but they do their own killing there ; I mean those who bring live stock or poultry.

Q. Is mutton, for instance, killed or bought dressed ?

A. Killed.

Q. Where do they purchase the stock of cattle and sheep to kill ?

A. All about the county, and in adjacent counties.

Q. How as to payment made for such purposes, is it cash ?

A. Yes, sir.

Q. You say that payments for the groceries and such supplies are made quarterly ?

A. I say only as to those of Butler & Hamilton, for I have looked over those bills.

Q. Their purchases are the staple grocery supplies of the institution ?

A. Yes, sir.

Q. And amount to a considerable proportion of their domestic bills ?

A. Well, I should suppose that — it is a mere guess — not a considerable proportion of their provision account by any means, but a considerable proportion of their grocers' account.

Q. How much do you suppose Butler & Hamilton's bills for the year amount to ?

A. I should suppose seven or eight thousand dollars.

Q. If these bills are presented quarterly, why would it not be possible for the auditing committee to audit these bills once a month before payment ?

A. It would be, if the auditing committee could give them the time — it is a tax upon the time of the auditing committee.

Q. You have said that Dr. Gray's duties are somewhat comprehensive; do you not think that much of the work which you have referred to — purchasing supplies, etc., and of management of outside matters — should be taken away from Dr. Gray and given over exclusively to the steward, or to the steward and a sub-committee of the board ?

A. I think that there should be one responsible head and that the superintendent should have control of all the persons in the institution.

Q. If it were said that Dr. Gray did not visit the wards very frequently, and it were urged in excuse that his time was much taken

up with other duties connected with the Asylum, would you not consider that it would be desirable to relieve him from such outside duties as much as possible, so that his attention might be more directed to the professional part?

A. I do not see how the matter of supplies and provisions, medicines can be intrusted to anybody but the responsible head; a hospital is different from a boarding-house, and such a person competent in that direction and who has entire control should be the responsible person to give directions in all those purchases.

Q. And as a matter of business economy, don't you think a business man connected with the board together with the steward responsible to them only, would be better able to make close purchases than a scientific gentleman, much of whose time is closely confined to his profesional duty?

A. When you say the board of managers should do that, I don't know that they are called upon to give their time to that department of work, my judgment is that the managers give all the time that they can generally spare for it; they give as much time to the institution as they do to corporations in which they have pecuniary interests unless they are executive officers of the corporation.

Q. Who appoints the steward?

A. The superintendent with the consent of the managers, or rather I should say, on his recommendation the managers appoint; I will qualify that — the managers appoint I think, and the superintendent has no voice in it except by courtesy; the present steward has been so long there that we don't — I remember long before I was connected with the management that there was a discharge of a steward by the board; I remember that, without the recommendation of the superintendent; his delinquencies were brought to the board of managers by the superintendent.

Q. How long ago was that?

A. Fifteen or twenty years ago, Mr. Olin; Mr. Dryer has been there in the same position he now holds for about twenty-six years.

The Witness — Well that is more probably correct as to the time.

Q. Does Dr. Gray attend the meetings of the board of managers?

A. Generally; special meetings of the board have been held at my office when he has been present and when he has not, and meetings have been held at the Asylum when he has not been present.

Q. When the doctor is in town, and at home, he attends?

A. Yes, sir; but a good many times he did not act with the board because he was absent.

Q. How much was the doctor absent?

A. I don't know.

Q. How much has he been absent during the past two years; by weeks or months?

A. First he was absent in the winter of 1882; he was in Washington attending the Guiteau trial; during the summer the board of managers gave him leave of absence, and I think at least he must have

been absent during the year 1882, at Washington and in the pursuit of health after his injury, more than six months in that year.

Q. And during last year, how much was he away from the institution, to your knowledge?

A. I don't know in the year 1882; it was a noticeable year, much of his absence was due to his professional employment in the Guiteau trial and other cases; and also to absence in consequence of his injury.

Q. So far as an absence for private professional employment has been, do you approve of such absence on his part?

A. Yes, sir; so far as I understand it, he is generally called under circumstances where it would be a great injury to some one if he as not permitted to go.

Q. And if he is permitted to go, is it not true that it is a source of great profit to himself?

A. To what extent I do not know.

Q. Are you not aware that he stands so high professionally, that he is able to charge large fees for his services as an expert?

A. I presume it may be so, I don't know any thing about it?

Q. Are you not aware that he lectures regularly at Bellevue Medical College?

A. I am aware of it.

Q. Are you aware that he is also called away as an expert in public trials?

A. I am.

Q. Do you or do you not think that such business impairs his services at the Asylum?

A. Certainly; a man's entire time at the Asylum would be preferable to his absence at any time except for the recreation that is necessary for every man to have.

Q. It appears from the testimony of yourself and other managers, that but little personal attention was given to supervision of the attendants or inspection of the wards, and that this is left to the superintendent and his assistants?

A. I do not know how much time is given.

Q. In the absence of Dr. Gray, from the Asylum, who has the executive head?

A. The first assistant — at present, Dr. Brush.

Some of the managers visit more frequently than I do.

Q. Who are those?

A. Mr. Campbell and General McQuaid, and, I think, Mr. Swann goes there, but I go no oftener than I feel I ought to go.

Q. Then your supervision has been mostly to the business part of the concern?

A. Yes, sir.

Q. By that do you mean financial?

A. Yes, sir; I have been on special committees and I have been on the committee of water supply, which has taken a great deal of time.

Q. As to the purchase of supplies, is it your belief that the asylum makes its purchases as closely and economically as possible?

A. That is a difficult question to answer, for I have not scanned these bills with care myself; so far as I am informed, their goods are bought with due regard to economy.

Q. Then, as I understand, that is entirely left to the board of managers to the auditing committee?

A. Yes, sir.

Q. And so far as you know, the practical work is really done by Dr. Gray and the steward?

A. Yes, sir.

Q. And that no attempt is made to interfere with their purchases or regulate them on behalf of the manager?

A. I should say that that is not quite true, that I have heard suggestions made with the board of managers at their meeting to enquire whether flour, for example, might not be bought directly from the mills, and they have received no reply yet; this particular subject can be dealt with by business men on the board, who are more familiar with the matter, and they can suggest methods to be adopted in purchasing; and they have made suggestions to the full board.

Q. What action has been taken upon such suggestions?

A. I don't think the board have acted upon it yet.

Q. Was Dr. Gray present when the suggestions were made?

A. Yes, sir.

Q. Did he reply that in his judgment purchases were made to the best advantage at the present time?

A. I don't recollect.

Q. Do you remember whether Dr. Gray took any part in the discussion about prices?

A. Yes, sir.

Q. Did he suggest that a change should be made?

A. I don't think that he suggested it, but said that there was no objection to the effort to obtain supplies elsewhere, he had no objection.

Q. Did he seem to think they were bought to good advantage at present, or that there was no occasion for a change?

A. He did not express himself with any positiveness about it, that is according to my recollection.

Q. I understand you to say that the board, in such discussion, took no further action?

A. No, sir; not at that time.

Q. About what time was that?

A. Last April, I should think.

Q. April, 1883?

A. Yes, sir.

Q. Was the question raised on any other occasion?

A. I don't remember it on any other occasion.

Q. Who raised the question at the board meeting?

A. I think it may have been Mr. Winston.

Q. Has any other member of the board raised the question of a change in the making of purchase?

A. I recollect none now.

Q. Has any member of the board made any suggestion toward a change in the duties and responsibilities of Dr. Gray?

A. No, sir, not that I know of.

Q. Has any recommendation been made by any member of the board whether the steward should take a more direct control of the purchases, and leave Dr. Gray to the management of the medical department of the Asylum?

A. I don't know that I recollect any suggestions at the meetings of the managers.

Q. Has any suggestion been informally made by any members of the board?

A. I have made a suggestion that possibly an assistant to the steward would give the steward more time for canvassing the market as to values; most of my work has been in connection with this water supply, a special committee; I feel at liberty to leave other things to a special committee.

Q. About the supply of gas, where does the institution obtain its gas?

A. Utica gas light company.

Q. What rate do they pay a thousand?

A. One dollar and seventy-five cents.

Q. What is the rate for retail consumers?

A. One dollar and ninety-five cents, after all the deductions are made?

Q. What is the rate for mills, etc.?

A. The same as the Asylum.

Q. Do you believe the Asylum gets it as low as it is furnished anywhere in Utica?

A. Yes, sir.

Q. There was some trouble about that some years ago, was there not, when it was thought that the Asylum was paying more for gas than they should?

A. Not in my recollection.

Q. Has there been any reduction in the price of gas since you have been a member of the board?

A. I think a contract has been made reducing its price to $1.75.

Q. When was this contract made?

A. I should say it was about a year ago; the charges for gas have been charged to the private consumers by a reduction of twenty-five per cent it is $2.25, which is less by thirty cents a thousand.

Q. What has caused that reduction; the water gas company being here?

A. That is all used by the same company; water gas and coal gas; the gas company generally in the city of Utica has been in advance of the demand of its supply for a reduction.

Q. Do you know, as a fact, that the price of gas was lower to public buildings and hotels, etc., than the asylum?

A. Yes, sir.

Q. Are you connected with the Utica Gas Company?

A. Yes, sir.

Q. What are you?

A. I am a trustee and director.

Q. Was there any other gas company in Utica?

A. No, sir.

Q. How long have you been trustee in the company?

A. Six or seven years.

Q. As trustee of the gas company, are you satisfied with the rate paid by the Asylum to the gas company?

A. Yes, sir.

Q. As a member of the board of managers of the Asylum, are you satisfied the gas as furnished is as low as it can be obtained from the gas company?

A. Yes, sir.

Q. You are satisfied it is as low as it should be?

A. Yes, I am.

Q. Do you know, as a fact, whether or not the Asylum was paying $2.50?

A. No, sir, I don't; I said two years ago that the reduction was made; my impression is that I may be wrong about that.

Q. About how much do the gas bills amount to annually?

A. I don't know.

Q. Would you hazard a guess?

A. It is a large consumption.

Q. What do you mean by large?

A. I mean several thousand dollars, two or three thousand dollars, it may be twice that, I don't know.

Q. Have efforts been made to examine in the institution?

A. I don't know.

Q. Are you aware that comparisons were made a few years ago, as to the amount of gas used in this institution, with the amount of gas used in other institutions, and that it appeared that this institution used a larger amount of gas than other institutions of a similar character?

A. I never heard that until now.

Q. State if, in your judgment, there cannot be a reduction in the amount of gas used in the institution?

A. I know nothing about it; I cannot tell their requirements.

Q. As to lighting of the halls or different parts of the institution?

A. I have never been there in the evening since I have been a manager.

Q. What kind of gas is furnished to the institution?

A. Up to a very recent period there has been coal gas; it is now coal and water gas combined.

Q. Are you aware that a request was made to your institution by

the State Board of Charities several years ago to furnish an inventory of the property of the institution?

A. Yes, sir.

Q. Was such request complied with?

A. As far as I know it has not been.

Q. Do you know why it has not been?

A. It was given to the auditing committee to report upon, and, so far as I know, they have made no report.

Q. In your judgment should or should not such a report be made to the State Board of Charities?

A. I don't know the law under which they were acting.

Q. What is Dr. Gray's view on the subject?

A. I think he regards it as an unnecessary requirement.

Q. If you were informed that every similar charitable institution, subject to their supervision, except this Asylum and Buffalo, had complied with the request, what would you say as to the probable reasonableness of the request?

A. I had it told me they could not furnish it without months of labor.

Q. Is it your impression that the institution could not furnish the request without months of labor?

A. In looking over the lists of requirements, it seems to me it would be a very great labor.

Q. Have you ever signified your willingness to comply with any particular request?

A. I don't know that it has been before me.

Q. Has the board ever made any effort to induce the State Board of Charities to modify its request?

A. I do not know that I can say any thing on this subject; I recollect nothing.

Q. Has the State Board of Charities ever taken any action on the subject, except referring it to the auditing committee?

A. Not to my knowledge.

Q. Or asked that committee to report?

A. I don't recollect any thing; in fact, it has been generally understood that the subject was laid on the table; it is in the hands of the auditing committee.

Q. What would you, at the present, recommend in regard to such reports, after hearing that other similar institutions have complied?

A. I should recommend if it was put to me—I should ask to be excused from serving on the committee.

Q. Why?

A. The labor is so considerable, I think.

Q. Could not the labor be done by some employees of the institution?

A. It might be.

Q. Should it not be?

A. Clerks might be obtained, I suppose.

By Mr. HASKELL :

Q. Is the only objection you have to comply, that it would take considerable labor ?

A. I have no objection other than that.

Q. Is there not a reluctance on the part of the board of managers to furnish any information to the State Board of Charities as to the domestic arrangements of the Utica Asylum ?

A. I am not aware of it.

Q. Are you willing to furnish such information to the State Board of Charities as can be complied with by the institution without the emyloyment of additional clerks ?

A. I have no wish or feeling about that; I have no unwillingness that I know of.

Q. Or any willingness, specially ?

A. I haven't any special willingness.

Q. Are you aware that the refusal of the board of managers of this Asylum to comply with the request of the State Board of Charities has been made a subject of criticism of the Board ?

A. Yes, sir, I have been told so.

Q. Were you before the committee last winter ?

A. No, sir; I was in Florida last winter.

SATURDAY, *March* 1, 9:30 A. M.

Proceedings continued as follows:

MISS LUCY PECK,

Sworn and examined, testified as follows.

By the CHAIRMAN:

Q. What is your age, madam?

A. I was born in 1869, on election day.

Q. How old were you in November, 1869?

A. Oh, did I say 1869? That was a mistake; I should have said 1839.

Q. Please state if you were ever an inmate of the Utica Insane Asylum?

A. Yes, sir.

Q. And about when and for how long a time?

A. I think it was December 6, 1869, that I entered as a patient.

Q. How long did you stay there?

A. At that time I stayed there until the last of September, 1870, or the first of October; I think it was the last of September.

Q. Thirteen months?

A. No, sir, about eight or nine months.

Q. Did you again go there?

A. I did.

Q. Please state about the time?

A. October, 1871.

Q. How long did you then stay there?

A. Until, I think, it was May; the last of May; I am not sure whether it was the first of May, or the last of April; it was 1875.

Q. How long in all?

A. Three and a half or four years.

Q. Is that the last time you were there?

A. To stay, yes.

Q. Please explain under what circumstances you were there the last time; were you assisting, as well as a patient?

A. Not more than any others; I was not officially called there, but I worked with the rest as they did.

Q. State to the committee what are your impressions about the manner of the treatment of the patients there?

A. Well, I have been twice among the colored people of the south, and my impression was that at the Asylum they were treated worse than the slaveholders treated the negroes.

Q. Were you south before the war?

A. No, sir; since the war; I was there south as a teacher of the American Missionary Association.

Q. Are you now teaching?

A. Yes, sir; I closed my school yesterday in Deansville; I have been there four months; I was a teacher in Deansville Academy before the graded school was started.

Q. Have you regularly been employed as a teacher since leaving the Asylum?

A. I was three times in the town of New Hartford — it was above New Hartford on the hill; I had been sick a long time and had eaten very little, which is always the preliminary of insanity; my condition was a brain trouble, but it seemed to be more like intoxication than insanity; I insisted it was not insanity, but they said it was.

Q. Did you have any delusions?

A. I think I had a great many, and I think there are very few people who have not some kind of delusion; no physician saw me prior to my entrance into the Asylum; I asked my friends to take me there and they thought best to take me.

Q. So that your entrance was entirely voluntary with the approval of your friends?

A. Yes, sir.

Q. Please state what was paid for you per week at the Asylum?

A. It was paid by the county.

Q. Please state your impressions as to the treatment of the patients by the attendants and officers of the institution?

A. My impression is that the treatment by the superintendent was about the same as that of a slaveholder of his slaves; a person in the Asylum has no name; as soon as a person enters that Asylum, they cease to be an individual; the doctor will come through, and he will say to any one with him: "this is a case of so and so," as though the patient were a stick or a geological specimen.

Q. Was there any unkind treatment of patients by attendants within your knowledge?

A. Yes, sir; a great deal of it.

Q. Can you specify any instances?

A. I can, hundreds of them.

Q. What was the nature of them — in what did they consist?

A. Consisted in what I have stated, that the patients ceased to be individuals.

Q. Can you recollect any instances of harsh treatment of patients by attendants?

A. What led me to go to the back wards was to get where I could see what was going on; once, when I was going up stairs, Miss Sayles, the oldest attendant of the house — I was going up stairs as fast as I could, and she gave me a push or a pull or something, I won't say just what, to hurry me up or something; as they say there, the first thing to do is to break your will, and I suppose that was the beginning of it.

Q. Did you ever see any occasions of unkind or harsh treatment of any other patients by attendants?

A. Oh, yes.

Q. Describe any such treatment that you saw ; what did they do?

A. In the first place, I found large numbers of what they call "outside patients," if you know what those are; they were kept with insufficient food; those who could come to the table help themselves to the food such as it was.

Q. Did the outside patients complain?

A. They cannot complain ; and it is those suffer the most who cannot speak or complain.

Q. Do you mean that they are so much deranged that they cannot tell?

A. Yes, sir; they cannot tell ; they do not go to the table to eat, their food is taken to them ; sometimes they find other patients who will feed them.

Q. Do you state the fact, that their food has been insufficient from your own observation of the nature of the meals taken out to them?

A. It seemed to me very insufficient on No. 6 ; you see them more on No. 6, because that is the idiotic ward ; but I was kept most of the time in a private room, as an attendant put me in there she said she had no pity for any one who was big fool enough to come in here; the mess that was given to some of them to eat was not fit for a pig to eat.

Q. You have stated that you have seen instances of harsh and unkind treatment of patients — can you specify any instances of harsh treatment?

A. I saw a good many that were pulled and pushed around a good deal, and knocked down ; sometimes I would see them down, and not know how they came down, for I have such a horror of fighting, that I always looked the other way, but I have seen them bruised, and with their arms broken — at least one.

Q. Do you happen to remember the name of the patient who had her arm broken?

A. Her name was Mary, I am not sure whether it was Kelly or not, but there was a Miss Lasker who had her arm broken ; I am not sure whether it was Kelly or Parker, but it was one of those two names.

Q. Do you know how the injury occurred?

A. I don't know.

Q. Was it in a controversy with another patient or an attendant?

A. I did not know her arm was broken until she told me ; I complained because they kept her in the crib all the time, but they said it was necessary, that her arm was protected ; I saw her there and talked with her, and as she did not say that it was a patient that did it, I concluded that it was done in a scuffle with an attendant.

Q. But you are unable to say whether it was done by an attendant?

A. I am unable to say for certain.

Q. It may have been by accident?

A. Yes, sir, it may have been.

Q. Did you ever see an attendant strike a patient?

A. I have, but I don't remember seeing one strike a patient very hard.

Q. Was it a frequent occurrence; the striking of patients by attendants?

A. Whenever a patient was to be "disciplined" as they call it, they were taken into another room; they were pulled in to a little room when they were going to do any thing, so that we did not see the affair, we only saw the result of it.

Q. What were the results?

A. In one case I saw a patient terribly bruised so that she did not look like a human being on one side of her face; her name was W. K.; it was in this way, she did not want to go out into the back yard, they said that she must; so she saw the doctor and got his permission to stay; Dr. Kempster told her that, but we had another docter there and he made a change in the orders; so the attendants said she must go out, but she relied on the promise of the other doctor and thought she was doing right in refusing to go out into the barn-yard; she was willing to obey orders, but thought she had permission to stay in; and when she refused to go they "disciplined" her.

Q. Did you see her disciplined?

A. Yes, sir; I was on the ward.

Q. Had she been violent at all?

A. Never; she ran away once.

Q. From the Asylum?

A. Yes, sir; but she was very quiet and lady-like; a well-behaved woman at all times as far as I knew; she went the first night as far as she could walk; she said the people where she went took her in.

Q. Was that just about the time you speak of when she was disciplined?

A. It was about a month before.

Q. State the circumstances about her being disciplined?

A. It was time to go out on to the yard and she would not go: when she did come out on to the yard with the attendants, one side of her face was so black that I would not have known who she was.

Q. How was it caused?

A. I don't know; I only know that when we went on to the yard I saw that there was going to be a fight, I knew she was going to resist, and I knew that the attendants would insist upon her going out, and soon afterward she came out as I have described.

Q. Can you give the names of the attendants?

A. Mary Haynes; she had charge of the ward.

Q. When this patient came out on to the yard, did she make any complaint?

A. I do not remember; her complaint was self-evident.

Q. Do you know whether these injuries were the result of accident or of intentional injury by the attendant?

A. I do not think they intended — I think in making her go out in the yard they bruised her in that way.

Q. She may have struck her head against a door or upon the floor in falling?

A. Well, I don't think any one striking would have produced such injuries as that.

Q. Do you think the bruises were the results of blows?

A. I do not know enough about such things to know what the effect would be

Q. What did you believe was the cause of her injury when she came out into the yard?

A. I believed the attendants struck her and that they had had a fight.

Q. What made you think she had been badly treated by the attendants?

A. Because I knew she would not go out unless forced to, and they went after some other girls to help force her before I left the ward; Miss Haynes lives in the city and I think is a truthful person.

Q. Can you remember the names of any of the other girls?

A. I can think them up; if I can look at that "paper" with the names of the attendants on, I can tell; there was Delia Sherman, but I cannot tell whether she was on the ward at the time of this occurrence.

Q. Do you know of any other occasions where patients were bruised or injured by an attendant?

A. I had a sore on my own arm a long time from wearing a muff.

Q. What was the muff put on for, do you recollect?

A. I think it was because I unstrapped a patient; I did so because I was so tired of seeing her strapped up in that way.

Q. How long had she been strapped?

A. From the time I went on the ward until I left the ward; all day and all night, and they were not allowed to change their clothing.

Q. Were they not violent patients who were so confined?

A. You could not tell because they were always kept strapped; they were not tried; the patients themselves said they did not know what they were kept strapped for; she said she did not need that camisole any more than I did, and in one case where it was taken off the patient was perfectly quiet after it was taken off.

Q. Did you ever speak to the doctors about any such patients?

A. Yes, sir.

Q. And what did they say?

A. I guess they said it was necessary—I do not remember what they did say.

Q. They probably said it was necessary, is that it?

A. Yes, sir; I heard Dr. Kempster and Dr. Andrews talking with the attendants and urging them to try them.

Q. As a rule were the physicians kind to the patients?

A. Do you call it kind of Dr. Gray to serve you as if you were only a stick or a stone?

Q. Explain what you mean by that?

A. I mean that I do not think it is kind to treat one—even if they are a little insane—to treat them as if they had ceased to be an individual.

Q. How did he speak to the patients?

A. In different manners; sometimes if they spoke to him he would answer them and sometimes he would not; sometimes he would be very pleasant indeed; the first time I was there I really had quite a high opinion of Dr. Gray; and he came on to the wards at that time often—as often as once in four or six weeks.

Q. That was during the first time you were there?

A. Yes, sir.

Q. Did he not come oftener than once in four weeks?

A. Well, I could not be positive about that; I know that the last time I was there I did not see him once in four months.

Q. Months or weeks do you mean?

A. Months; I did not see him as often as once in four months?

Q. How often did the physicians come on to the wards?

A. Every day; at that time they did not come more than once a day but I think they come now twice.

Q. Did they come at a regular time during the day?

A. Generally; it varied, but they came about ten o'clock or eleven o'clock in the morning.

Q. And how long did they stay on the ward?

A. Not very long; they would pass through and speak to the patients.

Q. Did the patients ever speak to the doctors about their restraint?

A. Most of the patients who are so restrained cannot make an intelligent complaint; about Dr. Gray coming there, I would say that an attendant there said she did not know Dr. Gray and had never seen him—her name was Ella Smart, Sangerfield Centre.

Q. Have you any complaints to make of the doctors?

A. Yes, sir; I have a complaint to make of Dr. Gray that he is not there much.

Q. Did the other doctors perform their duties with consideration for the patients?

A. The doctors' characters were different; I think that Doctors Kellog, Andrews and Kempster had a great deal of feeling for the patients, but those doctors that seemed to have most feeling seemed to be fettered in their powers, while some of the others had almost unlimited powers; Dr. Kitchener, for instance, had; he would come on and say to a whole ward at a time "you can't go to chapel to-day;" sometimes a doctor would tell a single patient they could not go, but never a whole ward; he (Dr. Kitchener) seemed to have more power than any of the other doctors who had more feeling for the patients.

Q. Did the attendants behave any differently toward the patients when the doctors were away than they did when the doctors were present?

A. Some of them did and some of them did not.

Q. Can you recollect any instance where some of them did behave differently?

A. Well, one of their favorite restoratives there was smothering with wet sheets, but I think they never did that in the presence of any doctor.

Q. Explain what you mean by that?

A. Well, they took a sheet — an ordinary sheet from the bed — and wet it thoroughly; now you know, through a dry sheet you can get a little air, but you can't breathe through a wet sheet; they would wet it and double it up and put it over the patient's head and twist it around the throat, so that you could not breathe.

Q. Do you say that was done sometimes?

A. Yes, sir; very frequently.

Q. For what purpose?

A. For punishment; I remember very well the first time I was subjected to such treatment as that; it was one Sunday I wanted to go to chapel; I asked the attendant if I could go to chapel; she said no I could not; well, sometimes it would happen that an attendant would say that you could not go to chapel and afterward the supervisor would come through and would say that you might go; on this occasion I thought in some way that I should be allowed to go and so I said I shall go, and I went into the room and started to get ready; I was combing my hair and preparing myself to get ready for chapel, the attendant came into the room and closed the door, I guess some one was with her, and they smothered me with a wet sheet; at another time when I was treated in the same way I think it was because I had unstrapped a patient.

Q. Then what did they do?

A. Smothered me the same as they did at this time; another time that I was smothered it was for reading; I was fond of reading and I had found something to read, it was a piece of an old book; you know that there are windows over the doors; we were put to bed directly after supper, which was at six o'clock?

Q. At what time in the year do you go to bed at six o'clock.

A. All the year; I thought I did not care to sleep so long; I thought I would read; so I pushed a wash-stand or bureau against the door and sat on that with my book so placed that I could see to read by the light from outside through the window over the top of the door; there was a bureau in the room that contained some clothes belonging to an attendant — Barbara Bisikel — she lives here in Utica; I don't want to say any thing about some of these attendants because Barbara is quite a good friend of mine, and I think they did not do more than most girls would do under all the circumstances; well, she came in for some clothes and found I was

reading; she went out and came back with a sheet and smothered me.

Q. What did she say when she came into the room?

A. I do not remember.

Q. Did she complain of your being up reading?

A. I do not remember about that.

Q. Did she go out and bring in the sheet wet?

A. Yes; I think it was right in the room that I was smothered.

Q. Did she do it alone, or did she have some one to assist her?

A. I think she did it alone, but I am not positive; I was not at all strong at the time, and one attendant — any one attended in the house could easily master me. I am not sure that any one was with her.

Q. Were you ever smothered at any other times than those?

A. Not that I remember of.

Q. Did you ever see any other patient smothered?

A. I did not see any others smothered, but I saw them taking wet sheets and go into different rooms sometimes; Miss C. W——, of New Hartford, told me on one occasion that an attendant was passing her door, she did not laugh, but she made a face at her, and for that the attendant went and got a wet sheet and smothered her.

Q. In what other way or ways did attendants control patients?

A. Largely by mechanical restraints.

Q. How long did they keep these sheets on?

A. In many cases they kept them on a long time; I nearly died the first time they put it on me, and still nearer the second, and I thought I never could live through a third.

Q. Did they keep it on until you became unconscious?

A. I do not think I was wholly unconscious.

Q. About how many minutes would you say they kept on the wet sheet?

A. I do not think I could estimate the time.

Q. Did it absolutely stop your breath?

A. I could not tell. If you would like to know, I would like to have you try it; Mrs. Kast, an attendant, had it tried on her for an experiment; she tried all the restraints, was strapped down, and was fed with a tube, she wanted to see how the things were; she is in Rochester now, and is not in the institution.

Q. What is her full name?

A. I think it is B. C. Kast, that is the name of her husband, 21 Hamilton place, Rochester; she wrote to me last year during the time Dr. Gray testified.

Q. When was Mrs. Kast there?

A. She went there in 1870; I think she was there twice during the time I was there.

Q. Were you there when the experiments were tried on her?

A. No, sir.

Q. Then how do you know that they were tried on her?

A. By statements made by herself to me and to my sisters.

Q. Were there any other complaints that you could speak of at the — that time made against attendants?

A. Well, about the cribs; I think they kept patients too long in the cribs; they are uncomfortable but perhaps necessary, sometimes they were in the habit of putting patients in before supper, and keeping them there until six or seven o'clock in the morning, which would make thirteen hours; I presume the same thing is done now.

Q. In the covered beds, how much space would there be between the mattress and the top of the cover — enoguh for a patient to sit up?

A. No, sir; I think not.

Q. Was it enough for them to turn over easily?

A. I could not say, although I slept in one once voluntarily.

Q. Did you ever know of a patient being injured in the covered bed?

A. I think it injures one to stay there so many hours at a time; it is very uncomfortable.

Q. Any thing more than being compelled to be in one position?

A. No, sir; not only that; but the air cannot be admitted as well; I do not know as I can exactly describe it, but I know it was very uncomfortable.

Q. Can you not turn round or turn over easily?

A. I do not remember about that.

Q. Can you rise up easily in them?

A. I don't remember about that now.

Q. Have you any other causes of complaint against the institution?

A. There is a great number of patients there who are weak and feeble and they get tired and would like to lie down; but I was told there that it was against the rules of the institution to lie down; we became so tired that we could not really sit up; once I was so tired and wanted to lie down so much that I laid on the floor, and I know a minister's wife there who did the same thing.

Q. Did you ever ask permission to lie down?

A. Yes, sir; some times the doctors would say about a certain patient "let her lie down," and once when I had permission to go and lie down from the doctor, I told the attendant so, but they said they did not care, and would not let me.

Q. You now refer to the day time?

A. Yes, sir; lying down in the day time; and to prevent their lying down in the rooms, the doors were always kept locked, so that you could not get into any room where there was a bed; when General Barlow passed through the wards on his inspection he noticed that the doors were all closed and locked; he said, what are these doors kept locked for; and they said to him; "oh, if we did not lock them the patients might get in and lie down;" and he said, what if they did.

Q. Did you hear him say that?

A. No, sir; I did not hear it myself.

Q. We must ask you to state only what you heard yourself?

A. Well, Mrs. Kast came once, and it seemed like a present; she said what are those doors locked for; they said that the patients might get in there and lie down or something; she said, "I don't care, I will open those doors if they raise the devil;" I heard her say that myself; I had been acquainted with her for about ten or fifteen years and I never heard her make any such expression before except then; on No. 7, the doors were always kept locked, and on No. 9, some of them, and on No. 6, I think all of them.

Q. What ward were you on most of the time?

A. I managed to get on all the back wards; those that are not called good wards are situated in the back part of the building.

Q. What cases are those on the back wards?

A. I think that the murderers, those that came with a diploma from the State prison or on an indictment from some court are stationed on the front wards; I think now of one, a Mrs. J., who roasted her own child because she would not buy liquor for her; she is on number two.

Q. What are the character of patients on the back wards?

A. There are those that protest against murder, either in the Asylum or out; that was like a girl that I saw, she said "I will stay here in this house until I see law here."

Q. Were they noisy patients on the back wards?

A. Yes — no, sir; not all noisy.

Q. Were they restless and violent?

A. Yes, sir; restless and violent patients, and a great many quiet ones.

Q. Have you any other matters to speak of?

A. Yes, sir; I have; there was one great and universal cause of suffering on ward 10; I was on ward 10 once.

Q. What was the subject of complaint there?

A. There was a great deal of suffering there; they suffered a great deal with cold; there was a Miss S.; I remember one New Year's day, when the fire was not out in the ironing-room, that she went to it and she kept saying "this is grand," "this is grand;" I have heard her say it as much as ten times.

Q. Was it always cold in that ward?

A. In cold weather it was.

Q. Was there not any heat there?

A. There was a water-closet that was warmed, and there was a little room that they kept the swill pail in, that was warmed; it had a register in but most of the time it was locked.

Q. Was there any register in the ward itself?

A. I could not say; it was so cold that the doctors would come down and would say, "why, you have got a window up some — wheres," but there would not be any window up; I have heard the fireman, Mr. Graham, come up there and say it was cold, and he could not understand why that ward should be cold at all, because it was nearest to the engine-room; but he said, "it is no use to say any thing to Dr. Gray about;" I heard him say that.

Q. Was there any other cause of complaint in that ward?

A. Yes, sir.

Q. What other cause of complaint was there in that ward?

A. The ward was the darkest ward in the house; there were blinds nailed on to the lower part of the windows — of course they were nailed so that we could not open them and let the sunlight in there; so that it made it very dark; I finally took the slats out of all the blinds on the ward and they remained so for some time.

Q. How long a time — some weeks?

A. I am pretty positive that when I visited the Asylum after I was out, a year after it was done, the blinds were still there, but the slats were out.

Q. What did you do with the slats?

A. Threw them out of the window.

Q. Did the attendants ever make any complaint of the cold in No. 10 ward?

A. Actions speak louder than words; I remember once that an attendant, they called her "Rebel" Cameron, because she rebelled against the rules of the house, she said once "as soon as the doctors go, you can all go to bed and warm yourselves;" some of the attendants would not let us go to bed.

Q. Was it a common occurrence to go to bed in the day time?

A. Dr. Kitchener came one day and we were abed, and he wanted to know if we were abed to keep warm, and the attendant said that we were.

Q. What did the doctor say?

A. I don't remember.

Q. What was done, if any thing, to make it more comfortable?

A. Some time afterward, about the time I came home, I cannot say whether it was the last winter or next to the last, Dr. Andrews came on to the ward one day, and one of the patients went to him— one that had been there a long time, and said to him "I am almost froze to death;" he turned around then and asked others about if they were cold, and they said they were; and then, very soon after that, they put in some new registers.

Q. So that the evil was finally remedied?

A. Considerably; I saw the other day in the papers that the ward was being rebuilt or reconstructed; you asked me about the attendants complaining of cold, and I was going to say, in answer to that question, that several came there apparently strong, healthy girls, and of course while they were working they would not feel the cold, but when they got through with their work they would feel it more than the patients who had not been doing any thing; a good many of them died and I believe their colds were caused by that told ward — I think their death was hastened by the cold of that ward.

Q. How do you know they have died since?

A. Rhoda Parks left the house and died in St. Luke's Hospital; Mary Comstock died; I visited her friends; Cecilia Deese, she has

died since, I saw some one going to her funeral; and Nelly Campion, and Annie Roscoe, they both died in the Asylum about a year ago.

Q. Do you know where this "rebel" Cameron is now?

A. No, sir; she went west and was married; I have tried to find out her address, she had a brother in the city but he is dead.

Q. You have mentioned several methods of ill treatment by the attendants; does any thing else occur to you now that you can mention?

A. I do not know; I will look at my paper here (refers to a paper); yes, sir; I want to find fault with the matter of correspondence of the patients.

Q. Have you any complaint to make about that?

A. Yes, sir.

Q. What is it — please state it?

A. They are not allowed to communicate with their friends, which I think is very wrong.

Q. How do you know that they are not allowed that privilege?

A. Because I tried it; the first time I was there I was unable to get a syllable out.

Q. Did you write to your friends?

A. Yes, sir.

Q. Did you get any answer?

A. No, sir; I did not get any because my letters were not sent?

Q. Did they give you the letters your friends wrote you?

A. I think they did.

Q. Did your friends acknowledge receipt of letters from you?

A. Yes, sir; the second time I was there, some of my letters were sent; the first time I was there none of them were sent.

Q. Did your friends make any inquiries of you at the time whether or not you had written to them?

A. I do not know whether or not they wrote to me the first time; they came to see me very often; I was in there about nine months the first time

Q. And your friends came to see you very often — about how often?

A. I could not say exactly.

Q. Once a month?

A. No, sir.

Q. Meanwhile you endeavored to write to them?

A. Yes.

Q. And when your friends visited you, as you say they did, did you ever ask them if they had received your letters?

A. Yes, sir.

Q. And what did they say to you in reply to that?

A. They said that they had not.

Q. Did you make any complaints to the physicians about your letters not being mailed for you?

A. Yes, sir.

Q. To whom did you complain — can you give us the name of any physician to whom you complained?

A. Dr. Keeler; and the second time I was there I was writing a letter to my mother; Dr. Kitchener came on to the ward and he said to the altendant, Miss Sarah Sterling, who is now in the house, "Take that away from her;" she did not do it, however. And I know of a case, a Miss B.; she wrote a letter to her father and sent it out secretly, and for that she was placed in a room in solitary confinement; I don't know how long it was kept up, but I think she was there about six weeks or two months to the best of my recollection?

Q. Did you ever see her in that room?

A. No, sir.

Q. How do you know she was there during that time?

A. She wrote to me during the time and slipped her letter under the door, and Mrs. D. H., at that time, but now Mrs. M., on Barack street, brought me the letter.

Q. Have you that letter?

A. I have not. I have letters from Mrs. B.; she is now out of the Asylum; I had a letter from her this week; she is now in an asylum in California; I heard from her this week. I would like to say some more about my experience and observation, because our Asylum here at Utica is said to be the base of all similar institutions in this country; with regard to this last case, I can only say that the report was that she was put in that room for sending that letter; she was kept in confinement a good deal because she tried to get the keys, but she never was kept so closely before; I saw her attempt to snatch the keys once.

Q. From whom?

A. From attendants; she would try hard to get the keys and would scuffle, but she was not noisy nor violent, but she was not bad, because I had no trouble with her; I could take her and hold her.

Q. Do you know whether she was sleepless or not?

A. I think she slept pretty well; she slept in the same ward that I did some of the time.

Q. And during the time that she was in this room were you in the habit of passing by the room yourself?

A. No, sir.

Q. Was it on another ward?

A. Yes, sir. I can give you the names of the girls that were on the ward, who took her there by the doctor's orders.

Q. Please give their names?

A. Frankie Davis had charge of the ward; she is in Utica, dressmaking with another girl who was also an attendant; she is on Deborah street, with Miss F.

Q. What other attendants were there?

A. I am not positive who were the other attendants at the time, but she could tell you

Q. For all you know, the seclusion in this dark room may have been on account of the necessities of her case, according to the judgment of the doctors?

A. Well she was there three years and was never so wholly secluded but what she was allowed to come out on to the wards and get warm, but she did not even have a chair there to sit down on; she was never treated so severely at any time excepting for sending this letter; the doctors knew of her seclusion because they ordered it, and I was told that it was ordered because she sent that letter.

Q. Who told you?

A. I guess she told me herself, but I would not say.

Q. Did you ever speak to any of the doctors about it?

A. No, sir.

Q. Did you ever make any remonstrance to anybody about her seclusion?

A. I made a remonstrance in this way about a great many things; one day I remonstrated to Dr. Kempster and he said to me "you be quiet and I will put you on the first ward;" I says I never will be quiet about such things.

Q. What did he mean by putting you on the first ward? is that a noisy or a quiet ward?

A. A quiet ward.

Q. And if you would be quiet he would put you on that ward as a favor?

A. Yes, sir; I suppose so.

Q. Was it generally regarded as a favor to get on to a quiet ward?

A. I think it was; of course the rooms are pleasanter.

Q. Are there any other complaints that you have to make against the institution?

A. Yes, sir. (Referring to a memorandum.)

Q. Please state what they are?

A. Yes, sir; patients were locked up in what they call "sitting-rooms" and, of course, there was less variety than if they had the range of the wards, and in those rooms the time seemed double as long as it would if they had more variety.

Q. What were they locked up there for; were they noisy patients?

A. Some were noisy and some were not.

Q. Why were they locked up in the sitting-room?

A. My idea of the matter was it was to get them out of the way.

Q. Did the patients have any means of amusement or occupation?

A. That is what I was going to say next; the patients — a good many of them — would be glad of a little something to do.

Q. Are they allowed to sew?

A. Very little; one time I went up with an attendant into the garret where there were some pieces of tissue paper and old cloth — odds and ends — we were coming down with these things; we were on No. 6; the attendant said, "Run in there quick, Miss Sayles is

coming, and she does not allow that; she does not allow the patients on her ward to work, and if you go through her ward you will see very little work of the kind going on."

Q. Were you allowed to read?

A. There was no objection, I suppose, but we were not permitted to have books, so we did not have any thing to read; I was not allowed to have my own Bible even.

Q. Did you ever get any books out of the library of the institution?

A. I did not know that there was a library when I went there.

By Mr. Olin:

Q. Did you come back the second time to the Asylum or did your people bring you?

A. I came on foot in the night; that is, I arrived there by daylight, of course, but I came in the night.

Q. Did you decide that you ought to come back?

A. No, sir.

Q. How came you to come back here then?

A. I had made some promises there that I could not have fulfilled without going back and I wanted to go back.

Q. How long a time elapsed between the time you left and the time you came back?

A. Over a year; if I cannot at any time do as I agree, I want, at any rate, to make an explanation and say why I cannot do it, so I came back thinking I would make some explanations; one thing I had agreed to do was to inform the friends of some of the patients how they were.

Q. So you came back to get into the institution to tell them?

A. No, sir, not wholly that; another thing was that when I was there, as I was going away, Dr. Andrews says to me, "you won't forget us," and I says no; some one else said, "when people go away from here they soon forget us," and I said, "I will not; I will come and see you." I begged my friends to bring me to visit here, but they would not, and I thought I would come, any way; but I did not expect to be put in as an inmate of the Asylum again.

Q. As I understand you, you tried, while you were in there, to get into these back wards?

A. Yes, sir, I did.

Q. What ward were you put into when you first went there?

A. Into No. 3.

Q. Was that a quiet ward?

A. Yes, sir.

Q. What was your object in getting into those back wards—what did you want to get there for?

A. Well, one of the prominent men of Oneida county said to me, a few days before I came to the Asylum, "when you come out you can tell us all about it;" I thought that if there was the state of oppression here that there is in the south, the time would come

when the same thing would come again ; that is, I thought if there had been any wrong there, that it would be there again, in the Asylum, I mean ; I was an obscure person ; no person in the Asylum knew me, and I thought I could find out a good many things that other people could not find out.

Q. So that your object was to find out the things that went on there ?

A. Yes, sir.

Q. Were you on all the wards in the institution on the south side ?

A. I was placed on every ward except twelve and eleven ; sometimes when the wards were crowded and there was not enough room, I asked the girls to let me go down on to ward No. 10; and I was down there daytimes sometimes, but it was so cold down there, that is the very cold ward about which I spoke, I went from there to get warm sometimes, so that I was on that ward several nights and days.

Q. How did you get from one ward to another — suppose you were on ward 8 and wanted to get on to ward 4, for instance — how did you manage it ?

A. We were changed around.

Q. Who changed you around ?

A. The doctors ; the way I got changed was that I managed one day to do something ; if you would like to know how I managed it, I will tell you.

Q. Yes, I would like to know ?

A. I inquired when I got up stairs when I got out of Mrs. Sayles' reach, how I could get on to the back wards ; they said if you make a noise — are noisy, they will put you there ; so I noised around considerably.

Q. And your object was to get there and find out how things went ?

A. Yes, sir ; I had been teaching and taking classes through the higher mathematics — through trigonometry — and they, some of them, asked me to go further and take them out surveying ; I did not do that with my classes, but when I got into the Asylum, I thought there was some "surveying" to be done there, but of rather a different kind that, perhaps I could do.

Q. And it took you about three years to get through with it ?

A. Yes, sir, it took about that time.

Q. In your going to the Asylum the last time, you must have come away without your people knowing ?

A. Yes, sir, I did.

Q. Did you try to get them to bring you and they decline — is that what you said ?

A. I tried to get them to bring me for a visit ; I did not come intending or expecting to stay ; I had been pronounced all right the year I was home and I did not know as they would put me in.

Q. But they found you there in the morning and thought you belonged in there ; is that it ?

A. No, sir ; they did not.

By Mr. SWAN?

Q. Did you escape at any time from the Asylum?

A. Yes, sir; that was the first time I was there.

Q. How long were you gone?

A. Over a year.

Q. They did not find you and take you back when you escaped?

A. No, sir; I went there voluntarily; my friends would not have put me there.

Q. Did you not go back with your mother?

A. No, sir; I came back alone in the night.

By Mr. HASKELL:

Q. Is there any other abuses or complaints of patients — or causes of complaint than you have now specified — please state them; or have you stated all now?

A. If you were there at the hour they put patients to bed you would see that they are left in those cribs or covered beds thirteen hours; if you could be there you would find that out; then, if you visit the wards, I would like you to please notice and see how many of the women patients are engaged on any kind of work — needle-work, I mean; you cannot realize how a little work of that kind enlivens the time and shortens it; patients who have been confined there, who are there now, will tell you that it shortens the time wonderfully.

Q. I am asking you if there was any thing you saw that you think should be complained of?

A. I am stating a ground of complaint; patients were not allowed to keep their embroidery work; when they came they would bring some such work to keep them out of idleness, and it would be taken away from them; some of the attendants would allow that to be done — would allow them to do such work, and even in some cases furnish the work, or furnish the things, but the head attendant, Miss Sayles, would not do so, as she was opposed to it.

Q. Is Miss Sayles there now?

A. Yes, sir; and it was in her department that I saw most abuse; hers was the third department, No. 3 and No. 6; I referred to the "outside patients" who did not leave the wards to go to the dining-room; I watched a good many months and I never saw those outside patients have a warm meal.

Q. How do you know that their meals were not warm?

A. I saw it given to them; they would put some milk into some cold coffee, and some crackers into it, and that is all I ever saw them have from morning till night.

Q. Do you know as a fact that they did not have any other food?

A. Yes, sir; because I often took their meals out to them.

Q. For several consecutive days?

A. Yes, sir.

Q. On what ward did you ever feed any patient for several consecutive days all the food they ate?

A. On number eight; I fed Mrs. L. with all the food she had for several consecutive days; that was during the second time I was there.

Q. Where is she now?

A. I do not know; but she would be wholly unable to testify if you could find her.

Q. What was her condition?

A. Very sad; when I first saw Mrs. L. I met her in the back yard, a very nice looking young lady, and very tastily dressed; she was from Allegany county, she said; she had a husband and one child, and she told me a good many things about her husband and child; I talked with her some time and she seemed to be a nice appearing young lady; I asked her if she would not like to see a newspaper; I used to come down to the kitchen and through their kindness there I used to get a paper at times; I asked this Mrs. L. if she would not like to see a paper from Allegany county; she said that she would, and I got and gave her a paper from Allegany county — from Andover; she took it and looked it over, and all in a moment, suddenly, I thought she had another kind of "Andover;" she started away and climbed up the high fence; she went up like a squirrel; she did not read the paper; she looked at it; I saw her climb up over the fence; she went up as I said like a squirrel; but she was caught; the next day she did not come out in the yard, and I inquired of her, about her.

Q. Did she get clear over the fence and out of sight?

A. Yes; I think she did.

Q. Did you see her when she was brought into the institution?

A. No, sir; I only saw her at that time to talk with her, because that was the only time she could talk; she was not allowed to go out into the fresh air any more, and the next time I saw her was on ward eight; I did not recognize her as the same person; I slept in the same room with her for some months.

Q. What change was there in her mental condition?

A. She was kept in strong dresses and strapped down and never spoke an intelligible sentence.

Q. What do you mean by strapped down?

A. Kept strapped to a chair.

Q. All the time?

A. Well she might have been led to the water-closet perhaps.

Q. And for how long a time did you feed her all that she received?

A. I presume it was a month.

Q. What kind of food did she receive during that period?

A. She had some of the same food from the table.

Q. Then she was sufficiently fed?

A. She was not properly fed, for she had a disease about her that her food did not agree with her, and she did not have such food as a person of her disease needed.

Q. Did she have as good food as the other patients?

A. I would not be positive whether she had the same or not, but in many cases it was cold even if it was the same food.

Q. Was hers cold, that she received?

A. I could not tell you positively.

Q. Is there any other specific thing that you want to call our attention to in regard to the Asylum?

A. Yes, sir, there are; for instance, on one ward there was a patient that was very lousy; it was on number 12.

Q. How did you know that the patient was lousy?

A. She came to the ironing-room where I was sorting clothes, and as patients or attendants came near her they were liable to catch the vermin.

Q. Lice in her hair or body lice?

A. Lice in her hair; she was thoroughly lousy and was from Flushing, Long Island; she had been in the institution; been in there about two years, and she was in that lousy condition for some months.

Q. Do you know that of your own knowledge?

A. Yes, sir; I tried to comb them out once; a great many of the others got lousy, and so did I myself.

Q. Is that all you have to state, or is there any thing else?

A. Yes, sir; the indifference in regard to life and limb; now, on ward 9 the beds were so made up, with a rise in the middle, that feeble patients would fall off, would roll off like a log; I protested that it was not safe to put feeble women on those rounding beds; I know of two cases where they fell out; one was a woman who had been there but a short time; she fell off and died from her injuries, or I should say, from her injuries; she was so injured that I think she died the same night; it was common report on the ward; I think Miss N. M. told me; another case was Mrs. J., an old lady; she laid in the next room to me; one morning she told me her leg was broken; they told her it was not; she insisted that it was, and upon examination it was found to be so that her leg was broken.

Q. How do you know it was?

A. I saw her sometime afterward; she finally died; they told her she never would get well, and she never did; a great many of the patients are taken away to Ovid or to Rome, to other asylums, and they have a horror of being taken to institutions for the chronic insane, and they are taken away without being allowed to notify their friends of the intention to remove them.

Q. How do you know that?

A. In this city there is a music teacher, Miss Mary S., who has a friend in there; she told me that she asked Dr. Gray to notify her about it, as she wanted to see her friend before she was removed, but she never was notified, and she was removed.

Q. All you know in regard to the removal of chronic cases without notifying their friends is from what some one told you?

A. Yes, sir, that is all; but you can ask those persons, and you will find that they will say it is so; for my own part, I know they have been taken away suddenly when they themselves — the patients — did not know that they were going to be taken away; that is, they were never notified.

Q. Is there any other matter you desire to call our attention to?

A. Yes, sir; the fact that the class of patients there who seem to receive the most favors there, and were allowed to have the most influence in demoralizing patients by contact, were the murderers and insane criminals; such patients, several of them, were allowed more general range among the patients than any others; I know it was demoralizing to the patients and to the attendants.

Q. You mean their moral influence?

A. Yes, sir.

Q. What particular privilege do you refer to as being granted to them that was not accorded to any other patients of the same mental condition?

A. Well, perhaps I am not a good judge as to whether they were of the same mental condition; they were on the same ward.

Q. You mean that inmates who have been sent there after having committed some crime ought not to be put with a class who are not in the same category, and have not been guilty of any offenses?

A. I think they ought not to be allowed special privileges; there ought not to be a premium put upon murder.

Q. What special privileges do they have that is not accorded to other patients of substantially the same mental condition?

A. Well, about the same mental condition, perhaps I could not say that they were that.

Q. What privileges were accorded to them that were not accorded to other patients on the same wards?

A. Well, take ward 9; I was on that ward; there was only one carpeted room, comfortably furnished, and that given to a patient from Sing Sing; her name is A. H.

Q. Was she there as a pay patient?

A. No, sir; she was a poor girl.

Q. Is that a fair sample of the privileges accorded to those you mention?

A. Yes.

Q. Do you know why she was in that room?

A. No, sir; but if any patient should complain they would be punished; I once heard Dr. Kitchener say to a patient, "you are kept here for talking against the institution," and he said to the same patient on another occasion, very soon after, "you can write to your friends that I think you are well enough to go home;" her name was Maggie K., she lived in Harlem or New York city.

Q. Is there any thing else that you want to call our attention to?

A. Yes; some matters that should be attended to by the Asylum authorities is done by others; this Miss. M., that I mentioned, she has put some of her own clothes on to patients and taken them

to chapel, and where some would take one or two patients she would take ten or eleven ; her father was a lawyer.

Q. Was she an attendant or a patient?

A. An attendant; Nettie Munross, she was very kind and attentive to the patients, but when there was to be any promotion or higher pay it was given to some other attendant who was not so kind to the patients; Miss Munross is dead now.

Q. Then, as a rule, you do not think they promoted the attendants on account of real merit?

A. No, sir.

Q. How was it with the physicians as to being kind and attentive to the patients?

A. Some of them were and some were not; Dr. Kitchener was not; he was a State's prison character, as you probably know.

Q. Do you mean Dr. Kitchener?

A. Didn't he leave Binghamton Asylum for embezzling funds there, and drinking; I was told he was in the State's prison in California ; he was last seen with a chain gang going through the streets; I was so told by the wife of the chaplain of the Binghamton Inebriate Asylum ; I don't know it of my own knowledge ; one of the wards was, for a long time, in charge of an attendant who had been an inmate of an asylum herself, and she was as insane as any of the patients; her name was Mary Pullman.

Q. You do not know whether she was insane or not, do you?

A. She was taken to the Asylum as insane, in the first place, then she was employed and kept there as an attendant; she was put on another ward while her ward was undergoing some repairs, but she got into a quarrel with another attendant and said she would leave until her own ward was finished; then she came back and Dr. Andrews told her she could not have her place and she was afterward brought back a patient; she was removed to Rome, finally, and there she died.

Q. Is there any thing else you desire to call our attention to?

A. As a rule, the general tone of the authorities to the patients is not what it should be; Dr. Andrews, Dr. Kelly and Dr. Kempster seemed to do the best they could for the patients; one time when I was on Mrs. Sayles' ward she put me off the ward without consulting any doctor; there was a lady from Madison county — to Mr. Haskell: you are from Madison county, I believe — she was from Brookfield ; one Sunday morning I thought I could get her mind off something; I says, "is not Brookfield a dilapidated, broken-down, out-at-the-elbows kind of a place?", they said, "oh, no, Brookfield is a nice town;" I turned round and said, "are you all from Brookfield, too," and they said, "no, but we are from Madison county;" and we counted seven that were from Madison county; I walked quietly along the ward, and jokingly said to Sarah, "now, this thing has got to be stopped ; we cannot have all Madison county dumped down in the Utica Insane Asylum;" Miss

Sayles came up to me, took hold of me, and stopped me, and I was put on to ward six. In regard to the patients in the back wards, I want to say that they do not get water to drink; I could sometimes hear the cries of the patients for water; they could not get it, no one would take it to them; they were kept like that all day long, and, of course, at meal times they would get a little.

Q. Did they have none except they had it at meal times?

A. No, sir; the fact that patients cannot communicate with their friends enhances the opportunities of the attendants to ill-treat them, because they cannot be complained of in a quarter where, probably, their complaints would be heeded.

Q. Were you ever prevented from communicating freely with your friends?

A. Yes, sir, I was, and others were also; after I had been there over a year, I say I could not leave there; I thought of what Dr. Hopkins, of this city, said to me; he said, "if they put him there, he should act so bad that they would not keep him there;" and when I saw the privileges of those who acted badly, I made up my mind that I would act very badly.

At the conclusion of the testimony of the last witness, the committee went to the Asylum and made an inspection of all the wards on the south side — female department.

The committee then adjourned to meet in room B, Monday afternoon, March 3.

ALBANY, N. Y., *March* 3, 1884,
ROOM B, NEW CAPITOL.

The committee met at 3 P. M.

Proceedings continued as follows:

GEORGE BARNARD,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?
A. Fifty.
Q. Where do you reside?
A. Rome, Oneida county.
Q. What is your business?
A. Cashier of the Fort Stanwix National Bank.
Q. What relation do you sustain to the Utica Insane Asylum?
A. I am one of the managers.
Q. When were you appointed?
A. This last spring; this is my first year.
Q. Please state what meetings of the board you have attended?
A. All that have been called, except one special meeting called at the First National Bank of Utica, along in the first of January; that I was unable to attend on account of some business.
Q. On what occasions have you visited the Asylum, except on the occasion of the meetings?
A. Not any; not since I have been manager.
Q. What occasion of these meetings have you gone over the wards?
A. All, except one meeting; we visited the wards every time, except one meeting.
Q. On such occasions, did you visit each of the wards, or only a few of them?
A. Only a portion of them.
Q. Have you, at any time, visited as many as all the wards in the institution?
A. Yes, sir.
Q. About how many meetings have been at the Asylum?
A. I should say four since my appointment.
Q. Was Dr. Gray present at all of these meetings?
A. He was.
Q. Did he go through the wards with you?
A. He did; I think thrice.
Q. How about the three times?
A. I think he went through one, and then we went through the day-rooms with some of the doctors; that is my impression.

Q. Are you a member of the auditing committee?

A. No, sir; I am not.

Q. Are you acquainted with the financial operations of the Asylum?

A. No more than through the report of the treasurer; I saw that.

Q. Do you know where the supplies for the institution are purchased?

A. No, sir; I don't.

Q. Have you had occasion to examine the accounts at all to ascertain as to the prices paid?

A. No, sir.

Q. By what authority are purchases made at present?

A. Through the steward, I understand.

Q. Does any member of the board supervise these prices or purchases?

A. No, only the auditing committee do so.

Q. Do you know whether the auditing committee examined the bills before payment or after?

A. It is my impression, after payment, but I may be mistaken about that.

Q Are you familiar with the duties of the superintendent, Dr. Gray, any more than that he has the general management of the asylum; please state, so far as you know, what his duties are?

A. As I understand, it is to take a general oversight of the whole asylum; that is, the admittance of the insane and their discharge when they are cured, and also the purchases; that is, it is all under his management.

Q. That is to say the business part of the asylum is also under his direction?

A. So I understand, yes, sir.

Q. Does that include also the supervision of the farm and the grounds, and outside matters?

A. Yes, sir.

Q. Who employs the attendants?

A. I think Dr. Gray hires them.

Q. Whether in your judgment there is or is not too much labor imposed upon Dr. Gray?

A. I think myself he has a great deal of labor to perform.

Q. Would you not regard it as desirable to separate the business and professional duties, so that the superintendent should be mainly responsible for the care of the patients?

A. I think myself it would be an advantage.

Q. Would you or would you not think it desirable whether there should be frequent and regular visitations of the Asylum by members of the board?

A. I think there should be

Q. Are you aware to what extent it is now visited by members of the board?

A. No, sir, I am not; no more than at these meetings, that is all.
Q. Do you know how many physicians there are?
A. I think there are four assistants.
Q. Do you know how many attendants there are?
A. No, sir, I do not.
Q. Some wards have two, some three, some four?
A. I do not know.
Q. Do you know what the pay of attendants is?
A. I think it is something like twenty-two or twenty-five dollars, something like that.
Q. Do you know what the hours of duty are of the attendants from day to day?
A. I am not positive, but my impression is that they quit at eight o'clock.
Q. Do you know when they come on in the morning?
A. No, sir, I do not.
Q. Have you no idea?
A. I cannot tell you from memory.
Q. Are you aware they are also liable to be called upon and are frequently called upon at night to attend patients?
A. I have been so informed.
Q. If it were true that the attendants are on duty about fourteen hours a day and were then liable to be called up during the night to attend patients, would you or would you not consider such hours of duty excessive?
A. I would.
Q. Have you any recommendation to make in regard to any relief of the attendants in that respect?
A. I have not.
Q. What do the purchases for food and other supplies of the institution amount to annually?
A. That I am unable to state.
Q. Have you any idea?
A. I looked over the report, but I don't carry it in my mind, therefore I cannot state the amount; I am unable to state the amount.
Q. Do you know whether Dr. Gray occasionally attends to private professional employment, as expert on diseases of the brain, outside of the institution?
A. Only as I have seen it reported in the papers.
Q. Do you know how much of his time that takes?
A. No, sir; I do not.
Q. Do you know how much he has been away from the institution during the past year?
A. No, sir, I don't.
Q. Do you or do you not consider that absence on such employment might clash with the performance of his duties at the institution?

A. If he were away considerable time, of course it would have to take considerable of his time.

Q. Do you or do you not consider it objectionable that Dr. Gray should accept such private professional employment, away from the institution?

A. If carried to any extent I do consider it objectionable.

Q. What would you consider an objectionable extent?

A. A number of times a month.

Q. How many?

A. Eight or ten times a month.

Q. What would you think his absences would have to amount to to be considered objectionable?

A. I am taking into consideration the time it takes to do it, if he were only away an hour or so, no; but if called away from the Asylum for a length of time, then it would be.

Q. Would you consider an absence of several days at a time objectionable?

A. I should if it were repeated a number of times.

Q. Are you aware that a request has been made of the Asylum authorities to fusnish to the State Board of Charities an inventory of the property of the institution?

A. I am not aware of it.

Q. Are you aware that another request has been made of the institution by the State Board of Charities of any statement of its affairs?

A. At one time, I remember, Dr. Gray showed me a schedule that he said some one wanted prepared for them; whether that is what you refer to or not, I don't know; it was a schedule in which the number of clothing, the different kinds of clothing that was made for the insane, etc.; whether that is what you mean or not, I don't, or as he told me where it came from or who made the inquiry.

Q. What other items were called for beside clothing, as you remember?

A. The number of crockery that was used in the Asylum, and I don't know whether provisions were mentioned or not; there was a long tabular statement which covered a sheet of paper three feet long, I should judge, and with different headings; I think it was written; that is my impression.

Q. A tabular statement to which answers were required?

A. Yes, sir; I think it required an answer in figures.

Q. It was in blank and answers were required to the questions upon it?

A. Yes, sir; that is the way I understood it.

Q. About what time was that?

A. I think some time this last fall.

Q. What did Dr. Gray say when he showed it to you?

A. That is all he said; it was something that some one required

him to make out; I happened to be the first at the meeting, then the others came in and then it was dropped.

Q. Was any thing said about it at the meeting?

A. No, sir.

Q. Did not Dr. Gray lay it before the board?

A. No, sir.

Q. Have you conversed with members of the board concerning the propriety of furnishing such information?

A. No, sir.

Q. Would you have any objections to furnish to the State Board of Charities any information relating to the institution?

A. No, sir; not as far as I can come at.

Q. Are there any criticisms whatever, that you can make touching the management af the Utica Asylum?

A. Not any.

Q. Are there any recommendations that you can make?

A. No, sir.

FRED C. SMITH.

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?

A. Twenty-four.

Q. Where do you reside, when you are not at the Asylum?

A. Holland Patent.

Q. What is your post-office address at home?

A. I have made it my home at Holland Patent.

Q. What position do you hold at the Asylum?

A. Snpervisor.

Q. In what ward?

A. Third department.

Q. What wards does that comprise?

A. Ten, eleven and twelve.

Q. How long have you held that position?

A. Since the middle of June.

Q. What position did you previously occupy there?

A. An attendant.

Q. How long had you been an attendant?

A. Until the middle of last June. I was there three years last November.

Q. What are your duties as supervisor?

A. To take charge of the third department, and see that the department is kept in order, to look after the patients and to see if a patient dies, to see that he is properly laid out.

Q. What were your duties as attendant?

A. To take care of the patients.

Q. In what wards were you stationed when attendant?

A. Fourth ward and first ward.

Q. How long were you on the fourth ward?
A. About sixteen months.
Q. What attendants were then with you?
A. Daniel Torpey and Charles Travers, Richard Jones and Richard Evans.
Q. Who was then supervisor of that ward?
A. Mr. Evans.
Q. Is he now in the institution?
A. No, sir.
Q. Do you know why he left?
A. No, sir; I think he bought a farm, or he went to a farm.
Q. While you were on the fourth ward were any patients injured there?
A. No, sir.
Q. None at all?
A. Not that I know of; I cannot recollect any.
Q. Will you state more precisely the period by dates that you were on that ward?
A. I cannot now.
Q. Can you state about what month you went on the fourth ward?
A. When I first went there, three years ago last November, and was there about sixteen months on that ward; from November, 1880 to March, 1882; I was then on the first ward and then about June, 1883, that I was appointed supervisor, which position I now hold.
Q. You have said that no injuries were suffered by any patient while you were on the fourth ward?
A. I cannot recollect any just now.
Q. Did patients during that time ever receive black eyes?
A. I cannot recollect any now.
Q. If any had been you would likely to have known it, while you were attendant?
A. Yes, sir; I think I would have known it.
Q. Did you ever see the patients with bruised noses, or other bruises about their persons?
A. I have seen some in a fit fall on the floor.
Q. Were you ever asked by any of the physicians in regard to bruises or black eyes suffered by patients, during the time you were on that ward?
A. I don't remember any now.
Q. If you had been so asked, do you think you would have been likely to remember it?
A. I might; yes, sir.
Can you not on reflection recall any such instances?
A. No, sir.
Q. Have you ever seen an attendant strike a patient on that ward?
A. No, sir.
Q. Never?
A. No, sir.

Q. Are you quite clear about that?
A. Yes, sir.
Q. Have you, yourself, ever struck a patient?
A. No, sir.
Q. If an attendant struck a patient on that ward in your presence, would you or would you not consider it your duty to report the fact to a physician?
A. I should report it immediately.
Q. Do you know of patients while you were on that fourth ward who were injured at night in their rooms, so as to have black eye, or other bruises about their head or body?
A. Well, I cannot recollect any now.
Q. How often has Dr. Gray visited the wards in which you have been?
A. I do not know.
Q. Does he visit them frequently?
A. I don't know.

By Mr. Rice:

Q. Why don't you know?
A. Well, he might visit them, when I was not there; I do not know how often he goes there.
Q. If Dr. Gray did visit that ward while you were there, you would be likely to see him, would you not?
A. If I was on the ward?
Q. If you were on duty?
A. Yes, sir.
Q. About what hours were you on duty while you were an attendant on the fourth ward?
A. In some parts of the season, from five until eight o'clock in the evening, and other seasons I would not be on quite so early in the morning.
Q. Did you have many vacations?
A. No, sir.
Q. Were you usually on duty.
A. Yes, sir.
Q. How many days were you absent from duty during the sixteen months you were on the fourth ward?
A. I think I was away a week.
Q. In sixteen months?
A. Yes, sir.
Q. I now ask you again, how frequently Dr. Gray visited that ward while you were an attendant there?
A. I don't know how often he did.
Q. Did you ever see him there?
A. Yes, sir.
Q. Can you not state how often you saw him there?
A. No, sir; I cannot.

Q. Did you see him there more than once during that sixteen months?

A. Well, I think I did, yes, sir.

Q. Can you recollect more than one occasion when you saw him?

A. I think he came there with the managers once, and came down to see a sick patient once.

Q. Can you recollect any other occasions?

A. No, sir; I cannot now.

Q. Are you willing to say that you have not seen him there more than twice on that ward?

A. I may have seen him three, but I cannot recollect three now.

Q. Then to the best of your recollection, how many times will you say that Dr. Gray was on that ward, while you were an attendant there, that you saw him?

A. I can't recollect in all those.

Q. When you went to the first ward, how often did you see Dr. Gray?

A. Quite frequently on the first ward.

Q. How frequently would you say?

A. I cannot say as to that.

Q. As often as once a month?

A. Yes, sir; I think I did.

Q. Oftener than that?

A. I cannot say as to that.

Q. How many months were you on that ward?

A. About fifteen months.

Q. About how many times during that fifteen months, as near as you can recollect, did you see Dr. Gray on that ward?

A. I don't know how many; I didn't see him there.

Q. How often are you willing to say that you think you saw him there?

A. I don't know as I could state.

Q. You have stated that you think he was there once a month; are you willing to say whether that fairly represents the frequency of his visits?

A. I do not know as to that.

Q. How often, since you have been supervisor of those wards ten, eleven and twelve, have you seen Dr. Gray on those wards?

A. I do not know.

Q. Can you make any estimate generally as to the frequency of his visits?

A. No, sir; I cannot.

Q. Has he been on them at all to your knowledge?

A. Yes, sir.

Q. Can you recollect any occasion when he has been there?

A. The first day he went through with you he was there.

Q. The day he went through with the committee?

A. Yes, sir.

Q. Can you recall any other occasion?

A. He has been there to see patients; and to see about the work there, when they were repairing the wards.

Q. How many times will you say that you have seen him there?

A. I cannot state.

Q. How often has he been there, as often as once a month?

A. I cannot say.

Q. Are you prepared to say, then, that he comes there very infrequently?

A. No, sir.

Q. You are not prepared to state that?

A. No, sir.

Q. State whether you had any conversation with any one connected with the institution concerning your expected examination before this committee?

A. No, sir.

Q. Has no one said any thing to you of it?

A. No, sir.

Q. Are you ready and willing to answer all questions fairly and fully that are put to you?

A. Yes, sir.

Q. What physician was in the fourth ward when you were there?

A. Dr. Russell.

Q. Where is he now?

A. In Europe, now.

Q. How frequently did he attend on that ward?

A. He came there twice a day.

Q. About what hours in the day?

A. About nine in the morning and five in the afternoon.

Q. Were those his regular hours?

A. Well, he didn't come through exactly at that hour every day.

Q. But those were about his usual hours?

A. Well, about that time.

Q. When he had made his regular visits, was it unusual for him again to appear the same day?

A. Yes, sir; I have seen him come through.

Q. Frequently?

A. Yes, sir; quite frequently.

By Mr. Olin:

Q. The third time in a day?

A. Yes, sir.

Q. Who is now the physician of the wards in which you are now supervisor?

A. Dr. Pilgrim has charge and Dr. Backus under him.

Q. What visits do they make to the wards?

A. Twice a day.

Q. Do they come at other times?

A. Yes, sir.

Q. How frequently?
A. Quite frequently.
Q. What do you mean by that?
A. I mean they come there oftener than twice a day.
Q. Every day do they come twice or three times?
A. No, sir; not every day.
Q. How frequently do you have to summon the physicians at night?
A. Well, I cannot state as to that; the night watch has charge of that.
Q. Are you ever summoned at night?
A. Yes, sir.
Q. By whom?
A. The attendants; if I heard any disturbance in the ward I would get up and see what was the matter.
Q. Is your sleeping-room adjoining the ward?
A. Yes, sir; right on the ward.
Q. Then you can hear any disturbance that takes place?
A. Yes, sir.
Q. What is the practice of the doctors when coming to visit patients at night; do they always come, or do they always send medicine?
A. It depends upon the condition of the patient.
Q. What do they most commonly do, come or send medicine?
A. Sometimes they come and sometimes they send medicine.
Q. Have you ever seen patients struck in any other ward but the fourth ward?
A. No, sir.
Q. Have you ever seen a patient struck since you have been in the institution by an attendant?
A. No, sir; not by an attendant.
Q. Have you ever heard of patients being struck by attendants while you have been there?
A. I cannot recollect any now.
Q. Have you ever heard of attendants being discharged for that reason, since you have been in the institution?
A. I suppose there has been, but I don't recollect.
Q. You don't recollect any instance?
A. No, sir; I don't know.
Q. Do you know any of the managers of the institution by sight?
A. Some.
Q. Please state whom you know by sight?
A. Mr. Campbell, Mr. Winston and Mr. Swan.
Q. Do you know Mr. Rogers by sight?
A. No, sir.
Q. Do you know Mr. Barnard by sight?
A. I do now.
Q. Why do you know him now?
A. I saw him to-day.

Q. Was that the first time?
A. Yes, sir; that is the first time I can recollect.
Q. Do you know Mr. Pomeory by sight?
A. Yes, sir.
Q. Do you know Mr. Lowery by sight?
A. No, sir.
Q. Do you know General McQuaid by sight?
A. Yes, sir.
Q. How often have you seen General McQuaid on the wards since you have been in the institution?
A. I do not know.
Q. Have you any idea?
A. No, sir, I haven't.
Q. Have you seen him more than once?
A. I have seen him together with the rest of the managers.
Q. Have you ever seen him there without any other manager?
A. I cannot recollect.
Q. Have you seen any of the managers alone, except at the time that the managers have been going through?
A. Yes, sir; I think I have.
Q. Can you name any?
A. Only Mr. Swan, I have seen him there.
Q. Where have you seen him, in the office or in the wards?
A. In the office.
Q. Have you ever seen him in the wards?
A. I have seen him go through with the rest of the managers.
Q. I ask you if you have never seen him coming through alone, or with the doctors.
A. I cannot recollect any times.
Q. Can you recollect a case of seeing a manager come through except where the board have gone through altogether?
A. I think I saw Mr. Campbell.
Q. How often have you seen Mr. Campbell go through?
A. Once.
Q. Any oftener?
A. I cannot recollect any.
Q. Which part of the building was that once?
A. The men's side.
Q. Which ward?
A. He was on the tenth ward when I saw him.
Q. Do you recollect the occasion?
A. It was on Sunday afternoon and there had been a patient—had a fainting spell in the chapel and was fetched on to the ward, and he came down to see him, he was attending chapel at the time.
Q. How long ago was that?
A. It was a while after I was promoted to be supervisor.
Q. How did you come to be employed at the Asylum?
A. I went there and asked if they had a vacancy; I sent my name to Mr. Dryer, about a year before this.

Q. Had you any recommendations?
A. Yes, sir.
Q. From whom?
A. Dr. Crane of Holland Patent.
Q. Any other?
A. No, sir.
Q. Was that the only letter you took?
A. Yes, sir; I could have had others if I wished.
Q. What did Mr. Dryer say to you, when you visited the Asylum?
A. He said he had no vacancies then but would give me the first chance.
Q. When you next went to the Asylum, what did Mr. Dryer say?
A. He told me to come to work.
Q. Did he ask you any questions?
A. I don't exactly remember now.
Q. Don't you remember whether he asked you what your qualifications were?
A. No, sir; I don't think he did.
Q. Don't you remember whether he asked you what you had previously worked at?
A. No, sir.
Q. Do you think he did not ask you any such questions?
A. No, sir; I don't.
Q. What were you employed at before going to the Asylum?
A. Farming, farmed it for a few years, then I was at work for Dr. Crane, a little over a year.
Q. In what capacity did you serve Dr. Crane?
A. Seeing to his farm and taking care of his horses and flower garden.
Q. The general work of his place?
A. Yes, sir.
Q. Where did you work farming?
A. Holland Patent.
Q. What wages do you get at the institution?
A. Thirty-five dollars per month.
Q. How long have you received such wages?
A. Since I was made supervisor.
Q. What did you previously receive?
A. Twenty-six dollars; I started in on twenty dollars and they raised every six months until you were there a year.
Q. Do you know whether any complaints have ever been made against you since you have been at the institution?
A. No, sir; I cannot recollect any now.
Q. Have you had occasion to make any complaints yourself?
A. Yes, sir.
Q. To whom?
A. Some of the attendants.
Q. Can you name any of them?
A. Yes, sir; I have; of Mr. J. A. Hensel.

Q. Any others?
A. Mr. Geo. Morris.
Q. What was he?
A. He was an attendant.
Q. Any others?
A. I do not recollect now.
Q. Of what did you complain of him?
A. That he was slack in his work and duties.
Q. What was done with Hensel upon such complaint?
A. He was removed on to another ward.
Q. Of what did you complain against Morris?
A. Slack in his work; did not attend to his duties.
Q. What was done with him?
A. I think he was discharged; I cannot say for certain; he went away from the building three days after I complained of him; I cannot say whether he was discharged or not?
Q. Is Hensel still in the institution now?
A. Yes, sir.
Q. Were not three of these attendants complained of for striking or maltreating patients?
A. No, sir.
Q. You have stated that you have never seen any patient suffering from bruises or other injuries since you have been at the Asylum?
A. I cannot recollect any now.
Q. Have there not been patients bruised, or kicked, or injured by accident, or otherwise, since you have been supervisor?
A. There might, but I cannot recollect now; I might from the book there that you have.
Q. The injury books now being before you, I ask you if you can identify your own writing in the injury book [handing the book to the witness] after inspecting it?
A. Yes, sir (handing it back).
Q. Had you dates at the commencement?
A. January 16 when the entry of F. Camp came.
Q. Does it continue in your own writing through the book?
A. Yes, sir.

By Mr. HASKELL:

Q. Did you have charge of the fourth ward while you were there?
A. No, sir.
Q. What position were you in?
A. I was as an attendant.
Q. A general attendant?
A. Yes, sir.
Q. During the time you were in the fourth ward, who had charge of it, one man all the while?
A. Yes, sir; Daniel Torpey.

Q. While you were in the fourth ward was a patient by the name of Giles Penny on your ward?

A. No, sir; he was in the building at the time.

Q. At any time while he was in the building did you have charge of him at all?

A. No, sir.

Q. How came you to be removed from the fourth ward to the first ward?

A. I don't know as I can answer that; the doctors removed me there.

Q. Without provocation?

A. Yes, sir.

Q. Something that you asked for?

A. No, sir, I did not ask for it.

Q. But it was a promotion?

A. Yes, sir.

Q. And increased wages—were they increased when you went on to the first ward?

A. No, sir; not at the time I went there.

Q. What wages were you receiving at the time you were transferred?

A. Twenty-four dollars.

Q. And soon after you were transferred were they raised?

A. I don't know as I can say exactly the time.

Q. But very soon?

A. Yes, sir.

Q. And then they terminated at twenty-six dollars, until you were made supervisor of the third department?

A. Yes, sir.

Q. Since that time you received thirty-five dollars?

A. Yes, sir.

Q. Do you know how you came to be made supervisor of the third department?

A. No, sir, but I suppose it was by the doctor's advice.

Q. It was a promotion?

A. Yes, sir.

Q. As you understand, for good conduct?

A. Yes, sir.

Q. Was it before or after you were made supervisor that you complained to the men you have spoken of?

A. After I was made supervisor.

Q. The first ward is a ward where more visitors come than any other in the institution, is it not?

A. Yes, sir.

Q. It is visited more frequently?

A. Yes, sir.

Q. You may state, if you recollect, what class of patients are on the first ward?

A. Convalescents.
Q. Patients nearly cured?
A. Yes, sir.
Q. More ready for discharge?
A. Yes, sir.
Q. State how much Dr. Gray gave to the patients generally when you were on that ward, was it considerable attention?
A. I don't know as to that.
Q. Would you see him there to see some one patient nearly every day during the time you were there?
A. No, sir.
Q. About how often, as near as you can put it, would he come to see some one patient that he was taking particular interest in?
A. I do not know as I can state.
Q. You know more about it than I do?
A. I would not want to make a rough guess.
Q. Have you any recollection whatever?
A. No, sir.
Q. Is your recollection very poor about every thing?
A. Well, not very.
Q. Who were the attending physicians on the male department of the institution while you were on the first ward?
A. There was Dr. Russell, Dr. Josselyn and Dr. Bloomer.
Q. How often would you see them on the first ward?
A. Quite frequently; they went through most generally twice a day.
Q. Would you see them in addition to their twice a day visit?
A. Yes, sir.
Q. Would they average as much as one additional visit a day?
A. Yes, sir; I think more than that on the first ward.
Q. Recollecting so distinctly about that, cannot you recollect more distinctly in regard to Dr. Gray?
A. No, sir.
Q. Was he not there at all? (not answered.)
Q. Do you mean to say that the first ward was left to his disposal entirely, and Dr. Gray gave no additional activity at all?
A. I cannot say as to that.
Q. Can you say whether he was there as often as once a month?
A. He might be and might not be, I cannot say.
Q. Do you know whether he was there during the whole time you were on the first ward?
A. He might have been, but I cannot recall now.
Q. Where were you subpœnaed on Saturday?
A. In the doctor's office.
Q. In the library?
A. Yes, sir.
Q. The medical library?
A. Yes, sir.
Q. How came you to come there?

A. The doctor whistled up through the pipe to me.
Q. And told you to come to the office?
A. Yes, sir.
Q. Did he say what for?
A. No, sir.
Q. You say that you have spoken — that you immediately went back to your work after the subpœna was served on you?
A. Yes, sir.
Q. And there was nothing more said by the authorities of the institution to you since then, except what you said to Dr. Pilgrim?
A. No, sir
Q. Now, what time did you leave the institution this morning?
A. About ten, I think.
Q. Who did you notify before you left?
A. Dr. Pilgrim.
Q. What did you say to him?
A. Says I, "I suppose I will have to go now," and says he, "All right; you will be back to-night, will you?" I says, "I will if I can; I don't know how long I will be kept there."
Q. And that is the only thing that has passed between you and any of the authorities?
A. Yes, sir.
Q. How did you go down to the depot when you came down, did you come down alone?
A. Yes, sir.
Q. Where did you meet Orendorf?
A. At the depot; I was about to come.
Q. Do you know how he got there?
A. No, sir; I cannot say.
Q. Did any one furnish you with any money to pay your expenses here?
A. No, sir.
Q. And you and Orendorf came down together on the train — from the depot?
A. Yes, sir.
Q. Did you see any of the managers of the institution before you left Utica?
A. No, sir; I met Mr. Barnard on the train between here and Utica.
Q. How did you know it was Barnard?
A. Mr. Orendorf came into the car and said, "Mr. Barnard, one of the managers, is in the other car; come in and I will introduce you."
Q. Had he been talking with Mr. Barnard before you saw him?
A. I do not know.
Q. You were introduced to Mr. Barnard?
A. Yes, sir.
Q. And all three of you came down here together?
A. Yes, sir.

Q. Did you and Mr. Orendorf have any conversation in regard to what you were coming down here for?

A. Yes, sir, I think we did.

Q. Did you talk together about what questions would be asked you?

A. No, sir.

Q. Was it talked over before Mr. Barnard what you were coming down here for?

A. No, sir.

Q. There was nothing said between you two and Mr. Barnard, or before Mr. Barnard, what you were coming down for?

A. No, sir; I just said: How do you do, Mr. Barnard, and happy to meet you, and that is all I said to him until we got here to Albany.

JOHN B. ORENDORF,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q How old are you?

A. Forty-six.

Q. What is your residence apart from the Asylum?

A. I have none.

Q. What is your position in the Asylum?

A. General attendant on No. 9, that is the suicidal and hospital ward.

Q. How long have you been connected with the institution?

A. I have been off and on since April, 1863, and went there April, 1863, and severed my connection on 7th June, 1868, and returned on 2d of May, 1877.

Q. What position have you held there?

A. In 1863, when I went there, and had charge of the dining-room on April 3, until I went away.

Q. What was your salary when you entered?

A. Sixteen dollars a month.

Q. What is your salary at present?

A. Twenty-six dollars since I had charge of the ward.

Q. What wards have you served from time to time?

A No. 3, No. 1 and No. 9.

Q. What is the character of patients on No. 3?

A. At the time I was there in 1863 they were considered convalescent — quiet.

Q. What is the character of the patients on number one?

A. That is the hall on which they are considered almost fit to go away.

Q. How about number nine?

A. Suicidal and sick.

Q. What are your duties at present?

A. Having charge of the ward, which is being over two other attendants and sometimes three; we have ten or twelve — these men in bed are filthy men — then I have three men under me.

Q. How many patients are in your care at the present time?

A. Thirty-one.

Q. With about how many attendants?

A. At the present time I have three.

Q. How frequently does Dr. Gray visit your ward?

A. Quite frequently.

Q. What do you mean by quite frequently?

A. Because it was the hospital ward — sometimes he was there once or twice a week.

Q. How frequently has he visited the wards that you have been connected with, prior to this?

A. When I was on number ten he used to come there every day; that was before we had the assistant; he used to come through with his book, the same as the under physician; and when I was on ward one he came.

Q. During what years was that?

A. From 1863 to 1868, and when I was on the first ward it was in 1867; I was there one month.

Q. Does he go through the institution now as frequently as formerly?

A. I cannot say, with the exception of my own ward.

Q. What physician had charge over your ward?

A. Dr. Pilgrim.

Q. How often did he visit?

A. Thursday.

Q. Any other times?

A. Oh, yes, sir; he comes, being on hospital, he is called, sometimes he is there probably half a dozen times, and then again a dozen; but he comes regularly Thursday.

Q. Are patients brought to the hospital for injuries as well as for diseases?

A. I never had but one case that was brought for injuries, and that was recently, since the committee went into the Asylum.

Q. What case was that?

A. S. H.

Q. What was the nature of his injuries?

A. Dislocation of his hip.

Q. Do you know how the injury occurred?

A. Only from what Dr. Pilgrim told me that a patient by the name of C. L. knocked him down on ward eight.

Q. When did that occur?

A. I really could not say, he was transferred to my ward, about two weeks ago.

Q. The injury occurred a day or two before that; is it a serious injury?

A. I think not; he is improving.

Q. During your connection with the institution do you know of patients who have been injured?

A. I don't, with the exception of this old gentleman.

Q. This is the first case of injury you have heard of?

A. And Mr. Hughes.

Q. And you have never heard of any other cases of injury in the institution?

A. Well, I heard of something a year ago, and what I read in the papers?

Q. But you heard of nothing in the institution?

A. No, sir.

Q. Of what injuries did you hear a year ago?

A. I think it was of Mr. G. the papers spoke of.

Q. And you never heard of that case until it was spoken in the papers?

A. No, sir; I heard of it in the papers, during the investigation.

Q. You did hear that of some patients having black eyes, didn't you?

A. I did not because we never have any such cases happen on our ward, it is a quite ward — hospital ward.

Q. Have you ever been in the fourth ward?

A. I have been frequently, but not of late.

Q. How long since you have been?

A. It was in the fall, and I was in the ward, I went in to see the sitting-room.

Q. Have you ever seen men there with bruised faces?

A. No, sir.

Q. Ever heard attendants speak of patients having such injuries?

A. No, sir.

Q. Did you ever hear of attendants striking the patients in the institution?

A. Yes, sir; the case of Mr. G. was the only case.

Q What became of the attendant in the case?

A. I think it was in Mr. Weir testimony; I think he testified that it was John Sage.

Q. What became of John Sage?

A. He was discharged from the Asylum two months ago.

Q. How long after Mr. G. received his injuries?

A. That was previous to the last investigation, previous to last winter, a year ago, it was testified in the investigation a year ago; Mr. Weir testified of it.

Q. It was there testified to, that Sage had struck G.?

A. I think from reading the testimony that Mr. Weir testified, that the patient was transferred from his ward to Weir's ward, and he found him with black and blue marks on him.

Q. Was there any testimony to the effect that Sage had struck G. that you recollect?

A. I think the testimony was, that Mr. Weir asked Mr. G. and G. said Sage struck him.

Q. And you say Sage was not discharged until two months ago?

A. It is all of two months ago, that he was discharged.

Q. That is about a year after the investigation?

A. Yes, sir.

Q. Was he discharged before the accident to Mr. Hughes, or afterward?

A. It was before that.

Q. Have you any recollection of seeing any patient about the institution, or about the ward, or going out for walks with black eyes or faces bruised?

A No, sir.

Q. How often did you visit the fourth ward during the seventeen years of your employment there?

A. I cannot say; our rules are very strict; we are not allowed to visit from ward to ward, and if we did, of course we should stand a chance of being discharged; we have strict discipline there.

Q. Have you opportunity from to time to form acquaintance with attendants on their wards?

A. No, sir.

Q. Was that as a matter of fact?

A. There is little communication between attendants from their wards; there is no way only when we meet them down street.

Q. Only when you meet them in the town?

A. No, sir.

Q. As a matter of fact, do attendants stay some time without being acquainted with each other?

A. Yes, sir.

Q. Have you ever hear attendants speak of injuries inflicted upon patients by attendants?

A. No, sir.

Q. Have you ever heard them speak of injuries inflicted by patients by each other?

A. No, sir.

Q. Is it ever a matter of conversation between the attendants as to the condition or appearance of patients?

A. Not in the ward I have charge of.

Q. Don't you compare notes, from time to time, touching the condition of patients in your charge?

A. I would if I found them in any suspicious — found any thing about them — any marks or any thing that would cause suspicion, and I should —

Q. Suspicion of whom?

A. Why, if I had a patient sent to my ward and I found black marks on him, I should report it to the supervisor immediately.

Q. Did you not ever speak with the attendants on your ward,

touching the condition of patients from time to time — their general condition?

A. Our own patients?

Q. Yes.

A. Yes, sir; we do our own patients.

Q. So that the attendants in any one ward are familiar with the condition of patients, both from their own knowledge and by comparison of views with other attendants on the same ward?

A. Yes, sir.

Q. Do you say again that you don't know of any patients, during the whole time you have been in the institution, that you have not seen with black eyes?

A. I never had but one case since I have had charge of the ward, of black eyes; that was a patient that came from ward four, whose name was C.; that was the only case.

Q. Did he have any other bruise or injury?

A. No, sir.

Q. What inquiry did you make about that?

A. I reported it to the supervisor.

Q. What was done?

A. He investigated it and told me it was inflicted by a patient on the fourth ward; he told me his name; that was supervisor Jones that investigated it.

Q. Do you ever see patients out in the exercise yard?

A. I do not, only as I see them from the windows in the summer time; I do not go out with them, because my duties are such that I stay on the wards with the sick.

Q. Do you know any of the board of managers by sight?

A. I know Senator Campbell, General McQuaid and Mr. Swan; I did not know Mr. Barnard until I met him out on the train; I was told that he was going down; that is the only three.

Q. Do you know Mr. Swan?

A. By sight.

Q. Do you know Mr. Pomeroy by sight?

A. No, sir.

Q. Or Mr. Rogers by sight?

A. No, sir.

Q. Mr. Winston?

A. No, sir.

Q. How often do you see the board of managers on the wards?

A. The second Tuesday in December is their annual meeting; and I have seen them at other times; but they did not come as a body, but one or two would come on the ward together.

Q. How often have you seen Mr. Campbell there on the ward?

A. I do not know as I ever saw Mr. Campbell on the wards except at the annual meeting; I have seen him at the Center, at the executive department of the institution.

Q. Have you seen John McQuaid on the wards?

A. Yes, sir.

Q. How often?

A. I should think, from memory, two or three times a year.

Q. How about the authorities; have you seen any of the authorities except at the annual meeting?

A. I have seen Mr. Swan once or twice.

Q. How often did you see one of the managers on the wards?

A. It was not an unusual thing to see them.

Q. How often do you see them there?

A. Those that I have seen, of Mr. McQuade two or three times in the course of a year coming round with the visitations, and Mr. Swan; I cannot speak as to others except at the annual meeting of the managers.

Q. Did you see the patient Hughes while he was at the Asylum?

A. He was sent into my charge as soon as ever the case was taken.

Q. Where was that?

A. In the suicidal ward.

Q. What was his condition when he was received?

A. I should judge it was a case of melancholia.

Q. Was he under the influence of chloral at that time, in your judgment?

A. No, sir.

Q. Did any conversation pass between you and him when he was put there?

A. When he came in he shook hands with me and said, "Well, Orendorf, I am crazy again."

Q. What did you say?

A. I said, "I am sorry to see you back, Mr. Hughes;" I gave him his dinner.

Q. In the ward or in the dining-room?

A. In the dining-room.

Q. At what hour was this?

A. Might have been twenty minutes after one when we were through dinner.

Q. Please state, as near as you can recollect, how he behaved during the afternoon?

A. After I bathed him — I did that as soon as he had dinner, that is what we always do — I found him free from any marks, in very good condition, weighing about 170 pounds, I should judge; he talked with me quite a while in the afternoon, but still he seemed to be depressed, worrying about his farm and the losses he had been having, he said, beginning with loss of sleep, and these losses had upset his mind; he was quiet, but did not want to sit down but wanted to be walking; he was in that condition from the time he came in at one o'clock until when I went out at six o'clock for my evening; he had a good supper; I was out until eleven o'clock on leave of absence; when I returned I found him in the ten-bedded dormitory in his night-clothes; Mr. Mulheron, the night watchman, said he could not prevail on him to lie down; I came in with my overcoat

on and put him to bed and covered him up, and said, "Now lay quiet, Mr. Hughes, and get a little rest," but he kept jabbering in Welsh; I started for my room and Mr. Mulheron says, "He is out of bed again;" I went to bed and, in the morning at six o'clock, Mr. Mulheron says, "We were obliged to put Mr. Hughes into a covered bed."

Q. On the same ward?

A. Yes, sir; I went down to the crib-room and he was jabbering in Welsh, and Mr. John M. Jones, and myself went in and opened the crib; I opened the crib; Mr. Jones could talk Welsh and they conversed in Welsh; Mr. Hughes came out and dressed himself without assistance; but he seemed to be more disturbed than he was when he came in.

Q. Had he had any quietive medicine during the night?

A. I didn't hear that he had.

Q. Did you administer any during the afternoon?

A. No, sir.

Q. What instructions did the doctor give you concerning him, upon his entry to your ward?

A. When the supervisor brought him on to the ward, he says, "give Mr. Hughes his dinner and bathe him, and I will be over if he needs any medicine; I will go and see the doctor;" but he did not require any medicine in the afternoon.

Q. You say he didn't require any medicine during the afternoon?

A. No, sir.

Q. Did you send for the supervisor then?

A. He came over in the course of twenty minutes.

Q. What did the supervisor then say?

A. He says, "I don't think Mr. Hughes is as bad as he was when he came here before, do you"; ? and I says, "I don't; I don't think he is as disturbed as he was, when he came before;" the supervisor assisted me in bathing him.

Q. Did the doctor come there that afternoon?

A. Yes, sir.

Q. Did he see Mr. Hughes?

A. Yes, sir.

Q. Did he prescribe for him?

A. I cannot say; I was with the doctor; it was Dr. Backus.

Q. Did you receive any instructions from the doctor concerning Hughes' treatment?

A. No, sir.

Q. Would the doctor have given his instructions to you or to the supervisor?

A. The supervisor.

Q. Do you know whether he gave any instructions to the supervisor that afternoon?

A. I do not.

Q. Did the supervisor give you any instructions concerning him after the doctor's visit?

A. No, sir, he was quiet; he didn't require any.

Q. You have brought his condition down to the morning when he dressed himself — what was then done with him?

A. Breakfast bell rang, and I said, come Mr. Hughes, come down to breakfast; he stood in this way (indicating, holding his hands up and looking up) and seemed to be praying in Welsh; I said, "come Mr. Hughes, come down to breakfast," he came quietly, but ate very little breakfast; after breakfast, he walked about half way down the north corridor and stood in this attitude (indicating) with his hands raised over his head, hands open, extended, with his eyes raised and his head back, praying in Welsh; after he had stood there for about ten or fifteen minutes, I went and got a chair and put him into the chair, and I had hardly taken my hands off from him before he was up again, and I tried two or three times to have him sit down; I thought he would get tired out standing in such a position; finally Mr. Jones and I made a basket of our hands and carried him down to the sitting room, and sat him down into a seat, and instead of sitting down as we would put him, his back seemed to be rigid and he kept slipping down this way (indicating) with his hands in this way (indicating) still looking up all the time; we tried two or three times to make him sit up in a seat so that he would rest, but he would not, and about half-past nine o'clock I received an order from Dr. Backus to go to the theater in the building (I have charge of the theater and stage and properties, and have had for a number of years) and select properties for a play that our Asylum dramatic corps was going to give at Whitestown, and I think I was off the ward about not to exceed twenty-five minutes, and when I came back, supervisor Jones was on the ward, and he says, "Mr. Hughes has become violent, and now you have come, I want you to stay down beside him, and help to hold him in the seat, until I go and report him," so I sat down beside him and put my hand on his shoulder and I sat on the left side of him, and he tried to bite me and spit in my face, and tried to kick me, and the froth was running out of his mouth. The supervisor was gone probably eight or ten minutes, he came back and says, "we'll take Mr. Hughes to number four." Mr. Jones, the supervisor, and Mr. Morris Mahoney took Mr. Hughes down to number four; and that was all I knew of Mr Hughes at that time.

Q. Did you go with them to number four?

A. I did not, that would have left the hall alone.

Q. Where did you next see Mr. Hughes?

A. That same evening, going through number eight with the supervisor to number six; I says, "where is Mr. Hughes, what room is he in," and they told me, and I stood in the door and looked in, I didn't go into the room.

Q. Did you see Mr. Hughes there?

A. I did from the door.

Q. Was he lying down?

A. He was lying on his back, breathing heavily, his eyes closed?

Q. Could you see any portion of his body?

A. No, sir; only his face.

Q. What was the appearance of his face?

A. He looked as though he was suffering, and from the manner of his breathing I thought he was pretty sick.

Q. Did you then know of his injuries?

A. Mr. Linn, who had charge of number eight, told me; he says as I went through the ward, "Mr. Hughes was put on this ward now;" I says, what is the matter with Mr. Hughes? He says, "didn't you hear about his getting injured on ward four;" I said I didn't.

Q. Did he state to you how the injury occurred?

A. No, sir.

Q. Did you ask him?

A. I didn't at that time.

Q. Did he state what the injuries were?

A. I asked the supervisor when I got over to his ward number six, John Wilson Jones had charge of the second department, and that includes number six, seven, eight and nine.

Q. What did the supervisor tell you?

A. He told me that Mr. Hughes' jaw was dislocated or broken, and that something was the matter in the neighborhood of his ribs as far as he could judge.

Q. Any thing else?

A. That was all; then I asked him who done it, and he says, "some of the attendants on ward four;" he was transferred to ward four about ten o'clock on that morning, and I don't know what time he was transferred to number eight.

Q. When did you next see Mr. Hughes?

A. I think it was early in the next week one evening; I was coming through number eight and his son invited me into the room.

Q. And what was his condition at the time?

A. About as he was when I first saw him; sleeping.

Q. Was he conscious?

A. I cannot say, he was sleeping.

Q. How long did you stay in the room at that time?

A. Not to exceed five minutes.

Q. What passed between you and his son at that time?

A. I says, "how does your father seem to-night?" He says, "he is resting." It was in whisper, of course, we did not talk loud; that is about all that was said.

Q. When did you next see Mr. Hughes?

A. I don't think I saw him again.

Q. Did you see him after he had died?

A. No, sir.

Q. Were you present at the inquest?

A. I testified — gave my testimony before the coroner and jury.

By Mr. HASKELL:

Q. In the morning how was he?

A. He would not stay in his chair and was restless.

Q. Why did not you report his condition to the doctor as soon as he became in the way you have stated?

A. I did; I told the supervisor.

Q. Was it the supervisor who was with you when you made a basket of your hands and carried him?

A. No, sir; John M. Jones that was.

Q. When was it you first informed the supervisor of his condition?

A. I should think it was before nine o'clock in the morning; Mr. Jones was on the ward and said, "Mr. Hughes won't sit down and we cannot make him sit down."

Q. Did the supervisor remain with you then until you went away to the property-room of the theater?

A. No, sir; the supervisor came over with — I don't know what, but he came over for he is on the ward, and came many times in the course of the day to see to the sick men.

Q. Did the supervisor remain with you then until you went away to the property-room of the theater?

A. No, sir.

Q. Did he go over the ward?

A. He went back to his department.

Q. When did you next see the supervisor?

A. When I came back from the theater.

Q. Didn't Mr. Hughes apparently grow worse from the time you spoke to the supervisor until you went to the theater?

A. No, sir; just about the same condition.

Q. And the only report you have made was that you have stated?

A. Yes, sir; all.

Q. For how long a time have you received twenty-six dollars?

A. Since the 14th November, 1870; since I took charge of the ward.

Q. And you have remained in charge of that ward ever since?

A. Yes, sir.

Q. Explain to us the system of promotions in the institution as you understand them?

A. I can only state in my own case; I had charge of the dining-room on this same ward from the 2d of May to the 14th of November, 1870.

Q. Have you always been in this same ward?

A. Since the 2d of May, 1870; since I returned.

Q. Do you know why Smith, the witness preceding you, coming after you did, should be promoted to be supervisor of a department before you were?

A. I do not; it was rather humiliating to me, after being there so many years.

Q. Then you don't understand the system by which promotions were made in the institution?

A. No, sir; I don't.

Q. Since you were subpœnaed on Saturday morning last, with what authorities of the institution have you conversed in regard to your coming here as a witness?

A. Dr. Pilgrim is the only one.

Q. When was that?

A. About five or ten minutes after I was subpœnaed I went down to Dr. Pilgrim to ask him if I was to be at my own expense, and he told me, "no; you will get mileage;" that is all the conversation.

Q. And then you went back to your duties?

A. Yes, sir.

Q. Were you aware that you were to be examined by us, as a witness, at the suggestion of Dr. Gray and Dr. Brush?

A. No, sir; I was thinking it was because I was a witness on the coroner's inquest; that was my idea.

Q. Who made the arrangement to have your place filled while you were away to-day?

A. I don't know as it is filled.

Q. What time did you leave the institution?

A. Just one hour previous to train time.

Q. How did you go to the depot?

A. Walked; I left at half-past ten.

Q. And where did you meet Smith?

A. At the depot.

Q. Have you had any conversation with Smith since you were subpœnaed, and before you left the institution in regard to coming down here?

A. All the conversation with Smith was when I started back to my ward with my subpœna; he stayed in the corridor waiting for me to come; he says, do you suppose we have got to pay our own expenses? I said, I didn't know. He says, well either you or I ought to see about it; and then I went to see Dr. Pilgrim.

Q. Did you see Smith after that talk with him on any subject, until you met him at the depot?

A. No, sir.

Q. I suppose you had a conversation about this matter on the way down?

A. We had not.

Q. And have not since you got there?

A. No, sir; we have not been together since we — we walked up from the depot and we took a walk round the block and finished our cigars; and went up through the building, the Court of Appeals room, and different places.

Q. And during the occasion of that time you say you did not converse upon your examination at all?

A. No, sir.

Q. Or what it would probably be?

A. No, sir; no such conversation

Q. Or as to what questions would probably be asked you?

A. No, sir; I visited most of the time, coming down, with a Mr. Martin, a friend of mine.

By Mr. Rice:

Q. How did you get acquainted with Smith, the last witness?

A. I got acquainted with Mr. Smith at a Pythian party.

Q. Is there an attendant in the institution, who has been there, that you are not acquainted with?

A. Yes, sir; there is quite a number I am not acquainted with — I have had introductions to every one, I guess, that is there.

Q. Do you know all, on both sides, male and female?

A. Well, on the female side there is a barrier; I know the ladies that have taken part in theatricals and the supervisors, Mrs. Sayles and Mrs. Thomas.

Q. Are you a married man?

A. No, sir; I am not.

Q. Whether or not your continuance in the Asylum has affected your health in any way — is your health better or worse since you went in there?

A. It is better.

Q. What are your hours?

A. From six in the morning to eight in the evening.

Q. Do you find those hours tedious?

A. Of course; I have charge of the sick.

Q. What do you say as to whether you are able to perform the duties of your position fourteen hours?

A. Yes, sir.

Q. You think the hours are not too long?

A. No, sir; I do not think so.

By Mr. Olin:

Q. How did you know that Mr. Barnard was on the train?

A. I think — Dr. Pilgrim told me yesterday on the ward that he believed that Mr. George Barnard, of Rome, was subpœnaed to go down to-day.

Q. How came he to tell you that?

A. I asked him if there was any one besides Mrs. Smith and myself who were subpœnaed?

Q. What did he tell you?

A. He said he believed that Mr. George Barnard, one of the managers, was subpœnaed.

Q. Did you testify in the inquest in the Hughes case?

A. Yes, sir.

Q. Did you testify before the committee last year?

A. No, sir.

Q. Have you ever testified in any of the investigations that have been held here?

A. No, sir; I never was sworn until the inquest on Mr. Hughes in my life; I never was a witness before.

Adjourned.

ROOM B, NEW CAPITOL,
ALBANY, N. Y., *March* 4, 1884.

The committee met at 3:30 P. M.

Mr. JOSEPH SWAN, Jr., one of the managers of the Asylum, said: I have a matter I desire to bring to the attention of the committee. The board of managers had a meeting yesterday, and I explained to them, as I did to some members of the committee, that it would be impossible for me, on account of my personal engagements, and in view of the amount of time required in this investigation, that it would be impossible for me to attend to it in the interest of the Asylum and the board of managers.

In view of the fact that the committee decided we could be present at the hearings, the board, at their meeting, passed the following resolution, which I will read:

"At a special meeting of the board of managers of the New York State Lunatic Asylum, held March 3, 1884, at which were present Messrs. Rogers, Swan, Lowery, Winston and Pomeroy:

The investigating committee of the Assembly having decided that while witnesses called and examined by the committee are being examined, the board of managers shall have a representative before the committee.

Resolved, That Hon. Alexander T. Goodwin be appointed to represent the board of managers before said committee, and during the investigation.

THEO. POMEROY, *Secretary.*"

I also reported to the board of managers the mode of examination that I understood was taken by the committee, and it seems to me well that some record should be made of it also, if no record has been made. I submitted to writing my understanding of the proceeding in the committee-room at Utica, when the mode of examination was decided upon. I put it in the form of a report which I submitted to the board of managers, and it is as follows:

February 28, 1884.

Mr. Swan appeared on behalf of the board of managers of the Asylum, accompanied by Dr. Brush, the first assistant physician. Some of the committee objected to the presence of any officer of the Asylum, in company with Mr. Swan, during the examination of witnesses by the committee. Mr. Swan urged that some officer of the Asylum should be present with him, in order that he might intelligently cross-examine the witnesses produced and examined by the committee.

The committee went into executive session, and afterward announced its determination as follows: That while witnesses, not officers, attendants or employees, called and examined by the committee, are being examined, the board of managers shall have a

representative before the committee, which representative shall be the same person during the continuance of the examination; that such representative shall have the right to suggest questions to the committee with which to interrogate such witnesses, but not the right to cross-examine, except for special reason; that no part of the evidence shall be made public until the whole evidence to be taken before the committee shall be concluded; that after the evidence of witnesses to be called by the committee shall be completed, the whole of it shall be submitted to the representative of the board of managers; that the board of managers and officers of the Asylum may then produce such witnesses and evidence before the committee as shall by them and the committee be deemed proper or necessary, in order to give the committee a full understanding of the subject under investigation, and said committee will, upon request, recall any witnesses called and examined by the committee for cross-examination.

February 29, 1884.

The committee having determined what witnesses they would call on Tuesday of the following week, Mr. Swan requested their names and the committee declined.

That is the report I made and I believe it is correct.

The CHAIRMAN — Substantially.

Mr. SWAN — Mr. Goodwin is here, and will attend your hearings on behalf of the Asylum authorities.

The CHAIRMAN — That is quite acceptable to the committee.

ALBERT CRAMPTON,

Sworn and examined, testified as follows:

By Mr. HASKELL:

Q. Where do you reside?

A. Green Island.

Q. What is your business?

A. Drawers and blind manufacturer, and lumber dealer.

Q. State whether you were acquainted with a Mr. Brown, and, if so, give the circumstances connected with him some time during the past few years?

A. He was a minister in the State street church.

Q. State street, Troy?

A. Yes, sir; he was there three years; his name was George J. Brown; he was there three years, and was not on actual duty on account of ill health — his health would not permit him to attend to his duties; but I told him he could stay with me until he had rested a little and got better, and could make it his home with me, and he did so; he was there about six months; while he was there we went down to Ocean Grove; that was in 1880; when we came to go away he wanted to stay there a little longer.

Q. What time during the season was that?

A. I think that was in August; it was in the summer time; he thought he would stay there a while, and so we left him there; and the first I knew he became raving, and he was brought back to Troy, and brought to our house, and taken from there to the Utica Asylum; I was in Canada at the time; we went out to visit him while he was there at Utica; he was taken there in August, and some time in September, I think, we went to see him; when we called on him he was apparently as rational as I am.

Q. Whereabouts in the institution did you see him when you visited it?

A. I cannot tell you the room; the attendants came with him when we saw him, and he seemed to be afraid; he looked around as if he was afraid.

Q. That is, his general demeanor was one of fear?

A. Yes, sir; it seemed to be.

Q. Did you see him in the hall with any of the other patients?

A. No, sir; he was alone with his attendant when I saw him.

Q. Do you know the attendant's name?

A. No, sir; I do not remember it now.

Q. Do you remember what floor it was on that you saw him?

A. I do not remember now.

Q. Did they bring him down to the reception-room?

A. No, sir; he was not brought down to the reception-room, but it was in another room off of that.

Q. Did you go up through any part of the Asylum, and then have him come to a room?

A. We went to another part of the Asylum, but I do not remember whether it was up stairs or not.

Q. But it was not in the reception-room?

A. No, sir; it was not in the reception-room.

Q. Describe the interview that you had with Mr. Brown?

A. I expected then that in a short time he would be out again; he appeared to be a little afraid of what he said, and he talked with me as though he was under a little fear.

Q. What did he say?

A. If he said any thing (and I do not remember just what he said) but I think he said that he was very glad he had not harmed any one of his friends when he was in that way.

Q. Before he was taken from your house was he rational or insane?

A. I was not there at the time he was taken away; I was in Canada at that time, and he was brought there to my house, and taken from there to the Asylum.

Q. How long did your interview last?

A. I should think, perhaps, half an hour, and perhaps longer—twenty minutes I think we were allowed. I think it was in the neighborhood of half an hour.

Q. Describe his general appearance?
A. What do you mean by that?
Q. His general appearance.
A. He was quite fleshy.
Q. What would you call his approximate weight?
A. I should think he would weigh perhaps 160 pounds.
Q. How high was he?
A I should think he was not over five feet four — he was less than five feet and a half, I should say about five feet four.
Q. What do you say his age was?
A. I did know what his age was, but I have forgotten it; but I should think he was about thirty years old — well, he must have been a little older than that.
Q. Somewhere between thirty and forty years old, should you think?
A. Yes, sir; about between those ages.
Q. Was your wife with you at this interview?
A. Yes, sir.
Q. Did you recollect any thing particularly about the conversation that you had with him?
A. Well, not much of it; I do not think there was any thing very important, only he seemed to be very glad that he had not injured anybody while in that way.
Q. Did he make any complaint to you in any way in regard to his treatment in the Asylum?
A. No, sir; I do not recollect that he did.
Q. The attendant was with him all the while?
A. Yes, sir.
Q, Do you remember which one of the physicians you saw when you went to the institution?
A. Dr. Russell.
Q. Did you see Dr. Gray?
A. Not at that time.
Q. When did you see or hear from Mr. Brown after this interview in September?
A. I should think it was less than six months.
Q. What did you see of him, or what did you hear from him?
A. We heard that he was dead.
Q. How did you receive that information?
A. We heard by way of his folks, that was the first that I heard of it — that is from Mr. Brown's people. That is my impression about it now.
Q. Can you name the person who informed you?
A. I do not know as I could.
Q. What did you do, if any thing, upon hearing it?
A. Well, Mr. Brown's brother came up there.
Q. To your place?
A. Yes, sir; and then I went to Utica after the remains.
Q. Do you know what day it was that you went to Utica, with reference to the day of Mr. Brown's death?

A. No, sir; I could not tell you.

Q. Who did you see when you got to the Asylum?

A. I saw Dr. Russell — Dr. Russell came into the reception-room and saw me, and I gave my name there; he was the one I think that came in, and I believe there was a man by the name of Dryer came in and talked to me.

Q. The steward?

A. I am not positive whether or not he was the steward, but I think that was his position; it was a Mr. Dryer.

Q. Some one connected with the institution?

A. Yes, sir.

Q. How long had Mr. Brown been dead, as you understood it, when you got to the institution?

A. I do not know as I remember now how many days it was.

Q. It was not a very long period?

A. No, sir, only two or three days after he was said to have died; I do not remember just how long it was.

Q. Did you see Dr. Gray at this visit?

A. Mr. Russell told me — he sat down and talked with me a few minutes and he said that Dr. Gray would like to see me.

Q. State what occurred at that time?

A. Mr. Russell made a few remarks and said that Mr. Brown had died of apoplexy, and that he had two sores on his face —abscesses — on his neck, I think, and one on his face, he said; he made a few remarks to that effect, and soon after Dr. Gray came in; do you want I should go on, and state what he said?

Q. Yes.

A. He thought the only way was to leave the remains there until Monday.

Q. What day were you there, with reference to Monday?

A. What day of the week? I was there, I think, on Friday.

Q. Did you tell Dr. Gray what you came there for?

A. Yes, sir; I told him I came for the remains; he said it would not answer to move the remains at all; and said if they were disturbed in the least, that they would not be able to see the remains at the funeral at all; he said he had died of apoplexy, and he said it would not do at all; I told him it would be all right, to bring the remains down; I told him that the undertaker had said so to me; he said he knew more about it than the undertaker, and he said the best way was — he advised me to leave the remains there, and have them sent down Monday morning; I told him I thought there was no train going Monday morning, that the remains could get there in time for the funeral; well, he said, they could go down on Sunday.

Q. Had the funeral been fixed for Monday?

A. Yes, sir.

Q. Did you see in that time Dr. Gray?

A. Yes, sir.

Q. What time on Monday was it?

A. I do not remember the hour now.

Q. Go on with your statement?

A. It was a little earlier than usual, because the remains were to be taken home, and they had to be taken on a certain train; my impression is it was ten o'clock, but I don't remember now.

Q. Go on, and state what occurred between you and Dr. Gray?

A. I told him I thought there was no train that would bring the remains down on Monday morning, and he said they could be brought down on Sunday, and left over Sunday night; I think he said they could be left in the depot, and taken right to the church; I told him that he (Brown) had not got any clothes there at Utica, and that he had some better clothes at my house, and I thought his friends would not like to have him laid out in the clothes that he had there; Dr. Gray said that he had a suit there that was plenty good enough; I told him I thought there was no train going down Sunday night.

Q. Did you ask to see the remains?

A. Yes, sir, I did ask to see the remains; I did not ask Dr. Gray to see the remains; but he sent me to the undertaker's about a mile, I should think, in that neighborhood further.

Q. Where were the remains at that time?

A. They were at an undertaker's down town in the city.

Q. Did you make a final arrangement with Dr. Gray when the remains were to be sent?

A. I said, of course, that I did not really want to take the responsibility, against his protest, of bringing the remains away under the circumstances; but I would go home, and then I would inform him by telegraph what I would do.

Q. What did Dr. Gray tell you, if any thing, in regard to Mr. Brown's death?

A. He told me that he died of the apoplexy; he said that he was in there a few minutes before he died.

Q. Did he give you any description of the body at all?

A. He said to me that the body was discolored very much on account of his dying with the apoplexy.

Q. State whether or not he mentioned any thing about any sores on the man?

A. I wont be positive whether he spoke of the two abscesses; Dr. Russell did any way, and I don't know but Dr. Gray did; but as to that I don't remember particularly; I asked to see the remains, and he said they were at the undertaker's — Dr. Gray did.

Q. Do you remember the undertaker's name?

A. No, sir, I don't; it was in the city of Utica; I went down there and I met Mr. Dryer; I met him coming out of the undertaker's room; I had met him before and had a conversation with him at the Asylum.

Q. You met him coming out of the undertaker's room, did you say?

A. Yes, sir.

Q. Did you have any conversation with him at the undertaker's room?

A. No, sir; not with him at that time.

Q. State what occurred at the undertaker's room?

A. I went in there and called for the undertaker; there was an attendant there, and he said that the remains were in the next room behind the screen; that I could see them through an open door there, but he did not want to let me see them; he wanted I should wait for the undertaker; he said he would be in in a few minutes; there was a man there who was an attendant of the undertaker.

Q. He did not want you to see the remains until the undertaker came?

A. No, sir; he did not want to take the responsibility, I suppose; but I did not want to wait until the undertaker came; I wanted to take the train and go home; an attendant came in there at that time that seemed to have something to do with the business there; but nothing to do, but I must wait until the undertaker came in.

Q. They would not allow you to see the remains until the undertaker came in?

A. No, sir.

Q. Was any reason given for that?

A. They thought it was not best to disturb the remains in some way; it seemed to me that they did not want to take the responsibility of it.

Q. And you did not see the remains at all?

A. No, sir.

Q. You and Mr. Brown's brother came home then?

A. Yes, sir.

Q. State what you did?

A. I got home and went and had a talk with the undertaker and asked him what he thought about it; and he thought it was just as well that the body should be brought here as not; he thought there would be no trouble, but what the remains could be seen at the funeral if he was brought home.

Q. What was the name of the undertaker?

A. Arnold, his name was.

Q. Did you send the undertaker after the remains?

A. Yes, sir, I did; I had my suspicions aroused there at Utica; the circumstances of the case seemed to indicate that there was something wrong, so I sent the undertaker right after the remains, and told him to keep his eyes open and see if he discovered any thing wrong, and to see what condition the remains were in, etc.

Q. When did the undertaker go, do you remember?

A. I think he went on Saturday, but I don't know but he went that same night; I am not positive now; I don't remember.

Q. You don't know whether he went on Friday night or Saturday morning?

A. No, sir, I don't know.

Q. Did you telegraph Dr. Gray?

A. Yes, sir; I telegraphed, I think, to Dr. Gray that the undertaker would be there after the remains.

Q. When did you see the body?

A. When it was brought to my house.

Q. What day?

A. Saturday, I think it was.

Q. Will you describe what, if any thing, you noticed in regard to the body?

A. I noticed that it looked as if it were pretty badly bruised up.

Q. What marks of violence did you discover?

A. There was a mark on him that looked as though he had been struck with some blunt instrument, rather a bad place over the right eye.

Q. Would you be positive about its being his right eye?

A. I think I would; I think I am positive that it was his right eye.

Q. What other marks, if any, did you discover upon his body?

A. On one side of his head, around his ear, it was unusually black, as though there had been some concussion or blow, or something that struck him on that side; it was darker than the other side, at least.

Q. Did you notice any swelling, or was there just a black and blue mark.

A. Yes, if my memory serves me right, it was swollen somewhat on this side — that is, on the right side; I have nearly forgotten which side of the head it was that was swollen, but there was a mark as though there had been a blow; then under the chin, here on the throat, there was a piece of court-plaster there, and the throat had the appearance as though it had been cut on something; it looked, apparently, as though there was a gash there.

Q. What made you think there was a gash there?

A. That is how it appeared.

Q. Was it because there was a piece of court-plaster there?

A. No, sir; it showed that there was an abrasion there; an abrasion of the skin.

Q. How far round the neck did those marks appear?

A. I should think perhaps — to guess at it I should say, perhaps, an inch and a half long right in the front of the neck, nearly in front at least.

Q. What, if any, other marks did you notice?

A. Somewheres about here (indicating right side of the nostril); there was a mark I think on one of his lips, looked as though it had been bit through, as though he might have bit it through in agony, or something of that sort, I don't know what; it looked as though it might have been done with his teeth; and on one of his fingers there was a lump out of it, a piece of flesh which was right out clear into the cords there; I didn't see the bone, but I know it was cut deep in; quite a chunk of flesh out of one of his fingers.

Q. Any other marks of violence about his body in particular?

A. I don't think now of any that I noticed in particular.

Q. I suppose the body was buried from your house?

A. It was taken from our house to State street church, and the funeral was at that church?

Q. Did you ever make any investigation, or take any means to ascertain about his injuries?

A. No, sir.

Q. Or did any one else, to your knowledge?

A. There was there at the time on the Sabbath day Mr. Van Alstyne, who was a little distantly related to him; he was over there and I told him what I knew about the circumstances, one thing and another; and I thought that if he didn't feel disposed to have any thing done about it, why I would not.

Q. You called the attention of one of the relatives of the deceased as to what you had seen?

A. Yes, sir.

Q. And that is all you did in regard to it?

A. Yes, sir, that is all I done; I mentioned it to some of the official brethren in State street church; to one or two of them, but no one seemed to take any action in it, and, therefore, I did not.

Cross-examined by Mr. GOODWIN:

Q. I would like to have the witness state why his suspicions were aroused as to there being any unfair play there?

A. In the first place I had been there before, and there was not near so much notice taken of me as there was at that time; there was all the officials there — I did not see all, but three of them, and they were all over-nice, and then he objected so strongly to having the remains moved in the first place until Monday, and then taken right direct to the church; and another thing, the remains taken down to the undertaker's down town, was another reason why.

By Mr. HASKELL:

Q. When you say he, you mean Dr. Gray?

A. Yes, sir; I had most of the talk with Dr. Gray; I talked with Dr. Russell and Dr. Dryer as well.

Q. Any other reason?

A. At the time I thought he must have known more about the trains than what he showed that he did know afterward how the trains run.

Q. Any other reason?

A. I don't know as there was any thing in particular.

Q. You have given the committee all the reasons why you thought things were suspicious at Utica before you came down?

A. Well, the conversation generally led me to believe that he was — that there was something wrong somewhere; so much so at least that I told the undertaker to take particular notice of every thing.

Q. You have given the substance of that conversation to the committee, have you?

A. There was probably a great deal more.
Q. But the conversation that led you to have these suspicions?
A. Yes, sir; it was a conversation with him, that I had with him.
Q. You have given the substance of that conversation here?
A. Yes, sir.
Q. No other conversation except that you have related?
A. Oh, yes, sir; there was other conversations.
Q. But the conversation that led to your suspicion I mean?
A. I think I have, nearly the whole; there might have been some other things at the time that I don't remember now.
Q. Who subpœnaed you here?
A. I think he said he was sergeant-at-arms.
Q. Had you written to the committee?
A. No, sir; I didn't know as the committee was meeting.
Q. Who did you last talk to about this matter before you were subpœnaed?
A. I don't know as I have mentioned it before in two years; I don't know as I have; I might have done with some acquaintance, some casual conversation, but nothing to amount to much in the last two years.
Q. You do not know how you came to be subpœnaed?
A. No, sir; I say I didn't — the sergeant-at-arms said that we was represented as prominent citizens of Green Island, and it would do well enough to call on us as witnesses; that is all I know about it.
Q. You said something about a cut on the throat — do you know whether that was a cut or an abrasion of the skin?
A. It might have been done with a strap or a sharp instrument; it was an abrasion of the skin.
Q. You don't know how deep it was?
A. No, sir.
Q. You did not remove the plaster?
A. No, sir; I didn't remove it to examine it; it was not entirely covered — the abrasion with the plaster.
Q. Did you inform Dr. Gray, or any physician at the Asylum, of your suspicions in regard to this man?
A. No, sir.
Q. You didn't name any thing of that at the time?
A. No, sir.

By Mr. Olin:

Q. You didn't see Dr. Gray after you saw the body, did you?
A. I don't know as I have ever seen him since; I don't know as I saw him when I was out there; I didn't see him to speak to him; I cannot say that I have ever seen him since then.
Q. Have you been at the Asylum since you went at that time?
A. No, sir.
Q. Was this George Brown a married or a single man?
A. A single man.
Q. He was your pastor when he was taken insane?

A. He had been, but was not at that time; he was laid off at that time on account of ill health.

Q. And he was only up there from August until — what time did he die?

A. September, I think; no, it was in September that I went out.

Q. When did he die?

A. I don't think I can tell you the date.

Mrs. LOUISA CRAMPTON:

Sworn and examined, testified as follows:

By Mr. HASKELL:

Q. You are the wife of the last witness?

A. Yes, sir.

Q. And you are a relative of Mr. Brown mentioned by your husband?

A. Yes, sir.

Q. Do you recollect the fact of his having been taken insane and being sent to the Insane Asylum?

A. Yes, sir.

Q. Were you at home when he was sent from your house?

A. Yes, sir.

Q. About what time was he sent from your house to the Insane Asylum, Utica?

A. He went there the 18th August, and we went to see him in September.

Q. What was his condition at the time he went from your house?

A. He seemed perfectly well at the time we saw him there; at the time he lived at our house he was violent most of the time.

Q. Was he rational?

A. No, sir; not all the time, he was very violent most of the time.

Q. Did you hear any thing from him, from the time he was sent to the Asylum?

A. We heard every week from Dr. Brush, and different ones; Dr. Gray's name was signed, but generally Dr. Brush; and also telegrams once a week, while he was there.

Q. What time in September did you visit him?

A. The 18th of September.

Q. You and your husband?

A. Yes, sir; both of us.

Q. What was his condition when you saw him in September?

A. He seemed very well indeed; I hadn't seen him for about four weeks; since he left our house; he was in such a condition, of course he seemed very well, during the few minutes we saw him.

Q. So that he would talk rationally?

A. Nothing that would indicate that he had ever been insane; and his conversation was general, just of topics of home and what had transpired.

Q. Was there any thing said to him in regard to how he was treated at the Asylum?

A. Not at all; not a word.

Q. Nothing was said by him in regard to his treatment there?

A. No, sir.

Q. Was there nothing peculiar about his condition that impressed you?

A. Nothing only his rapid improvement made in a few weeks?

Q. How long did your interview last?

A. We were there not over twenty minutes, and right about that time he seemed very uneasy.

Q. Did you and your husband see him alone?

A. The attendant was in the same room.

Q. Did you hear the attendant's name?

A. His name was Jones; Mr. Brown introduced him to us as Mr. Jones; I don't know his first name.

Q. Did you understand he was one of the attendants?

A. He told us he was his attendant; he introduced him as his attendant — Brown did.

Q. And there was nothing, as I understand you, that particularly impressed you in that interview, except his improvement?

A. Nothing special at all; he seemed well at the time, but very sad; we asked him if he thought it was wrong his going there, he said it was all perfectly right, that he had realized it for some time.

Q. When did you next hear any thing in particular in regard to him?

A. We heard, I think it was five or six days later, and next week we heard from him again that he was worse.

Q. From one of the members?

A. Yes, sir; we wrote to see how he was, and they wrote back that he was very much worse, that there had been a very great change.

Q. What next was there of importance that occurred, if any thing?

A. There was nothing special, except, as we heard occasionally, that he remained the same, but they didn't say that he was so, but that they expected, and thought and hoped that he would get up again; they didn't inform us of his real condition, just as it was.

Q. When did you learn of his death?

A. He died the first day of December.

Q. Eighteen hundred and eighty?

A. Yes, sir.

Q. And from whom did you learn that he was dead?

A. We learned from our physician; they telegraphed to our physician in Troy.

Q. Who telegraphed?

A. Dr. Russell; that he was dead, and our physician came about seven o'clock in the morning and told us; his name is Dr. M. Felter; his residence is 106 Fifth street, Troy.

Q. You had no direct knowledge from the Asylum of his death?

A. Not at all; and they were told to keep us posted especially.

Q. And did they keep you posted down to that time?

A. Yes, sir.

Q. Do you recollect how long it was before his death that you had heard from the Asylum directly?

A. It was over a week.

Q. Now, you didn't go to the Asylum yourself?

A. Not for the remains.

Q. Did you see the body after it was brought to your house?

A. Yes, sir.

Q. And did you make any examination?

A. Yes, sir; the undertaker brought him in; he was brought Sunday morning about three o'clock to our house; they went after him Saturday, and trains were delayed and it was in the morning at half-past two or three o'clock that the remains came.

Q. When did you examine the remains?

A. Shortly after he was brought in, and they had him laid out?

Q. At your house?

A. Yes, sir.

Q. State what, if any, marks there were about the remains that attracted your attention?

A. The first was his looks; he didn't look natural; he was black, just as black as he could be.

Q. His face?

A. Yes, sir.

Q. And then those marks — describe them?

A. Most of the things — I am not positive — was on the right side; the mark that my husband spoke of, the mark on his temple, was on the opposite side, and it was his right ear, and right side of his head, that looked as though it was bruised; there was another mark here (indicating the right side of the nostril); that was stuck over with court plaster.

Q. How long a mark?

A. I should think it was an inch long.

Q. Any other mark about the face or head?

A. The lip looked as though it was bitten through with his teeth, pieces bitten out, and this mark in his neck I should have said it was as much as four inches one way, and court plaster which was on it one piece this way, and another this way (indicating), that is, the pieces were crossed.

Q. What was the appearance of his neck?

A. Something of an abrasion, of course, I cannot say, but I supposed it to be a cut.

Q. A cut with any kind of instrument, blunt or sharp?

A. Of course I cannot say about that, but I should think it likely it might have been something sharp, but of course I don't know.

Q. And you think the mark on the neck was four inches long?

A. About four inches across this way (indicating horizontally), and an inch the other way (vertically).

Q. Was there any thing else you noticed?

A. Nothing, except the finger of the left hand; there was a piece out in that direction (indicating laterally); that was taken out seemingly to the bone; that was the first thing I discovered about it; the middle finger of the left hand.

Q. Any thing else?

A. That is all we discovered of importance.

Q. When did the funeral take place?

A. At ten o'clock Monday morning at our house, and at eleven o'clock at the church.

Q. Who, if any person, did you call attention to about the body?

A. Nothing was said, except to the undertaker and between ourselves.

Q. You yourself did not talk to anybody else?

A. No, sir; no one outside until after the funeral.

Q. Do you know whether your husband did, or did you yourself call the attention of any relatives of the deceased to it?

A. No, sir, there was no one there; Mr. Van Alstyne is not a relative of Mr. Brown's, he was a friend only.

Q. His attention was called to it afterward?

A. He was there on Sunday, and he talked with the undertaker about it.

By the CHAIRMAN:

Q. Did the doctor see the body?

A. Dr. Felter did not see him at all; I testified so of Mr. Brown's death, that was all.

Q. Do you know any other persons who saw those wounds?

A. My brother, Mr. Baldwin and Mr. Wilson Baldwin; Mr. Emerson Baldwin, he lives on Green Island.

Q. What is his occupation?

A. Door and blind maker with Mr. Crampton, in partnership.

Q. Did any other person see them to your knowledge?

A. Yes, sir; there were two ladies from Troy, I don't know whether it would be necessary to give their names; A. Mrs. D. of Troy, who was there in the evening at our house, was one of them.

Q. What was the other name?

A. I don't know that; C. D. I think, she is a widow, I don't know her address; the other lady's name was Mrs. T., I don't know her Christian name, but she resides in Troy, she boards and she is a young lady.

By Mr. OLIN :

Q. Was Mr. Brown laid out in a dead suit of clothes from what he had at first at the Asylum ?

A. Yes, sir ; the undertaker is here who got them and can tell you about that.

Cross-examined by Mr. GOODWIN :

Q. When Mr. Brown was brought from the Asylum to your house was he crazy ?

A. Yes, sir.

Q. Who examined him then ? what doctor, if anybody ?

A. We had Dr. Felter and Dr. Steinberg also ; they prescribed for him, gave him remedies, gave him quieting medicines, I believe it was.

Q. Do you know whether they committed him to the Asylum on their own certificates ?

A. Yes, sir.

Q. You talked with your husband when he came back from Utica, and he gave you his suspicions, didn't he ?

A. Yes, sir, he did.

Q. That was before you saw the body ?

A. Yes, sir.

Q. Did anybody suggest to you that you had better send for the family physician to see the corpse ?

A. No, sir.

Q. Did you think of it yourself ?

A. Yes, sir ; we thought of it but we did not know how it would be.

Q. Why didn't you do it ?

A. We did not think of doing it ; of course, we did not know how far we might go, and we could not prove any thing of course, but it was spoken of and that was all ; there was only one day.

Q. You did not think then that what you saw was of sufficient significance to send for a physician ?

A. We thought if it had been our own we should have done so, and we have regretted it a good many times that we did not do something any way.

Q. You did not think then that what you saw was of sufficient significance to send for a physician ?

A. We did think it was sufficient to send for the physician, and we did not send for one as we should have done if he had been one of our own family ; we did not do it.

Q. Was that the reason you gave to the committee ?

A. No, sir ; I should not like to state that was the reason, but we thought of it.

Q. But did not do it ?

A. No, sir.

Q. And you gave your reason why you did not do it to the committee ?

A. Only that we thought perhaps it would be best not to, that is all.

Q. You made no examination of the body at all?

A. No, sir.

Q. And you did not know what his condition was when brought to your house, before he was taken to the Asylum, in regard to wounds or bruises?

A. No, sir, not really; of course I saw him there the two days and nights he was there.

Q. He had no bruises then on his face or throat in any way?

A. No, sir; only what has been stated about.

CHARLES W. ARNOLD,

Sworn and examined, testified as follows:

By Mr. HASKELL:

Q. What is your occupation?

A. I am an undertaker.

Q. You may state if in the fall of 1880 you were spoken to by Mr. Crampton in regard to going to Utica to get the remains of the Rev. Mr. Brown who died at the Asylum?

A. I was.

Q. Were you previously acquainted with Mr. Brown?

A. I was.

Q. Were you an attendant of his church?

A. No, sir.

Q. But you had known him?

A. Yes, sir; I knew who he was.

Q. Upon what day of the week did you go to Utica?

A. On Saturday.

Q. State what you saw there?

A. I went up to Utica and went to Mr. Daniels, the undertaker, where the remains were, and I left him still there and went up to the Asylum.

Q. Did you see the remains before you went to the Asylum?

A. It strikes me that I did — I think I did, and went into the back room where they were alone and uncovered them and looked at the face, and then went to the Asylum; Dr. Russell, I think, was in the office, and what conversation I had there I had with him, but nothing much relating to Mr. Brown; something was talked about, but just what I don't remember; I told him I was after Brown's effects, whatever they were, that was there; and after talking to me something about Mr. Meredith's people, that I was acquainted with, he sent me the clothes.

Q. Did you see Dr. Gray at the Asylum?

A. I did not.

Q. Did you have any talk with Dr. Russell in regard to Mr. Brown's death or the condition of his body?

A. I did not; I cannot state what our conversation was, but I think he told me how he died, but talked something about Mr. Brown; just what I cannot state now.

Q. Did you see Dr. Gray that day at all?

A. No, sir, I did not.

Q. Then after getting the facts of the decease you went to the undertaker's?

A. Yes, sir.

Q. And had you brought with you from Green Island any clothing to dress the body in?

A. No, sir.

Q. Now you may state what you did with the undertaker in reference to the body, and any thing you noticed about the body?

A. I went around to Mr. Daniels, and saw his assistant, I don't know what his name was, and told him I would like to strip the body and change its clothing; well, he thought it was unnecessary as his clothing was all right, and they washed him and dressed him, and I went into the room where Mr. Brown's remains lay; it was a warm room, and there was an ice chest over the trunk of his body filled with ice; but his head was exposed to the heat of the warm room.

Q. Any cover over the head?

A. There was a cloth over the face.

Q. Dry or wet?

A. I think it was dry, and there was some blood oozing from his nostrils, and some marks; as I unbuttoned his shirt I saw some marks on the chin here (indicating), and his lip looked as though a chunk had been bitten out of it, about here (indicating), and that was covered with court plaster on the lower lip; and the finger, it looked as though a piece of flesh had been bitten or cut out nearly to the bone; I spoke of these things to this young man; I said I guess that they had pretty rough treatment at the Asylum sometimes; well, he said he thought so; he didn't seem inclined to talk much about it; I stripped the body there; I didn't find any marks on the body at all, except a little scratch here (indicating), right below the knee; but there was nothing uncommon in that at all, we might any of us have such a mark as that, but the rest of the body was fair; he said he died with a fit of apoplexy; I said I thought it was singular, I never had seen a case like it; I said that after death from strangulation the blood generally settles back into the body, and the features become natural again; in this case the features were black, and had not become natural at all, and his body looked very fair and nice; I spoke of these things, and talked about them; I dressed him and put clean clothes on, and brought him home.

Q. Did you notice any marks on the side of his head?

A. No, sir, I did not.

Q. Or any thing upon his face near his nostril?

A. Yes, sir, I think there was a scratch, I don't know but what it was upon the nostril, near the nostril; he had a little light mustache; it was covered with court-plaster, on the scratch upon his face; there was this mark upon his face, and that court-plaster I think was on the under lip, I won't be positive, but it strikes me that it was.

Q. Describe the marks upon the neck?

A. It looked to me as though a strap had been drawn tight round under the jaw.

Q. How long was the mark?

A. It was pressed in as though like a cloth after a body has died, sometimes they put a handkerchief under the chin, and it left an impression as something of that kind would do.

Q. Was the skin broken?

A. It was bruised, the skin was.

Q. Was there any court-plaster round the neck at that time?

A. No, sir, no court-plaster.

Q. Did you put any on?

A. No, sir; it was not seen, this place under the chin, unless you handled the body, and attention was called to the body; it looked as though he might have been strangled, and was found cold and stiff, and the blood of course was all collected and did not settle.

Q. What do you say in regard to the treatment of the body? Have you taken care of bodies in cases where they have died of apoplexy?

A. I have, in several instances.

Q. Did this body present to you an appearance of having died of apoplexy?

A. No, sir; it did not here on the chest.

Q. What were the distinguishing marks between this body and other bodies that you have taken care of where they have died of apoplexy?

A. Generally you find black places running up here, and the chest and face would become spotted instead of being so black and discolored, I didn't find much of that — of these spots on the chest my experience has been, that after a while the blood will settle back and the features will become quite natural.

Q. Describe if you will, these appearances of his lower lip, where it had been apparently bitten?

A. It was swollen somewhat.

Q. Was there a piece bitten out?

A. I should think it looked as through his teeth had done it.

Q. Was it taken clean out of the lip?

A. Yes, sir.

Q. And was not torn at all?

A. No, sir; some of these marks were seen by Mr. and Mrs. Crampton and others; I remember speaking to them about it at the time.

Q. You have described to us all that you noticed in regard to the body, at Utica?

A. Yes, sir; I think all that I know.

Q. Did you ever see the body of a person who had been killed by strangulation?

A. No, sir; not with a rope or any thing of that kind.

Q. You may state whether the treatment of the body as you saw it at the undertaker's was such as to restore the natural condition of the features or to prevent putrefaction?

A. It would produce putrefaction — it could not produce any thing else, that treatment of the body.

Q. Why?

A. Because it was left exposed to the heat, the face was, and the blood could not settle, from the fact that they were chilling the body. The face was exposed to the heat, and the blood had begun to work and ferment and so produce just that effect; it was beginning to putrefy and in twelve hours more it would not be presentable, it would have been repulsive in my opinion.

Q. You brought the body to the house of Mr. Crampton of Green Island?

A. Yes, sir.

Q. And took charge of the funeral?

A. I did.

Q. Did you change the treatment of the body after you took charge of the body?

A. Yes, sir; I put it into a cold room and took some embalming fluids and put on the face and kept it wet.

Q. And reduced the temperature of the rest of the body?

A. No, sir; I left the temperature all the same; it was in a cold room. I did not put him into a freezer or any thing of the kind; it was not necessary; it was in December, and was very cold.

Q. Were there any change in the condition of the face after you took charge of the body, or did it simply arrest the progress of decay?

A. There was a little change for the better I think.

Q. Do you know how long Mr. Brown had been dead when you went there?

A. I did not; I think he died Friday and this was Saturday, that is my recollection.

Q. Was there any thing more that you can state in regard to the condition of the body, or any thing in regard to the matter — any thing that made you think about as to how he came by his death?

A. Nothing that I can state.

Cross-examined by Mr. Goodwin:

Q. You saw no court-plaster on the throat at all?

A. No, sir.

Q. And in your opinion, a man dying of apoplexy, his face does not discolor and remain permanently so?

A. It does when they die, but does not remain so; at least I never had a case that did.

Q. How long have you been an undertaker?

A. Ten years.

Q. Who did you tell about the condition of this body; if anybody?

A. I talked it over with Mr. Brown's friends; some of them.

Q. Who did you talk with about it?

A. Mr. Crampton and Mrs. Crampton and Mr. and Mrs. Baldwin and Dr. Felter. I could not tell who spoke to them about it; I described to them the conditions.

Q. When did you tell this to Dr. Felter?

A. I think it was on the Sabbath day.

Q. Before the funeral?

A. I think it was then, but I am not positive; I know I had a conversation with him about it, but whether before or since I cannot state.

Q. Who subpœnaed you?

A. This committee I suppose.

Q. Who have you talked with upon this subject last?

A. Before being subpœnaed I have talked with nobody until I got this subpœna; I talked with Mrs. and Mr. Crampton about it some time ago.

Q. Since when was the last conversation you had previous to being subpœnaed?

A. I cannot tell you; it has been a great while since any thing has been said about it?

Q. Was the condition of the atmosphere of the room in which you put the body — was it such as to interfere with the condition of the body?

A. With the face do you mean?

Q. Yes?

A. It would in time.

Q. Would it have any effect on the face?

A. Yes, sir; it would have a bad effect.

Q. What effect?

A. It would cause the body to go to decay and the blood would rush into the head.

By Mr. HASKELL:

Q. Would the simple fact of the body being in a room of the temperature in which this body was, with ice upon the trunk and the face left exposed, cause the black appearance that was on the face?

A. Not in so short a time.

Q. You say you think there was no court-plaster on the neck of the body?

A. That would be my memory now; I am not positive about it, I have seen so many bodies I cannot recollect about it.

Re-examined by Mr. GOODWIN:

Q. You spoke of a depression round the neck, which might have come from either a strap or from a piece of cloth being tied around it; could have come from either?

A. Oh, yes, sir; I should think it might have been either cause.
Q. Could it come from a piece of cloth used to keep the jaw up?
A. No, sir; I think not.
Q. Was it such mark as might have been caused by the deceased person hanging himself?
A. Yes, sir, that is what I thought perhaps it was.

By Mr. Haskell

Q. Did Mr. Crampton, when he sent you after the remains, give you instructions in regard to any examination of the body?
A. Yes, sir, he told me to look at the body.

HENRY HINDMAN,

Sworn and examined, testified as follows:

By Mr. Haskell:

Q. Where do you reside?
A. Albany.
Q. What is your business?
A. Lumber inspector.
Q. Are you a married man?
A. No, sir.
Q. Who do you live with?
A. My father and mother.
Q. How old are you?
A. Thirty-three.
Q. Were you ever an inmate at the Utica Insane Asylum as a patient?
A. I was.
Q. When were you there?
A. 1881.
Q. From when until when?
A. From some time in January — about the middle of January, until the middle of April.
Q. Who sent you there, or caused you to be sent, your parents?
A. I presume so.
Q. Why?
A. I presume because I was out of my head.
Q. From what cause?
A. I am incompetent to answer that properly.
Q. Don't you know?
A. I may have a general idea.
Q. Give us your best general idea?
A. I think it was dissipation.
Q. Do you recollect the fact of your going to the Asylum?
A. I do remember it very distinctly.
Q. Were you sent on the certificate of some physician?

A. I presume so, I don't remember, I had a physician attend me when I was at home.

Q. Who went with you to the Asylum?

A. There was a Dr. Stonehouse of this city.

Q. Did anybody else accompany you to the Asylum?

A. Yes, sir, a friend of the family, Charles W., who lives in the city; he is a dock master of Albany in the lumber district.

Q. Do you recollect who you saw when you went to the Asylum?

A. When I first entered there?

Q. Yes, sir?

A. I remember seeing Dr. Gray in the office.

Q. And do you recollect what ward you were first placed upon — what ward it was?

A. Fourth ward.

Q. Who had charge over that ward when you were there?

A. A man named Torpey — Dan Torpey.

Q. Do you recollect the names of any other attendants?

A. No, sir; I don't.

Q. Do you remember distinctly and clearly what occurred and who you saw when you first went to the Asylum?

A. When I first entered there?

Q. Yes, sir?

A. Yes, sir; I recollect what occurred.

Q. While you were in the fourth ward, how long did you remain there?

A. I cannot state precisely how long.

Q. Can you give the names of any other attendants on the ward?

A. No, sir, I cannot; I never learned their names.

Q. How long were you on the fourth ward?

A. I cannot say precisely, but I should think at least two weeks.

Q. While you were in the fourth ward, how were you treated by the attendants?

A. I don't understand the question exactly; I was well fed and well housed, had a good bed and plenty to eat, if that is the treatment you refer to.

Q. Was there any other treatment you received besides being well used and well fed?

A. I remember having an encounter with an attendant — the head attendant, Mr. Torpey.

Q. How long was that after you entered the institution?

A. I cannot say how long it was, probably a week after I entered there.

Q. Describe the encounter?

A. I can recollect that there was a patient there that I took a fancy to, and he became very violent.

Q. Do you remember his name?

A. No, sir; I don't; and in consequence of his being so violent they put him in the crib, as they called it — that is a bed with a cover over the top — and confined him there night and day.

Q. How long did they keep him in the crib?

A. I can only recollect that they kept him there two or three days I should say, and I thought in my mind that it was wrong to keep him there; and he kept tossing about in the bed, and trying to get out, butting at the boards, and I interceded with the keeper to let him out, and he told me to mind my own business; several times I asked this Torpey to let him out; he used to bring his meals to him and give them to him in the crib and then lock him up again; the crib was open at the top, then shut down and locked; well, one day, the second or third day, when he was bringing his dinner through the hall from the dining-room, when he was at the other end of the hall, I remember that I was walking in the hall at the time, and I passed him, and I asked him whether he was going to let this fellow out; I cannot recollect his name; he made no reply, to the best of my recollection; it is three years ago; I cannot recollect every circumstance, but anyway I hauled off and made a crack at him, and with that he dropped the dinner and jumped on to me; he was a very strong man, but he called for another attendant, and the other attendant ran from the third ward, halloed, and then both got at me; I was thrown on the floor by this other attendant and Torpey; I can recollect this distinctly; he took hold of me by the head and pounded my head on the floor, and the other fellow jumped on my breast; this Torpey, with his knees, he jumped on my breast and stomach; I was marked with it I know, because when I was made to take a bath that afternoon, I know I was marked all over from the effects of the thumping of his knees; this occurred about twelve o'clock; after a while they both of them let me up from the floor; the wind was knocked out of me, and they ordered me down to dinner; the dining-room was down below the hall, a few steps down in the basement, and I can distinctly remember that this Torpey gave me a blow in the chest with his fist and knocked me up in the corner.

Q. How seriously were you injured, if at all?

A. I was not seriously injured, I presume, I was a pretty tough subject; I was not injured very seriously, I was in good health and could stand a pounding.

Q. How was it commenced, by your striking at Mr. Torpey?

A. Yes.

Q. Did you hit him?

A. I think the blow that I made at him he dodged his head and it glanced off; I think I did strike him on the head slightly.

Q. Did you make any report to the physicians in regard to it?

A. I did not.

Q. Was that all the violent treatment that you received while you were on that ward?

A. Do you mean was that the only blow that was struck me?

Q. Yes?

A. No, sir; I can recollect receiving two distinct kicks in the stomach before that from Torpey; in the first place when I went

there, the first day that I went there, it was a custom when a patient is first received, he is taken to the bath-room for a bath: I recollect when I was taken to the bath-room I objected to undress myself before this attendant and wanted him to go out of the bath-room, and I would undress and take the bath; he told me to strip — and I had to strip right before him, and I believe — I don't know whether I made any attempt to strike him then, but the first thing I know, I got a kick in the stomach, that sent me to the other end of the bath-room, and that brought me to time then.

Q. Were you stripped?

A. Yes, sir, I took a bath then.

Q. What was the occasion of your being kicked in the stomach the other time?

A. That was the same afternoon with another attendant, I cannot recollect his name; he was a younger man than Torpey; I recollect I did not get in time for dinner, and because I didn't have my dinner, I believe, he brought me up a tin can full of rice and milk and I objected to eating that, and I got to jawing with him and he gave me a kick in the stomach, I remember falling back into a chair; that is a favorite way with the attendants up there of fetching unruly patients to time with a kick in the belly.

Q. Did you ever see any other person kicked in the stomach or badly used, aside from these two occasions when you received kicks yourself?

A. I cannot recollect of any particular occasion that I ever saw any other patient kicked that way.

Q. Why do you say it is a favorite way of bringing patients to time?

A. Well, the reason I said so was, because they seem so expert in the way of kicking.

Q. Do you think so?

A. Yes, sir; it struck me at the time and has since, that is the impression made on my mind, that it was a usual way with them.

Q. But you didn't hear of any other patient being kicked in that way?

A. I cannot recollect any other circumstance.

Q. Do you remember seeing any action of violence toward any other patients than yourself while you were on that ward?

A. I can only recollect one instance, that was a patient that slept in the opposite room from mine on the fourth ward; he was very troublesome, particularly with the keepers, and he would not undress himself at any time without a great deal of trouble; and I remember seeing this Torpey haul off and strike him behind the ear, I think it was, he struck him from behind any way.

Q. What was the effect of the blow on him?

A. It didn't knock him down, merely made him cry out — the patient — it made him cry out.

Q. Did you report to any of the physicians in regard to your being kicked?

A. I never did.

Q. Why didn't you?

A. Because I think it would only fetch more ill treatment on me; I was afraid to.

Q. Did you see any thing else besides this blow, and what you have narrated, and this patient being kept in the covered bed, that seemed to you wrong or improper in the treatment of patients, while you were on that ward?

A. No, sir; I cannot say that I did.

Q. Do you know how you came to be changed from the fourth ward to some other?

A. I recollect being taken up stairs by Torpey, up to the eighth hall.

Q. Do you know why you were changed; were you informed why you were changed, or that you were to be?

A. No, sir.

Q. How long did you remain in the eighth ward?

A. I think it was only a few days.

Q. What kind of treatment did you receive on that ward?

A. I cannot say positively it was the eighth ward, I have forgotten the number, but I believe it was the eighth ward; I was only there a few days after leaving the fourth ward.

Q. What kind of treatment did you receive on that ward?

A. I was not ill treated there; I received very good treatment there.

Q. Did you see any of the other patients ill treated in any way on that ward?

A. I did not.

Q. From there do you remember what ward you went to?

A. I think it was on the seventh ward; I went to the third hall after I went up.

Q. How long did you remain there?

A. I cannot say; it is too long ago to recollect exactly.

Q. You were changed then from one ward to another until you came to the first ward?

A. Yes, sir; I was in six halls altogether, including the first ward.

Q. And upon any other ward than the fourth ward did you receive from the attendants any ill treatment?

A. Not at all.

Q. And upon any other ward than the fourth ward did you see any patients ill treated in any manner there?

A. No, sir; I did not.

Q. But upon what other ward than the fourth ward; you say the attendants were particularly kind and attentive to you?

A. Well, now, I made a statement there when I said I didn't see any ill treatment on any other halls; I beg to recall that answer; I say that there was a patient on one of the halls that I went on immediately after leaving the fourth hall that I think they used pretty rough.

Q. Describe that?

A. I think it was on the eighth hall, I would not be positive; they used to keep him strapped on a chair like this chair here (indicating), only it had arms to, and they strapped across the chest, I think it was.

Q. What kind of a strap?

A. A leather strap, I think.

Q. How wide was it?

A. I should judge it was a couple of inches wide; I think I was only on that ward a few days, but I used to pity that poor fellow when they used to bring him out his food, and the attendants used to stand behind him and feed him; once in a while they allowed him liberty to get up from the chair and walk round, but he used to be so unruly that they used almost invariably to put him in the chair again, and I saw that they used unnecessary violence in putting him in the chair; all of them used to get hold of him and fire him into the chair and strap him down, but I don't know as they ever struck him; and then again about the feeding of the patients, there was some patients that went to the hall I was in, I forget what hall it was that the attendants used to feed, I believe they refused to feed themselves, and they used to feed them with a spoon, oat meal and rice, well, they used to stand behind a patient, this attendant did, I cannot think of his name now, he used to stand behind them, and if a patient objected he would throw one arm, his left arm, round the neck, and he would shovel that rice or oat meal down his throat, why, it was terrible, the way he would shovel that down his throat, the man could hardly swallow it; I recollect distinctly speaking to the doctor about it.

Q. Which doctor was it?

A. Doctor — well I cannot think of the doctor's name.

Q. Was it Russell?

A. It was Dr. Josselyn, I think; a big man with a big bushy beard.

Q. What did he say when you called his attention to it?

A. The reason I called his attention to it was, this attendant on this hall used to object because I would not eat, he seemed to think I didn't eat enough, and he used to say he would have to feed me, and on one occasion, one afternoon, while I was talking with the doctor, he came up, this attendant did, and I believe he told the doctor — anyhow there was something said about me not eating enough, and I told the doctor that the great trouble on that ward was, they were feeding the patients too much, and that — well, I don't know as I complained about the manner of feeding, but I said I thought they feed them too much, what I meant was, the manner of feeding them, though.

Q. Was there any change made in the way these patients were fed afterward while you remained on the ward?

A. Not that I recollect now; I was transferred very soon after that.

Q. Were the patient you have spoken of as being fed in this manner, was he hurt or injured physically while being fed?

A. I should judge it would hurt their digestive parts considerably, to shovel food down the throat the way they used to; I remember one poor fellow there I use to try and eat half his mush in order that he should not have to eat it; but it was merely out of sympathy for the poor fellow.

Q. Did you see any thing else on this ward that was out of place or in the institution that you did not think was right, apart from what you have told us?

A. I cannot recollect of any thing; no, sir.

Q. During the three months that you were in the institution how often did you see Dr. Gray?

A. I think I saw him twice after leaving the office after entering the place.

Q. What were the occasions of your seeing him then, and where did you see him?

A. I saw him at one time passing through the hall, one of the halls, the second hall.

Q. That was how long after you had been in the institution?

A. That was probably two months after, or a month and a half at least.

Q. What was he doing?

A. Merely passing through at the time.

Q. When was the next time you saw him?

A. The next time I saw him was during the last month I was there, riding out in his carriage; I was out that day; I was helping the gardener.

Q. So that during the two months that you were in the institution you only saw him once, and then he passed through the ward you were in?

A. Yes, sir, that was all.

Q. In regard to the physicians, who were the attendant physicians that took charge of the wards you were in, while you were there?

A. Dr. Russell and Dr. Josselyn.

Q. How frequently did they come into the wards to look after the patients?

A. I think it was the custom to come twice a day.

Q. Generally once?

A. It seems to me they both came twice a day.

Q. Four visits a day from the physicians?

A. No, it seemed to me as if Dr. Russell had charge of some of the patients, and Dr. Josselyn had charge of others; now Dr. Russell always inquired of me how I was getting along, and as to my health, and Dr. Josselyn didn't, so I inferred from that that he had other patients.

Q. That is one had charge of certain patients and the other of other certain patients, or that one had charge of certain wards, and the other of certain other wards?

A. It was my idea that they both came on the same ward, but had a division of the patients on the same wards; but I may be mistaken about that; that is only an impression.

Q. Were the physicians attentive to the wants of the patients, as far as you could see and judge?

A. I should think so, yes, sir, as far as I could judge.

Q. You were well treated by the physicians?

A. Yes, sir; well treated by the doctors.

Q. And you were well treated while in the institution except what you received in the fourth ward?

A. Yes, sir.

Q. Now in regard to this patient that was kept in the covered bed for several days that you spoke of, was he kept there during the day time?

A. Yes, sir.

Q. As well as night time?

A. Yes, sir.

Q. And not allowed out of bed at all?

A. Not during at least two days; I won't say positively that he was kept there for two days.

Q. When it was necessary to attend the calls of nature what was done?

A. He was brought out by the keepers.

Q. Then he was taken out for this purpose?

A. Yes, sir.

Q. Then he was placed back in bed?

A. Yes, sir.

Q. Did you notice, while in the covered bed, he injured himself any by butting himself against the side of the bed?

A. No, sir; I did not notice that he did.

Q. Was the bed so that he could turn over easily in the bed?

A. Yes, sir; he could turn over; it was at least that wide (indicating); three feet wide, at least.

Q. How far was there between the cover and mattress upon which the patient lay?

A. Two feet.

Q. Plenty of room to turn over?

A. Yes, sir.

Q. Was there any thing especially uncomfortable about his being kept in the bed except that he could not get out?

A. Except his confinement.

Q. Do you know whether the physicians saw him while in that bed?

A. I know that they did; yes, sir.

Q. Was that their direction that he was kept in the bed?

A. I presume so.

Q. So that the attendants could not let him out of the bed if they so desired, as you understand it, or how do you understand it?

A. Well, as I understood it at the time, the attendants could have let him out.

Q. And that is the reason you spoke to Mr. Torpey about it?

A. Yes, sir; that was it.

Q. What was the mental condition of this patient, could he talk and converse so as to be understood?

A. No, sir; he was not rational; he had no sense about him.

Q. Do you know why he was put in the covered bed?

A. I judge it was because he caused extra trouble to them and was violent; I remember distinctly one time, in order to get him out, I told Torpey that I would take care of him and keep him quiet.

Q. He didn't let him come out?

A. No, sir; he told me to mind my own business; it was none of my business.

Q. While you were on the fourth ward what other restraints were applied to the patients on that ward?

A. That was all, I believe, sleeping in the crib.

Q. And that was the only patient kept in the crib during the day time?

A. That was all.

Q. Do you remember how many patients were upon the ward at the time you were there?

A. On the fourth ward do you mean?

Q. Yes; at a time?

A. I should judge there was somewheres about fifteen or sixteen.

Q. In the entire ward?

A. From fifteen to twenty.

Q. Have you any suggestions to make as to how the cases of cruelty that you specify should be prevented from occurring again — cruelty or violence of attendants toward patients?

A. No, I don't know, except that they ought to have a better class of attendants, and pay them more and get a better class of men.

Q. Do you recollect whether, while you were in the institution, you saw any black eyes, or other bruises, or marks of violence upon any of the patients?

A. No, sir, I don't.

Q. As to any thing else that you think of that occurred, while you were in the institution, or that you saw, or that you think you should state or inform us in regard to?

A. No, sir; nothing that I can remember now.

Cross-examined by Mr. Goodwin:

Q. Do you have any recollection now of your mental condition when you were taken to the fourth ward?

A. I have a recollection of being taken to the fourth ward.

Q. Do you know what condition you were in then, mentally; whether you were excitable or laboring under a delusion?

A. Yes, sir; I recollect that I was laboring under a delusion; what I consider now was a delusion.

Q. Were you violent?

A. I believe I was.

Q. You recollect that?

A. Yes, sir.

Q. And how long did you continue so after being put upon the ward, violent, etc.?

A. Probably a week, or perhaps three or four days, possibly.

Q. Now, did this striking occur after or before you came out of that maniacal or violent state?

A. That is the encounter I had with the attendant?

Q. Yes, sir.

A. Of course it must have occurred afterward.

Q. You were not violent then when it occurred?

A. I don't think I was — well I might have been violent to make a pass at the keeper, but I did it with a sane object, at least; I had a difference with him about this patient being kept in that confinement; I can recollect that very well; I did it with a sane intention.

Q. Do you remember whether you were quiet at the time you went in there?

A. Do I remember that I was quiet?

Q. Yes, sir; in your mind?

A. No, sir; I don't think I was.

Q. What do you think was the condition of your mind then?

A. I think my mind was all topsy-turvy.

Q. That you were violent?

A. Yes, sir; I was probably violent at times.

Q. Do you remember your delusion?

A. Yes, sir; I know what it was.

Q. What was it?

A. I decline to answer that; it is not necessary.

Q. You said to the committee the reason that you didn't report these occasions of violence to the physicians was because you were afraid to?

A. I thought the better mode would be to let it pass.

Q. Who made that suggestion to you, anybody?

A. No, sir.

Q. You thought it over and came to that conclusion?

A. Yes, sir.

Q. It was not made?

A. No, sir; I thought I would get square with the fellow sometime when I met him outside.

JOHN J. HALPIN,

Sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside?
A. Maynard, Oneida county.
Q. What is your age?
A. Thirty.
Q. What countryman are you?
A. An American born, Irish descent.
Q. Born in this country?
A. Yes, sir.
Q. How long have you lived in Oneida county?
A. I was born in Oneida county and have lived here off and on for the last thirty years, I might say.
Q. Were you ever an attendant in the State Lunatic Asylum here?
A. Yes, sir.
Q. When did you go into the Asylum as an attendant?
A. The 1st of January, 1874.
Q. And remained until when?
A. The first day of the year 1878.
Q. What had been your occupation just immediately before your going into the Asylum?
A. I was hired on a farm and worked there.
Q. Had your business been on a farm before that time?
A. Yes, sir.
Q. And had you had any experience in a lunatic asylum?
A. Never before I went in there.
Q. Through what means did yon obtain a situation in the Asylum?
A. By going up to see the steward.
Q. Who, if any one, interceded in your behalf.
A. My mother lived there before me and Mr. Dryer knew me; she had been an attendant or laundry woman there.
Q. She had been a helper there?
A. Yes, sir; she worked for Dr. Gray.
Q. How long did she work in the laundry?
A. Six or seven years; somewhere in that neighborhood.
Q. Had you any conversation with Dr. Gray when you went there to get employment?
A. No, sir.
Q. Who informed you?
A. Mr. Dryer.
Q. Had you any conversation with him when you went there?
A. No, sir; I told him who I was; that is all the conversation I had with him.
Q. You went and introduced yourself?

A. Yes, sir.
Q. Did any one go with you?
A. No, sir.
Q. Did you take any letter from any person recommending you?
A. No, sir.
Q. Just briefly state what occurred when you made the bargain for your services?
A. I went up to ask him if they were in want of an attendant; he told me that they would on the first of the month; this was about the middle of the month previous to the time I went there; I went to see him about the middle of May; he said he did not know of any at present but to come about the first of the month and that there would be a vacancy about that time; I came about the first of the month and procured the situation.
Q. What was said when you procured the situation?
A. I asked him if there was a vacancy; he told me there was and told me to go in and see the bookkeeper and sign my name, and then I went on to the ward.
Q. You went to see the book-keeper?
A. Yes, sir; to give him my name and sign it.
Q. Your age?
A. Yes, sir.
Q. Your occupation and residence?
A. Yes, sir, I think I did.
Q. What was it you signed?
A. I signed my name.
Q. Simply wrote your name in a book?
A. Yes, sir.
Q. Did you read what was there?
A. Yes, sir, I read it.
Q. What did you read that was entered there when you signed?
A. I cannot state now; I know they gave me rules to read.
Q When you did that, what did they do?
A. Sent for the supervisor.
Q. What supervisor?
A. Supervisor Jones.
Q. What ward were you taken upon?
A. No. 6, and I remained there a couple of days.
Q. What inquiries, if any, were made about you by Mr. Dryer or any other person after they hired you and sent you on the ward?
A. I can recollect Mr. Dryer asked me if I was of age—and I was not quite of age then.
Q. Did he inquire about any thing in reference to your habits?
A. I think he asked me if I was steady, that was all.
Q. You told him you were?
A. Yes, sir.
Q. When you came upon the ward what were you directed to do, and who directed you?
A. The supervisor resided on the ward with us, and he was the

one; I don't know as there was any particular directions given when I came on to the ward; only to go in and see what the rest was doing; I came on at half-past or ten o'clock in the morning.

Q. What was done then?

A. The first thing I done was along in the afternoon, I took the spreads for the beds and folded them up, and then there was nothing to be done until next morning more than to be there in the room and lock the door.

Q. There is an outer spread that is taken off and laid away during the time when the bed is occupied?

A. Yes, sir.

Q. When that was done, what did you do?

A. When a man went to bed, he locked the rooms, went around and tried the doors, and that was about all that there was to be done that day.

Q. Did you go to bed that night?

A. Yes, sir.

Q. Where was your room?

A. No. 24, I think.

Q. Did anybody else occupy the room with you?

A. No, sir.

Q. Was there any disturbance in the ward that night, that called you up?

A. No, sir.

Q. Next morning what did you do?

A. Go around and open doors, went in and let the men out and helped him air the beds, and sweep out the rooms on the hall, or helped at it at least.

Q. How long did you remain on ward 6?

A. I rather think it was two days.

Q. Then what ward did you go to?

A. I went on to No. 10.

Q. How was it that you were changed from six to ten?

A. It seems to me they change you as they take a notion to; when the doctor came around, he thought there were attendants enough on that ward.

Q. Who was the supervisor on ward 10?

A. Supervisor Barrisdale.

Q. Is that the violent ward?

A. It is not particularly so; I think they have patients on it that are sometimes violent.

Q. Now, what did you do on ward 10?

A. It is just the same as on the ward below, and first thing in the morning it is to let patients out and help him through with the beds, and sweep out their rooms and sweep the hall.

Q. Any duty in reference to the cleanliness of the patients?

A. Yes, sir; if any of them are filthy, to clean them.

Q. Did you have to see to it, that the patients who would not wash themselves were washed?

A. Yes, sir.

Q. Did you do that?

A. Yes, sir, I helped to do it.

Q. On ward 10?

A. Yes, sir.

Q. Did you know of any patient being injured while you were on ward 6?

A. No, sir.

Q. Was there any disturbance or difficulty on ward 6 while you were there?

A. No, sir.

Q. You went on ward 10; how long did you remain on ward 10?

A. I cannot remember exactly the number of months, but I should judge it was near two years; I did not make a minute of it at the time.

Q. During the time you were on ward ten, was there any patient that received injuries?

A. I know one patient that committed suicide there; he was brought out to the dead house, and that was the last I heard of him; I have seen others struck there frequently.

Q. How did he commit suicide?

A. He got one of the case knives out of the dining-room and he was in the dormitory, and he cut his throat.

By Mr. Rice:

Q. Did you see that done?

A. No, sir; it was done during the night; I saw him next morning.

Q. Was he on your ward?

A. Yes, sir; on number ten.

Q. How was it he obtained that knife without you discovering it?

A. That is the dining-room men's places to see they don't ever get knives, and I guess he got it out through carelessness in not counting the knives — as near as I can get at it; they let the men out before the knives were counted.

Q. The rule was that the knives and forks are gathered before the patients leave the table?

A. Yes, sir.

Q. On this occasion you say they were permitted to leave the table before the knives were gathered and counted?

A. No, sir, they gathered them and counted them; but after the bulk of the men are let go, they keep in eight or ten patients to help them, and it seems that the door was left open before they were counted a second time, and this man happened to be one of them in there to help -- that remained behind to help.

Q. Was it not a portion of your duty to see to it that the patients did not have any thing left about them with which they could injure themselves or anybody else?

A. Yes, sir; but the men on the hall cannot tell when they have a knife, and would not search them unless they were told.

Q. If you had been told that there was a knife missing, you would have searched them?

A. Yes, sir; of course I should.

Q. Who was the dining-room man at that time?

A. Mr. Morgan.

Q. You say the patient cut his throat in the night?

A. Yes, sir.

Q. Were you aware of the fact that he had done so until morning?

A. No, sir; we discovered it in the morning.

Q. Did you open the door and unlock it?

A. I think I did.

Q. What did you find when you unlocked the door?

A. I found the knife alongside of him, and his head out of the bed and blood all over the floor; and he was dead and was carried to the dead-house; I saw no more of him.

Q. Was there any inquest?

A. Well, if there had been any inquest held on him we should have heard of it, I think; I don't know as there was any inquest; I was not called as a witness; to the best of my information there was no inquest.

Q. You were not called before the coroner?

A. No, sir.

Q. What was the man's name that cut his throat?

A. P.

Q. Where from?

A. I cannot tell you.

Q. When did that occur, what year?

A. I think it was in the latter end of the month of April, 1876; we never make any minute of any such thing; it was in '76 or '77.

Q. You never heard any thing more from him after he was taken out of the dead-house?

A. No, sir.

Q. Is there not a small cemetery or burying ground connected with the Asylum?

A. I believe all that come, afford to take them away.

Q. Is there a small cemetery or burying ground attached to the Asylum?

A. No, sir, not any, on the grounds.

Q. Do you know where they bury their dead that are not taken away by friends for the purpose?

A. They are buried in the potter's field.

By Mr. Olin:

Q. Was P. a pauper or not?

A. I cannot say whether he was or not.

Q. Was there ever an inquiry made about it by any of the friends of the man?

A. No, sir, I never heard any thing more about it.

Q. Any other injury to patients by patients themselves, or by attendants, or from any other patient?

A. I have seen attendants going to the room when a man would be making a noise and go and strike him in the pit of the stomach with his fist.

Q. Give us the names of the patients and attendant?

A. I cannot remember the patient's name; the attendant's name I can give.

Q. Do you know what room?

A. I don't remember.

Q. What was the attendant's name?

A. He was a Welshman; that is all I can tell about him; I think his name was David Williams.

Q. Do you know where Williams resided?

A. No, sir; he was a foreigner, I think.

Q. Describe to the committee just what you saw?

A. I think he came in and struck this man in the pit of the stomach; I told him it was not right for him to do it; I asked him how he would like it if any one done that to him.

Q. When did that occur?

A. Some where along in 1876 or 1877.

Q. Now, go on and state the conversation you had with Williams?

A. I told him at the time it was not right to strike a man there; if he struck him at all, that he ought not to hit him in the stomach, he was liable to rupture him or something of that sort, that he would not get over; he went on and said, well, it was good enough for him.

Q. Was the patient violent?

A. No, sir, he was noisy, not violent.

Q. Was the blow struck apparently a very severe one?

A. Yes, sir, it was a heavy blow.

Q. Did the patient complain?

A. Well, he groaned, but didn't make any complaint then.

Q. What time in the night was that?

A. About half-past eight o'clock.

Q. Soon as the patient had gone to bed?

A. Yes, sir.

Q. Did you see the patient next morning?

A. Yes, sir.

Q. Did he make any complaint?

A. Yes, sir, he said he was sore in the stomach.

Q. And was that all he said?

A. That was about all he said; it was best for him not to say any thing more.

Q. When did you first report that circumstance?

A. I didn't report it at all.

Q. Why didn't you report Williams to the supervisor?

A. The attendants do not make a rule of reporting one another; if they are going to stay there any length of time they do not report such things.

Q. There is a rule that attendants should report all injuries?

A. Yes, sir, but that rule is not carried out.

Q. It is not obeyed?

A. No, sir, it is not.

Q. But did it become known to the supervisor that the man was struck by Williams?

A. No, sir, I don't think it ever did.

Q. You never reported it?

A. No, sir, I never reported.

Q. After the first morning did you hear the patient complain?

A. I asked him the next morning if he felt sore; he said, yes, sir, he felt very sore in the pit of his stomach; the next day I told him he must try to be quiet when he got to bed so as not to have it occur again.

Q. Did you hear him report it to the head attendant?

A. No, sir, I did not.

Q. Did you hear the patient complain to any member?

A. No, sir; it has got to be a knowing patient that will report things, unless it is one who knows more than the rest of them and knows where he can get a little justice done to them.

Q. So then you know that injury was not reported to any physician?

A. No, sir, I never heard of it.

Q. Did you not think when you failed to report that to the supervisor, or head attendant, that you were violating a rule?

A. It was no matter of mine; I was making a living there; I know I was violating a rule; well, nobody ever told me to report such things, and it is not a rule among the attendants to report such things as that; this book of rules is laid aside; they are not carried out at all.

Q. Your book of rules did have in a rule that you must report all cases of injury to a patient, did it not?

A. I won't swear positive whether it did or not; I never read the book much and I don't suppose any of the rest of them ever did; it might read to that effect but I don't know that it does; I knew I was violating a rule to this extent; I know it not to be right to do these things; I have common sense enough for that.

Q. The next injury that you remember of being received by patient at the hands of an attendant, when was it?

A. Have seen them take them in from the open yard — but it don't do to touch a patient out there because you cannot tell who is looking out of the window — but I have seen men bring a patient in from there into the ward and threw him down and jumped on to him.

Q. Give us the name of the patient?

A. I can not remember it.

Q. Give us the name of the attendant?

A. Redner.

Q. When was that?

A. It might be in 1875; his name was Isaac Redner.

Q. How long was Redner there, do you know?

A. I think between two and three years.

Q. Describe to the committee how he threw the patient down?

A. He knocked his feet out from under him, then of course he laid on the floor.

Q. Knocked him off of his feet?

A. Yes, sir.

Q. What did he do after he jumped on him?

A. Of course when he got through he let him up; the patient went up stairs and went into his room.

Mr. HASKELL (reading from list) — "Isaac M. Redner, May 11, 1874, to March 31, 1875."

Q. What part of his person did he jump on?

A. On his stomach.

Q. Did you hear any outcry by the patient?

A. He hollered a little, but the rest was going up stairs it would not be heard; they have shoes on in going out on the yard; this patient, for some reason or other, did not come in — he sneaked round a fence, and when he did come in he gave him this treatment.

Q. How near were you to Redner when he knocked the man down?

A. I was right beside him.

Q. What did you say to Redner?

A. I did not say any thing to him.

Q. You did not say any thing to him?

A. No, sir.

Q. Why did you not remonstrate?

A. I said to you that it was not the rule for the attendants to interfere with one another in such matter as that, for if they did they would not stay long in the Asylum; it is not allowable, if they want to keep their places there; it would not be my place to go and report him anyway.

Q. If an attendant should kill a patient, do you think it would not be your duty to report it?

A. No, sir; I should not, not if I intended to stay there; of course, for my duty, it would be right to do it.

Q. Do you know of any case where an attendant was discharged for reporting a misconduct on another attendant?

A. No, sir; they will not discharge for that, but if he reports, he is watched and the other attendants are all down on him, and report him for something, and he is soon discharged for some reason.

Q. There is some sort of federation with you that you are not to report on one another?

A. No, sir; unless they're cornered, and to help himself out he will report in the morning, if he is going to get discharged for it.

Q. Did you see the patient afterward?

A. No, sir; he wasn't on my ward.

Q. So you didn't report the injury inflicted by Redner on the patient?

A. No, sir.

Q. So you don't know the result?

A. No, sir.

Q. Do you know of any other injury being inflicted, while you were on ward ten?

A. Not as far as I know, sir, except as far as striking a patient is concerned; that is an every-day occurrence.

Q. For the attendants to strike patients?

A. Yes, sir, it was when I was there; I don't know what it may be now.

Q. And did they strike them severe blows?

A. It would depend a great deal on the patient, and what he done; if he showed fight to the attendant, he would always get the worst of it — the patient would.

Q. The attendant would get in the first blow?

A. Well, the patients never got the best of the attendants.

Q. Can you name any instance where you saw an attendant strike a patient, and give the patient's name, or the the attendant's alone?

A. So far as striking a patient, I have done that there frequently myself, but I cannot name the patient.

Q. You can name Halpin?

A. Yes, sir.

Q. Where did you go to from ward ten?

A. I think I was on ward eleven a while.

Q. While on ward eleven, did you see any patient injured by an attendant?

A. No, sir; I did not see them, but I have heard of them.

Q. From what source did you get your information of their being injured?

A. From being told that such a one as they are called there, had "gone over," that is when a patient gets a pretty good mauling; that is what they call it.

Q. Who told you about a patient getting badly mauled?

A. An attendant that was on there, and before I go on any further on eleventh ward — I remember a patient brought over from twelve; he belonged at Albany; I cannot remember his name, but he and his brother were hatters at Albany, in the hat business; he had a notion of letting up and down the window, occasionally and the attendants sat him down a number of times; finally he got up again and he was struck in the ribs, or along in the side there, and on the back so that it hurt his water passage, his urine; he could not draw it himself and he was brought over to No. ten; I took care of him there; I saw that patient struck one time; I think the attendant's name was Evans, but I won't be positive about the attendant who struck him.

Q. And the patient was brought on to your ward?

A. Yes, sir.

Q. What was his condition when brought to your ward?

A. He was so bad he had to be put to bed.

Q. Described the injury he received?

A. He was struck in the side; that man died in the Asylum and the Albany paper came out and gave the name of the disease that he died of; I cannot give you the name; it was a long name; I don't know what the disease was called, but I know that he died of it.

Q. That was on the twelfth ward?

A. Yes, sir.

Q. Did he die on your ward?

A. Yes, sir.

Q. Do you remember his name?

A. That I cannot, but the man, just before he died talked as rationally as I can or as any one in this room; he said he didn't like to make any trouble for the attendants, but he told the cause of his death; he said it was from being struck in the side.

Q. Did he tell you who struck him?

A. I don't believe he was on the ward long enough to remember the attendant's name; I don't think he knew their names; he told me he and his brother was in the hat business at Albany; I don't think it was entered on the injury book, because I saw it come out in the Albany paper.

Q. Did you occasionally see the injury book in the supervisor's possession?

A. No, sir; I never got that in my hand; I think it came out in the Albany paper after that and stated about him being there and what the disease was that he died of.

By Mr. Morgan:

Q. And it was some disease other than the injury?

A. Yes, sir; it did not speak of the injury whatsoever.

Q. Or of its being the result of any injury?

A. No, sir.

Q. Did you report that case to the supervisor of the ward?

A. No, sir, I did not.

Q. Why didn't you?

A. I gave you the reasons before.

Q. This man that injured him so on number twelve, was not on your ward?

A. If he was on number four, the farthest ward away from me, we should not make a practice of doing any thing of that kind as the telling of it.

Q. You regarded that as a violation of the rules?

A. No, sir; I never regarded it as such, although it was against the rules.

Q. You took it as being a matter of course, it was so often violated?

A. Yes, sir; we never reported these things.

Q. Who carried the body out of your ward?

A. I helped to carry it; he was carried to the dead house.

Q. Did you hear any more about it except the account you saw in the paper?

A. No, sir; I took it for granted that his folks came for him from Albany.

Q. How long was he confined to his bed before he died?

A. Quite for a week or ten days; he went through an operation.

Q. Who performed the operation?

A. Doctor Smith.

Q. What was the operation?

A. In the first place I was a private attendant for the patient at the time; looked after his interests altogether.

Q. He was a paying patient?

A. Yes, sir; but then we are not supposed to know; as attendants we generally judge from the patients; I took him down to the bath tub; got him a warm water bath, as warm as he could stand it, to draw the water from him; it didn't have any effect; the doctor got a silver wire and ran that up in his penus, and his water could not be drawn from him, so consequently the man died.

Q. Did you learn from him whether he had ever been troubled with any such difficulty?

A. He said not; he said it was the first time it ever occurred.

Q. And tell us as far as you know that injury was not reported or mentioned to the physicians of the Asylum?

A. No, sir, I don't think it was; never to my knowledge any way

By Mr. Rice:

Q. For how long a time had you been attending to this man?

A. From the first time he was there, a week or eight days, perhaps.

Q. Before the injury?

A. Before the injury I was not an attendant for him until he was brought to the ward after the injury.

Q. And you became a private attendant after this injury?

A. Yes, sir; I made his bed and brought his meals and such like.

Q. Do you know whether he had any difficulty in passing urine before that?

A. He said not.

Q. Do you know any thing about it?

A. That I don't know.

Q. Were there any bruises or marks upon his body?

A. No, sir; I could not see any along the side, any more than he said it was very sore when I lifted him up to make his bed.

Q. Did you see him after this?
A. Yes, sir.
Q Did you make an examination to see if there was a bruise or not?
A. No, sir; no more than a mark; I could not see anything from the outside; but a man could get a blow in the side or stomach and not mark him.
Q. Was there quite a black or blue spot on his side?
A. No, sir; I could not see any.
Q. And you would say from the body that an attendant inflicted this injury with his feet?
A. No, sir; with his fist he struck him in the side.
Q. Did the man immediately go to bed — take to his bed?
A. No, sir; I think he did not go that day.
Q. How long was he about?
A. I think he was put in bed the next day.
Q. And after that he never got out?
A. No, sir; he died there.
Q. And from that time you became his private attendant?
A. Yes, sir.
Q. How soon after the injury was he brought over in number ten?
A. I think it was a couple of days.
Q. Had he taken to his bed in number twelve before he was brought to number ten.
A. Yes, sir; he was carried over to my ward.
Q. And from that time you were his attendant?
A. Yes, sir.
Q. And with him all the time?
A. Yes, sir; day time I was there.
Q. And who was with him nights?
A. Nobody at night.
Q. You saw the physicians attending him?
A. Yes, sir.
Q. You were there when they came in to prescribe for him?
A. Yes, sir, of course I saw the doctor come in.
Q. What physician attended him?
A. Dr. Smith was one, and I think the other was Kendrick; I remember Smith because he performed the operation on him.
Q. Dr. Gray?
A. No, sir; I only saw him two or three times a year up there.
Q. He didn't attend upon the man?
A. No, sir.
Q. Where is Dr. Smith now?
A. Morristown, N J. That is the last I heard of him.
Q. In the asylum there?
A. Yes, sir.
Q. Now you say this man was pretty rational?
A. Yes, sir.

Q. Seemed to understand himself and any thing he was talking about?

A. Yes, sir.

Q. Did he appreciate the fact that he was going to die?

A. Yes, sir, he told me he was going to die.

Q. And he understood all that you said to him?

A. Yes, sir.

Q. You were there when the doctors came to see him?

A. Some of the time I remained up in the room with him, sometimes not.

Q. Did you ever hear him say any thing to the doctors about the injury?

A. He told me he did not want to make any trouble.

Q. (Repeated)?

A. No, sir, I never heard him talk to the doctor.

Q. Did you ever hear him give the doctor any reason or cause for his trouble?

A. No, sir; I never heard him give any.

Q. Do you know then whether the doctor was ever told that he had received this injury?

A. I rather think he never was.

Q. Are you able now to give any reason why a man so injured that he was dying, and having received a wound which he knew must result in his death, should not have told the doctor of it?

A. I would not swear positively that he did not tell, but I never heard him.

Q. Did he tell you that he never told the doctor?

A. He told me a few days before that he thought he didn't want to make any trouble for the attendants, and I never knew him to tell it.

Q. Do you know of any reason why a man who has received a wound that would result in death would not have told the doctor?

A. No, sir; I don't know of any reason.

By Mr. Morgan:

Q. Who detailed you as private attendant upon this man?

A. The supervisor I suppose, he told me.

Q. To take care of this man?

A. Yes, sir.

Q. Who was the supervisor?

A. Barrisdale (Alexander).

Q. He is there now?

A. Yes, sir.

Q. You attended to the care of him until he died?

A. Yes, sir.

Q. Would not you say it was your duty to have reported this to the supervisor or the doctor what this man had said to you about the injury?

A. As I told you I suppose it was my duty but it was not ruleable among the attendants to do any thing of the kind, it would not help the man's case along at all, and it might get that patient discharged, and it might not.

Q. You understood that the only way that the asylum could be relieved of that kind of attendants was that they should be reported in order that the superintendent or steward might discharge them?

A. Yes, sir; well, that is the only way, of conrse there is occasions where they cannot get out of it.

Q. I am taking that very case; you knew that the only way the Asylum could be relieved from that kind of attendant, that you stated the man is, was to report it and he would be discharged?

A. He might be, and he might not.

Q. There was no way of their learning of this injury except that it should be reported by an attendant?

A. Not unless the patient reported him, that is about the only way.

Q. A patient did tell you on this occasion?

A. Yes, sir; I could not swear that he did not tell the doctor, I am not positive about it; if he told him I never heard of it.

Q. Was there any other injury that came to your knowledge while you were on ward ten?

A. That I have seen marks on patients?

Q. That came to your knowledge?

A. I saw this man struck.

Q. Well, any thing that came to your knowledge reported to you by the patient?

A. I saw them carry a man out to the dead house this same night; he was a man who went up stairs with the attendant, and went and got into the reservoir up there, or cistern, and got drowned.

Q. That was the case where the patient got in and got drowned?

A. Yes, sir; the attendant took up four or five to do some work in the attic.

Q. You didn't understand that the attendant put him in the reservoir?

A. Oh, no, sir; I did not insinuate any thing of the kind; the patient jumped in himself.

Q. Was there any other case that you remember, that a patient was injured by an employee?

A. Yes, sir; I knew a patient named C.; this was on the fourth ward, I don't know his first name, he got such a kicking that when I took him out three months afterwards, in place of bending his back, he would bend his knees if he had to pick any thing up; he was injured in the back by being kicked.

Q. What information did you have or knowledge that he was kicked?

A. The knowledge I had was seeing it done.

Q. Did you see him kicked?

A. Yes, sir.

Q. Who kicked him?

A. An attendant.

Q. Who was the attendant?

A. I won't be positive, I think his name was Roberts – I think his name was John.

Q. When did that occur?

A. I think it was in 1877.

Q. Where was the patient when Roberts struck or kicked him?

A. On the floor of the ward.

Q. On ward four?

A. Yes, sir.

Q. Down upon the floor?

A. Yes, sir; he was a powerful man, he could stand a great deal of punishment without injuring him; more than the general run of men.

Q. What did Roberts say and do to him?

A. This was a patient that showed fight; he took a notion he would strike him.

Q. What did Roberts say and do to him?

A. He kicked the patient on the floor; he did not say much to the patient.

Q. What did Roberts say and do to him?

A. I Don't suppose he said any thing.

Q. Did he ask him to go up?

A. No, sir.

Q. But kicked him?

A. Yes, sir

Q. How did the patient lie on the floor?

A. Longwise; he lay on his side, I think.

Q. And Roberts kicked him in the back?

A. Yes, sir.

Q. About what portion of the back?

A. About the center of the back.

Q. More than once did he kick him?

A. Yes, sir; half a dozen times or more for that matter.

Q. Where were you when he was kicking him?

A. On the ward.

Q. Did you say or do any thing when you saw him kicking this man?

A. No, sir; I did not interfere.

Q. Was this man the attendant on an equal grade with yousrelf?

A. He was a stronger and and a bigger man than I am.

Q. He was not the head attendant?

A. Yes, sir; he was.

Q. If you saw a man lying on the floor and the head attendant walk up and kicked him half a dozen times, didn't you think it was your duty to interfere and prevent him?

A. No, sir; it was my duty to report it perhaps, but it was not ruleable to do so.

Q. Could you not have interfered and prevented the patient from being injured?

A. I had not been there long enough to dictate to him, it was for him to dictate to me.

Q. You think you were justified in standing there and seeing that man kicked half a dozen times without in any way remonstrating or interfering?

A. It would not do any good if I had interfered; if I had reported it, I should soon have been discharged, some fault would be found by the other attendants and I should be discharged for something I didn't do; they did not report one another there and I told you why.

Q. And even such an extensive injury was not?

A. No, sir.

Q. Did that man complain when the doctor came or not?

A. There were three days the doctor did not see him at all.

Q. Where was he?

A. In his room, I suppose; when the doctor came down one side of the hall he would step into the rooms and see that patients in that room; and while he was in some of the rooms, having passed this room we would take him from the room on this side and put him over on the other into a room that the doctor had passed.

Q. And that ran along for two or three days?

A. Yes, sir; until the man could stir round.

Q. Was the patient satisfied to do that?

A. He was one of this kind he would never report; you might kill him and he would never give in.

Q. And he did not make any disturbance becuase you cheated the doctor?

A. No, sir; I don't suppose he knew any thing about that.

Q. He would be transferred from one room to another, taken across the hall and have no suspicion that you were trying to keep him from the sight of the doctor?

A. No, sir.

Q. Who helped you move him across?

A. Well, he could move himself he could walk; I would move him sometimes.

Q. Did the head attendant tell you to do it?

A. I don't know as he did me; I would not; I would know enough to do that myself.

Q. You was doing that so that the doctor would not learn of the injury and thereby have the head attendant exposed?

A. Yes, sir; that was it.

Q. That was the object?

A. Yes, sir.

Q. Were you on ward four in 1877?

A. Yes, sir.

Q. Do you remember two patients—a patient by the name of J. L.?

A. Yes, sir; I think I do.

Q. Do you remember a patient of that ward by the name of D. W.?
A. Yes, sir.
Q. Do you recollect either of these men being severely injured when you were on the ward?
A. Yes, sir; W. was a man all the while doing something or other and he got a good many thumpings from one and another.

By Mr. Howe:

Q. Attendants or patients?
A. Attendants.

By Mr. Haskell:

Q. Do you recollect any instance when W. was hurt seriously?
A. I think the man was hurt, and the time it was set that the patients got quarreling, and that was the cause.
Q. Is that a customary excuse that injuries resulted from the attendants?
A. Yes, sir; if it can be put off in that way; it is done.
Q. Do you recollect what kind of injury it was to W.?
A. No, sir; I cannot swear positively what it was.
Q. Do you think you recollect such an occurrence?
A. Yes, sir; I recollect W. being in bed for awhile.
Q. Do you think it was reported as a quarrel between him and another patient?
A. Yes, sir; I think so; that is the best of my opinion; this W., he made a great deal of trouble for the attendants and when he went too far, of course they had to subdue him.

By Mr. Rice:

Q. That was to curb him a little?
A. Yes, sir.

By Mr. Haskell:

Q. When you were on the fourth ward was R. McCormick and J. E. Rickard?
A. I think Mr. McCormick went off as I went on, and I know Rickard but I was not on the ward with them two.

By Mr. Morgan:

Q. How long did this man remain disabled in consequence of this matter that you have spoken of?
A. He was disabled when I came away from there.
Q. How long was that after the injury?
A. That I cannot swear positively how long it was I took the men out to air, and three or four months after that I looked at the man, and I pitied him, to see a strong, able bodied man have to stoop by

bending his knees instead of his back, which he could not bend in consequence of this injury.

Q. How long after that injury did you remain in the Asylum?

A. That I cannot say, six or seven months.

Q. Was that man then laboring under this injury?

A. The last I know of him he was.

Q. Was he in your ward when you left?

A. On ward four.

Q. You think he became rational?

A. Yes, sir; he got so he could talk quite rationally.

Q. Did you ever hear him complain to any attending physician?

A. No, sir; I don't believe he ever spoke to them; he was one of those kind of independent men that would not speak unless spoken to; I never saw them ask him.

Q. Did you ever hear the physician make any inquiry as to what the trouble with this man was?

A. No, sir; I never did.

Q. Did he ever give you his history; tell you why he was there, or where he came from?

A. No, sir; I don't think he did; I had him out to work on several occasions and I would see —

Q. What do you think he would weigh?

A. One hundred and seventy pounds; he was a deceiving man, bony, he was taller than I am.

Q. What was the next case of injury to a patient, that came to your knowedge?

A. I don't know of any other serious injuries, but I know of a case where an attendant came in there, or a patient rather, and I rather think he was a private patient, he had been in the habit of wearing his flannels all the year round; I called him by name, but I cannot remember him now; he was a very gentlemanly sort of man; he told me he would like to wear his flannels, as he had worn them all the year round; he was told it was the rule to change the flannels in the spring; he said, "for God's sake don't take them;" he would miss them; I spoke to the "super," whether he would let him have his flannels or not; he said, "no, he must do as the rest did, change the flannels;" a few days after that he came into the yard and was shivering and shaking, he told me to give him his flannels, for God's sake, or he would die of cold; I told him I would do what I could to get his flannels; I spoke to the supervisor, I did not get them, and the man caught cold and he took to his bed and he died.

Q. Died in the Asylum?

A. Yes, sir.

Q. When did he die?

A. I cannot give you dates at all.

Q. Do you know where he was from?

A. No, sir.

Q. In what season did he die?

A. It was in the spring.

Q. In the month of May or April?

A. No, sir; I think it was May.

Q. Was there any talk in the Asylum about the man's death?

A. No, sir; they don't make any talk about a man dying there; it is a frequent thing about their dying; they put them in a tub and wash them, and carry them to the dead-house; that is all that is done about it.

Q. Did you learn any thing of the body after this man wa washed, and then taken to the dead-house?

A. No, sir.

Q. He was buried after that?

A. Yes, sir.

Q. How old a man was he?

A. I should say about thirty-two; between thirty and thirty-two; a young man.

Q. Who knew of this man's complaining of not being permitted to have his flannels; who knew of that beside yourself?

A. I spoke to the supervisor.

Q. Who was the supervisor?

A. Barrisdale.

Q. And he said it was against the rules?

A. Yes, sir.

Q. Was it against the rules to allow patients to wear flannels in the summer?

A. There are some there who do wear them.

(Question repeated.)

A. It is the rule for them to change their flannels.

Q. If they have not got a change, how is it?

A. This man had changes; he told me his folks would furnish him with more flannels when they were worn out; it saves washing.

Q. Were there any other cases of injury on ward ten, while you were there?

A. No, sir; I don't remember any more quarrels, that is, with patients; as far as attendants striking patients, that was an every day occurrence.

Q. Do you know of one being struck, or that he was injured in accident?

A. No, sir; that is about all the cases I know of.

Q. How long did you remain on No. 10 after this man died?

A. It would be about five or six months, I cannot remember as to dates.

Q. Did you go upon another ward then?

A. Yes, sir; I went from ten to eleven.

Q. How many patients were there on number eleven?

A. About twenty-four or five.

Q. And how many attendants?

A. Three.

Q. Who was supervisor on eleven?

A. Barrisdale.

Q. Who was the head attendant?

A. His name was McLaughlin.

Q. Was there any injury to patients on eleven while you were there?

A. No, sir; I don't know of any serious injury.

Q. How long did you remain on eleven?

A. Well, a couple of weeks, I think.

Q. And no injury that you know of?

A. No, sir; not on that ward.

Q. Where did you go to from eleven?

A. To twelve.

Q. You went to twelve; how long did you remain there?

A. A couple of months.

Q. Any injury to patients while you were on twelve?

A. I have seen patients struck there quite frequently, but never seriously injured.

Q. Struck so as to injure them so that they complained?

A. Well, I have seen one get into a room, and after he got in — he got into the room and got the bedstead loose, and barred the door so that he would not let any attendants into him; he said the doctor wauld have to come up before he opened that door; we had to go and get one of the doctors up there and he would speak to him up over the head light, over the door; to get him to take the bed away from the door.

Q. And the doctor advised and he took it away?

A. Yes, sir; he asked the doctor if he would see that he was not hurt; the doctor said he would and he took the bed down, away from the door, and then they brought him out on the ward.

Q. The patient seemed to be suspicious, if he opened the door for the attendants, that they would chastise him for blocking the door?

A. Yes, sir.

Q. Any other occurrence on that ward while you were there, on number twelve?

A. No, sir; not any thing serious that I can remember.

Q. Then where did you go from number twelve?

A. Down to four.

Q. You had been on number four before?

A. We would shift around.

Q. You had been on number four before that?

A. Yes, sir.

Q. And when you got on number four, how long did you remain on there?

A. I left the Asylum from number four.

Q. While on number four did you see any injury to patients?

A. I told you about the injury to C., that was on number four.

Q. I mean the last time you were there?

A. Nothing serious; no, sir.

Q. How often did you see Dr. Gray on the wards?

A. Three or four times a year.

Q. And what would be the occasion of his coming on to the ward?

A. With the board of county supervisors, board of managers or commissioner in lunacy.

Q. Did you ever know of his coming on to either one of the wards where you were, to see patients?

A. I never knew him to, but to one; his name I cannot tell you. he had St. Anthony dance, or St. Vitus dance; Dr. Andrews looked at him first, then went for Dr. Gray; Dr. Gray looked at him; he said "sit on the bed and hold his hand; "I sat up all night with the patient and sat on his hand, and held the other hand, as he told me, and next morning he was better, but the patient died two or three weeks afterwards; that is the only patient I ever knew Dr. Gray to prescribe for while I was there.

Q. His visits seemed to be with men of importance?

A. Yes, sir; when they came, the whistle would blow and every thing was to be got in readiness for them.

Q. When there was to be a visit by the board of managers, or any public men, how was that communicated to the attendants?

A. There was a whistle led up to each department, and whistle would blow.

Q. Where from?

A. From the office.

Q. A speaking tube?

A. Yes, sir; a speaking trumpet.

Q. Was any thing said through the trumpet except to whistle?

A. It said; "the board of managers will be there this morning or afternoon, just as it happened to be, and every one would be getting as straight as possible; they used to go through wards that regular company didn't go through as a rule; the board of managers or supervisors, they generally went through them.

Q. As you go through ward four, and pass down a flight of stairs, and then down on the other side of the stairs, there is quite a lot of very bad patients down there, is there not?

A. Well, it has been altered since I have been there.

Q. Can you think of any other serions injuries on that ward down to the time you left?

A. Well, speaking about the cribs, I have seen things done with them.

Q. What did they do with them.

A. Taking a filthy patient, we used to change them every morning; they would take the crib and they would fill that up full with straw so that when the patient would be filthy he could not move round and make the sides dirty, we would shut the cover down tight on to him — shut it down so he could not move round at all so that he could not move round and swear the crib.

Q. Who did that?

A. The attendants; I used to do it sometimes.

Q. You filled it so full that the patient could not lay in the bed in any comfort?

A. Yes, sir; they filled it with straw and jammed him down.

Q. Did the patients complain?

A. No, sir; it would not be any use to.

Q. Did the patients complain?

A. I never heard of any complaining; when the cover was shut down they would tell us not to hear them.

Q. And they would remain, how long?

A. They were put in there at seven o'clock at night and stayed until next morning at half-past five or six.

Q. And the crib, or covered bed, in that condition, could the patient turn over?

A. On his side; it was pretty tight squeezing if he should.

Q. Who was supervisor on that ward when you did that?

A. I think his name was Evans; in that department they didn't have a supervisor on each ward.

Q. But he is supervisor of that ward?

A. Yes, sir.

Q. Did he know you filled the bed so full it made it uncomfortable for the patient?

A. I don't know; he could see them there, but we would not tell him certainly.

Q. Did any one remonstrate with you for filling the beds so full?

A. No, sir.

Q. Then you would fill that bed in that way so as to save the disagreeable work of cleaning the bed after a filthy patient?

A. Yes, sir.

Q. Did you think you had fairly discharged your duty towards the institution and the unfortunate men who were there, by doing that?

A. Well, it was ruleable I believe to do it before I came there, and that is as I was told to do it.

Q. It was a rule among the attendants?

A. Yes, sir.

Q. It was not laid down before you?

A. No, sir; I never heard of it being laid down.

Q. You left in what time?

A. 1878.

Q. What day?

A. First of January, 1878.

Q. What was the cause of your leaving?

A. Mr. Dryer handed me a double check; I says "what be I discharged for"; he says Mr. Halpin, I cannot tell you; I went to see Dr. Gray about it; it was all unawares, and the term that he used — it was a high word — quite a big word — when I went home I looked in the dictionary and found out that it meant something about secrecy.

Q. Meaning that you did not keep the secrets of the institution, or what?

A. Well, the trouble was I went and got married and didn't notify Dr. Gray; it was the rule, I believe, to inform Dr. Gray if any man got married, and I thought it was a queer rule, for one man to tell another of that, and I got married and didn't notify him.

Q. There were times when you had a half-day off?

A. Yes, sir; each month.

Q. That was when you got married?

A. No, sir.

Q. Where were you married?

A. In Utica.

Q. You came down here without permission?

A. I used to have evenings off.

Q. Then you came down to the city one of your evenings off?

A. I used to go down every evening, we would be off two nights a week.

Q. And it was one of the two evenings you were off?

A. Yes, sir.

Q. You came down to the city?

A. Yes, sir.

Q. And while here you got married?

A. Yes, sir.

Q. Did you return to the Asylum that night?

A. Yes, sir.

Q. And on time?

A. Yes, sir.

Q. At ten o'clock?

Q. Left your wife at the city?

A. Yes, sir.

Q. How did they find out you were married?

A. In the paper.

Q. Was there any complaint made against you in the Asylum, of your being intimate with some lady in the city?

A. I don't know of any; it might have been so, but it was never made known to me.

Q. The books of the Asylum show that you were discharged on account of having been charged with the seduction of a girl in the city; do you know any thing about that charge?

A. That is a false charge.

Q. Was there any truth in it?

A. No, sir.

Q. Do you know how such charge came to be on the books of the Asylum?

A. No, sir; no more than I suppose some one reported it to Dr. Gray; he is one of those kind, that if a man goes with a story, he believes them and does not give a chance to explain that it is right or wrong; the only word he give me when I was getting my discharge was — it was some very high word; I looked in the diction-

ary afterward and found it had reference to secrecy; I did not know what it meant then.

Q. Was it clandestinely?

A. No, sir.

Q. You were there three years and seven months; do you think that you were an obedient and faithful servant during that time?

A. I was discharged with a recommend; I got a recommend from Dr. Gray when I called there, so I have not been very bad.

Q. And all they told you was that you were turned away for seduction?

A. He didn't say any thing about seduction to me when I was called there.

Q. Have you got that letter that Dr. Gray gave you?

A. No, sir; I haven't it with me.

Q. Where is it?

A. I applied for another position at Auburn and sent my recommend, with my letter, up to Dr. McDonald in the Auburn prison, and Dr. McDonald was coming this way and went up to the Asylum and got talking to the doctor, Andrews or Dr. Gray, and I never got the recommend back; I never received it back.

Q. In your judgment were you an obedient and faithful servant in the Asylum during the entire time you were there?

A. More so than the general run of them.

Q. I want to know your opinion as to that?

A. I think so; yes, sir.

Q. And you thought you should not have been turned off?

A. I was turned off on illegal charges; nothing was brought against me at all.

Q. And you thought you should not have been turned off?

A. Yes, sir; I did think so.

Q. Now you wrote me a letter; I wanted to ask you about it; now you say you know of a case similar to that of Mr. Hughes?

A. Yes, sir.

Q. What case was that?

A. That man struck in the side — it was very similar to it, I think.

Q. Was there any thing else you think of in regard to this or to the management of that Asylum?

A. Well, as far as Dr. Gray is concerned, I don't think he does his duty; he doesn't come around among the patients to see what is the trouble himself; when a man cannot come more than two or three times a year he cannot tell one case from another; I say, Dr. Gray didn't do his duty.

Q. Is there any other physician attached to that institution that doesn't do his duty, as you think, and if so, name him?

A. No, sir, I don't remember any.

Q. Do you think Dr. Gray was responsible for your discharge?

A. I think somebody was; I think some one brought that story to him out of jealousy, and that was some of the women working for

him attending to the rooms, corridors or something; there is considerable jealousy arises up there among those girls put to work under him; if they don't have their way they come to him with a story.

Q. What has been your business since you left the Asylum?

A. I was foreman on the West Shore road here for the last four years.

Q. What is your business this winter?

A. I am stopping over to home.

Q. Do you know of any immoral conduct as between the males and females of the institution, or as between the attendants of the one department, the male, and the attendants of the female department?

A. No, sir, I never knew of any.

Q. Or of the patients of the male department and those of the female department?

A. All I can tell is what I have heard; I haven't any knowledge about it myself.

Q. Do you know of any other defect in that institution that you have not spoken of?

A. I don't think the managers know what is going on in the institution.

Q. How often did you see the managers there?

A. Not more than twice in a year.

Q. Do you know Senator Campbell?

A. Yes, sir.

Q. How often would you see him on the wards?

A. Not more than once a year.

Q. Did you see Mr. Winston there?

A. No, sir; I guess he was not a manager then.

Q. What other manager did you see on the ward?

A. I cannot tell you; the board of managers went through there, and I think General McQuade was one; I don't think they went through over twice a year, if they did that; I think in the winter season they went through; I don't know whether they did in the summer time.

Q. The board of supervisors went through afterward?

A. Yes, sir.

Q. The Commissioner of Lunacy?

A. Yes, sir.

Q. Did you know him, Mr. Smith?

A. Yes, sir; it was not Mr. Smith in my time; it was Dr. Ordronaux.

By Mr. Howe:

Q. I want to inquire about the method of reporting injuries which were received by patients from attendants when they were struck as you have described. If a patient was struck and received a black

eye, from an attendant, what report, if any, was made to the supervisor or doctors?

A. Well, in case there should one be made —

Q. Was ever any report made?

A. Sometimes there has been such a thing as a patient reporting an attendant for doing it.

Q. What would the patient say?

A. He would say he was struck by such an attendant.

Q. What would then be done?

A. If the patient was very violent and quite insane, if it could be turned off that he was fighting with another patient, it would be done so.

Q. What do you mean by that?

A. For, instance, suppose I struck a patient and gave him a black eye, I would know whether that man was very insane or not and whether I could turn his evidence round, and if I could turn it off and say another patient was fighting with him and he done it, I would.

Q. To whom would you make such representations?

A. To the doctor.

Q. What would you say to the supervisor?

A. Well, he never asked any such questions like that, the supervisor didn't as a rule.

Q. The supervisor himself would make entries in the injury books, would he not?

A. Yes, sir, I should judge they were in these books, but I never saw one.

Q. If the supervisor made an entry to the effect that one patient struck another and received, in consequence, a black eye, where would he get such information from — from the attendant or the patient?

A. From the patient, always.

Q. And if a patient said that an attendant had struck him, would the supervisor make an entry in his book?

A. I don't know as there is a great many made; I would not swear to that; I don't think there is a great many entries like that in the books?

Q. Have you ever seen the books?

A. No, sir, I never have.

Q. What are the customary excuses given for bruised faces, noses and eyes?

A. If it could be turned off that the patient was fighting, he would say it came from that or else in self-defense.

Q. Were they attributed to any other causes or were any other reasons given in regard to these bruises?

A. That is all I know of it; an attendant would be careful not to bruise them; he would punch them in the stomach or kick them in the stomach and make no marks; after an attendant is there a

time he learns the ropes and don't mark the patient unless he is cornered up and cannot help himself.

Q. Would the attendants ever attribute such bruises to any circumstances?

A. Yes, sir; they would say the patient fell; if the patient was hurt bad, that he fell up "agen" the door or something else; or getting him into the bath-tub, any thing like that; of course, the excuse would have to be a proper one; that is, it would have to suit the place or something when the doctor came round.

Q. What do you mean by "suit the place?"

A. For instance, if a man was tied in a chair, it would have to be that another patient struck him; it would not do to say he fell out of the chair, because he is strapped in, and he could not have run against the door.

Q. What would the attendant say to the doctor?

A. The attendant would be called and his word would be taken by the physician and not the patient's.

Q. Would there be any conference or agreement between the attendants, as to what excuses should be given among the attendants on the ward that the man was on?

A. Yes, sir; there would be an agreement.

Q. Do you know of any such conference having taken place?

A. Yes, sir.

Q. Can you refer to any in particular, any special cases?

A. No, sir; I don't know as I can now remember one of them; I know I have had conferences of that kind myself.

Q. What have you said?

A. That the patient got hurt falling into a fit; we would all have to agree in case he would question all three of us about the bruises we would all have the same excuse; it would not do for me to say a patient struck him and another to say he fell against a door, they would have to correspond.

Q. How can you avoid the patients telling the truth about it?

A. Well, their word don't go as far as a sane man's whether they tell the truth or not; as a general thing they tell the truth about it.

Q. Then you had to take your chances?

A. Yes, sir; a man has to take his chances in a place like that to stay any length of time. He would have to swear black is white; the charge they brought up against me was an illegal one, I don't know who could bring it, but they never gave me any notification of it whatever.

Q. Where were these conflicts between patients and attendants most frequently?

A. On the worst wards in the house always.

Q. Please to state the numbers of the wards you refer to?

A. Four, twelve and eight. I never was on eight, but I was on four and twelve.

Q. Did these injuries ever happen to the patients on the quiet wards?

A. Very seldom.

ALBANY, N. Y., *March* 5, 1884.
ROOM B, NEW CAPITOL.

Proceedings continued as follows:

Present — the committee; Mr. S. S. MORGAN and Mr. A. T. GOODWIN, of counsel.

MISS CLARISSA C. LATHROP,

Sworn and examined, testified as follows:

By Mr. HASKELL:

Q. Where do you reside?

A. Brooklyn.

Q. How long have you resided at Brooklyn?

A. Very nearly a year.

Q. Prior to that where did you reside?

A. In New York city, and prior to that in Rochester.

Q. At any time were you an inmate of the State Lunatic Asylum at Utica?

A. I was.

Q. State briefly in regard to your commitment what you desire to?

A. I would rather go on and relate the circumstances from the beginning.

Q. Unless there were any thing in your commitment, in which the Asylum was a party to some wrong, it is hardly necessary to make any long statement about it?

A. The Asylum was a party to it in every particular.

Q. Where were you residing at the time of your incarceration in the Asylum?

A. In Rochester.

Q. Who were you residing with?

A. With my mother and two sisters.

Q. When was it you were committed?

A. It will be four years ago the 19th of October, this coming October, I think.

Q. What was the nature of the process upon which you were sent to the institution?

A. No process whatever.

Q. Were you examined by any physicians?

A. I was not, to my knowledge.

Q. Who went with you to the Asylum?

A. Dr. Neefus.

Q. If there were any legal documents or papers which authorized your being sent to the Asylum, you did not know any thing of it?

A. I knew of nothing, certainly, at the time, because I did not dream that a sane person could be placed in an Asylum.

Q. You claimed that you were perfectly sane?

A. Yes, sir; just as sane as I am at this moment.

Q. Did you not know when you left Rochester to go to the Asylum, where you were going?

A. I did not; I was not told where I was going.

Q. When you came to Utica Asylum, did you come on the Central road from Rochester?

A. In answering these questions, you are omitting some of the most important circumstances, as I consider it; you ought not to omit them.

Q. Did you come from Rochester to Utica by the Central road?

A. I did.

Q. When you got to Utica state what was done?

A. I was put into a carriage, or got into a carriage at the depot.

Q. What time of day?

A. Somewhere between twelve and one o'clock, noon.

Q. And went directly from the depot to the Asylum?

A. I must correct that — it might have been eleven o'clock.

Q. You were driven directly to the Asylum?

A. Yes, sir.

Q. Did you know at the time you got off the cars and into the carriage where you were going?

A. No, sir; not until then.

Q. What was said to you?

A. Nothing.

Q. In regard to where you was going?

A. Nothing whatever.

Q. So that you did not know your destination?

A. No, sir? nothing had been said about my going to an Asylum?

Q. Who did you see when you got to the Asylum?

A. I was taken into the parlor first where I remained for about an hour.

Q. Were you alone?

A. Yes, sir.

Q. Without seeing any of the physicians of the Asylum?

A. Dr. Bloomer may have come to the door but not to have any conversation.

Q. When you got to the Asylum were you informed what it was?

A. I could see it was some kind of an institution.

Q. Who of the officials did you see?

A. I saw Dr. Russell and Dr. Josselyn; they were physicians in charge of the male department.

Q. Did you see Dr. Gray at this time?

A. I did not.

Q. What examination was made of your mental condition at this time?

A. Dr. Russell asked a few questions, but nothing that related to

my mental condition; he asked me about my suspicions; I said I suspected that I had been poisoned, that I had been told so by a lady friend of mine — a Mrs. Greenleaf, congressman Greenleaf's wife, and by the person who had taken care of me, Mrs. Dr. Sanford; he asked me if there was some lady in the case and some gentleman, and I told him there was.

Q. After the physician had talked with you what was done?

A. I requested food, I had had no dinner, and I requested food; I was taken through the first ward and up on to the fourth ward where I was given a lunch of some tea and some dry bread, on the bare table, as I remember.

Q. This physician — Dr. Neefus — he went away leaving you at the institution?

A. He went away and left me there; I was then taken into the matron's room, and asked if I had any jewelry; then I was taken on the second ward.

Q. You knew before Dr. Neefus left, that you were at the Utica Insane Asylum?

A. I supposed I must be at the Asylum; I was not informed of the fact though in any way.

Q. Did you make any objection to being left there?

A. When I found that I was to be left there — when I realized there — that I was to be left among those insane people — I had always had a perfect terror of insane people.

Q. Did you realize that you were to be left there before Dr. Neefus left?

A. I did not know when he left; you know nothing after you are taken into the wards of the Asylum; you know nothing of what is going on in any other ward and certainly not what is going on at the center, as it is called, where people have their exit and entrance to the Asylum.

Q. Which ward were you first placed upon?

A. On the second ward.

Q. How long did you remain there?

A. I remained there six weeks, and at that time I demanded to see Dr. Gray; I saw him once previous to that after I had been there about four weeks.

Q. Was that the time you demanded to see Dr. Gray?

A. I demanded to see him when I had been there about a month; and he came but some gentlemen sent his card up, and Dr. Gray left before I had any opportuniiy to state to him the circumstances of my incarceration. After six weeks time I again demanded to see him. I saw him, and I said "I claim the right to leave this building." I understood he was allowed to keep patients six weeks to ascertain whether they were insane — as a time in which to test their sanity. At the expiration of that time (what I supposed to be the time) I demanded to see him. I said to him, "I claim the right to leave this building"; he said "upon what grounds," and I said "upon the grounds of sanity;" he said, "who placed you here?" and

I said, "Dr. Neefus;" he said "who of your family?" and I said "my sister." She had accompanied me and was in the carriage with me at the depot. He said to me "you can make a statement."

Q. Did she come all the way with you to Utica?

A. No, sir; just to the depot in Rochester. He said "write a statement of your case," and then I wrote my claims to sanity.

Q. And gave them to Dr. Gray?

A. I directed them; he said "for your family"; I wrote them for Dr. Gray, and sent them to Dr. Gray first, in order that he might read the statement before it was sent to my family; I gave it to one of the doctors for Dr. Gray.

Q. Do you recollect which doctor you gave it to?

A. Dr. Bloomer, I think.

Q. When you first entered the institution, which—

A. Then I was sent on to the first ward after writing my claims to sanity; that very night I was placed on the first ward.

Q. During the six weeks you were on the second ward, which of the physicians had charge of the female department?

A. Doctor Brush and Doctor Bloomer; they visited the ward almost every day.

Q. And Doctor Gray, you did not see at all you say, except when you sent for him at the end of the four weeks, or at the end of the six weeks?

A. Yes, sir; that was the only time I saw Doctor Gray.

Q. During the six weeks you were on the second ward, did you notice any ill treatment of patients by attendants, or otherwise?

A. I had so much confidence at that time in the physicians of the Asylum that they would do what was right, even in my case, and I was so ignorant as to insanity and was suffering so much myself, anxiety and other causes by being placed there, that I remained in my own room and avoided going on to the ward because I was afraid of the patients, and I remained in my own room all the time.

Q. Then would your answer to the question be that you did not see or notice any unkind treatment of the patients by the attendants during the six weeks you were on that ward?

A. I cannot say; I was so ignorant in regard to the treatment of insane people that if I saw anything, that I might afterwards have thought was cruelty, I might then have thought was a necessity by reason of the condition of the patients; I saw things at times that I did not consider were right.

Q. You were transferred to the first ward at the end of six weeks; how long did you remain on the first ward?

A. I remained there until February, 1881.

Q. And about what time was it you went on the first ward?

A. I have been there about six weeks.

Q. So that it was some time in November that you were transferred on to the first ward?

A. Yes, sir; in November.

Q. You remained from some time in November until February?

A. It was nearly the first of February when I was transferred on to the first ward.

Q. Who has charge of the first ward?

A. The supervisor, Miss Jenny Morris.

Q. How often did you see Doctor Gray on the first ward while you were on there?

A. I saw him about two days after I was placed upon the ward; I had then prepared a paper for him stating my grounds of suspicion that he might not think that I had any unjust suspicions in regard to being poisoned, and the statement in regard to it was sent to him; he passed through the hall with a gentleman, showing him the building, and I insisted upon speaking to him and handed him this paper, and he said to me upon that occasion, "you were placed here on the certificate of two physicians," and he turned round on his heel and left me there; those were the last words he spoke to me on that ward.

Q. Did you see him on the ward after that?

A. I did not see him again to speak to him until he passed through with the Senate investigating committee when they passed through the wards; I am positive as to that; he may have passed through at another time, but I do not recollect seeing him again except with the Senate investigating committee.

Q. His first ward, as you understand it, is where convalescent cases of insanity are placed?

A. During the time I spent there there were few, if any, insane patients on the first ward.

Q. While you were on that ward, was there any thing in regard to the treatment or care of the patients that you desire to call our attention to?

A. There was.

Q. If so, state it?

A. There was neglect of the sick.

Q. By whom?

A. By the physicians, I should say, because I placed the responsibility upon the physicians in regard to the care of the patients.

Q. Upon which physicians?

A. All the physicians in charge — Dr. Bloomer, Dr. Brush, and Dr. Gray, pre-eminently.

Q. In what particular respect were the sick neglected?

A. No care, or very little care; there were some cases where they received some care, but in many cases they would have been neglected entirely if it had not been for the other patients taking care of them.

Q. Is there any thing else in regard to the care of the patients on that ward that you desire to call our attention to by the attendants or otherwise?

A. I could call your attention to some cases that came under my direct observation, but some of them are of such a nature that I should rather hesitate to make them; one matter, about which I

wish to make complaint, is in regard to the use of improper vaccine matter; I spoke of that last year; I had every reason to think that improper vaccine was used.

Q. Do you mean impure virus?

A. Yes, sir.

Q. In vaccinating the patients?

A. Yes, sir; in a majority of cases every one I saw that was vaccinated had considerable inflammation of the arm, and in one case the patient lost the use of her hand and arm almost entirely; the cords were drawn up and contracted; she had not recovered it when I left there; I know nothing further in regard to her now; there are some other matters, and one special case, that I am not willing to state while there is a reporter for Dr. Gray present (indicating Mr. Goodwin), because the patients it concerns may be in the building at the present time.

Mr. Goodwin — I will retire, if the committee think I had better do so.

The Chairman —Perhaps you had better for a short time.

[Mr. Goodwin then retired.]

The Witness — I know so much about how Dr. Gray gets hold of this testimony, and I would rather make a statement and not have it taken down to get to him.

The witness then made an informal statement to the committee, who questioned her in regard to what matters they might consider proper to take her testimony upon.

Adjourned until to-morrow afternoon at three o'clock.

THURSDAY, *March* 6, 4 P. M.

Present — Messrs HOWE, HASKELL, RICE and BROWN, of committee. Messrs. S. S. MORGAN and A. T. GOODWIN, of counsel.

Proceedings continued as follows:

Miss LATHROP,

Recalled:

Examination continued by Mr. MORGAN:

Q. In reference to the vaccination of patients; all the means you had, I suppose, of knowing or believing that it was improperly done, or impure virus was used, was the results as they appeared upon the arms of patients?

A. That was all.

Q. State any other mismanagement of the institution that has come under your knowledge?

A. I object to the system of management.

Q. What part of it?

A. The system of punishments that came under my direct observation; the moving of patients from the ward as a means of punishment.

Q. A punishment for what offenses?

A. In my case, for attempting to send out a letter and refusing to perform certain labor.

Q. From what ward were you taken?

A. From the first ward to the second ward.

Q. You were transferred from the first ward to the second as a punishment for attempting to send out a letter?

A. Yes, sir.

Q. Do you know of any other patients that were transferred from one ward to another as a punishment?

A. I do in repeated cases; one lady was removed from a ward for refusing to go out on to the lawn; she was removed from the first ward to the fourth; and another lady was removed to the seventh for hysteria, and her condition was such that it seemed to me particularly dreadful to move her.

Q. What was her offense?

A. She had hysteria.

Q. Do you think of any other case?

A. I could think of different cases if I put my mind on that; but so many patients have come and gone that I cannot put my mind on them.

Q. What other punishment do you know of being inflicted for what was regarded as a disobedience of the rules?

A. Giving medicine as a punishment.

Q. For what particular offense would they give medicine as a punishment?

A. In my case for writing a letter to Dr. Gray demanding my release, and entreating him to help me and give me my freedom.

Q. What response did you get to that letter?

A. Medicine.

Q. Who gave it to you?

A. It was sent on a tray as it always is; it was sent up there each day.

Q. Did you refuse to take the medicine, or did you take it?

A. I pretended to take it, but I threw it away.

Q. What evidence had you that medicine was sent as a punishment for your writing the letter?

A. It might be called an answer to my letter; it was the only answer I received.

Q. Had you been taking medicine just previous to that?

A. No, sir, I had not been taking medicine; there was no occasion for my taking medicine.

Q. Had you been taking medicine before they sent the medicine which you regarded as a punishment?

A. When I first went there, the first night I was there, I took one dose of chloral.

By Mr. RICE:

Q. The question is whether at this time, and for a week or two previous, you had been taking any medicine?

A. Not at all; there was no occasion for it.

Q. Did you taste the medicine so as to get an idea of what it was?

A. Yes, I could tell, it was sweet some of the time, and then sometimes it would be a little bitter; I would taste enough to find out the nature of it, and I would say, "it is not quite so bitter," or "it is sweet to-day," and I would throw it away into a cup that I had with me; I threw it away for four days; that was just previous to the Senate investigating committee visiting the Asylum.

Q. Did you know of their inflicting punishments upon any other ladies in the Asylum?

A. I knew a lady who had some altercation with the doctor, and had medicine sent to her that night; another patient wrote a letter to Dr. Gray and he sent her up eight large pills, as large — well, very large pills; she had not been taking medicine before; I understood that; I did not see her take it.

Q. If you wrote to Dr. Gray did he answer your letter by letter or in person?

A. Neither.

Q. State any other abuses that occurred there while you were there?

A. The system of keeping patients there after they are cured.

Q. Can you give the names of any patients who were kept there after they had recovered?

A. Miss R.; she was not insane, but she had acquired a habit of taking opium, but she was insane when I left the building; she was there about a year or two, and her mind was just as clear as anyone's up to that time; I believe she resided in Albany.

Q. Did you talk with Miss R.?

A. I was on the ward with her a great portion of the time; she was bright and intelligent; I saw her every day.

Q. Were you ever able to discover any signs of insanity in her?

A. Nothing whatever, until previous to my leaving the Asylum; when she had been there two years she became insane; but she never had been until that time.

Q. Do you know what was the immediate cause of her becoming insane?

A. In my opinion it resulted from the treatment she received.

Q. What was the treatment that caused you to so believe it resulted in insanity in her case, that you know of yourself, not what she told you?

A. Her detention there, whereas if she had been released and in her own room, she might have recovered by being kept under proper medical treatment.

Q. Is there any other case which comes to your mind of ill-treatment or mismanagement?

A. I object to the enforced labor; there were not many extreme cases came under my personal observation.

Q. State only what did come to your knowledge?

A. I saw the effects of enforced labor; I did not happen to be on the ward when the patient was forced to do the labor, but I saw the condition of the patient; one case — I cannot recollect the name — was that of a lawyer's wife who had been brought up in luxury, and had never been accustomed to any kind of labor; she was obliged to go to the mangle day after day, when she had a weakness — a very serious female weakness — that she should have not been allowed even to stand upon her feet; her condition became such that her mind is a complete wreck; she went right down, and that was her condition; I saw her almost every day.

Q. Did you see her at the mangle?

A. I never went to the ironing-room to see her working, but was repeatedly told she was there.

A. Did she tell you so herself?

A. She may have told me so herself; I could not say positively; I can find plenty of witnesses who have seen her there at the mangle.

Q. You have in your lifetime seen women who were laboring under the difficulty of female weakness?

A. I have.

Q. And have you seen the results of their working beyond their ability?

A. I have, repeatedly.

Q. What do you say as to her condition compared with persons whom you had sden under like circumstances?

A. It was the same; her condition was aggravated.

Q. And you think her condition was the result of such labor?

A. Yes, sir; that is what I attributed it to.

Q. Any other case you can mention that came under your observation?

A. That of a lady who was compelled to iron a dozen shirts every day; she had not been accustomed to labor.

Q. Do you know her name?

A. I have been trying since last night to think of her name; I cannot recollect; she had several children, and became so anxious about them that she became insane, and I doubt whether she ever recovers her mind; it was caused by anxiety on account of her husband's sickness; they would not allow her to go to him, and she was detained there until her mind became affected.

Q. You think the labor imposed upon her of ironing a dozen shirts was too much for her strength?

A. Yes, sir.

Q. Did you see her ironing the shirts?

A. I did not go to the ironing-room; I refused to go there; I said I never had been accustomed to do work of that kind, and did not propose to do it.

Q. Did they ask you to?

A. Yes, sir, they did; and Dr. Bloomer threatened to send any patient off the ward who did not perform the work.

Q. Were you at any time sent off the ward because you refused to work?

A. I was not, because the attendants did not require it of me; I never thought of such a thing as doing any work, but after that I did do a little something on the ward, because I did not want to be taken off the ward.

Q. What ward was this lawyer's wife on?

A. She was on different wards; she entered on the second ward—this lady that ironed shirts was on the first ward, it was the lawyer's wife who had the mangling to do and she was on the second ward.

Q. What doctors had charge of your ward when you went into the Asylum?

A. Dr. Brush and Dr. Bloomer.

Q. How often did they visit your ward?

A. Once or twice every day.

Q. What would they usually do when they visited the wards?

A. They would speak to almost all the patients on the ward; Dr. Bloomer, I will say, usually visited the ward every day, and Dr. Brush not so often.

Q. Did you see any neglects on the part of the doctors in examining into the condition of the patients?

A. On some cases.

Q. Can you name a case where the doctor neglected his duty toward any patient?

A. I had in my mind a patient or patients who did not have medicine sent at the time they should have had, when they wanted relief and could not get any, when a simple little remedy would have given relief, but it was required at once, they could not have it until the doctor came on the ward; for instance some hot drink; I have known cases where they have suffered a long time when they might have been relieved in a few moments if it had been brought to them by an attendant when they were in pain and needed it.

Q. Do you know of any case where the patient was taken sick and called for medicine?

A. Yes, sir.

Q. What was done in that case?

A. Sometimes it was not sent.

Q. Suppose a patient was taken sick, who would the patient make complaint to?

A. To the attendant, and the attendant would report to the doctor or the supervisor, and the supervisor to the doctor.

Q. What did the doctor do?

A. As he saw fit.

Q. Was it customary for the doctor to come on to the ward then and see that patient or send medicine?

A. Sometimes he would send medicine; it was sent up on a tray; the attendants usually go for the medicine and bring it in.

Q. You have spoken of a tray, what about that?

A. The medicines were brought up on a tray and the patients would go and get their medicines; the names of the patients for whom the medicine was intended, would be outside on each cup.

Q. So that the patient would come up and find her name on the cup, and would take that medicine?

A. Yes, sir.

Q. How often was the medicine sent up in that way?

A. Three or four times a day and once at night.

Q. Do you object to that manner of giving medicine?

A. Not at all; when I first went to the Asylum what shocked me more than any thing else was seeing in the supervisor's room large bottles of medicine, some of them quart bottles containing medicines which the attendants dealt out to the patients as they chose; I considered it was the function of the physicians to send the medicine and measure it out; some of them were powerful remedies and ought not to have been allowed to be given out at the discretion of an attendant.

Q. The attendants are not professional people?

A. No, sir.

Q. Was there, to your knowledge, in the female department any female physicians?

A. No, sir; the physicians are all men.

Q. Have you ever had any experience with a female physician?

A. I have, if an electrician might be called a physician.

Q. Was Dr. Pilgrim there when you were there?

A. I was introduced to him; an English physician took Dr. Brush's place temporarily, at one time.

Q, Are there any other abuses that came under your personal knowledge?

A. Withholding letters from friends, in my own case particularly.

Q. What evidence had you that a letter had been written?

A. I mean letters sent out to friends; I sent some letters and they told me that my letters could not go all over the country; Dr. Bloomer told me that; he said he did not send those letters, but he did not say what he had done with them.

Q. Did you ask him to return them to you?

A. I did not.

Q. What other abuses can you state about in your own case?

A. I considered my detention there an abuse.

Q. What further?

A. If you wish me to make a statement?

Q. Any statement you want to make in reference to abuses, and you are to be the judge yourself as to whether you desire to state any thing further?

A. Do I understand that you wish me to speak of all the simple abuse that I received, or do you wish me to go on and state my experience from the first?

Q. Your personal experience, any thing; if you wish to state any abuse that you were subjected to, state it; if you do not want to state it the committee will not require you to, and you must be the judge?

A. The greatest abuse I received I should only be willing to make under the hope and belief that lady physicians might be employed upon the female wards — and that drugs and anœsthetics should not be used for immoral purposes.

Q. If you desire to state what occurred at the Asylum in your own case you may state it, and if you do not desire to state it you need not, and you may be the judge whether you will state it or not?

A. I do not *desire* to; I am not desirious of making any such statement, but at the same time I am willing to sacrifice my own feeling and make the statement if there is a possibility that any good may result from it to others; I would state as the greatest abuse existing in the Utica Asylum to use of anæsthetics for immoral purposes.

Q. State to the committee what evidence you have in your own case that such practice is resorted to?

A. The first occasion was after I had been there in the Asylum six months, I awoke one night with a feeling of suffocation and saw that the door of my room was partially open and that some one was standing in the door; I was alarmed for a moment, I thought it might be an excuse or pretext for the purpose of giving me some

medicine; I thought I might have made some sound and that the night watch had come to my room to see what it was; I said, "it is nothing but the nightmare;" the door was left open for a moment; I could not see who it was, and afterward it was closed; my condition was such the next morning that I knew what the effect produced upon me — that is, the cause, could only be an immoral — that there could be only one cause for my condition; I thought at first that I had neuralgia, I was so lame; I asked the night watch if she had come to my room the night before; she said, "no, she had not;" after that I was transferred to the first ward.

Q. Were you transferred that next day?

A. No, sir, a week or two afterward.

Q On that day, state what, if any thing, occurred between you and one of the physicians?

A. Dr. Bloomer inquired how I was; I said "very well;" he asked, "are you feeling very well?" and I said, "very well;" I was transferred a few days after to the first ward; just a month from that time, the time my room was first entered, I awoke in the same way —

By Mr. Rice:

Q. Before proceeding further, I would like to ask you a few questions. What was your condition the next day after this occasion you saw the person in your door; what was your condition?

A. You will have to ask me in a different way.

Q. Was your clothing soiled in any way?

A. It was; there was some blood on my night dress.

Q. What portion of your night dress?

A. The lower portion.

By Mr. Morgan:

Q. What other evidence had you that improper liberties had been taken with you?

A. You will have to ask that question in a different way.

Q. Were you lame?

A. I was.

Q Through what part of your person?

A. My hips and limbs — lower limbs.

Q. Were there any other evidences you can name which led you to believe that improper liberties had been taken with your person?

Mr. Rice — Mr. Morgan, permit me to ask the witness a few more questions.

By Mr. Rice:

Q. At what time did you go to bed that night?

A. Eight o'clock.

Q. Was it your custom to lock your door?

A. The doors were locked upon us; we were locked in.

Q. Do you remember whether your door was locked that night?

A. Yes, sir, it was; I always took particular pains to see if it was locked, because I felt more secure when my door was locked.

Q. You fell asleep?

A. Yes, sir; I always slept well.

Q. What clothing did you have on when you went to bed?

A. A night dress.

Q. You went to sleep, did you?

A. I did.

Q. Now after falling asleep, when were you first conscious again?

A. Not until I got up in the morning.

Q. What was your first sensation in the morning?

A. Pain in my hips and I was trembling.

Q. Did you wake up conscious of that fact?

A. No, sir; not until I got up.

Q. I understand you to say that there was a feeling of suffocation?

A. That was when I woke and found some one standing in my door.

Q. Can you describe that any more than to say it was a feeling of suffocation?

A. Not in any other way; I had a feeling of suffocation.

Q. Inability to breathe was it?

A. I reached and shoved up the window a little further; I could shove up the window from the bed.

Q. Did you soon reeover from that feeling?

A. I soon recovered from it.

Q. And when you moved you experienced pain, did you? A. I did; pain and trembling.

Q. Did you make any examination then of your person?

A. Yes, sir; it became apparent to me — the condition of my person became apparent to me; I was too ignorant in regard to such matters, and too unwilling to believe any such thing to take the safe guard I should have taken in pushing my bed against the door; in fact I could not do so on the ward I was then on; I was transferred two or three weeks after on to the first ward and about a month from that time my room was entered the second time and I awoke with the same feeling of suffocation.

Q. Before going from this I want to have you detail this so specifically that there can be no doubt left about it as to what occurred there, because if we go to any extent short of the full extent of an examination of you the public will be skeptical; although I know it is a very delicate matter, I must ask you to state more particularly in answer to my questions; state whether or not your person was lacerated?

A. It was.

Q. To what extent was your clothing soiled with blood?

A. Not very much.

Q. Did you call the attention of any person to your condition?

A. I spoke of being lame.
Q. To whom?
A. To an attendant and to one or two patients.
Q. Did you suggest to them any reason for your lameness?
A. I said it might be neuralgia.
Y. You did not state to them what you believed to be the true cause of it?
A. No, indeed.
Q. And you never called the attention of any person to the condition of your clothing?
A. I did after I went on to the first ward, but not that day.
Q. That is to say nobody made a personal examination of your person?
A. No, indeed.
Q. How soon after waking did you realize the fact that your person had been outraged?
A. Not until I got out of bed.
Q. Did you immediately then?
A. Very soon.
Q. What other, if any, stains were upon your clothing; were there any other?
A. Not that I recollect of.
Q. Nothing but the blood stains?
A. I do no recollect seeing any other.
Q. For how long did the soreness continue?
A. Not more than that day.
Q. What reason would you give us for not having made complaint of this outrage?
A. I was afraid to; who could I complain to?
Q. Why did you not call the attention of the attendants to your condition?
A. I did not dare to.
Q. Why did you not go to the matron and make complaint?
A. I seldom saw the matron, and never had more than three consersations with her, and that was after I had been there several months — almost a year; when I left the building she came and accompanied me to Albany; I may have seen her half a dozen times; I simply asked her to buy articles for me but had no conversation; when she came on the ward, which was very rarely, I might have a few words with her, perhaps.
Q. How often did she come on to the ward?
A. She would hurry through the wards sometimes on an errand; sometimes go through once a week, and poss ibly oftener.
Q. Had she any habit of making regular visits to the ward?
A. Not at all.
Q. Did you know who it was at the door?
A. I could not say; I simply saw a person standing at the door with a lantern.
Q. Was it a male or female figure?
A. I could not distinguish whether it was a male or female.

By the CHAIRMAN:

Q. What time in the year was this?

A. After I had been at the Asylum six months.

Q. What hour in the morning was it that you were first awakened?

A. I could not tell the hour; I saw this person or figure standing at the door; I said, "it was nothing but the night-mare;" I had had a dream as I supposed; I thought that two locomotives suddenly came into contact with each other, and I waked up at that moment; I thought I might possibly have said something that had awakened the night watch, and so I said, "it is nothing; it was only the night-mare."

Q. Who did you suppose the person at the door to be?

A. The night watch.

Q. When did you first regain consciousness after falling asleep that night?

A. When I awoke with this feeling of suffocation.

Q. That was not in the morning?

A. No, sir; that was when I saw the person at the door; I heard the door closed and locked, and then I opened the window to relieve that feeling of suffocation.

Q. You have no idea of the hour?

A. No, sir; not the slightest.

Q. Did you again fall to sleep?

A. Yes, sir.

Q. And then this matter occurred which you have detailed?

A. Yes, sir.

By Mr. HASKELL:

Q. Who locked those doors at night?

A. The attendants.

Q. Do you know how your door could be opened?

A. By turning the key in the lock; the keys were taken out of the doors at night; there were thirty doors and one key unlocked them; each attendant had a key to the doors, and one of the doctors, I think, had a key.

Q. And the same key locked all the doors of the ward?

A. Yes, sir.

Q. Did your clothing go to the wash?

A. I suppose it must have; they generally took it.

Q. Do you know whether it excited any comment or remark?

A. I certainly could not say; I never thought any thing more of my clothing until it came back from the wash.

Q. After that night what was your course in reference to attempting to protect yourself?

A. I could not push my bed against the door on that ward very conveniently, and although I kept thinking of this all the time, I was so ignorant in regard to such matters, that although I felt, I

knew that my condition was different from what it had ever been before, I did not push my bed against the door until I went on to the first ward where I could do so easily; I am positive my room was not entered again until a month from that time, when I awoke again with the same feeling of suffocation, and I heard the key turn in the lock of the door; I got up and opened my window which had been closed, and after that time no doubt existed in my mind on the second occasion.

By Mr. Morgan:

Q. On that second occasion was your bed against the door?

A. No, sir, it was not against the door, I did not push it against the door because I was so ignorant myself about such matters that I could not believe such a thing would happen.

Q. Describe the sensation of the second occasion and what you discovered?

A. I was so lame that I could scarcely stand, and I trembled so that I could hardly walk across the floor.

Q. Was there evidence upon your clothing?

A. Nothing I can specify; from that time I pushed my bed against the door; my reason for not speaking of this to any patient or attendant or any one in authority was my extreme terror; I had had enough experience to know that if it was known that I was aware of the — of what had occurred — that I would be subjected to a certain persecution, at least, and I could easily be taken off the ward; and I knew that if I was moved on to the back ward, I would have no means whatever of protecting myself; the beds are screwed to the floor on the back ward, and it was a matter of life or death with me to keep my own counsel, I felt, and I did so; I wrote a letter to my brother, or attempted to get out a letter to my brother, whether it reached him or not I cannot state, in the July following, begging him — stating the facts as I have stated them now, and begging him and entreating him to come to my assistance.

Q. Was that second occurrence in the winter?

A. It was in April, I think it was the last of March or the first of April; it was difficult for me to say, for I had no calendar at that time, but it was about that time.

Q. Was there any other evidence except that you were very lame the next morning, and the fact that you felt the suffocation; any other evidence you had that improper liberties had been taken with your person?

A. The condition of my person, but that is all.

Q. Did any thing occur between that and July?

A. Nothing occurred after that; I was careful to put my bed against the door, and I removed it before the doors were unlocked, that the attendants or no one should discover publicly that I pushed my bed against the door, because if an attendant had found my bed against the door she would have reported it to the doctor and the

doctor would have made an excuse for sending me off of the ward on that account.

Q. The reason you give for not making a disclosure is that you feared punishment in some way if you made a disclosure?

A. Certainly; I was afraid I should not be able to protect myself in any way.

Q. Was there a third occasion?

A. Yes, sir; six months after — excuse me, allow me to change that; it was a year from that time; I had pushed my bed against the door over night; it was a year I said — it was almost a year; it was the last of January or the first of February; the mornings were very dark; I had made a mistake in the time, and had pushed my bed back too early in the morning, and my room was entered a third time; I had been in the habit of putting a little stool against the door; after I pushed my bed back from the door, I found that stool shoved back against the wall; and that was proof to me that my room had been entered, with other proofs that satisfied me; that was the last time my room was entered.

Q. What were those proofs?

A. They were very similar to the second time, lameness and trembling and the condition.

Q. When was it you wrote to your brother?

A. I wrote to my brother in July, 1881; I succeeded in sending out a letter at that time; I wrote to my brother at once, but did not succeed in getting the letter out until July, although I had been on the constant look out for opportunities.

Q. How did you send then it out?

A. I sent it out through a patient; whether or not that person mailed it, I cannot say; I had no stamp, and no means of getting a stamp.

Q. Do you know whether or not you brother received it?

A. That I cannot state.

Q. Did you ever ask your brother if he received it?

A. After I left the Asylum I wrote him a second letter; in my first letter I described my last experiences, after my room was entered the third time, and I told him that I was liable at any time, in case my letter was detected, to be sent off of the ward as a punishment, and be sent where I could not set my bed against the door; that I was at the mercy of the doctors then, and would have no means of self-protection, and that then I certainly should kill myself; I begged and entreated him to help me; and I would do that same thing this moment if I were again placed in the same position; I could not endure it.

By the CHAIRMAN:

Q. Did you receive any answer from your brother?

A. No, sir; after I left the Asylum I wrote to him and asked him if he received those letters; he was unwilling to make any

statement in regard to any letters; I have written to him, but I have never seen him since; he lives in New Orleans.

Q. What reason did he give?

A. He said I was seeking notoriety in coming to Albany and making my case known, that Mrs. Lincoln had made her case known and no good resulted from it, and that others had done the same, and that I was only trying to aggravate family difficulties by asking him for letters or even wishing to receive information.

Q. Were you on friendly terms with your brother?

A. Yes, sir.

Q. Are you on friendly terms with him now?

A. Yes, sir; in a way.

Q. What is your brother's name?

A. George T. Lathrop.

Q. Where does he live?

A. New Orleans, 15 Common street; he has a book store.

Q. How long is it since you have seen your brother?

A. It is almost four years.

Q. That was before you went to the Asylum?

A. Yes, sir.

By Mr. MORGAN:

Q. Is there any other evidence you can give us that your person was violated except such as you have stated?

A. No, sir.

Q. Can you give us any evidence that will enable us to corroborate your evidence upon this fact?

A. I do not know how I can any further.

Q. Did you make it known?

A. I made it known to one of the patients at the Asylum; I went to her to ask her something to satisfy myself fully that that was the cause of my condition.

Q. Is that lady living now?

A. She is living.

Q. Are you willing to give her name?

A. Her name was H. H.; Mrs. H., and her residence is at Elmira.

Q. Is she now in the Asylum?

A. She was released about two months before I left; I cannot say where she is at the present time, of course; I have not corresponded with her; her husband is a farmer, I believe, and lives just out of Elmira; her son's name is H. L.; he is T. A. at Elmira

By the CHAIRMAN:

Q. Did you mention these circumstances to any other person in the Asylum?

A. No one else.

Q. Do you know of any other circumstances as to any other person?

A. Except those I gave yesterday; there was the case of the young lady I took care of on two occasions.

Q. What was her name?

A. I would prefer not to give it as she is still in the Asylum.

Q. Did you see her directly after the occurrence complained of?

A. I took care of her at the time of her sickness.

Q. What was the nature of her sickness?

A. It was flowing and vomiting.

Q. What was it caused by?

A. I judged that it was caused by the same experience that I had had.

By Mr. MORGAN:

Q. You thought she was pregnant, did you?

A. I thought she had been.

Q. Do you mean to say that you regarded her sickness as the result of a miscarriage?

A. I did, or something of that nature.

Q. What led you to so believe; did you converse with any one else about it, I mean?

A. I may have mentioned it to Mrs. H., possibly; but I was not in the habit of speaking of such things; when I went to her room there were attendants taking care of her, and I was pushed out of the room; the door was shut right in my face; I object to giving her name, because she is there now.

By Mr. RICE:

Q. Do you think it would make any difference in her treatmen there at the Asylum?

A. It might make some difference in her treatment; I will give the name to Mr. Morgan, the counsel, but not to go in print; I will give it with the understanding that it is not to be published or given to the Asylum authorities.

Chairman HOWE — Will you guarantee, Mr. Goodwin, that the name shall not be made public by the Asylum authorities, if Miss Lathrop gives it?

Mr. GOODWIN — I don't know that that can be promised; this is a serious charge, and possibly we may have to call the very person she refers to as a witness; I will not publish the name, myself.

The WITNESS — It was a Miss ——— of ———.

Q. Now state what you observed in regard to her?

A. The first occasion was her sudden sickness, vomiting and flowing, after a cessation of three months.

Q. Of the usual menstrual periods?

A. Yes.

Q. How do you know that?

A. Because I was very much interested in her; hoping that her condition of mind would improve; at the time of her periodical sickness she would have spasms of epilepsy; knowing that fact we both used to look after that time knowing that she would have such a time, and she spoke about it, called my attention to it; I was not in the habit of talking to patients or attendants about such matters; I noticed the cessation myself.

Q. And this was the fourth month?

A. No, sir; the third, three months.

Q. How do you know that this was not an unusual menstrual discharge?

A. I will tell you; there was no one there to do us a favor, some one had to remove the cloths after they were wrapped in paper, and I did it repeatedly for her, there was no one else to do it.

Q. How long did this vomiting and flowing keep up?

A. For some time; I should say the vomiting and flowing about an hour, possibly longer, I could not specify the time, it may have been two or three hours.

Q. What caused her sickness in your opinion -- was it a miscarriage — is that what you would have us infer?

A. This singular sickness and flowing, which I know was unusual, continued about ten days or two weeks time.

Q. Do you know whether the doctors were notified of her condition?

A. The doctor came on to the ward, and I suppose he was notified.

Q. Do you know what he said in regard to it?

A. I have no means of knowing what he said.

Q. What doctor was it?

A. I cannot say, either Dr. Brush or Dr. Bloomer, it was one or the other who attended her, I cannot specify.

Q. Was there any thing except your observation of these circumstances that led you to believe it was a miscarriage?

A. The second time one of the attendants asked me if I saw what passed from her, I told her no.

Q. Do you know the name of that attendant?

A. Miss Morris, she is supervisor of that ward; I think she is conscientious, but I do not think she would implicate herself, although, as I said yesterday, I would not consider Miss Morris implicated, except that she simply took care of her.

Q. Did Miss —— herself understand her condition?

A. She gave me the idea that she did; she told me it was really true, but I pretended not to believe it, she says "really and truly it is so, I am so bloated."

Q. Was this on the second occasion?

A. Yes, sir; and a few days after she said she was going to speak to the doctor; I attributed her second sickness to the same cause.

Q. And you believed it was a miscarriage?

A. In my judgment it was.

Q. State whether she said any thing about it which led you to believe that was her condition?

A. I never allowed her to speak to me on the subject; I never asked her questions — I was afraid that — I was afraid that she would fully realize, and I was afraid that she might suffer from it.

Q. Did she not speak to you about it?

A. I would not allow her to talk about it; she asked me questions if the night watch came to my room at night, and she asked me also if I had ever taken ether.

Q. What did you reply?

A. I told her — I gave her an evasive answer.

Q. Did she say any thing else to you about ether?

A. Nothing further.

Q. What did you suppose she meant?

A. She was inclined to speak upon the subject, but I avoided it.

Q. Did you think her mind had a tendency to dwell upon the subject?

A. No, sir; not at all, we never spoke of such things.

Q. Had she alluded to such subjects at all before that occurrence?

A. No, sir; never, not at all.

Q. How many months' cessation was there on the second occasion?

A. Three months.

Q. Were they both three months?

A. About that time.

Q. How long a time elapsed between the first and second time?

A. I should think about six or eight months.

Q. Was there any thing said about seeing the doctor about her condition?

A. No, indeed.

Q. No complaint made?

A. No, sir; that would be the most ungenerous thing I could do, for her sake as well as my own.

Q. Why did you not ask to see Dr. Gray?

A. I had no confidence whatever in Dr. Gray; I had asked to see him on other occasions and had been refused.

Q. Why did you not ask to see the matron?

A. I could not see any object in seeing her; I never considered that she had any thing whatever to do with the patients.

Q. Were any other attendants present but Miss Morris on any such occasion?

A. Miss Morris, and Miss Roscoe — she is dead.

Q. Was the matron present on either of these occasions?

A. No, sir.

Q. Were any doctors present with the attendants?

A. No, sir.

Q. Do you say that both of these occurrences took place in the presence of attendants and without doctors?

A. Yes, sir.

Q. Were they in the day time or during the night time?

A. In the day time.

Q. Can you refer to any other cases?

A. I can give briefly another case of two sicknesses exactly similar to that of —— ——; there was Mrs. T., she ought to have been in her home to-day; I thought Mrs. T. would not live through it.

Q. You think her sickness was from the same cause?

A. They were exactly alike; I never heard of any such cases before, so long continued as those cases were.

Q. Can you give us the names of any other persons who had knowledge of this at the time, that we can call to corroborate your testimony?

A. The attendants on the ward could, but I do not think you will get any kind of testimony from them.

Q. In the case of Mrs. T., what attendants were present?

A. Miss Morris was upon the ward.

Q. Any other attendant?

A. I could not say.

Q. What doctors were present?

A. No doctors were present.

Q. Were any of the doctors informed of it?

A. They were informed of her sickness, I suppose, but no one said any thing about the cause of her sickness.

Q. What knowledge did you have; did she speak to you or to the attendants in your hearing about it?

A. Everybody on the ward knew of her sickness, she vomited almost half a day constantly.

By Mr. Haskell:

Q. When was the first time that Mrs. T. was sick, as you have described?

A. The first time Mrs. T. was sick was during the first year I was in the Asylum, while I was on the second ward.

Q. What attendants took care of her during her sickness?

A. Mrs. Sterling, I think, and a Miss Davis.

Q. Who took care of her particularly, I mean?

A. Those two, I think.

Q. And the second time that she was sick, who was it that took care of her, what attendants?

A. Miss Morris, and I could not say what other attendants on the ward.

Q. When did the second occasion occur; in what year was it?

A. The second year I was there, not very long before I left; there was a case that I mentioned yesterday to Mr. Morgan of a young girl sixteen years old whose room was full of ether, so full that it was noticeable to any one passing the door; that was on the first ward during the last year that I was there.

Q. Now, as to your own case, when you woke up with this sense of suffocation, did you discover the smell of any drug?

A. I did not discover it; there was this, however; the next day one of the patients spoke to me about there being perfumery round me; I did not discover any thing particularly myself, that is, not to think what it was.

Q. Did you, on any occasion when your room had been entered, detect the smell of drugs?

A. My room was full of ether on one occasion; it was noticeable to any one passing the door.

Q. Did you notice it yourself?

A. Certainly.

Q. Now, to whom was the first person that you ever mentioned the fact of these occurrences, and when was it?

A. It was to Mrs. H.

Q. After that, to whom?

A. To my brother, by letter, on two occasions.

Q. To whom did you talk when you left the building, if any one?

A. I did.

Q. To whom?

A. My cousin, a young lady; that was immediately after I left; she communicated it to her brother; I also told my sister, Helen C. Lathrop; I told her on the occasion of her first visit to me at the Asylum, nine months after my incarceration, and begged her to take me away; I told her all of these circumstances, and she can prove that fact if she chooses.

Q. What did she say?

A. She did not say any thing.

Q. What did she do?

A. Nothing.

Q. Did she not speak to Doctor Gray?

A. I have no reason to think she did; I have only seen her but once since then.

Q. Where is your sister now?

A. In Rochester.

Q. Do you know her address?

A. Yes, sir; number — —— street.

By Mr. Rice:

Q. Is she the sister who accompanied you to the depot, as you stated yesterday?

A. Yes, sir.

By Mr. Haskell:

Q. Were you examined before the committee last year?

A. Yes, sir; I testified before the committee.

Q. Did you give any evidence before that committee in regard to these personal outrages upon yourself?

A. I did not give it in testimony; I gave it to Doctor Nelson, who was one of the committee.

Q. It was not taken by the committee?

A. It was not; in my judgment it was not best to give it before that committee, but I told it to Dr. Nelson, as a member of the committee, because he was a physician, and I wished to make the statement to him, rather than in public to the committee.

Q. State as briefly as you can, what was the cause of your being sent to the asylum?

A. I suspected that I was poisoned; I took some medicine to be analyzed, and before the result of the analysis was made known, I was taken to the Asylum.

Q. At whose instance were you taken to the Asylum?

A. At the instance of Doctor Neefus, as I believe.

Q. And at the instance of any of your relatives?

A. I think, as I still hold and believe and do to this day, that my family were deluded by Doctor Neefus and others, and by Doctor Gray; afterward, deluded by Doctor Gray, in regard to my condition.

Q. What led you to believe you were poisoned?

A. By my peculiar sickness.

Q. What was the nature of your sickness — what led you to think you were poisoned?

A. On the Monday before I was taken to the Asylum, and also on Friday before, I had two peculiar sicknesses; I had had nothing like it before; on the first occasion it was vomiting and pain, and numbness in the hands and feet, and sharp pain extending down my limbs; I went and had a vapor electric bath, and then in a few moments I had a stickiness all over my entire body; I called the attention of the lady to it; I was also running at the nose and mouth and vomiting terribly and in excruciating agony, and a desire, but impossibility, to urinate; then I received relief in urination; I was left in a very prostrate condition — very weak — that was the Monday's sickness, but passed off, and on Friday I was attacked with the same symptoms.

Q. Who did you charge with giving you the poison?

A. I suspected two persons; one was a girl that was in the house, and the other person was a Miss Hamlin, who was in the house at that time; she was in Rochester the last I knew of her; I do not know her present address; I suspected that this poison was given to me intentionally by one of those two persons.

Q. To kill you; was that the intention, do you think?

A. Yes, sir; I believe so.

Q. What was Miss Hamlin's motive?

A. I have never made this statement as a positive fact; it was a suspicion I had, and, as I had stated in the Asylum, I was open to conviction; I suspected this person to be the divorced wife of a

gentleman to whom I had been engaged. The simple history of my case is in this way: I was engaged to be married to a gentleman, who has since removed to Brooklyn — a dry goods merchant. The engagement was broken off and he was afterward married. I did not see him again for years, and about two years before I was taken to the Asylum I saw a notice of his wife's death in the paper. The December following I received a paper marked by him, just as he had been accustomed to send me papers with pieces marked, indicating that his affection for me was unchanged. My natural inference, of course, was that his wife was dead. A week from that time I saw him in our church; he sat in our seat, and the lady who had first introduced us, re-introduced us, as he had changed. A short correspondence followed, and after that he sent me papers and books marked in a manner to indicate an affection. My supposition still was that his wife was dead, although I thought his conduct was singular, because he did not come out in an open manner. His former landlady called to see us, and spoke of his having a wife and two children. It was a great shock to me. He still continued to send me papers, and they were marked in such a manner as led me to believe he was separated from his wife. About the same time I saw an item in the paper about a gentleman formerly well-known in Rochester, etc., and speaking about getting a divorce, etc. Circumstances led me to think it had reference to this gentleman. I recognized the circumstances. There was a correspondence between us. The February previous to my going to the Asylum there was a woman came to our house, recommended by her aunt, as she called her, a Mrs. Ranney. We were requested, as a favor, to allow her to stay two weeks, and she came. From the moment she entered the house I had a sudden sickness occasionally. I had been teaching, but was unable to go to my school on Monday. I was so bad that I feared paralysis of the whole left side, the numbness that I experienced led me to fear it was the premonition of paralysis. I commenced taking electric treatment and I experienced immediate relief. I got the better of that sickness. I came home again and the sickness reappeared. I went into the country again and spent three or four days. I suspected then that I was being poisoned, and I understood that electricity neutralized poison, although that had not occurred to me at the time. From that time I had difficulty with my battery at home; the handles were bruised and disturbed.

Q. Was this lady then in your house?

A. Yes, sir; and she had been at the battery; she professed that a Dr. Smith, from Philadelphia, was coming to marry her in two weeks, but he never came; the time passed and still she remained.

Q. Was she boarding at your place?

A. She professed to pay for her board, but she never did pay for it; they got up some sympathy for her there; she was very strange; her hair was bleached and she wore a wig; this I should never have discovered myself, but my attention was called to it by a lady staying a few weeks with us on a visit.

Q. How old was this lady that you suspected?

A. She was thirty-four or five.

Q. Who is this Mrs. Rannie that you have referred to?

A. A member of our church, she lives in Rochester now. This sickness that I last spoke of was relieved by my trip to the country, and I was delighted. My brother came there from New Orleans at that time, and we went for a visit to the bay; I sat on the piazza and this Miss Hamlin brought me some water in a tin cup; I did not want it but I took it out of courtesy to her a short time after taking it I had this same sickness, the same symptons that I had before experienced, and I went the next day and took another vapor bath.

Q. Did you complain to any one about this?

A. Yes, to a dear friend of mine, Mrs. Greenleaf, Congressman Greenleaf's wife; I did not tell her I was being poisoned then, because I did not suspect it.

Q. How long had this been going on?

A. Since February, and this was in August; I commenced my school in September; I suffered occasionally from this peculiar sickness, all the time this woman was there at the house, but I was never so sick as I was at the first time because I counteracted it with the vapor baths. In October I received a blank envelope — I had not received any paper from this gentleman for some time — since she came to the house I received no papers as I had been receiving before her appearance there; she used to watch for the postman and every thing that came to the house she took; I believe she intercepted mail matter for me; on this occasion in October that I was about to mention, I received a blank envelope containing fifty dollars; and a paper from this gentlemen; I thought it strange that he should send me money, I had never received money from a gentleman before, and I was very much embarassed, I did not know what to do. About that time I learned from one of the neighbors that this woman Miss Hamlin had been trying to borrow fifty dollars. About this time I missed something, it was part of a silk quilt, I learned that this woman had a habit of searching in my bureau drawers, she did many things, too, to annoy me, she would try on my things, new hats, gloves, etc., when they came home she would try them on, and it used to annoy me very much. One day I saw her trunk open, it was about this same time, she had been in the habit of receiving suspicious letters dated from Campden in this State. This first aroused my suspicions that there was something wrong about her, as I looked at her trunk, which was open, my eyes fell upon a bundle of papers, one letter was there that I was strongly prompted to open, I opened it, and inside was written in a man's hand, in substance it said "If you want me to help you, you must send me the money this week," and it referred to the Wannamaker will case; I was so much agitated at the tought of doing any thing of thekind; I could not recall the signature so I could not say what that was; but it was at the time she wanted the fifty dollars, and had been round trying to borrow it, and was at the same time

that I received the fifty dollars from this gentleman. About this time my sister was sick; she had been taking hyperphosphate of lime, andas her symptoms were very similar to my own, it aroused my suspicions, and then, like a flash, all these different circumstances occurred to my mind — the fact that they first appeared when she came to the house, and had continued along while she was there at intervals; I suspected that the medicine my sister was taking had been tampered with, and in order to satisfy myself, I took it to Dr. Forbes of Rochester, who is a friend of mine; I told him I expected poison had been administered, and I told him I would bring him some tea that I also suspected had had poison put in; on Monday, before I went to the Asylum, I had symptoms the very reverse of those I had experienced; the slow poison had produced great activity of the kidneys, and the reverse symptoms occurred on Monday before I went to the Asylum; on my return from the doctor's, I found some letters and papers that had been in my trunk; I was sick in the summer and thought I might not recover, and I wrote a letter to this gentleman, to be sent to him in case of my death; when I returned on the occasion just referred to, I found all my papers straightened out and this letter on top, as if prepared for my death; when I saw that, I at once made up my mind that if I did die, nobody should have an idea that I committed suicide, so I destroyed some of the papers and took some with me; I went to see Judge Angel and stated the case to him, telling him I suspected this person; I was in distress; I desired Judge Angel to telegraph to this gentleman to come, that I might prove whether my suspicions were well based or groundless.

Q. What did Judge Angel do?

A. He pretended to send the telegram.

Q. Did the gentleman come?

A. He did not; I wrote some letters for Judge Angel to send to this gentleman; but I have been told that Judge Angel never sent them nor the telegrams; I have seen this gentleman once since; he told me he received a letter from me asking him to assist me, asking for fifty dollars; but I never had written any such letter; I wrote a letter for this gentleman and handed it to Judge Angel when I was in such distress; I asked him to send the letter, or to take it personally, and I would pay him for his trouble and expenses; it was urgent; I wanted the letter to go; on Friday I had this second sickness; I found then that my battery had been interfered with; I forgot to say that the platinum was all shriveled up on to the zincs; on Friday I saw Mrs. Greenleaf and Mrs. Dr. Sanford; they took care of me, and they said I had been poisoned; and Mrs. Greenleaf seemed to recognize the symptoms.

Q. Did they specify the kind of poison that had been given to you?

A. They did not.

Q. Did they intimate to you that they had any suspicion of the kind of poison?

A. They did not; but I have since been informed by an eminent physician that it was *aconite* the second time I suspected, and *digitalis* the first seven months of my sickness.

By Mr. HASKELL:

Q. Did you communicate the fact that you believed you were being poisoned, to several persons?

A. I did; to Mrs. Greenleaf and Mrs. Dr. Sanford, and Dr. Neefus was called in.

Q. Was he the family physician?

A. No, sir; I never had any occasion to have any physician.

Q. You were taken to the Asylum with the full knowledge of your people — were you not — of your mother and sister?

A. I suppose so.

Q. How long did you state that you remained in the Asylum?

A. Twenty-six months.

Q. You left the Asylum in what way?

A. By a writ of *habeas corpus*. I was released by Judge Barnard at the instance of Mr. James B. Silkman; I was taken to Poughkeepsie, and my case was heard before Judge Barnard and I was discharged.

By Mr. RICE:

Q. Have you a present belief in the truth of the facts you have just stated, or has any thing occurred to change your opinion as to any thing you have stated?

A. I have no proof one way or the other.

Q. I mean this: Since these things happened that you have related, has any thing occurred to change your belief in their truth?

A. Every circumstance occurred just as I have related, and my suspicion remains to-day, because the facts remain unchanged.

By Mr. HASKELL:

Q. Upon what wards were you when in the Asylum?

A. I was only on the first and second wards during the time I was there. (Handing paper to Mr. Haskell.) I would like you to look over that I have drawn up there, the sketch of a law for the management of insane asylums, drawn up by myself.

The committee then adjourned.

UTICA, *March* 13, 1884.

The committee met at 8 o'clock, P. M., in room 48, Baggs' Hotel.

Present — Messrs. HOWE, OLIN, RICE and BROWN.

Messrs. MORGAN and GOODWIN of counsel.

Mr. MORGAN stated to the committee that he had a witness in waiting, but upon a preliminary examination of the person referred to, the committee decided not to use him as a witness.

There being no other witness present, the committee went into executive session.

Adjourned.

FRIDAY, *March* 14, 9:30 o'clock, A. M.

Present — The full committee.

Proceedings continued as under:

SAMUEL CAMPBELL,

Sworn and examined, testified as under:

By Mr. MORGAN:

Q. Where do you reside?

A. I reside at the New York Mills.

Q. How far from the New York State Lunatic Asylum at Utica?

A. It depends upon what point you are at; it is three miles more or less by the traveled road.

Q. Are you one of the board of managers of that institution?

A. Yes, sir; I have been a member of the board for twenty years or over.

Q. Are you the president of the board of managers?

A. Yes, sir.

Q. How long have you been president?

A. Quite a number of years; I could not name the number of years — perhaps eight or ten years.

Q. Please state your age?

A. Seventy-five years.

Q. And your business is that of a manufacturer?

A. Yes, sir.

Q. For the last four years how often have you visited the Asylum?

A. I could not answer that question correctly.

Q. How often in the year?

A. I am there, I should say, every week, and sometimes oftener; I call in frequently, as I am passing, to make short calls; if I should say sixty times in the course of the year I probably should not be far out of the way.

Q. When you call there with whom do you converse?

A. With the doctors, one or the other of them; I talk with any one I meet in the large room; sometimes I see several of them and I ask how things are going on; I frequently call on Dr. Gray in his office and have a conversation with him.

Q. Is it not a fact that you usually go into Dr. Gray's office and have a talk with him?

A. Yes, sir; sometimes.

Q. Do you go through the institution among the patients?

A. Occasionally; yes, sir; but I have not as much lately as I formerly did; I used to make a point of going when I knew a doc-

tor was on the ward, and I would go round with him, but my knee has pained me lately and I have not been as much on that account; but during the last year I have been through the wards; if there is any person on the wards that I want to see I go on purpose to see that person; I make a point to do that.

Q. How many times have you been upon the wards of the institution and among the patients within the past year?

A. Probably three or four times; our duty is to do it quarterly, anyway; sometimes I have gone through one of the departments only perhaps, one end or the other, and have not gone wholly through because of lameness; I used to be familiar with the names of the patients, but of late years I am not so familiar with them.

Q. What inquiries do you usually make of patients?

A. I would talk with them just the same as I would talk with a sane person; I would go and shake hands with them and talk with them the best I could.

Q. You frequently find a great many of them that can talk as rationally as a sane person, do you not?

A. Yes, sir.

Q. And you inquire after their health?

A. Yes, sir.

Q. Any thing further?

A. Yes; I encourage them; the great trouble is that they take me for a doctor, and they want to go home; that is their main complaint; that they are improperly detained in the Asylum; and I try to encourage them against that; I know in one case I had advised a lady to go there to the Asylum and I said I would look after her; I would go and see her every time I was there; she was suicidal; I would advise her to eat well and have patience and she would come out of it all right; but she would want to go home; I took the course that she was sick — all run down in health — and that all she needed was nourishment; I got along with her very well and she was improving every week that I went there; she got entirely well and she finally appealed to me to get out; I says to her, "I want you to weight a hundred and twenty pounds before you can go home;" why, she said, "I never weighed as much as that in my life;" I said, "I know you have not but that is what I want you to do;" she was there sometime longer and finally went home; she says they did not give her medicine, and yet she wonders how she got well.

Q. Is there any objection to giving the name of the patient?

A. Not at all; it is Mrs. W. There was another lady who was treated in the same way; her case was melancholia, Mrs. McG. Those were cases that I knew, and I took some interest in them, perhaps more particular interest in them than in others.

Q. Did you ever make any other inquiries of the patients?

A. Well, they would talk to me and I would answer them to the best of my judgment.

Q. Are there any other inquiries that you make of the patients except as to their health, and how they are progressing?

A. I do not know of any thing in particular that I inquired about excepting that; I don't know what else I should inquire about.

Q. Do you inquire of them as to their treatment — that is, as to how they are treated by the attendants?

A. No, sir, I do not make that a special question; I have never had any complaints made to me of that kind.

Q. Have you in mind any patient in the Asylum of whom you have made an inquiry as to the treatment of the patients by the attendants?

A. No, sir; I don't know any occasion for it.

Q. Do you ever inquire of the patients as to how faithful is the attendance of the physicians or the attendants?

A. No, sir; I am not in the habit of asking such questions of a lunatic.

Q. Is it not true that many of the patients will talk to you as rationally as a sane person?

A. Yes, sir, but I know they are not sane.

Q. The question is whether they will talk to you and answer your questions like a sane person?

A. Yes, sir; they will ask me questions and I will answer them as well as I can.

Q. How do you satisfy yourself that the physicians in charge are doing their duty toward the patients?

A. I know the physicians, I talk with them and I believe they are doing their duty; I have no reason to doubt it, not the slightest.

Q. Do you ever inquire of the patients as to the frequency of Dr. Gray's visit on the wards of the Asylum?

A. No, sir; nor of any other doctor's visits.

Q. When were you last through the wards of the Asylum?

A. I could not name the time; the last time we met as a board, I could not go with them only part of the way; my time was very much occupied then; I have frequently gone through on Sundays when I have more time to spend, and I go through with either of the doctors as the case may be, generally with Dr. Brush; I talk with him about the cases, but I do not talk with the patients themselves about their own cases.

Q. Have you seen Dr. Gray on either of the wards within the last year?

A. Yes, sir; I have been with him; I could not name the time; he went through with us, I think — I cannot tell how often — but it was more than once this season.

Q. How often have you visited the wards with Dr. Gray during the last season?

A. I think we went through most of the wards on our usual visit — our stated visits; he goes with us on those occasions.

Q. Is there a portion of the patients that are in a back and retired part of the Asylum?

A. Not that I know of; the rear part is not in as good condition and we have been trying to improve it of late.

Q. When were you in the extreme southerly part of the fourth ward?

A. The last time was during this winter sometime.

Q. Did you go to the extreme south or south westerly part?

A. Yes, sir; where they are building.

Q. Did you learn the names of any patients there?

A. I did not.

Q. Did you make any inquiry of those patients as to the manner in which they are treated by the attendants there?

A. I did not, I might say that as a general principle I do not do that, for I should not expect to get satisfactory answers.

Q. From your experience in the Asylum, do you not think that you could get a rational and truthful answer from many of the patients as to the manner in which they are treated by the doctors?

A. It is possible I might, but I should not put faith in any answer I should get; some would be ridiculous; but whether it was intelligent or not, I could not rely upon it.

Q. Take the case of Miss W., about whom you spoke, for quite a time before she left the Asylum she was apparently sane, was she not?

A. Yes, sir; she acted rationally.

Q. Do you not think that she would have given you a rational and truthful answer?

A. I think she did after I asked the questions.

Q. Then if you had inquired of her as to the attention given by the doctors to the patients, do you not believe you would have got a truthful and reliable answer?

A. Very likely I would from her.

Q. Were there any others equally as sane as she was?

A. Very probably there were several.

Q. In other words there are patients there who are continually convalescent are there not?

A. Yes, sir; I suppose there are.

Q. And from those you would expect a truthful answer if you inquired of them as to the treatment they received from the attendants or the physicians, would you not?

A. There are those who would give truthful answers, I have no doubt, those who have become convalescent as you say.

Q. That is true of the male as well of the female department, is it not?

A. Yes, sir.

Q. In your inquiry of Miss W., in reference to her condition she seemed to understand what you said to her, did she not?

A. Well, I know what was the matter with her — if you want to know I will explain — in her case she was suicidal; now she was

melancholy — that is the thing — but there was not any time but what she was sensible for all that.

Q. Are there not other inmates in the Asylum whose cases are similar to those of Miss W. ?

A. There may be, I can't tell you

Q. Do you think that the practice would be a good one for the managers to inquire of the patients who are convalescent, or nearly so, as to the management of their wards by the attendants and physicians ?

A. No, sir; I do not so consider.

Q. How then would you satisfy yourself that the physicians and superintendent were vigilant and attentive to their duties?

A. By observation; I go in and ask the doctor, not the patient, how that patient is getting along; that is the way I put it.

Q. If the doctor had neglected his duty, you would hardly expect he would own it to you, do you, to the president of the board of managers ?

A. No, sir, I don't think he would, but he might.

Q. Then do you not think that a system of inquiry from the patients that are convalescent, or nearly so, would enable you to ascertain the fact whether the doctor had neglected the patients or not ?

A. To that I say no, again.

Q. Yet you do not think if the doctors had been remiss in their duty that they would own it ?

A. I don't know about that.

Q. In your judgment, how often should Dr. Gray, the superintendent of the institution, visit the patients ?

A. Where there are cases demanding his presence he should be there at any time, night or day; there are peculiar cases of that kind, when it is a necessity, but otherwise he does not require to be there very often, with the help that he has got.

Q. How often should he visit the patients, in your opinion, to ascertain their condition, and the condition of the ward they are on ?

A. I cannot answer that question as to how often; it is a speculative question; he should go as often as it is necessary, that is all I can say; he is expected to be there at the call of the doctors at any time.

Q. With your experience in the Asylum, how is the doctor to know whether it is necessary for him to visit a patient or not?

A. Easily; he is in constant correspondence with the other doctors, and every thing is brought to his knowledge, and then he recommends whatever he deems best in the way of medicine or otherwise.

Q. You have nothing to do with the employment of the attendants, have you ?

A. No, sir, I have nothing to do with that.

Q. Who employs the doctors ?

A. We employ them; but still they are generally selected, who

we are to have, by Dr. Gray; it has been his place to seek the best help he can get.

Q. Who employs the attendants?

A. The steward does that; he employs them.

Q. Have you any rule adopted by your board of managers as to the manner in which you shall ascertain the qualifications and fitness for the position, of an applicant for a position as attendant in that institution?

A. The habit has been, heretofore, when a person applies — application is frequently made to learn the character of the man, and where he has been, and what he has been doing before, what his recommendations are, to whom he refers; more recently they have appointed a committee of three to investigate such matters on this new principle; that was adopted recently.

Q. Adopted since this investigation commenced, was it not?

A. I don't know exactly; it was recently.

Q. When did you first hear of any such thing as that?

A. You are no doubt correct about the time, because the first time I heard of it was when I was last in the Asylum, that that method was to be adopted; that was within a few days.

Q. Then you first learned that fact since this investigation?

A. Probably it was since the investigation commenced.

Q. It was since I (Mr. Morgan) met you at the Asylum?

A. Yes, sir, I should say it was since then.

Mr. Morgan — I will state to the committee that that was since the investigation commenced.

By Mr. Morgan (resuming):

Q. You learned that was the practice now?

A. The only method I knew of before this was simply the way I should do in the case of an employee; I should learn all I could about him, either by recommendation or reference, or more particularly by a talk with them.

Q. Who is the committee now?

A. That I cannot name.

Q. Who is the committee to examine applicants for positions at the Asylum?

A. I could not name them, because I have only heard them quite recently, and only casually.

Q. Is it a committee of the board of managers or a committee of the doctors?

A. I think the committee is within the institution.

Q. It is the doctors in attendance there?

A. I think so; I could not name the parties.

Q. Have you, at any time, been present when an examination was being had of an applicant for a position there?

A. No, sir; not that I remember of.

Q. Would you, in your judgment, say that it was a proper manner in selecting a man for an attendant in the Asylum whose previous business had been that of a hostler?

A. I do not know whether being a hostler would prevent his being a good man.

Q. I do not mean that the position of a hostler would degrade the man in any way; but would not the calling, and training, and practice be entirely different from what it should be; would not the occupation in the Asylum as an attendant call for altogether an entirely different character of man?

A. Yes, sir; but he may be a fit person and still have been an hostler.

Q. Do you think that would be a good selection?

A. It might be a good one and it might not; a man's calling may be an honest one because he is an hostler; the idea is that it is a degrading position, I suppose?

Q. Not at all; but the difference in the calling would not prepare or fit a man for taking care of insane persons, would it, in your judgment?

A. Oh! no sir; it would not, I should think.

Q. Would you think it would be advisable to employ a stranger who came to the Asylum with a letter recommending him; the letter purporting to be written by a party in Canada about whom the officers in the Asylum had no knowledge?

A. Well, I have depended a good deal upon the appearance of the person —

Q. I am asking your opinion about that matter; the stenographer will read the question.

[The last question was read by the stenographer.]

A. I should not, on that alone.

Q. Have you, at any times, investigated the qualifications of any of the attendants in the Asylum?

A. Not strictly speaking, but I hear of them; one is well spoken of and another is well spoken of; but as to investigating, I have not strictly done that.

Q. When you are in the wards visiting the patients do you hear complaints made by the patients against the attendants?

A. No, sir; I do not recollect any case of that kind.

Q. Where a patient complained of ill-usage by an attendant?

A. No, sir; I cannot recall any such thing.

Q. Have you ever had any of the patients complain to you of the physicians or doctors?

A. No, sir; never a case of that kind that I recollect of.

Q. Have you ever had patients complain to you of Dr. Gray?

A. No, sir; not that I recollect of at all.

Q. No patient has at any time complained to you that Dr. Gray did not give them the attention that they thought they were entitled to?

A. No, sir.

Q. Has there ever been any complaint made to you that the doctors refused to allow the attendants to place restraint upon the patients?

A. No, sir; the attendants have never made that complaint; do you mean that they wanted such permission and that the doctors would not grant it to them?

Q. Yes, that is what I mean; either neglected or refused to allow the attendant that power, and as a consequence the attendant got injured.

A. No, sir; I have not heard of any case of that kind.

Q. State whether or not you have ever seen on the wards any patients who bore the evidence, by their appearance, of having received injuries?

A. No, sir; I do not recollect any now.

Q. You did not see patients who appeared to have been injured?

A. No, sir; I do not remember to have seen any.

Q. Have you within the past four years found a patient there with a black eye?

A. No, sir.

Q. Nor a bruise upon the face which was visible?

A. No, sir.

Q. Have you found patients that were lame from injuries?

A. Do you mean injuries received there?

Q. Yes?

A. No, sir; I can't say that I have.

Q. Then in short, in four years, with your examination, you have not found a patient with a black eye, or with any visible injury that appeared to have been received while the patient was on the ward?

A. No, sir; I have not known of a single case of that kind.

Q. How do you account for the fact that we have in evidence injury books that give accounts of such injuries and show that they are of almost daily occurrence in the Asylum and that the injuries are visible ones; how do you account for your not seeing it?

A. Well, because I have not seen them, that is all I can answer.

Q. Have you seen patients that were in restraint?

A. Yes, sir.

Q. What restraints have you seen upon patients?

A. I have seen them in various positions; I have seen them with what they call the "muff" on their hands; I have seen them fastened to a chair with the muff on at the same time.

Q. And have you seen them in the restraint that they call the camisole?

A. Well, that is it, that is what I mean.

Q. When you have found patients in that restraint have you ever made any inquiry as to why they were so in restraint?

A. Yes, sir, I have made such inquiry.

Q. What did you ascertain on such occasions?

A. Generally for tearing their clothes, particularly on the female side of the place, and exposing themselves, etc.

Q. For what upon the male side?

A. I do not remember what it is on the male side, but I think it is to prevent them from injuring themselves.

Q. Do you remember any particular case in which you have made such inquiry as that?

A. I could not recollect any particular case or give the name of any one, I have seen it so generally.

Q. Who would you inquire of as to why the restraint was put on?

A. I would inquire of the doctors.

Q. Who happened to be with you at the time?

A. Yes, sir; unless I was there alone.

Q. On the women's side, you say, it was to prevent them from tearing their clothes?

A. Yes, sir; that is what I understand.

Q. Is that the reason the doctors gave to you?

A. Yes, sir.

Q. Was any other reason given you?

A. I could not recollect any other reason; that is the most common; and also for injuring others; some of the patients act very violently at times.

Q. State whether or not you have seen any evidence of injury by one patient upon another during your visits there?

A. No, sir.

Q. That you have never seen at all?

A. No, sir; I do not recollect any.

Q. Have they now adopted the same rule of investigating the qualifications of the attendants in the female department as they had on the male side?

A. I suppose so; it applies to both, I believe.

Q. It is true, is it not, Senator, that there are very frequent changes of attendants?

A. Yes, sir; I have no doubt that there is; but that is a matter that comes less under my observation, but there is, no doubt, frequent changes there.

Q. Do you know how many attendants they have there in the Asylum?

A. I could not give the number, except by estimating; there is about one attendant for every seven patients — somewhere thereabout, and there are about six hundred in the Asylum; I could not give the number correctly, that is an approximation to it.

Q. Do you know how many attendants they have had there within the last year?

A. No, sir; I do not.

Q. Or how many they have had within the last ten years?

A. No, sir; I do not; I cannot tell you that.

Q. Give me, if you will, any number or estimation of the number, from what you have seen in your examination and visits there, how many they have had within the last ten years?

A. I could not give it; I could not answer the question with the slightest decree of accuracy.

Q. How do you account for the very frequent changes of attendants?

A. It is easily accounted for; an attendant goes there and he wants to leave; they can leave as they do from any other employment; of course they are not confined there any length of time, they come and go as they do in any other employment.

Q. But a very large number of the attendants are discharged for cause, are they not?

A. I suppose quite a number; I do not know how large a number; but when you say *very* large I cannot agree with you.

Q. What proportion of the attendants who leave the Asylum in a year do you think are discharged for cause?

A. That I could not answer.

Q. As the president of the board of managers, are you consulted as to the propriety of discharging an attendant?

A. No, sir.

Q. And have never been?

A. No, sir; if an attendant violates the rules he is discharged; if he touches a patient — uses them rudely or strikes them, he is discharged promptly

Q. Have you known of any instance of a patient being injured by an attendant within the last four years?

A. Only by hearsay.

Q. When you have heard such a thing have you gone and investigated the case?

A. Only this recent case of Mr. Hughes, and another case where one patient hurt another.

Q. Then there have been two cases that you have known within the last four years?

A. I have not investigated the last, I have heard of it, that is, the Hughes case; I have not investigated that in any sense of the word; I have not investigated any that I know of.

Q. My question is, when you hear — as you say you do — cases of injury to patients, have you in any case gone to the Asylum and made an investigation to ascertain the truth in reference to the injury?

A. No, sir; that person is discharged and I do not hear or have any thing more to do with it.

Q. How do you know that he is discharged?

A. It is the rules to discharge him when such charges are made; but I think there have been very few from that cause; I think it is more from voluntary leaving; I think the number discharged for cause is very few.

Q. Upon what do you base that opinion?

A. Because I think I should hear if there was such a thing; I see the same attendants there for some length of time; I have no reason to suppose but what very few of them are so managed as not to be removed.

Q. In your examination of the Asylum, when you make these

visits to the wards, do you sometimes miss an attendant from their position on that ward?

A. No, sir; they are there generally.

Q. Have you at any time missed an attendant?

A. No, sir; I do not remember of being there without some attendants present.

Q. But have you missed an attendant that you knew was formerly there?

A. I may have, but I can't recall any case.

Q. You do not remember any case now?

A. No, sir; I can't recall any at this time.

Q. Then you would not know whether they had been discharged or not?

A. I might not know that.

Q. You go into the ward and you find about two or three attendants, do you not?

A. I find attendants in the wards when I go in.

Q. Do you distinguish between those that have recently come there and those that have been there for any length of time?

A. It is possible I might, but I do not think I do; it is a matter that I do not remember about.

Q. Then an attendant might be discharged, or leave, and new attendants come in, and you might not discover it?

A. Yes, sir; that might be so, of course.

Q. What other member of the board of managers have visited the institution and gone upon the wards with you within the last year?

A. I think most of them probably; I could not say; I could not put that thing entirely correct if I should try; there has been — we have gone along in all together.

Q. You have all gone in at once, I suppose; but name any one of the board of managers who has gone through with you during the last year?

A. Yes, sir; the present board; if you want me to name them I can do so.

Q. Name the one member of the board who has gone?

A. There is Mr. Winston; he has gone.

Q. When did he go through with you?

A. I think at the last quarterly meeting.

Q. When was the last quarterly meeting?

A. I could not name the time exactly.

Q. Was it since this investigation began?

A. No, sir; it was before that time.

Q. Do you think it was before this investigation?

A. I think so, I will not be very certain; these are things that it is impossible for me to speak correctly about; they are questions I never dreamed of being asked about it again; it has been a matter of so little importance who it was that was with me; the board of

managers goes through quarterly, one meeting is in April and one in December, so you can divide the rest; it is a common thing to do.

Q. Do you remember of hearing any other manager who has passed through there with you making any inquiries of the patients as to the manner in which they are treated by the attendants?

A. No, sir, I don't know that I have; they generally go along with a number of the doctors, and they talk about the patients in general.

Q. Have you heard any member of the board of managers inquire of patients as to the faithful manner in which the attendants discharged their duties?

A. I should think not, I remember none.

Q. Have you heard any member of the board of managers inquire of the patients as to how faithfully the physicians attend to their duties?

A. I should answer the same; I think not.

Q. Or as to the superintendent — Dr. Gray?

A. No, sir; nor of him either.

Q. Have you in visiting the male department at any time found any person serving as an attendant whom you considered was not a fit person to discharge the duties of that office — of attendant?

A. I cannot say that I ever have.

Q. Have you on the female department?

A. No, sir.

Q. I think I inquired about the male department as to injuries; have you at any time discovered any evidences of injuries on the patients on the female side of the institution, to any one of the female patients?

A. I have not, no, sir; you asked me that before; I said no.

Q. So far then, as your observation and investigation has gone, the patients have been entirely free from injury of any kind?

A. As far as I know, they have.

Q. And you have been in there when there are patients in there who were apparently sick?

A. Yes, sir; I have seen some that seemed sick.

Q. Do you inquire of them what the difficulty is?

A. No, sir; I do not inquire of the patients at all; I inquire of the doctors.

Q. And you are content with what the doctors say?

A. Yes, sir; I do not expect to get a reasonable answer from a lunatic.

Q. But you said that you got a truthful and rational answer from many?

A. With those that are convalescent and some that are not so bad, but they have mind enough left to give satisfactory answers, but it is not always the case — very rarely.

Q. Have you at any time specially investigated the temperature of the various wards in the Asylum?

A. Yes, sir; and I know it to be excellent.

Q. Have you found some wards where it was very cold?

A. No, sir, I have not.

Q. Are there any wards there where patients are kept that it is uncomfortably cold in cold weather?

A. Not that I know of; in the rear part it is not as comfortable as it ought to be, I admit that, but there is nothing that would warrant the idea that the patients were not properly cared for as far as possible, or that they were unnecessarily cold.

Q. Wherein does the lack of comfort come?

A. It is worn out; the building is in bad repair; the rear part has gone further than it ought to have been allowed to go, on account of the crowd of patients; the whole institution has been regenerated, and that part has not been as well done as it ought to have been.

Q. Who has charge of the repairs of the Asylum buildings?

A. Dr. Gray with the board of managers; we pass on it and give our opinion — have more frequently than anybody else — what is best to be done in improving the building.

Q. And then who takes the laboring oar and sees that the repairs are done?

A. The superintendent takes the most of it on his shoulders, and he is the most competent man to do so, but there is a building committee, and we go through and see that it is properly done; now there is something going now in that direction; I am on that committee, to procure materials at the cheapest rate we can get them.

Q. Do you procure the material?

A. Yes, sir.

Q. When did you procure the material for these repairs?

A. Well, I procured brick not long since for the erections progressing at present; it was between I and another member of the board.

Q. I am talking about what you have done yourself?

A. You want to get at the truth, and I will tell you how it happened; I had been buying brick and could get them at a lower figure than the market price, and I put these brick for the Asylum in at the same time; and at the same time or about that time another member of the board of managers spoke to the same person, so that it was between the two of us.

Q. State when you have personally purchased any material for repairs?

A. So far as that is concerned, it was this last fall.

Q. What did you purchase personally, this last fall?

A. I am speaking of that brick for one thing, and lumber for another thing that we got from Kelloggs.

Q. Did you purchase the lumber?

A. No, sir; I did not, personally.

Q. Confine yourself please to your individual acts; you purchased this brick last fall?

A. Yes, sir; but the other man took it; I arranged for the price; he got them from the same party; that was Mr. Rogers.

Q. When did you examine the bills for repairs done in the institution?

A. I never have done that.

Q. Do you make yourself familiar with the expense of repairing the building?

A. Yes, sir; somewhat.

Q. Do you know what amount of money was expended in the way of repairs to the institution in the year 1883?

A. No, sir; I do not; I could not tell you.

Q. Can you give us an approximation to it?

A. I could not; in the fall of 1883 there was an appropriation, but I do not remember the amount of it.

Q. You have been for some time on the building committee?

A. Yes, sir; I have been on it generally.

Q. For how long have you been a member of that committee?

A. It is composed of Mr. Rogers and myself, and I forget who else.

Q. For how many years have you been on it?

A. Well, call it ——; I cannot tell you the number of years; I could not give it.

Q. Have you been on that committee for ten years?

A. I could not say; I have been on that committee most of the time that the building was going on.

Q. As a member of that committee have you at any time investigated or become familiar with the expense of the repairs that have been put upon the institution?

A. I have been familiar with the cost of repairs at the time, but I have not followed the thing closely up; I did not audit the bills at all.

Q. So that you are unable to say whether the expense has been extravagant or not?

A. I can; I say it has not been in my judgment.

Q. How do you know it has not?

A. I know that the materials are bought economically, the work done economically, and a good deal of the work done by the patients.

Q. But you do not know how much has been paid for it?

A. Why, no, I could not give you the items.

Q. Can you give the sum total?

A. No, sir, I cannot, but it is within the appropriation.

Q. How many horses are owned by the State and kept upon the premises?

A. I do not remember how many there are.

Q. Have you any idea?

A. No, sir, I have not.

Q. Do you know whether the horses kept are owned by the State or by others?

A. I could not give you any idea.

Q. Do you know any necessity for any doctor employed in that institution to own or keep a horse there?

A. Yes, I should say so.

Q. For what purpose?

A. For going down to the city or going off anywhere, at any time.

Q. So far as the State is concerned, the doctors' duties are all confined to that institution, are they not?

A. Not exactly; no, sir.

Q. What other duties have the doctors there elsewhere than in the institution?

A. He goes down to the city frequently.

Q. In what capacity?

A. I cannot tell you; possibly buying some medicines; or whatever it may be, I cannot tell you the reason, but such is the fact, I know that.

Q. Do the doctors buy the medicines?

A. I think probably Dr. Gray has more to do with that than anybody else.

Q. What other doctor in that institution, in your judgment, should keep a horse there in order to properly discharge his duties to the State?

A. That question is a singular one; what doctor should keep a horse, is that it?

Q. Yes; as president of the board of managers of this institution what doctor, in your judgment, requires a horse in order to discharge his duties there?

A. I think Dr. Gray does for one; I do not know that any of the others have horses; you are getting into a ground that I do not know much about.

Q. Who makes the purchases of the horses and carriages?

A. I cannot tell you, unless it is the steward; I cannot tell; he makes most of the purchases; the steward has a horse for instance.

Q Does he have a horse separate from the Asylum team?

A. A horse for his own use.

Q. And that horse is kept from the Asylum, or State feed, is it not?

A. Yes, sir, I suppose it is.

Q. There is a team that is kept there for the purpose of coming to the city — a covered wagon or covered sleigh — to come to the city to make purchases?

A. Whether to make purchases or not I don't know; they are kept there.

Q. All the purchases or packages are transported from the city to the Asylum with that team and in that sleigh and wagon as you understand it, are they not?

A. I don't know about that.

Q. Have you ever seen a large oil-cloth or canvas-covered sleigh that is used here for transporting the goods and city purchases to the Asylum?

A. I cannot say that I have.

Q. Do you know how the supplies for the Asylum are transported to the Asylum?

A. My inference was that they were brought by those from whom they purchased the goods, but I may be mistaken.

Q. As you understand it there are plenty of teams there to do the transporting, are there not?

A. I don't know but there may be; I cannot tell how many teams there are there, and whether or not they have the transporting to do or not, I can't say.

Q. Have you at any time investigated the expense of the keeping and caring for the stock of horses kept there?

A. No, sir, not exactly.

Q. Have you ever made any investigation?

A. Yes, sir; there is one team, for instance, engaged to carry the doctors to church in Utica.

Q. Have you investigated the expense of maintaining the horses there that are kept at the Asylum?

A. No, sir; I cannot tell you that.

Q. You have neither investigated the number nor the expense of keeping?

A. No, sir; I have not investigated that matter.

Q. Do you know how many horses Dr. Gray keeps for his own private use?

A. No, sir, I do not; I can't tell you.

Q. Have you at any time investigated the cost of the supplies of the Asylum?

A. Yes, I have inquired into it somewhat.

Q. So as to become familiar with it?

A. Well, so as to have an opinion in regard to the merits of the thing.

Q. I mean as to their amount?

A. I could not give any idea as to their amount.

Q. Do you know how many men are employed outside the Asylum, upon the farm, at the barns and out-buildings?

A. I have a memorandum with me that will give it, that gives the number; I cannot repeat it.

Q. Give us the number from your memorandum?

[The witness then produced a copy of the "Utica *Herald*" of April 23, 1883.]

And said: "I had a calculation made a year ago in relation to this thing; it gives 590 in five years; now, if you divide that by five, you get it very nearly, 120."

Q. One hundred and twenty employees, in and out?

A. Yes, sir.

Q. There are from eighty to eighty-five employees in the institution, are there not?

A. That I could not say; in this paper (the "Utica *Herald*"

there is also a calculation about the cost of feeding ; the average cost is twenty-one cents a day ; that is, six cents for breakfast, ten cents for dinner, and six cents for supper for each patient.

Q. Have you ever made any personal examination into the prices paid for supplies for the Asylum ?

A. I might say not personally ; I know of it and know the arrangement that exists ; for instance, Mr. Dryer does the purchasing and I have no doubt that he does it as economically as possible.

Q. Where does he purchase ?

A. At this city — Utica.

Q. Where does he make his principal purchases ?

A. At a number of places; I cannot name them.

Q. Are not the heft of the groceries purchased at Butler & Hamilton's ?

A. A large part of them, yes, sir.

Q. You do not understand that they advertise or in any way invite competition in the furnishing of the supplies, do you ?

A. Yes, sir, I do; and this is the result of a competition.

Q. That is, the various dealers in the city are allowed to put in bids and offers ?

A. They have had the opportunity again and again.

Q. How long ago have they had it ?

A. It is constant, I might say.

Q. Do you know of any bids that were put in there, than Butler & Hamilton ?

A. There were none that were any lower.

Q. Do you know any others that were put in ?

A. I cannot remember any ; I have understood Mr. McQuade — he is not here now — but I understood he has gone and tried to get them lower, but he could not get them lower.

Q. Can you give any date that those bids were put in or invited ?

A. I could not give the date; it has been running for some time — for some years, I know.

Q. Can you give a date — any time that that was done; any time within the last four years ?

A. I know it has been talked of in the board.

Q. Can you give the date that that has actually been done, within four years; the inviting of bids, I mean ?

A. No, sir; I cannot do that.

Q. Can you say that it has been done ?

A. I can say this, if you will permit me to give you what is actually my belief — that it has been talked of before the board, and some members have followed it up to see if they could get it for any thing less.

Q. Do you know of an instance where bids have been invited in four years, that the merchants of the city of Utica have been permitted to put in a bid ?

A. Not if you take it in the true sense of the word; I have not done it, but I understand another of the committee has done it;

now if I heard one of the other managers say he done so and so, have I a right to believe him or not?

Q. Do you know of any time in four years that the board of managers or the officers of the institution have compared bids for supplies and made an award?

A. No, sir; I cannot tell any time it was done.

Q. Do you know of that having been done since you have been a member of the board?

A. I know it was done so originally; I was not a party to it but I so understood it.

Q. Do you know of your own knowledge where the bids have been received and examined, and the award made?

A. No, sir.

Q. In your judgment, the supplies of that institution should be purchased through a competition of the dealers, should they not?

A. Yes, sir; when you can get qualities considered.

Q. I suppose if they were to advertise for bids — solicit bids for a certain quality of goods, then the lowest bidder should be awarded the contract of furnishing the Asylum, should he not?

A. It might be and might not be; it would depend a great deal upon the responsibility of the party and the quality of the goods he held, there is a great deal in that.

Q. Now, I suppose, if you call for a specific quality you would expect that the party who bid would supply that quality as he agreed to furnish?

A. I have known cases where.

Q. You would expect that, would you not?

A. Why, I should have the right to expect it if the man had the ability to do it.

Q. And if he had not it would be a prudent thing on the part of the officers of the Asylum when the contract was awarded to him, to give a bond that he would do it?

A. That would be natural I should say.

Q. Do you know of any instance that a bond has been required from the parties furnishing supplies to the institution?

A. No, sir; not that I know of.

Q. Do you know where the liquors used in the Asylum are purchased?

A. No, sir; I could not tell you that.

Q. Do you know of any instance where competition has been invited in the furnishing of liquors to the Asylum — of your own knowledge?

A. No, sir; I am not acquainted with any of those circumstances.

Q. Have you at any time investigated so as to become familiar with the particular kind of liquors used in that institution?

A. I have not, except by the reports.

Q. By the report as published you find some very costly liquors, do you not?

A. Very likely.

Q. Very expensive, are they not?

A. I cannot answer that knowingly.

Q. Do you know what use is made of the most expensive liquors that are purchased for that institution?

A. I suppose it is used as a medicine; I should think so.

Q. The State pays for — or furnishes to Dr. Gray and his family their provisions?

A. I suppose that is so.

Q. Do you know whether those liquors are purchased for the family use of Dr. Gray?

A. I do not know any thing about that.

Q. Have you ever inquired to see?

A. I have not as I remember of; I do not know; my impression is that it is not so but I might be mistaken.

Q. With your understanding of Dr. Gray's employment, should you think that the State should furnish him liquors for his private use?

A. No, sir; I should think not.

Q. And if that had been done, in your judgment that would be a violation of the rule, would it not?

A. I don't know that there is any rule about it; but I do not know that it would be expected that the State should furnish liquors for the table.

Q. Do you know the McQuaid Brothers of Utica?

A. I know of them.

Q. Have you any personal acquaintance with the liquor firm of McQuaid Brothers of Utica?

A. No, sir.

Q. Do you know whether the liquors used in the Asylum or any part of them are purchased of that firm?

A. I do not know; I could not tell you.

Q. The Asylum fund is used now to pay for the domestic help in Dr. Gray's family?

A. I think so.

Q. Do you know the terms of employment of Dr. Gray as superintendent of that institution?

A. I do not understand that.

Q. Do you know the terms under which Dr. Gray is employed, or has his appointment in the institution?

A. I suppose I do; he is employed as superintendent of the Asylum, and the rules are laid down as to what shall be his business; he is the head, and I might say the responsible person in all cases, employed by the managers —

Q. That covers a portion of the question; but as to the maintenance of the doctor and his family; what provision is made in reference to that?

A. I don't know of any special provision in that respect at all.

Q. Do you know any thing about how many private servants the doctor has for himself and family?

A. I do not know that.

Q. Have you ever made the inquiry?

A. No, sir, I never have inquired.

Q. Do you understand that by the terms of Dr. Gray's appointment the State is to furnish all the domestics for his family that he or his family may think they need or require?

A. I do not know; I should infer such was the fact; I do not understand your question exactly.

Q. Do you know who made the contract with Dr. Gray for his appointment there?

A. Well, the managers do; he is employed by the managers, but it is so long since that regards any part of the contract, I cannot say any thing about it now.

Q. Do you know whether the contract is reduced to writing?

A. No, sir; I do not know that it is; I can't say.

Q. You would regard it as a very dangerous method to employ him, and he to judge of all the servants and attendants that he might want for his family use?

A. No, sir, I should think not; we think we know the man that we are employing.

Q. And I suppose included in this furnishing of the doctor's household is all the luxuries that he sees fit to have, is there not?

A. I cannot tell whether you are correct in your supposition or not.

Q. You do not know whether the arrangement covers those expenses or not?

A. If you know it, I do not.

Q. I ask you do you know what the provisions of the employment are in reference to luxuries?

A. No, sir; I do not know of any; I think Dr. Gray was employed there as superintendent before I was appointed manager and he has been continued there without any formality.

Q And you have never investigated to ascertain the terms of his employment, have you?

A. I have not investigated the matter and it does not require investigation; it is open to everybody who knows it.

Q. Do you know whether there has been any change in the terms of his employment?

A. I do not know of any.

Q. Do you know what his annual salary is?

A. I think there is $15,000; I think it must be $4,000.

Q. Do you know what Dr. Gray's compensation is per year?

A. I have known but I only speak from my memory; I think it was $4,000; I will not be certain.

Q. And do you know what is the salary of the first assistant physician?

A. That I have forgotten; I did know the division of the $15,000, but I cannot remember now; it is divided between the doctors, the matron and the treasurer.

Mr. Morgan — And the steward.

Q. You do not know what the yearly salary of either of the assistant physicians or of the matron is?

A. I have forgotten; I did know but it is not in my memory now.

Q. Do you know what the yearly salary of the steward is?

A. I do not remember; that is easily found out at the Asylum.

Q. How often do the three members of the building committee meet?

A. They have no stated time that I know of; we have a call if there is any occasion arises; then we get together by a special meeting.

Q. Is it not true, Senator, that the board of managers rely very largely upon what Dr. Gray says and does in reference to the matter of repairs?

A. A good deal depends upon his judgment, for in my opinion there is none better.

Q. And on his doing?

A. Yes, and he does right, I think, as a general thing.

Q. And you have the utmost confidence in Dr. Gray, have you not?

A. Yes, sir; I have every confidence in him.

Q. And that confidence leads you to take his figures and his management without making any investigation yourself that you otherwise would make — is not that so?

A. When you speak about "figures," explain what you mean; I do not take his figures for any thing.

Q. I refer to the amounts he gives you as the expense of the various departments?

A. Why, it is all down in black and white.

Q. Well, you take the figures that he has so put down, do you not?

A. No, sir; I take the figures from those that have charge of that matter; we have a book-keeper there and he has charge of that matter — the keeping of the books; he makes the report; we can always have all the accounts before us.

Q. Now come to the matters of building and repairs — who had the principal part of the directing about those matters, do you know — did not Dr. Gray?

A. No; not entirely; of course we rely very largely upon his judgment.

Q. And upon his acts?

A Yes, sir; if I understand what you mean by that.

Q. Well, I mean as to his hiring work and saying how it should be done?

A. Well, we have our general workmen that we employ to do such things as that.

Q. State who the boss workman is upon the building?

A. I cannot remember his name, it is a mason that generally does such work in the institution.

Q. Who is the boss workman that was engaged there last summer and superintended the repairs being made?

A. I could not tell you his name; I don't remember it.

Q. Did you make any contract with him yourself?

A. No, sir; I did not.

Q. Did you understand that Dr. Gray made that?

A. No, sir; I think he was paid by the day.

Q. Did not Dr. Gray employ him?

A. He was paid by the day.

Q. Was he employed by Dr. Gray?

A. Well, yes; he is employed pretty much all the time whenever they have such repairs — the general repairs of the place.

Q. Does not Dr. Gray do the general employing?

A. Yes, sir; I think he does.

Q. And it is your confidence in him that satisfies you that it is all right?

A. Yes, sir; and of course I can see that it is done too; I think I have some knowledge of those things myself, and am not apt to be deceived in such matters.

By the CHAIRMAN:

Q. Do you remember a request made to the board of managers by the State Board of Charities to furnish them an inventory of the materials and property on hand belonging to the Asylum?

A. I think I know what you mean — an itemized statement — is that it, a printed form to be filled in.

Q. Yes, I presume that is it; some of the managers have called it an inventory?

A. I will show you what it is, I have a copy with me; this is it (producing a paper and handing it to the chairman). Said paper was marked "Exhibit No. 12, J. H. M." (See appendix.)

The WITNESS (continuing) — It is a thing they want filled up but it is next to impossible to do it.

Q. When was that received by the Asylum authorities?

A. It was sent to me individually, I think, or at least I had one sent to me; but there have been more than that sent, they were sent by Mr. Van Antwerp — John H. Van Antwerp of Albany; he is one of the members of the State Board of Charities; I have here his letter to us, requesting us to fill in and send the blank to his board.

Q. Will you please produce that letter?

A. Yes, sir; here it is (producing the same); I will ask Senator Goodwin to read it for me; Mr. Goodwin then read the letter, as follows:

"STATE OF NEW YORK:

OFFICE OF THE STATE BOARD OF CHARITIES,
ALBANY, *February* 2, 1882.

DEAR SIR — I had, accidentally, the pleasure of meeting Dr.

Gray yesterday, and in the agreeable conversation we had, I understood him to say, that the board of managers of the State Lunatic Asylum had not specifically voted or acted on the question of furnishing the itemized report, called for by the State Board of Charities from the twelve charitable institutions, yours included, nine of which have furnished such reports. As Dr. Gray said, also that the next regular meeting of your board would not be held until April, may I ask if a special meeting of it could not be soon called to consider and decide the question as a board; for we have some reasons for thinking that there are some of your managers who are not in accord with the present position of the State Lunatic Asylum in refusing to furnish the report asked by the board. The managers could also then examine the blank for the report, sent from the office of this board, and see that it is not formidable, and one as easily made by your institution as by others having, in several instances, a much larger number of inmates than the Utica Asylum.

Very respectfully yours,

J. H. VAN ANTWERP,
Chairman, etc.

Hon. SAMUEL CAMPBELL,
President Board of Managers, State Lunatic Asylum, Utica.
The favor of an early answer is solicited."

Q. What, if any, reply was made by the board of managers to that letter?

A. I had it replied to; here is my reply to it.

The witness then produced another letter, which was read by Mr. Goodwin, as follows:

"NEW YORK MILLS, N. Y., *February* 6, 1882.

DEAR SIR.— Your favor of the 2d inst. received, also the printed schedule. I hardly think it necessary to call a special meeting of the board of managers for the purpose which you mention. It would incur some inconvenience and needless expense to those living at a distance, and if the board should meet, notwithstanding your reasons for thinking that some of our managers are not in accord with the present position of the board, I desire to say this, you may know, I do not, and do not pretend to controvert your presumption. I do not see what they could do in the matter more than has been done. I believe it is now a question of law and had better be determined by the proper authority. You have put the employees of the Asylum to some inconvenience by interdicting their payment of wages past due, which we believe to be a gratuitous encroachment on our rights and authority.

If you believe the managers of the Asylum are remiss and incompetent to serve two masters, why not have them turned out? You seem to have the ear of the Governor, judging from his message, he may think well of replacing the present managers by the appoint-

ment of your board instead. To be relieved from an unsought duty would save me valuable time.

I beg leave to say courteously your excessive importunity from time to time to enlarge your bounds and to obtain an increase of power for your board is, to my mind, a rather singular, silly piece of arrogance, indicating more fatuity than wisdom.

I am pleased you met with Dr. Gray in Albany. I advised his going to look after matters connected with the annual report and also with a view of getting more light with regard to your intrusive course of action.

Yours, very respectfully,

S. CAMBPELL,

President Board of Managers.

Hon. J. H. VAN ANTWERP, *Chairman, etc.*"

Q. Was there any reply received from that letter from the State Board of Charities in answer to your letter?

A. No, sir; but it brought up a discussion, and that brought a letter from Mr. Russell, the Attorney-General.

Q. This letter which has just been read by Mr. Goodwin, was that submitted to the board?

A. No, sir; it was addressed to me and not to the board.

Q. Was the correspondence afterward read by the board?

A. Oh, yes, sir.

Q. When was Mr. Van Antwerp's letter shown to the board, before or after your reply?

A. After I received it; probably the first time that we met after that.

Q. Was it shown to the board before or after your reply to it?

A. It would be after my reply undoubtedly, because he wanted an early answer.

Q. So that both the letters went to the board at the same time — the letter from Mr. Van Antwerp and your reply?

A. Quite likely, although that fact I do not remember.

Q. It was not submitted to the board before action was taken on it?

A. No; he wanted an early reply.

Q. Do you remember what action your board took concerning the correspondence with Mr. Van Antwerp?

A. No, sir; I don't think there was any action taken particularly.

Q. Was it approved or disapproved by the board?

A. I think it was not disapproved, sir.

Q. What action did the board take on that question?

A. They thought they had no right to.

Q. What action did they take?

A. They reasoned the matter over with the Attorney-General and with the Comptroller; he wanted light on the subject before he would pay it.

Q. Did the board request an opinion from the Attorney-General?

A. He gave them an opinion.

Q. Have you a copy of that opinion with you?

A. I have a copy of the opinions sent to the Attorney-General, and of the letter sent to him.

Q. Will you please produce those papers?

A. Yes, sir.

[The witness then produced the following, which were read by Mr. Goodwin.]

NEW YORK MILLS, *January* 31, 1882.

Honorable LESLIE W. RUSSELL, *Attorney-General:*

DEAR SIR--Your communication of the 25th inst. is received and will be submitted to the full board of managers at the earliest opportunity.

The unsought duty of a manager has been imposed on me for many years. During my experience I can say with confidence that the managers and superintendent have duly and faithfully and comprehensively made all reports as they believed required by law, and in all things have endeavored to conduct the affairs of the Asylum to its highest interests. I am not a lawyer, but am led to believe we are subordinate to the proper authorities, but not to the State Board of Charities. I am well aware that they desire to have it so; since their failure to induce the Legislature to enlarge their powers, and failing to legislate themselves into the office of the State Commissioner in Lunacy, they have assumed such authority. In my opinion, the interrogations they have made are without merit, diffuse, meddlesome and needless, and with an intermixed and divided authority would prove inimical to the best interests of the Asylum. I have requested the opinion of two legal gentlemen, now managers in the Asylum board, which they have kindly sent me, and I have the pleasure of inclosing them to you. I hope in the revision of the law you will be able to so frame it and so clearly to define the duties and responsibilities of both interests that there will be no further difficulty.

Yours very truly,

SAMUEL CAMPBELL.

To Hon. SAMUEL CAMPBELL, *President of the Board of Managers:*

My opinion is asked as to the construction of the laws out of which has grown the differences between the officers of the State Asylum and the State Board of Charities.

The State Board of Charities claims the officers of the State Lunatic Asylum have not made the reports required of them by law, and has notified the Comptroller of the State not to issue his warrants to them for the salaries they have earned.

Section 4, Laws of 1867, chapter 951, in substance provides that

all persons now or hereafter connected with the institutions which the Commissioners of the State Board of Charities are authorized to visit, are directed and required to give such information and afford such facilities for inspection as the said Commissioners may require, and any neglect or refusal on the part of such officer shall subject the offender to a penalty of two hundred and fifty dollars.

Section 6, Laws of 1873, chapter 571, provides said board of charities shall have authority to require from the managers and from the officers in charge of any institution it is authorized to visit, any information which said board may require in the discharge of its duties, and may prepare regulations according to which, and provide blanks upon which said information shall be furnished by any such officers and managers in a clear, uniform and prompt manner, for use by such board.

Section 1, Laws of 1873, chapter 571, provides it (the State Board of Charities) shall have power to make and use an official seal and alter the same at pleasure, and its proceedings and copies of all papers and documents in its possession or custody may be authenticated in the usual form, under its official seal, and the signature of its president and secretary.

Section 5, chapter 446, Laws of 1874, provides that the managers of the State Asylum shall from time to time determine the annual salaries and allowance of the treasurer and resident officers of the Asylum who have been, or may hereafter be, appointed, subject to the approval of the Governor, Secretary of State and the Comptroller, provided that such salaries do not exceed in the aggregate fifteen thousand dollars for one year.

Laws of 1881, chapter 185, provides after appropriating "for the officers of the State Asylum for Lunatics for salaries fifteen thousand dollars. * * * The amounts herein appropriated shall be paid by the treasurer from the respective funds, as specified, and the salaries named shall be established and fixed by this act for the several officers for whom they are designed, but the Comptroller shall not draw his warrant for the payment of the several amounts heretofore named, except for salaries and other expenditures and appropriations, the amounts of which are duly established and fixed by law, until the persons demanding them shall present to him a detailed statement thereof; and shall have made all reports required of them by law; and if such accounts shall be for services, they must show when, where, and under what authority they were rendered." * * * * *

The claim of the Board of Charities is that it has required information from the superintendent of the State Asylum which has not been given, and therefore the officers of the State Asylum have not made all the reports required by law.

First: The State Board of Charities has required no information from either the managers or officers of the State Lunatic Asylum.

The Board of Charities can only act by personal visitation of its members, or by a resolution of the board. It can only communi-

cate such resolution to a third person, unless such person is personally cognizant of the fact through some officer or agent, duly authorized, with the resolution duly attested under the seal of the board. Especially is this rule correct when it is sought to inflict a penalty on such third person for disobeying such resolution. The proceedings of the Board of Charities before the Comptroller seem analgoous to proceedings to punish for contempt for disobeying an order of the court. In order to found such proceedings either the original order, alleged to have been violated, must have been shown the offender, or a certified copy under the seal of the court.

No resolution of the Board of Charities, attested or unattested, has ever been produced to the board of managers or any officers of the State Asylum. The communication, with blanks purporting to come from the State Board of Charities, is annexed, but whether it is a work of supererogation by some over-zealous subordinate, or whether the gentleman signing his name assistant secretary is a subordinate of the State Board of Charities, neither the officers nor managers have any personal knowledge.

Second. The board of managers and officers of the State Asylum have made all reports required of them by law. The "information" which the Board of Charities might demand is not information required by law, but information required when desired by the board; information which the law authorizes the board to require.

Section 12, Laws of 1842, chapter 135, requires the managers to make an annual report in the month of January, each year; that is the only report required by law, and that report has been made.

The salaries of the officers of the State Asylum were expressly excepted in the appropriation of 1881, from the prohibition laid upon the Comptroller not to draw his warrant unless they had made the reports required by law.

That act says: "The salaries named (among others the salaries of the officers of the State Asylum) shall be established and fixed by this act," and then provides, "The Comptroller shall not draw his warrant for the payment of the several amounts heretofore named except for salaries. * * * The amounts of which are duly established and fixed by law until the persons demanding them * * shall have made all reports required of them by law;" that is, all salaries named in that act were expressly excepted from that prohibition and also all other expenditures and appropriations the amounts of which were duly established and fixed by law; but before this act was passed, it may well be claimed that the salaries were fixed by law; the board of managers were authorized by the act of 1874 to fix the amount of salaries with the approval of the Governor, Secretary of State and Comptroller; this, under that provision of law, they did. If it is true, as claimed by the State Board of Charities, that when the law authorizes it to require information and it does require information, it is information required by law, the necessary and logical conclusion follows that when the law authorizes the board of managers to fix the salaries, and the board does fix the

salaries, the salaries are fixed by law; under that view the salaries of the officers come under the exception..

Fourth. It is not claimed that information has been sought from any one but the superintendent, yet the salaries of all the officers of the Asylum, the State Board of Charities claim, should be stopped. By no possible construction of the statutes should the salaries of the matron, the steward and the assistant physicians, from whom no information has been sought, be suspended.

Fifth. It is preposterous to suppose the Legislature intended to put it into the power of the State Board of Charities to suspend the salaries of all the officers of charitable institutions they are authorized to visit, simply by making unreasonable demands for information.

Sixth. Another most serious question would arise under the construction given by the State Board of Charities to the provisions of law. Unless the charitable institutions give all the information required by its construction, they would not have given the report required by law, and the Comptroller should not then issue his warrant for the salaries. On the part of the institution it may be claimed no information has been required. All the information required has been given and all the information in possession of the officer called upon has been given. Each of these propositions may be denied by the State Board of Charities. Is the Comptroller to be constituted a judicial officer to decide these questions? Has he power to take evidence and administer oaths in order to decide these issues? The construction given by the State Board of Charities becomes absurd and the only practical conclusion to be reached is that reports required by law are reports fixed and designated in terms by the law and not information required by irresponsible boards or organizations.

Seventh. The law fixes the penalty for its breach by a penalty of two hundred and fifty dollars. It was not the intention of the Legislature to fix another penalty.

Upon each of the seven foregoing grounds I am of the opinion that the State Board of Charities has no right to interfere with the issuing of the warrants of the Comptroller to pay the salaries of the officers of the State Lunatic Asylum and that such warrants should be issued.

J. R. SWAN, Jr.

Utica, *January* 30, 1882.

(Copy.)

Utica, *January* 30, 1882.

To the Hon. Samuel Campbell, *President of the Board of Managers of the State Lunatic Asylum:*

Dear Sir— In answer to your request, that I express an opinion on the legal questions and other propositions suggested in the communication of the Attorney-General and State Commissioner in

Lunacy, to you, I have to say, that I have been unable to devote to the subject the careful attention which its importance demands, but I present herewith the result of such thought and labor as the brief time at my disposal permits.

The State Board of Charities has filed with the Comptroller a resolution in the nature of a protest against paying any appropriations to the Utica Asylum until certain reports, alleged by that board to be required by law, shall be filed. Since the protest, and pending a reply from our board of managers, the Comptroller has withheld the salaries of the medical superintendent, assistant physicians and other officers of the Asylum.

I am of the opinion that the protest of the State Board of Charities was not authorized by law, and that the appropriation bill of last winter, under which the protest was filed, does not apply, and was not intended to apply to the officers of the Asylum. I am sustained in this view of the statute by the opinion of the late Attorney-General, when, in October last, a similar protest was made, and also by every member of the profession with whom I have conversed on the subject.

My reasons are —

1. Assuming that the act creating the State Board of Charities authorizes that body to compel the board of managers of the Asylum to furnish it with a report itemized infinitesimally — a proposition which may well be doubted—it certainly does not require the medical superintendent or assistant physicians, who are the employees of the board of managers and under its control, to make such a report. Their powers and duties are clearly and well defined, and their alleged requirement will not be found among them; they have no power and no right to report; and yet these are the persons whose pay it is proposed to stop. It would be analogous to insist that the clerks in the Comptroller's office should not receive their salaries because of some fancied dereliction on the part of the Superintendent of Insurance.

2. The section of the law upon which it is supposed the right to demand an itemized report is based (§ 951, Laws of 1867), expressly states what the penalty shall be for a failure to comply wit hits terms, and it certainly does not provide such punishment as is here sought to be visited on those who in any event are innocent of blame.

3. The act of 1881 (chapter 185) expressly and in terms exempts from its operation, "all salaries and other expenditures and appropriations, the amounts of which are duly established and fixed by law."

The amount of the salaries ot the Asylum officers is fixed by law in a gross sum in the act itself, and in detail, pursuant to the provisions of section 5, chapter 46, Laws of 1874.

In other words, if each officer of the Asylum was required to make a separate report, and he had wholly neglected to do so, there is no power given the Comptroller, under the act of 1881, to withhold his salary.

Regarding the main "differences of opinion," I may say that

the policy of our board to maintain its independence of the censorship and control of the State Board of Charities, was fixed, if I am correctly informed, long before I entered it, two years ago, and is founded upon the deep-seated and long-entertained conviction on the part of the more experienced members of the board, of the rectitude of that position.

There are, it seems, two antagonistic and irreconcilable theories of Asylum management. The advocates of one theory maintain that the affairs of each Asylum are safer under the control of a body of gentlemen living in the immediate vicinity, knowing its wants and constantly looking after its interests, that under the control of one central organization, no matter how ably it may be conducted. The difficulty heretofore has been, that it was supposed possible to conduct the affairs of the Asylums under the supervision and control of both these authorities at once. This, in my judgment, cannot be successfully accomplished; the power and responsibility should be lodged somewhere and not divided between two separate, independent and antagonistic organizations.

I am glad the revision referred to by the Attorney-General is to take place, and I sincerely hope that the revisers will recognize the fact, that one or the other of the systems referred to must be adopted, and thus avoid the constant irritation, clashing of authority, and periodical accusations which have proceeded to such an extent that men hesitate to enter the boards of management of the various asylums with the certainty of receiving little but censure and abuse for labors which are both arduous and painful, but which are freely given to the State.

If it is thought best to abolish the separate boards and place the asylums under one central authority, let that be done; if, on the contrary, it is preferable to continue the present system, which was established in 1842, and is now represented in nearly every State of the Union, and attempt no new and dangerous experiments, I think the various boards should be emancipated from the dictation, censorship and control of the State Board of Charities, and rendered amenable only to the authority which created them.

Respectfully,

A. C. COXE.

(Copy.)

Q. You have stated that the Attorney-General was communicated with?

A. Yes, sir; he was written to; he communicated with me.

Q. To what effect?

A. That I cannot recollect, I cannot find that letter.

Q. Do you recollect the general effect of his letter?

A. I think it was in relation to this difficulty.

Q. And which side of the controversy did he take?

A. That I could not say; I think probably he was consulted by

the Comptroller and induced to write a letter to me, and that letter I cannot get my hands upon.

Q. As a result of the controversy what was done in relation to the payment of salaries?

A. They were paid.

Q. Why did the board of managers decline in the first instance to furnish the information requested by the State Board of Charities?

A. The reason was that it was — we deemed it hardly practicable for us to do it, it would require months of labor for any one to work up; and we do not think we are called upon to do it, any way.

Q. Did you make any offer to them to furnish any portion of what they asked, or of the information desired?

A. They have the opportunity of coming here at any or all times, but that they do not do; they have the opportunity of coming here and ascertaining all that they seek to know by this printed blank; they can find out the whole thing for themselves, they have an opportunity of doing that, and why don't they do it?

Q. Did you offer to furnish any of the information to them?

A. No, sir; not any of it, in particular, that I remember of.

Q. Would you not object to furnishing such information?

A. Yes, sir; I should object very strongly.

Q. Why?

A. Because I do not think they have any right to ask for the information.

Q. Are there any other reasons?

A. That is a very good one, I think; and for this reason, it is an immense sight of trouble to give these items; it is something which changes daily, it might be right to-day and wrong to-morrow, it is going on all the time and it changes continually; it is hardly a practicable thing.

Q. Are you aware that similar institutions have furnished such information to the State Board of Charities?

A. I only know from what I have heard them say; there is already a full report of the same thing, only they want it itemized; you look at that paper and you will see how impracticable it is (referring to Exhibit No. 12).

Q. Did the managers of the Utica Asylum have any correspondence with any persons connected with the asylum at Buffalo, with reference to this subject of the refusal to furnish the information required by the State Board of Charities?

A. No, not that I know of; still, you understand this, that the managers of the Buffalo Asylum and of this Asylum are quite friendly, and of course there is a natural correspondence between the two, that is, between the superintendent here and at Buffalo; the superintendent at Buffalo was once here with Dr. Gray, in this Asylum.

Q. By that you mean that they frequently correspond?

A. Yes, I think there is a frequent correspondence, and I understand further, that Dr. Gray is one of the managers of that asylum.

Q. Of what asylum — at Buffalo?

A. Yes, sir; that is, he was at the time when the correspondence was had about this matter, but he is not now; he was the principal man in getting up these plans, etc.

Q. Has the request for this information been since renewed by the State Board of Charities?

A. No, sir; not that I know of.

By Mr. HASKELL:

Q. I would like to ask you, Senator Campbell, whether as a matter of fact an inventory is ever taken in the institution to find out what property there is on hand belonging to the State, and its condition, etc.?

A. I cannot say whether there is or not; I do not know what you mean exactly; I do not know whether there is or not; an inventory could be easily gotten up.

By the CHAIRMAN (resuming):

Q. I now ask you whether you would object to the State Board of Charities being clothed with the power to require such statements from your board?

A. Yes, sir; I should not serve under such an arrangement; I think one master is enough; I take a position like this — a position of this kind, and I spend my valuable time, which I would not do under any other circumstances, only because it is a charitable institution; it has been imposed upon me, I never have sought the position; now, sir, if I cannot be trusted — if I cannot act without being under the State Board of Charities, I ought not to be a member of this board, and I won't be.

Q. Do you object to the visitation of the Asylum by an independent board?

A. No, sir; not by the Board of Charities even; they are welcome to come there at any time, and why don't they?

Q. Do you object to recommendations being made by such board?

A. I don't know but they are well enough, but if they impose on us this duty we do; if they can give us a recommendation of value we should be glad to adopt it.

Q. Do you object to being supervised by any board having the power to require changes to be made by your board?

A. Yes, sir; we are either an independent board, or we are not.

Q. How often does the State Commissioner in Lunacy visit the Asylum?

A. I have not seen him there more than once in a year.

Q. Are his visits more than once or twice a year?

A. I think they are regular; I really could not answer; I only speak of what I know in that particular; I only recollect of seeing

him but once, though I may have seen him there oftener, but I do not remember.

Q. Has he ever made any recommendation to your board of changes or improvements in the Asylum?

A. Not that I recollect of.

Q. Has the State Board of Charities ever made any recommendations for changes or improvements in the condition of affairs at the Asylum?

A. I am not certain; but I had a very familiar talk at one time with a member of the Board of Charities, with Mr. Anderson, when he was there, with him and Mr. Forster; I think there were some things talked of at that time.

Q. What recommendations were made by them?

A. I would not say that exactly, that they were recommendations, it was some suggestions of some things that were very agreeable to us, and my impression is, that there were some things suggested by them that we adopted, if I recollect right; it is a good while since they were there.

Q. Now, in regard to the duties of the superintendent; are you satisfied with the present scope of his duties?

A. Yes, sir; I am quite satisfied as they are —

Q. Are you of the opinion —

A. (Interrupting.) And I will give you my reason; I would rather have Dr. Gray for an hour than most any man that I know of for half a year; that is wherein the merit of the man — he knows what he is about.

Q. Do you believe that his time is profitably employed in the business management of the institution?

A. Yes, sir; I do think so, certainly.

Q. Do you not believe that it would be wise to relieve Dr. Gray from all such outside duties, except those of a professional character in the institution — relating to the treatment of the inmates?

A. That is a question that is pretty broad; let me answer it as I understand it; I should say the Asylum would suffer if it was confined to that.

Q. In what respect would it suffer, in your opinion?

A. In this respect: the building itself — the ventilation — a great many things that pertains to the management; most of the changes that have been made in that institution he has been mainly the author of; when you visit the Asylum you will see those sun rooms, which I think is a vast improvement; it originated with Dr. Gray so far as I know; and a great many other things that he seems capable of; it seems to be natural to him to make those improvements; I knew the Asylum when it was first built, when Dr. Brigham was there, and I have been through it with him; I know the difference in it now from what it was then; from time to time it has been very much improved, and all the improvements are due to Dr. Gray; that is what I want to say.

Q. Do you think that Dr. Gray should be charged with the responsibility of supervising the purchasing of supplies for the institution?

A. Yes, sir; I think he should be.

Q. Do you not think that his time could be more profitably employed upon the medical branch of the institution entirely?

A. The law makes it his duty to do certain things; you want a change in the law; is that it?

Q. This is the question; whether in your judgment you think a change in that respect would be desirable?

A. No, sir; I do not think a change would be desirable.

Q. Then you are satisfied that Dr. Gray does not have too many different things to attend to — too many duties imposed upon him?

A. No, sir; I do not think he has, with the assistance he has got under him.

Q. Now, about the purchase of supplies; is there any inspection or criticism of the bills prior to their being paid?

A. I should say not; there is wherein there is probably a misnomer in our method of doing things; we have what we call an auditing committee, but it is hardly an auditing committee; it has to examine the accounts and see that they are correct, so that the former proposition that you mentioned does not come in.

Q. So that strictly speaking it is not an auditing committee at all?

A. No, sir; you are right about that; I would like, in this connection, if it is permissible, to state my views about this matter of purchasing of the supplies, and about the present method of doing it.

By the CHAIRMAN:

Q. We shall be pleased to have you give them?

A. It is understood that it has been found fault with a good deal; now, I noticed in the Governor's message, for instance, and that draws my attention to it; he speaks of the expenses of the Asylum, for instance, as against the expenses at other places; and in that he takes the liberty of making this institution the target of all the others, being the parent affair, that is the practice; the Governor, at page 27, says: "A suspicion may well be entertained that in the localities where these institutions are situate, the privilege of furnishing the supplies and materials is granted from motives of friendliness or a desire to patronize home trade, resulting in bargains disadvantageous to the institutions and the State; in seeking to better the condition of affairs, we cannot fail to be reminded of the experience of the State in relation to prison management; during the year ending the 30th day of September, 1876, there was paid from the treasury for the maintenance of these institutions, above their earnings, the sum of $704,379.85; by an amendment to the Constitution adopted in November of that year the superintendence, management and control of the State prisons were vested in a super-

intendent, who entered upon the discharge of his duties in February, 1877; on the 30th day of September following, or in less than nine months, under the new management the deficiency of expenditure was reduced to $369,688.08.; this deficiency steadily decreased until the 30th of September, 1881, when a surplus of $564.35 was reported, which has annually increased until at the close of the last year it reached $9,106.23; there seems to be no good reason why similarly favorable results cannot be obtained by the application of a like system to the control and management of the business affairs of our charitable institutions; it accords with the plan adopted where large private interests are involved; it has the advantage of concentrated responsibility; the Legislature and the Executive should, under such a system, be satisfactorily informed of the actual needs of the different institutions and the necessary appropriations should be cheerfully made; the time of the superintendents could be devoted to their legitimate and proper duties; the detection and prevention of abuses and neglect could be reasonably exacted; a very large saving should be effected in the wholesale purchase of supplies of uniform grade, for all the institutions, and the advantages consequent upon a correct application of business methods would be secured to the people of the State;" that is what I have reference to; at the first idea you would think that was correct, but it is not correct in my judgment.

Q. In what respect is that portion of the Governor's message incorrect?

A. We can buy our supplies as we want them at five per cent profit on the bills as originally purchased.

Q. Five per cent on the wholesale prices?

A. Yes; we do not consequently have a great deal on hand; if we bought larger quantities and kept them on hand, they would lose more in value than the five per cent; lose it in decay and injury; very many of the supplies are of a nature that wont keep.

Q. What supplies are included under that five per cent arrangement?

A. Groceries of different kinds.

Q. What kind of groceries, can you state?

A. Oh, all sorts of groceries.

Q. Do you mean that all the grocery supplies purchased by the institution are purchased upon that basis?

A. No, sir; not all of them; I suppose for instance that eggs are bought of the farmers, and butter is bought of the farmers; meats are bought from the farmers — the stock — and is killed on the ground; all that is brought into that five per cent basis is comprised under that head — it is groceries, many things that are perishable in their nature; there is more than five per cent saved by buying in small quantities, so that they can be used up before they are damaged by being kept on hand.

Q. Do you understand that all groceries purchased from Butler & Hamilton, for example, are purchased upon that five per cent basis?

A. All, so far as I know; there may be some exceptions that is not comprehended in the purchase under that arrangement, that are bought outside.

Q. But so far as the purchases of Butler & Hamilton are concerned, is it all under that five per cent arrangement?

A. Most of them I believe are.

Q. Is it your understanding that the supplies furnished by them to the institution are upon the basis of five per cent profit upon the wholesale rates?

A. Yes, sir; that is as I understand.

Q. And that that applies to all purchases made from them?

A. Yes, sir; that is the way I understand it.

By Mr. Brown:

Q. Don't you think, that in your judgment the Asylum authorities ought to buy goods as cheaply as a retail concern who retails, in an aggregate amount in the whole year, about half of the amount that is used at the Asylum?

A. I should think they ought to be able to buy them as cheap, and I think we do.

Q. You think you ought to purchase them as cheaply and you think you do?

A. Yes, sir; I think so; and I have given a reason why I think it is a great economy to purchase as we have been buying.

Q. If it appears that they are not bought so cheaply, what action do you think the board should take toward effecting a change in the mode of purchasing?

A. I should try; it would be our duty of course to have a change in some way to accomplish the result; that is our duty undoubtedly; the steward would be the best man to know it, and as soon as the board of managers knew it they would change the arrangement very quickly; what is done at present is so done because we deem it to be to the best advantage of the institution that it should be so done.

Mr. Brown — Mr. Chairman, I suggest that you ask Mr. Campbell as to whether or not he possesses any knowledgeof the purchase of any high-priced blooded stock, and if so, what he thinks of the propriety of such a purchase.

The Chairman — I will ask him that question; there are a few more questions about this matter of supplies. Has any member of the board of managers made any criticism upon the method of buying supplies?

A. We have talked the matter over occasionally, perhaps you might call it criticism, as to whether the system could be bettered or not; we have talked about it at our meetings.

Q. Has any suggestion been made toward any change?

A. No, sir, not that I recollect of now.

Q. Has Mr. Winston made any complaint of that matter?

A. I have heard that he has to your committee, but that is all.

Q. Did he make any suggestion or complaint in the board?

A. Well, he may have suggested something like this, an expression which I suppose possible, "you might do better;" if so, we simply want to bring him right down to it and we will do so; we will see whether he can furnish any better or not, if he can, we shall know what to do; I know that others have tried and failed; he is a new member of the board, and it is but recently that I have heard any opinion expressed by any one since the board met. As to the facts of the case, I cannot venture to state them at all.

Q. Are you satisfied, then, that the supplies are purchased as cheaply and as economically as possible?

A. Yes, sir; I am satisfied, so far.

Q. And at as low prices as can be obtained?

A. As far as I know, they are; I have no reason to doubt it now; if any new offers or new openings take place, by which we can get them cheaper, we will attend to it; but I know of none now.

Q. What do you know concerning the character of the cattle or stock upon the Asylum farm?

A. I do not know very much about it now.

Q. How much stock do they keep on the property?

A. Well, quite a lot of cows and hogs; at one time they had a very fine lot of hogs, and I used to take a great deal of pleasure in hearing that man there explain all about them and their pedigrees, etc.; that was a man on the farm; he is dead now. As regards the cattle, they are common cattle, common farm cows, so far as I know.

Q. Are you aware of the possession by the Asylum of any blooded stock?

A. I do not; not blooded, strictly speaking.

Q. Do you know whether or not they have any Holstein cattle there?

A. I don't know; if they have, I should think it was a bad move.

By Mr. Brown:

Q. As president of the board of managers, what do you say as to the propriety of paying out $1,350 for two cows and a bull for the Utica Asylum — would you consider that in keeping with the good management of the institution?

A. No, sir, I should not; I have never heard of such a thing; I know of no such animals there.

Q. Is there any such animals there, purchased at so high a price — would you regard that as too high a price to pay for cattle for the use of the institution?

A. Yes, sir, I should say it was.

Q. That kind is not what you mean by "common stock"?

A. No, sir, I should think not; what I mean by common stock is common dairy cows.

Q. State whether you do or do not consider it advisable to have a

regular inspection of the Asylum weekly by one or more of the members of the board of managers?

A. That is the intention now — that is the rule, in fact.

Q. Do I understand you to say that the present rule is that one or more of the members of the board shall visit and go over all the Asylum weekly?

A. I think they expect to visit the Asylum weekly; it is expected of them; I have gone every week, and oftener; it depends a little upon circumstances; there are times that I think it is necessary to go.

Q. The question is whether you would think it advisable to have a weekly inspection of all the wards by one or more members of the board?

A. No harm would be from it, I should think.

Q. I do not understand you to say that it is now done?

A. No, sir; it is not, I think; I do not think we perform as many duties as we are expected to.

The CHAIRMAN — I think that is all.

Mr. GOODWIN — Mr. Chairman, I suggest that you ask Mr. Campbell as to the extent of his business; the number of employees, etc.

By the CHAIRMAN:

Q. You may state what is your business, Senator?

A. Our business is the manufacturing of cotton goods.

Q. How many hands do you employ?

A. I don't know exactly; if I should call it a thousand I would not be far wrong; I used to be able to go through and call the employees by name; but of late years I have not done that; it is a corporation now.

GEORGE D. JOSSELYN,

Sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside and what is your age?

A. I live at Schuyler's Lake; my age is twenty-three years.

Q. What was your business prior to 1882?

A. I was a farmer; worked on a farm; I was born and brought up on a farm.

Q. In the year 1882 did you make an engagement as an attendant at the Utica Insane Asylum?

A. Yes, sir; it was in that year.

Mr. MORGAN (referring to the employee roll) — It was January 17, 1882, that you went there, and you left August 19, 1882.

Q. Did you make an engagement there in January, 1882, as an attendant?

A. I believe it was in 1881 that I left my name there.

Q. When did you first apply to the authorities of the Asylum for a situation?

A. It was about a year before I went there.

Q. State what you done in the way of making application; when you went there, what did you do?

A. When I went there I called on an attendant that I was acquainted with, and I talked with him a spell; his name was Brownell; I talked to him a spell about it, and the first thing I knew Dr. Josselyn came in there and asked me if I would like a situation there; I told him that I would; and with that the steward came in and asked me if I wanted my name put down; and I told him I would like to have it put down; I just told him that I would like to, and that was all that was said about the matter at that time.

Q. He put your name down as an applicant for a situation?

A. Yes, sir; that is what it was for.

Q. And then you returned home?

A. Yes, sir; that is all at that time.

Q. Was there any further inquiries made of you except if you wanted a situation?

A. Not that I know of at that time.

Q. What was the next thing you heard in reference to a situation at the Asylum?

A. I had a letter from the steward to come and work; a letter saying that I could come and go to work if I wished.

Q. What did you do in response to that letter?

A. I came out here and talked with Mr. Dryer about it and went back home.

Q. What inquiries, if any, did Mr. Dryer make of you at that time?

A. He didn't make any, only he asked me in regard to the rules and one thing and another; then I returned home.

Q. How long did you remain at home at that time?

A. I only just went home; I returned the next morning on the train and went to work there.

Q. Was there any further inquiry made of you?

A. No, sir; only the doctors asked what ward I should go on to; that is, they asked one another; I can't tell their names; I was then sent on to ward one.

Q. Who was the supervisor of that ward at that time?

A. Mr. Jones, I believe his name was.

Q. How many attendants were there on that ward, including yourself?

A. One, I believe, besides myself; there was one supervisor and myself and another attendant.

Q. Had you before that time ever had any experience in any hospital or any similar institution?

A. No, sir, that was the first experience.

Q. You had always been a farmer before that?

A. Yes, sir, I had worked on a farm mostly.

Q. What were your duties on that ward — what did you have to do?

A. I had charge of the dining-room when I went there.

Q. How long did you remain on ward number one?

A. I was on that ward about two weeks.

Q. Did you have any thing to do with the care of the patients during that time, except to work in the dining-room?

A. When I was not at work in the dining-room, I was on the ward with the patients.

Q. What did you have to do then, on the ward?

A. Answer the whistle when the head attendant was not there; the speaking tube that comes up from the office, when visitors were going through.

Q. Then you went from ward one, where to?

A. On to ward nine.

Q. Who was the supervisor of ward nine when you went on there?

A. I think his name was Jones, too.

Q. State what were your duties on ward number nine?

A. I had charge of the dining-room there, too.

Q. And out of dining-room hours, what were your duties?

A. I "overseed" the patients; took care of them.

Q. How many patients were there at that time on ward four?

A. I can't tell exactly, twenty-two, three or four; there were two attendants there, another one beside myself, and there was the supervisor as well.

Q. What was the general character of the patients on ward nine?

A. Very good, I should say.

Q. Whether or not they were quiet patients?

A. Yes, sir, they were quiet patients — very quiet.

Q. How long did you remain on ward number nine?

A. I can't state exactly how long I was there; it was about five or six months I should think; somewhere about that.

Q. Were you then transferred to any other ward?

A. I left the Asylum then; I was on ward nine when I left on the 19th August.

Q. While you were there in the institution, state if at any time you saw any of the attendants punishing or correcting the patients in any way?

A. I see 'em make the patients mind; asking them if they would sit down, and they would give some slang back, you know, and keep on making a noise, and the attendant would kick their feet from under them, and down they would go.

Q. That is to say, the attendants would kick the feet of the patients from under them, and the patients would fall down?

A. Yes, sir; and the result would be that he would fall on to the floor, and he would act as though it had hurt him very much, sometimes; of course I can't tell how much it hurt him, you know.

Q. Can you give us the names of any attendant that you saw do that?

A. No, sir, I can't now; I don't remember the names.

Q. What other, if any, punishment did you see the attendants inflict upon the patients?

Q. This was not on ward nine that I see that.

Q. Was it on ward one that occurred?

A. No, sir, it was on ward eight; that was not my ward.

Q. What other punishment did you see inflicted upon patients by attendants, if any?

A. I don't know of any others.

Q. What punishment, if any, was inflicted by the doctors or by the officers upon patients?

A. By sending them on to rough wards.

Q. When a patient had done something that was regarded as wrong, what was the custom in the way of the officers punishing the patients?

A. They would send him back on to a rough ward.

Q. You mean by that, wards that are greatly disturbed, do you?

A. Yes, sir.

Q. From what ward to what ward do you know of a patient eve being sent as a punishment?

A. I know of them sending patients from ward ten to ward twelve.

Q. Is twelve a more disturbed ward than ten?

A. Yes, sir.

Q. From your experience in the asylum, and acquaintance with the patients there, what was the effect upon the patient in sending them on to a more disturbed ward?

A. I could not tell; I did not see him after he was sent, only in one case.

Q. In your opinion would it tend to make the patient more disturbed to send him on to those rougher wards?

A. I suppose so, but I can't tell.

Q. How often did you see Dr. Gray on ward one while you were upon that ward?

A. I did not see him at all while I was on that ward.

Q. After you went to ward nine how often did you see Dr. Gray on that ward?

A. I saw him once on that ward.

Q. And you were on that ward how long?

A I was on there nearly six months.

Q. Who had charge of ward nine when you were there?

A. Dr. Russell, I believe.

Q. How often did Dr. Russell visit ward nine?

A. I could not say how often he visited it; he would not come on to the ward all the while; his assistant might come sometimes; he had charge of the ward, and his assistant was Dr. Josselyn; he came on the ward every day, Josselyn did.

Q. Whenever a patient complained of being sick what was the manner of procuring and giving medicine to the patient; if a patient complained of being sick, what was done in that case?

A. The doctor would take it down in his book, if the doctor was in the ward at the time, and then he would send up medicine.

Q. Suppose the doctor was not in the ward, how would it be in that case?

A. Then the attendant would have to report to the supervisor, and the supervisor would go and report to the doctor, I suppose.

Q. Then through what source would the patient get the medicine?

A. The supervisor brings medicine three times a day.

Q. Then instead of the doctor coming to see the patient, the supervisor would bring the medicine?

A. Yes, the doctor would come up and see the patient if he was very bad.

Q. On how many occasions did you see patients' feet knocked from under them so that they would fall to the floor?

A. I saw that done once.

Q. State whether to your knowledge there was any report made of that case?

A. I did not make any, and I don't know if any was made.

Q. Did the patient complain of being injured by the fall?

A. Not that I know of.

Q. Then how did you judge that it hurt them badly?

A. By his catching hold of his arm by the other hand.

By Mr. Rice:

Q. Have you ever seen any abuses in the Asylum on the part of attendants toward patients, except such as you have named?

A. No, sir; I don't remember any.

Q. None at all?

A. No, sir; I don't remember of any.

Q. What do you say as to the restraint used in the Asylum; have you ever seen any restraint used?

A. Yes, sir; I have seen them in restraint.

Q. How long a time have you seen a patient under restraint, successively?

A. I could not say how long at a time; I could not say whether it would be all day or not.

Q. Have you ever seen a man strapped in his chair all day?

A. No, sir; I don't remember that I have.

Q. Are there men there in restraint nearly all the time?

A. I could not say as to that.

Q. Were you ever on a bad ward?

A. No, sir; I never was on one of the bad wards, only in passing through them whenever I was sent; I was never an attendant on one of those wards; I have been through them, but that is all.

Q. Do you recollect any men on the wards where you were an

attendant who had to have their food brought to them, or did all the patients go to the table?

A. Yes, sir; they all went to the table.

Q. Were any restraints used in any of the wards where you were?

A. No, sir; no restraints of any kind.

Cross-examined by Mr. GOODWIN:

Q. What were you doing on ward eight when you saw what you have stated about this kicking?

A. I was carrying the clothes that came in from number six from the wash-house on to that ward by mistake and I carried them over on to number six.

Q. Do you know who the attendant was who did it?

A. No, sir; I did not know his name at the time of it, but there were so many changes that I cannot remember now.

Q. What were you doing on ward ten when you saw the patient transferred to ward twelve?

A. I was carrying clothes.

Q. How do you know that they were transferred to twelve?

A Because I saw the patient there.

Q. When you were on ward ten, state to the committee how this man was transferred?

A. I do not understand your question.

Q. What conversation did you hear between any persons on that ward with reference to the transferring of the patient from one ward to another?

A. He got out of the Asylum; what caused him to be put on ward twelve was that he run away or got out somehow, and they caught him and took him back and put him on No. 12.

Q. Did you hear of his escape from the Asylum previous to going on ward ten?

A. Yes, sir; I had heard of it.

Q. Leave that out then, and go to the conversation that occurred in your hearing on ward ten previous to his transfer to ward twelve as a punishment?

A. I supposed by his being there that they had sent him back in that way. I did not hear any thing in the ward about it; I did not see him taken to the ward, but I saw him there; I had seen him on one ward, and then I saw him on the other.

Q. Then you did not see him taken from ward ten to ward twelve?

A. No, sir; I saw him on ten, and after he got caught then I saw him on twelve.

Q. And that is the only reason you have for saying that the patient was punished by being removed from one ward to another?

A. Only that, and what I have heard the attendants say.

Q. And that is all you know about it of your own knowledge?

A. Yes, sir; that is what I know about it.

Q. In ward nine you have stated that the patients were quiet?

A. Yes, sir.

Q. Do they walk out?

A. Yes, sir; they did, in pleasant weather.

Q. Did you ever go with them?

A. Yes, sir; I have been with them.

Q. At such times how long did you remain out?

A. About an hour it would take to walk round with them in the winter time.

Q. And how long would you be out in the summer?

A. We went out into the garden in the summer time.

Q. And how long would you remain out then?

A. Until twelve o'clock, from a quarter to eleven.

Q. When you went out in the garden were any patients left in the ward?

A. Not unless there was an attendant with them.

Q. But patients have been left there with an attendant on the ward when you have been out with patients?

A. Yes, sir.

Q. Do you know whether on such occasions, of your own knowledge, whether Dr. Gray at those times ever visited the wards?

A. No, sir; I do not know.

By Mr. HASKELL:

Q. You say you heard that the patients were sent back as a punishment?

A. Yes, sir.

Q. From whom did you learn that fact?

A. From different attendants; old attendants, that had been there.

FRANCIS A. EASTMAN,

Sworn and examined, testified as follows:

By Mr. MORGAN:

Q. You reside in Utica?

A. Yes, sir.

Q. And have, for how long?

A. Since last June.

Q. Are you the editor-in-chief of a daily paper in Utica, called the "Utica *Daily Press*"?

A. I am.

Q. Have you any acquaintance with Dr. Gray?

A. Yes, sir; slight.

Q. Have you ever visited the Asylum?

A. No, sir.

Q. Are you acquainted with the first assistant, second and third assistant physicians, or either of them?

A. I have been introduced to one or more of the physicians at the Asylum.

Q. Which ones have you been introduced to?

A. I don't think I can give their names, I simply met them casually.

Q. Are you acquainted with any patients that are in the Asylum?

A. No, sir.

Q. Are you acquainted with any attendants in the Asylum?

A. No sir.

Q. Have you any acquaintance with any ex-attendant?

A. No, sir.

Q. I hand the witness the "*Daily Press*" of Saturday morning, February 16, 1884. Will you tell the committee who wrote the communication that I show in the "*Press*" of the 16th?

A. I cannot, I believe, at this moment give his name. The man himself handed me the communication.

Q. Have you got the original manuscript?

A. No, sir.

Q. What has become of that?

A. I don't know; it has gone where all manuscript is liable to go.

Q. Didn't you write that yourself?

A. No, sir.

Q. Didn't you tell me in your printing office in the presence of one of your men, that a man came into your office, and made a statement about it, and you wrote that yourself?

A. No, sir.

Q. Do you know the man who did write that?

A. I never saw him before; I have seen him once since; I had another communication from him, which I declined to print; he is a large Irishman and lives in East Utica.

Q. Will you furnish us with the name of the man who wrote that communication?

A. Yes, sir; when you called at the office I told you I could get the name.

Q. You say the same man has furnished another communication?

A. He brought another communication there; it was not printed.

Q. Have you that?

A. No, sir.

Q. You cannot furnish us with that, either?

A. No, sir.

Q. Did you show me the communication I called on you for?

A. No, sir.

Q. I went to your office and civilly asked you to furnish the committee with the name of the author of that correspondence, did I not?

A. Yes, sir.

Q. I did it civilly, did I not?

A. Yes, sir.

Q. And you did not furnish it?

A. I gave you one name, Mr. Halpin.

Q. He didn't write this article?

A. No, sir.

Q. Did you give me the name of the writer of that communication?

A. No, sir, and I told you why; because I did not know him, but I told him our telegraph operator, Mr. McCauley, knew the person and would give him the name.

Q. Was not Mr. McCauley right close by?

A. No, sir.

Q. He was the young man right by at the time?

A. I don't remember; Mr. McCauley is only there nights.

Q. This communication was published on Saturday, was it not?

A. If that is the date of the paper; I don't know when it was published (looks at the paper); this is the paper of Saturday morning; it is very likely I did with this communication as I frequently do, I make alterations in them and copy them if they are not well written; I don't know whether I copied that or not.

Q. I was in your office following the issue of that paper on Monday, wasn't I?

A. I don't remember the day you were there.

Q. Did you have the original communication?

A. Not that I am aware of; communications are usually distributed, either in the composing-room or outside.

Q. Do you publish communications that have not the writer's name upon them, without having the writer's name furnished to you?

A. Sometimes we do.

Q. You expressly say in that issue of the paper that you won't do it?

A. Yes, sir.

Q. You say thus, "We cannot promise to publish any of these communications that have not the signature of the writers attached?"

A. Yes, sir.

Q. Did you publish these communications that have not the signature of the writer attached?

A. Yes, sir; I did.

Q. Did you publish it without knowing who the man was who furnished it?

A. I know in a general way who he was; I saw the man and his name was given in my presence, but I know nothing of the man.

Q. Can you give that name now?

A. No, sir.

Q. Can you give the street or number where he lives?

A. No, sir; I was told he lives in East Utica.

Q. Who was present when the name was given?

A. I think another man came with him; I was told he was known in the office; Mr. McCauley knew him, and a man named Perry knew him.

Q. If the writer of this could be known, you would regard it as very important evidence for the committee, if this statement is true, and we could get the man?

A. I suppose so.

Q. Yet you don't know what has become of the original communication?

A. I do not.

Q. And you can give the committee no further light on the subject, except you think he was a large Irishman living in East Utica?

A. I think I can probably furnish you with the man.

Q. Can you furnish the copy you made of it yourself?

A. No, sir; I cannot do it.

Q. How many letters have you received upon the subject of this investigation?

A. Several; I don't know exactly how many.

Q. You showed me or gave me the name of Mr. Halpin as the author of one letter?

A. Yes, sir.

Q. You took the letter out of your drawer?

A. Yes, sir; out of the pigeon-hole.

Q. You have never published his letter?

A. No, sir.

Q. Did you know Mr. Halpin?

A. No, sir.

Q. Did he come to your office with it?

A. No, sir.

Q. Why didn't you publish his letter?

A. Because I thought enough had been said on the subject by correspondence; it didn't seem to have any point in it.

Q. Halpin's letter?

A. Yes, sir.

Q. This letter you thought had a point in it?

A. Yes, sir; I thought it did.

Q. And still you didn't retain the letter?

A. We never do; it is not the custom in the printing office to retain manuscript; they are destroyed the same day they are used.

Q. What is the object of having the name of the writer; as a voucher for its good faith?

A. It is some little guarantee for the man's sincerity.

Q. It must be a very little if you so soon destroy the evidence?

A. Sometimes a very little, sometimes a great deal.

Q. Do you regard this as being of any great importance, this letter?

A. No, sir; it was simply the production of a writing of a matter that the air was full of in the community.

Q. If we could have this big Irishman as a witness, and he would substantiate that letter under oath, you would regard it as a very important evidence, would you not?

A. I don't know whether I would or not; I haven't looked at it as a lawyer would; I don't know whether it has any pertinency in it or not.

Q. Have you, in your possession, any letters from any person

who, from their knowledge, should be produced as a witness before this committee?

A. I don't think I have; I know I have not.

Q. Have you any personal knowledge of the management of the Asylum or the treatment of the patient that you can give to this committee?

A. None whatever.

Q. Can you give the committee the name of any person who can furnish or give evidence of misconduct or mismanagement in the Asylum?

A. I cannot.

Q. You cannot give any?

A. No, sir.

By the CHAIRMAN:

Q. Did you say Mr. McCauley, the telegraph operator, can give the name of this Irishman?

A. Yes, sir; I think so.

Q. Do you now believe that he now knows the name of this Irishman?

A. I have reason to believe so; I was told he knew it.

Q. Is he now connected with your paper?

A. Yes, sir.

Q. In a subsequent issue of the "Utica *Press*" appeared, I believe, an editorial address to this committee, calling their attention to the letter of this "ex-attendant," and suggesting to the committee that such ex-attendant should be called, do you recall that?

A. I do not.

Q. State whether this ex-attendant was known to any other person in your office except Mr. McCauley?

A. Yes, sir.

Q. Were they present at the time he called?

A. I don't know whether they saw him; they were probably in the office.

Q. Were they aware of his being there?

A. Yes, sir; I think they were aware of his bringing a communication.

Q. Will you name any other person?

A. I think a Mr. Perry, in my office; he is a reporter.

Q. Any other person?

A. I don't know of any other; I think they all knew him; he was a man well known in the town.

Q. Will you endeavor to ascertain, from some person connected with the office, the name of such ex-attendant?

A. I will.

Q. And communicate the same to this committee?

A. I will, this afternoon.

By Mr. MORGAN:

Q. Have you read over this communication since you have been in the room?

A. Not all of it; I have most of it.

Q. Do you think that is the language used by an Irishman?

A. Yes, sir; as I have said it may have been corrected and revised.

Q. You think it is the language used in the article furnished?

A. Yes, sir; we have sometimes to correct the grammar in such things.

Q. Who did that in this case?

A. I did, I think; yes, sir.

Q. And it was set up from your manuscript?

A. I think it was.

Q. Then the truth is that you wrote out the article that was published?

A. I copied the article, making grammatical corrections.

Q. You are sure you made no additions and left out nothing?

A. No, sir, nothing that was material.

Q. I suppose you have in your rooms a spindle on which the manuscript is put after it is set up in type, have you not?

A. Yes, sir.

Q. Haven't you got your original manuscript that it was set from?

A. No, sir, every thing is cleaned out every morning after the type is set up.

Q. Have you looked to see if it was there?

A. No, sir.

Q. Will you please look in your office and see if it is there?

A. I will; there is no trouble in having the man as I told you when you called.

Q. Can you give any reason why this was destroyed and the Halpin letter was not?

A. The Halpin letter had not been used, it is in my pigeon-hole yet.

Q. The Halpin letter was sent on Friday, was it not?

A. Yes, sir.

Q. So that you had the Halpin letter before you published this?

A. Yes, sir.

Q. And you retained the first that was not published and destroyed that which was published?

A. I had two letters in the paper, once before I said in an editorial in the paper that I would not publish papers unless the name of the writer accompanied it; the next day in came the same letter with the name attached.

Q. The first letter you got from Halpin was there on Wednesday?

A. I don't remember the date.

Q. And the letter with his name to it was on Friday?

A. I don't remember.

Q. The one you sent to me was on Friday, wasn't it ; that is the one you took out of the pigeon-hole ?

A. I don't know what the date was.

Q. Explain to the committee why it was you destroyed the letter you published, and retained one that you did not publish ?

A. I thought perhaps I would publish it ; I laid it aside for consideration.

Q. I told you I had a letter from Halpin, did I not ?

A. I don't remember whether you did or not.

Q. And that we had his name and could produce him, and that we hadn't the name of the man that wrote this letter ?

A. I don't remember any such thing.

OWEN J. McCAULEY,

Sworn and examined, testified as follows:

By Mr. MORGAN.

Q. You are a telegraph operator in the Utica *Press* office ?

A. Yes, sir.

[Handing a copy of the Utica *Press* to witness.]

By the CHAIRMAN :

Q. Have you ever seen that article before signed "ex-Attendant," in that paper ?

A. I have seen this article.

Q. Have you any information as to who wrote it ?

A. I could not say as to who wrote the article.

Q. Do you know who brought that article to the office ?

A. I cannot say as to who brought the article to the office.

Q. Have you any information about the article whatever ?

A. I have heard a conversation.

Q. Between whom ?

A. Between Colonel Eastman and I believe two gentlemen.

Q. Who were they ?

A. One gentleman I don't know, the other gentleman I have been introduced to but cannot remember his name.

Q. Then you don't know the other gentleman ?

A. I don't.

Q. Was either of them ex-attendants of the institution to your knowledge ?

A. Not to my knowledge.

Q. Do you know any ex-attendant of the institution who has been in your office ?

(Not answered.)

Q. Can you make any such statement?
A. No, sir; I cannot.

By Mr. MORGAN:

Q. Did you see any man deliver the original manuscript of that communication, or what purports to be a communication?
A. I didn't see the gentleman deliver it.
Q. Did you see the man himself?
A. I did.
Q. Describe him?
A. About thirty-five years of age, five feet ten inches in height, dark complexioned, weight about 190 pounds.

By Mr. RICE:

Q. What nationality?
A. Irish, I should think.
Q. You think he was an Irishman?
A. To the best of my belief.
Q. You had never had any acquaintance with the man?
A. Only that I met him.
Q. Did he make any representation that he was an ex-attendant of the Asylum?
A. I don't know what representations he made to Colonel Eastman.
Q. Did you hear him make any representations, any such representation?
A. I cannot say distinctly about that.
Q. Did you know the subject of his interview with the editor?
A. It was in regard to the Insane Asylum; I overheard it.
Q. What was it he said?
A. I heard him say to Colonel Eastman that he believed that it was proper that the people should know the facts of the management of the Insane Asylum.
Q. Did he pretend to state there that there was any abuse at the Asylum, did he pretend to state that, in that interview?
A. I cannot say.
Q. You say that he said it was proper this investigation came on?
A. Yes, sir.
Q. What reason did he give for that?
A. I cannot remember of any particular reason that he gave for it, owing to the position I was in, in being separated from the conversation by a partition.
Q. Did Col. Eastman ask you there if you knew this man?
A. Yes, sir.
Q. You said, "Yes, sir."
A. Yes, sir.
Q. You said he was a reliable man?
A. Yes, sir.

Q. Why didn't you tell his name?

A. Well, owing to the failing I have of remembering people's names.

Q. He was a man you knew well enough to recommend as a reliable man?

A. I remember that by being told about it by the gentleman who introduced me to him; I remember of that speaking to Col. Eastman and telling him I had heard that by being introduced to him by a gentleman who told me he was a representative man of East Utica.

Q. Who was the gentleman who told you he was a representative man of East Utica?

A. Mr. A. V. Lynch.

Q. Where does he live?

A. His business is at 106 Genesee street.

Q. When did he introduce you to this man?

A. About two months before this interview at the printing office.

Q. Where were you at the time of the introduction?

A. In Mr. Lynch's store.

Q. Did you have a conversation with this man at the time of the introduction?

A. No more than a general conversation of one or two minutes.

Q. After the introduction, and prior to the interview at the office, had you seen the man?

A. Yes, sir.

Q. So as to be acquainted with him?

A. Not any more than to become acquainted with his features.

Q. Did you talk with him during the mean time?

A. I did not.

Q. Or spoken with him at all?

A. No, sir.

Q. Were you able to give his name the morning he came into the printing office?

(Not answered.)

Q. How was his name found out by Mr. Eastman?

A. I believe I told his name.

Q. Then you did remember his name when he came in that morning?

A. I remembered his name to the best of my recollection on the introduction.

Q. When he came to the "*Press*" office on that occasion, you remembered his name as given to you at the time of his introduction by Mr. Lynch?

A. Yes, sir.

Q. How long is it since that interview was held at the "*Press*" office?

(Not answered.)

Q. It is not long, is it?

A. It was since the trouble at the Asylum.

Q. Within a few weeks?

A. Yes, sir.
Q. Now, can't you recollect the man's name?
A. I think his name is Buckley.
Q. What is his first name?
A. I could not swear as to ever hearing his first name.
Q. Who else was in the "*Press*" office on this occasion?
A. My memory is not clear as to that.
Q. Was there more than Mr. Eastman, Buckley and yourself?
A. Yes, sir; three or four others.
Q. Some one came in with Buckley, didn't they?
A. Yes, sir; some gentleman, a stranger; I was not introduced to him.
Q. How did the conversation commence that morning; who was first addressed by Buckley after he came into the office?
A. I don't remember.
Q. He was not known to Mr. Eastman, was he?
A. I cannot say.
Q. Didn't you introduce him to Mr. Eastman?
A. I mentioned his name to Colonel Eastman.
Q. Before they had any talk at all?
A. I don't think I did.
Q. Describe a little, if you please, the location of this printing office and the editor's room; was it in the editor's room that this interview was had?
A. Yes, sir.
Q. You were there when these two men entered?
A. I passed from the proof-reading room through the telegraph editor's office to my office as the gentlemen entered the door, and they entered Mr. Eastman's office and engaged in conversation.
Q. Where were you at the time they entered Mr. Eastman's office?
A. I was then passing through the telegraph editor's office, on my way from the proof-reading room to the telegraph office.
Q. Were you within hearing of what took place in the editor's room?
A. I was.
Q. Who spoke first?
A. I cannot remember.
Q. What was the first thing said, any way?
A. That I cannot remember.
Q. What was the first thing you heard said, that you now remember?
A. I cannot repeat the words as they were spoken by these gentlemen, but their purport was, that this was an article that should be printed, as it was proper for the people to know of the management.
Q. Did this man have an article with him written out?
A. I should judge so.
Q. Did you see it?

A. I did not.
Q. How soon did you go to the editor's room?
A. About three minutes after these gentlemen entered.
Q. Did you remain in there until Buckley left?
A. No, sir; I remained in there possibly half a moment.
Q. Did you speak to Buckley?
A. I merely nodded my head and said, "Good evening."
Q. Did you shake hands with him?
A. No, sir.
Q. Did you return again before he left?
A. I do not think I did.
Q. Tell me all you said during the half moment you were in the room?
(Not answered.)
Q. Tell me what you said during the time you were in that room?
A. Well, I cannot remember.
Q. Do you remember any thing?
A. I remember bidding good evening to this gentleman, Mr. Buckley.
Q. Then your greeting and "good evening" was all within half a moment?
A. Yes, sir.
Q. Cannot you remember any thing that you said?
(Not answered.)
Q. What was said to you?
A. Well —
Q. Come, witness, reply?
A. I remember Colonel Eastman saying to me, "Do you know this man?" I replied, "Yes, sir." I further stated that he was one of the representative men of East Utica.
Q. Go on —
A. And then followed a general conversation in regard to it, that I cannot remember the particulars of.
Q. Cannot you remember any thing after?
A. I cannot without having something to recall it.
Q. What would recall it to you?
A. If I were to be asked by either gentleman, if I could remember such and such things, I possibly could remember.
Q. Cannot you remember any thing that occurred during that interview; give it in a general way?
(Not answered.)
Q. That is a comparatively recent date and upon an important subject?
A. I understand that he —
Q. Give us in a general way what happened while you were in the office?
(Not answered.)
Q. What was the topic of conversation while you were in there?
A. About the recent abuses at the Insane Asylum.

Q. By whom was that topic spoken of?
(Not answered.)
Q. Now, who spoke about it to these persons present there?
A. Well it is a pretty hard matter for one to recollect, seeing I was engaged in my other duties.
Q. You say the subject of abuses at the Asylum was the subject of conversation; now which one spoke about it?
A. I cannot remember.
Q. Did Buckley say any thing about it?
A. I would not care to state upon my oath, that he said any thing about it.
Q. Did Mr. Eastman?
A. I would not care to state that either.
Q. Did you say any thing about it?
A. I didn't speak particularly of the abuses at the Insane Asylum.
Q. What did you speak of?
A. I spoke "good evening" to these gentlemen, and I stopped for possibly half a moment, and then left and went to my own office.
Q. Where were you when you said to Colonel Eastman this was a reliable gentleman, and a representative man?
A. I was in his office.
Q. What else did you say while you were in there?
(Not answered.)
Q. Witness, how did you know what the subject of that interview was?
A. From overhearing the conversation.
Q. Where were you when you overheard the conversation?
A. In my office.
Q. How far is that from the editor's office?
A. About ten feet.
Q. Are they adjoining rooms?
A. There is one room between.
Q. Were the doors open?
A. Yes, sir.
Q. Could you hear, distinctly, what was going on in there?
A. Not only when the voices were raised.
Q. How are the rooms divided from each other?
A. By a board partition or rails, I should judge, seven feet high.
Q. Not to the ceiling?
A. Within about four feet of the ceiling.
Q. And the doors were open between the rooms?
A. The door was open between my room and the telegraph editor's room, and it was closed between the telegraph editor's room and Mr. Eastman's room.
Q. Was that door closed before you went in there or after?
A. That I could not say.
Q. What time of day was this interview?
(Not answered.)

Q. Was it morning, noon or night, come?
A. It was in the evening.
Q. At what hour?
A. My recollection is not clear enough to give the hour.
Q. Was it dark?
A. I think it was.
Q. Was the gas lighted?
A. Yes, sir.
Q. How long did Buckley stay in the office?
A. I should think twenty minutes.
Q. You have no doubt now that his name is Buckley, have you?
A. Well, I could not state upon my oath that his name was Buckley.
Q. I say you have no doubt of it, have you?
A. I have not.
Q. What is his business?
A. I believe he is a groceryman.
Q. What is his street and number?
A. I don't know.
Q. Do you know his residence?
A. No, sir; I don't.
Q. When did you last see Colonel Eastman — have you see him to-day?
A. Not fifteen minutes ago.
Q. Where?
A. On the steps of the hotel.
Q. Did you have conversation with him?
A. I bade him good afternoon.
Q. Nothing else?
A. I cannot remember.
Q. Not a conversation held fifteen minutes ago?
A. I cannot remember exactly the conversation; I can give the substance of it.
Q. Give us that?
A. He wished to know if I knew that gentleman's name who was in the office — what that gentleman's name was? I told him I thought it was Buckley.
Q. What else?
A. That was all.
Q. Did he suggest to you that that was his name?
A. He did not.

By Mr. Morgan:

Q. State if you told Mr. Eastman down on the hotel steps that you thought his name was Buckley — why was you so long in remembering his name here?
A. Well, I was trying to—to—to tell you—to the best of my ability, without a doubt, what his name was.

Q. I asked you his name?

A. Yes, sir; but if you recollect, I was on my oath.

Q. Mr. Howe, the Chairman, asked you his name, and Mr. Rice, and it was a very long time before you could even guess that it was Mr. Buckley, was it not?

A. No, sir; it was not a long time; I gave it.

Q. You are sure that this was the communication that the man Buckley handed in, are you not?

(Not answered.)

Q. Are you sure that the communication you looked at in the paper of the 16th is the communication handed in there, or that the man Buckley gave — are you sure of that?

A. In my mind I am sure, but I could not say so on oath.

Q. Did you read the communication?

A. I sketched the communication in the office.

Q. Where were you when you sketched it?

A. I was in Colonel Eastman's office.

Q. Why didn't you tell Mr. Rice on his through examination that you sketched that communication in Colonel Eastman's office?

A. Did you ask me that question, Mr. Rice?

Mr. Rice — No, sir; but I asked you how long you were in there; you said half a minute; now you can state how much sketching you did in half a minute?

A. After the communication was left upon the editor's table; after he had left the room, as I did on every day a hundred times an evening; I saw the manuscript lying there, and just tossed the leaves over to see how lengthy it was; I gave it a mere casual glance.

Q. Is that what you call "sketching?"

A. Yes, sir.

Q. In printer's language, the tossing the leaves over to see how long it is; is that called in a printer's office, "sketching?"

A. Some persons who are acquainted with printer's establishment might not call it "sketching," but I do.

Q. How long have you been engaged in a printing office?

A. About a year.

Q. Did you ever hear the term applied, "sketching"; that it was simply looking at a communication?

A. I cannot say that I have.

Q. Didn't you use the term "sketching," here, without the thought that you had said to Mr. Rice that you were not in there over half a minute?

A. No, sir; I did not.

Q. What you saw on the table, was not that in Colonel Eastman's handwriting?

A. (After a long pause.) The article that I sketched over on the table was not in Colonel Eastman's handwriting; I am positive of that.

Q. Why didn't you answer me right off; readily?

A. Permit me to state, that on the editor's table there is possibly twenty files of manuscript.

Q. Usually; was there then at that time?

A. There was a number.

Q. Did you look them all over?

A. No, sir.

Q. How was it you looked this one over?

Q. Because to the best of my recollection, it was an article that was in Mr. Buckley's hands, and I saw him engaged in conversation with Colonel Eastman, and my curiosity to see how much of a document it would make prompted me to sketch it.

By Mr. RICE:

Q. Did you tell me you saw Buckley have nothing of that kind?

A. I didn't.

Q. You didn't?

A. I don't think I did.

By Mr. MORGAN:

Q. You say you did not tell Mr. Rice that you didn't see Buckley have any communication in his hands, but heard him talking about it; what day was it when the man you call Buckley was in the office?

A. I cannot remember the day of the week or the day of the month, but I remember it was a day very shortly after the alleged abuses at the Asylum were being made public.

Q. Was this the first communication that purported to be from "ex-attendant," that you published?

A. That I cannot say, because I don't know.

Q. Don't you read the paper; let me ask you; you didn't hear Colonel Eastman's testimony?

A. No, sir.

Q. Look at that and see if that is the communication that Mr. Buckley brought (showing witness) or another communication?

A. This communication that you now show me is not the one that I read on Colonel Eastman's desk.

Q. How do you know?

A. By the reading of both articles.

Q. Then you read that article through?

A. I read the article through and the other one; I have read both of them through; and this article you now give me last does not correspond in any way with the article I read, that laid on Colonel Eastman's desk.

Q. Then you read it?

A. I sketched it through as you would barely turn it over, and in that manner read half a sentence perhaps, and figured up how much it would make on a page.

Q. Then you say you read the Buckley communication?

A. If you will accept my statement of that.

Q. Do you say now that you read a part of the Buckley communication?

A. I read a part of it, yes, sir; several parts of it.

Q. A little while ago you said you sketched it, then you said that you turned the leaves over, simply, to see how much there was of it, and how much it would make, didn't you?

A. I said that.

Q. Now you say that you read a portion of it?

A. I do.

Q. Did you correct any part of the Buckley communication?

A. I did not.

Q. Did you see it again after you say you saw it alone on the editor's table?

A. Do you mean did I see the manuscript?

Q. Yes, sir; did you see the manuscript again after you saw it on Colonel Eastman's table?

A. I did not.

Q. Did you know that Colonel Eastman copied that communication?

A. I don't.

Q. Do you know whether he did or not?

A. I don't.

Q. What is done with communications of that character — with the original manuscript?

A. The original manuscript, it is, unless by some particular request, it is generally destroyed as it passes from the proof-reader's hands for the last time.

Q. Was the article that you saw, the Buckley article sent by Buckley, was that signed "ex-attendant"?

A. That I could not say.

Q. You read a part of the article?

A. Yes, sir.

Q. But don't recollect seeing who the writer was?

A. I don't.

Q. In turning it over, as you state, you turned it through to the last page, did you not?

A. I cannot remember whether I turned to the last page or one or two off the last.

Q. If you wanted to see how much there was after, or how much it would make, you would turn to see all the pages, wouldn't you?

A. Not necessarily so.

Q. When you met Colonel Eastman on the steps, he asked you if you remembered the man who gave that communication?

A. Colonel Eastman asked me —

Q. Give me what he said to you when you met him on the hotel steps a short time ago?

A. I cannot remember wether he said, "What is that man's

name;" or, "What did you say that man's name is that was in the office there;" I believe, and to the best of my recollection, I answered Mr. Buckley; there was some gentleman here with him who subpœnaed him, Mr. Henderson.

Q. What did Colonel Eastman say?

A. That was all he said.

Q. There is a man by the name of Buckley, who is a private watchman on Catharine street?

A. I believe he is a watchman of different streets, an entire block?

Q. His name is Buckley?

A. Yes, sir.

Q. And he is a large Irishman, isn't he; was he the man that handed that in?

A. He wasn't.

Q. Have you seen the other Buckley since the time he was in the printing office?

A. I have seen him on the street once or twice.

Q. How did you know that man was a representative man of East Utica?

A. From the introduction I was given to him by Mr. Lynch; in speaking of the gentleman after he went out, I mentioned the fact of the gentleman's prepossessing appearance; Mr. Lynch said "yes, he is quite a gentleman, he is one of the representative men of East Utica;" that was all that passed.

By Mr. Howe:

Q. Did you ask where he lived?

A. I didn't.

Q. Do you know now where he lives?

A. To say positively where he lives, I don't know; but it was in that locality, East Utica.

Q. Where would you go to find him, if you wanted to?

A. I should go over in the district that is surrounding Bleeker street, and in that neighborhood.

Q. Then how would you go to work to find him?

A. Make inquiries round there in that locality.

Q. Of whom?

A. Of the people who lived there and in business there.

Q. Is he a wholesale or a retail grocer?

A. I cannot tell you.

Q. Have you spoken to Mr. Lynch about him since?

A. I have not.

Q. When did you first ascertain that he was an ex-attendant of the Asylum?

A. I believe my first and only knowledge of his being an ex-attendant was from overhearing the conversation that passed between him and Colonel Eastman.

Q. Have you any idea what time he was attendant there?

A. If you will permit me to explain to you the position you will see why I should not overhear the conversation; my business is a press operator; a report comes in and I take it from the instrument, which makes a loud and distinct sound; I have to pay almost my particular attention to the report; I am engaged in copying, unless it happens to be something in the general run of business, where your mind is relaxed for a moment, of course then you hear the conversation going on around you; but if you are busily engaged in taking special matter from the instrument you may hear this conversation, but it will pass through your head so quickly that you cannot have any recollection of it, unless it be something unusual, like violent language or something that would disturb you.

Q. Was there any thing said in the course of conversation that you did hear about the time that this Buckley was in the Asylum?

A. I don't believe that there was.

Q. Did you hear him say what his duties were?

A. No, sir.

Q. Or what he was doing in the Asylum?

A. No, sir, I did not.

Q. Did Mr. Eastman ask him any questions about that, that you heard?

A. I did not hear any such thing.

Q. Did you hear him pass any criticism upon the Asylum?

A. I overheard him say that the article should be published — that it was a proper thing.

Q. Did you hear him say any thing in criticism of the Asylum.

A. Nothing more than that conversation.

Q. How long did that conversation last — that is, what was the whole time that Buckley was in the office?

A. It is almost impossible for me to answer that question, because the conversation lasted possibly twenty minutes.

Q. It lasted twenty minutes, and you have stated all that you heard of that conversation?

A. Yes, sir; I have to the best of my recollection.

ANTHONY V. LYNCH,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your business and residence?

A. Utica; in the hat and men's furnishing business.

Q. Do you know this Mr. McCauley, who has just left the room?

A. I do know a man of that name.

Q. Do you recollect introducing him to any person in your place of business two or three months ago?

A. I have introduced him to several persons in my store.

Q. Can you recollect the name of any person to whom you introduced him within two or three months?

A. I have introduced him to A. R. Mahar and to Mr. Edward Martin, but I would not say whether it was within two or three month's time.

Q. Can you now think of any others to whom you introduced him?

A. Yes, sir; there are several others whose names I cannot recall at present; I have introduced him to quite a number.

Q. Do you recollect an occasion when you introduced him to a gentleman who shortly after the introduction, went out, and that then you and McCauley had some conversation about the gentleman who had just gone out?

A. No, sir, I don't remember any particular occasion like that.

Q. Do you know a man by the name of Buckley, of East Utica?

A. Yes, sir, I know him.

Q. What is his business?

A. A grocer.

Q. Where does he live?

A. On the corner of Bleecker and Sumpter street.

Q. What is his first name?

A. Daniel.

Q. Have you any idea how long he has been engaged in that business — grocer?

A. He has been in that business two or three years.

Q. What was his business before he was a grocer?

A. I have heard him speak about being at the Asylum as an attendant.

Q. Has Mr. Buckley ever spoken to you about the Asylum?

A. Yes, he has; I think it is since there has some trouble arose there recently.

Q. Has he made any complaints to you?

A. I think he has remarked that things might be managed differently there.

Q. Do you recollect of introducing Mr. Buckley to Mr. McCauley?

A. I think I remember that, yes, sir; there was another gentleman with Mr. Buckley at the time; Mr. Buckley introduced me to him, and I introdued Mr. McCauley to him, the gentleman with Mr. Buckley.

Q. How long is that ago?

A. It is two or three weeks, I should think; it was in the back part of my store that the introduction occurred.

Q. Do you recollect what passed at that time between you two?

A. There was a general talk about the management of the Asylum.

Q. And did Mr. Buckley then make the statements that you have referred to?

A. He said, in substance, that he thought the management might be different for the benefit of all concerned.

Q. What did Mr. McCauley say upon that occasion?

A. I do not remember what he said in regard to it.

Q. You are sure it was not more than three weeks ago?

A. It was between three and four weeks ago, I should say.

Q. How long did the conversation in your place of business last?

A. I don't remember whether Mr. McCauley stayed as long as Mr. Buckley or not; but I think he did not.

Q. You think that Mr. McCauley left before the other gentlemen?

A. Yes, sir; he stayed there about twenty minutes; that is, Buckley did.

Q. After McCauley had gone did you continue the conversation with Mr. Buckley?

A. Yes, sir; we conversed somewhat more.

Q. Upon the same general subject?

A. It was not all on the same subject.

Q. But you did resume your talk, after McCauley left, in regard to the Asylum?

A. Yes, sir, I think we did; but that I would not swear to positively about Mr. McCauley not being there the whole time, but it seems to me that he did not stay there as long as Mr. Buckley did.

Q. When Mr. Buckley went out did his friend go with him?

A. Yes.

Q. State your best recollection as to whether McCauley had gone at that time, or whether he remained with you?

A. I think he left before Mr. Buckley; that is my impression about it; and that Mr. Buckley and his friend stayed there longer and talked about different subjects.

Q. Are you quite positive that McCauley left first?

A. It seems to me that McCauley left before Mr. Buckley did; that is my impression about that matter.

Q. In introducing McCauley to Buckley, did you state any circumstances about Mr. Buckley to McCauley?

A. No, sir, not that I now recollect.

Q. Did you say any thing as to what he was or where he came from?

A. No, sir, I think I did not.

Q. As near as you can recollect it was a simple introduction?

A. That is all it was as I recollect.

Q. Have you spoken to Mr. McCauley about Mr. Buckley since?

A. No, sir; not to my knowledge.

By Mr. OLIN:

Q. Did you tell this man — McCauley — any thing about this man Buckley's standing or position?

A. No, sir.

Q. You did not say to him that he was a representative man of East Utica?

A. No, sir; I do not think I did.

By Mr. RICE:

Q. Was any thing said at the time of this introduction, or at the conversation that ensued, about a communication that had been published in the Utica *Press*, signed by an "ex-attendant"?

A. Yes, sir; I think there was.

Q. What was said about it; give us your best recollection?

A. I think there was something said regarding it, but I cannot state who it was that broached that part of the subject first, but Mr. Buckley said that that struck pretty near the point, or words to that effect.

Q. Said that what did?

A. That article, or letter; I don't remember reading the article myself.

Q. Did you understand from what was said on that occasion that there had been an article written?

A. Yes, it was about that article.

Q. Was any thing said as to who had written it?

A. No, sir; I don't think there was any thing said as to who it was.

Q. Did you understand from what was said there that Mr. Buckley's experience and knowledge of the affairs of the Asylum had been put in print?

A. No, sir; I did not understand so.

By Mr. MORGAN:

Q. Did you understand that an article signed "ex-attendant" had been put in print, and that they were talking about it?

A. Yes, sir; they talked about the article.

By the CHAIRMAN:

Q. And that article was in the *Daily Press*?

A. Yes, sir.

Q. Do you know how long it was after this article was published that this conversation occurred?

A. Three or four days I should say; it was a recent publication.

By Mr. MORGAN:

Q. And the introduction was after the publication, as you understood from the talk?

A. Yes, sir.

Q. And these men did not know each other before you introduced them — that is, Buckley and McCauley?

A. No, sir; I think not; they were strangers, I think.

FRANCIS A. EASTMAN,

Recalled:

By Mr. HASKELL:

Q. I call your attention to an article — an editorial — published in your paper February 22, 1884, in which you call the attention of the committee to a communication in your paper addressed to Mr. Morgan?

A. Yes, sir; it simply repeats questions published in a former article; I understand to-day that he says I did make those statements to him; if I did, those questions are answered.

Q. I also call your attention to an editorial in your issue of February 21?

A. I say I felt justified from the remarks that were current in our office that Morgan had made the statement that he now makes; I asked him publicly whether he made that statement or not.

Mr. MORGAN — Who told you that I had made such a statement in a railroad car?

A. I did not say so; I asked you whether you did or not.

Mr. MORGAN — I ask you did any one tell you that I did make such a statement in a railroad car?

A. I decline to answer it.

Mr. MORGAN — Do you decline upon the ground that it would criminate or disgrace you?

A. No, sir; not at all; I base those questions upon remarks that were current among our reporters that you had there made the statement which you now repeat; I wanted to find out whether you had made such a statement or not; and I wanted to brand it as false, which I do now.

By Mr. HASKELL (resuming):

Q. To what do you refer in the editorial in your issue of February 25?

A. I had reference to remarks that were current; that was a matter strictly between Mr. Morgan and myself, it does not concern the committee.

Mr. RICE — It does not seem proper or profitable to go into any personal difficulty between the counsel of this committee and this witness.

Cross-examined by Mr. GOODWIN:

Q. I understood you to answer Mr. Morgan that you had not been a resident of Utica very long?

A. I have not been very long.

Q. And that you had no personal knowledge of the management of the Asylum?

A. None whatever; I have merely met Dr. Gray at the club.

Q. Do you know any of the assistant physicians?

A. I had been introduced to them last summer at the dining-room of the Butterfield House.

Q. Have you written any editorials in your paper in regard to the management of the Asylum, during the past month?

A. I think I have.

Q. Will you give to the committee the names of the persons from whom you obtained information about that matter?

A. I do not think I obtained information from any source; I gathered it up from what was "in the air;" I had no conversation with any person upon the matter that would furnish matter for articles; I got my first information from the examination of the men that killed Mr. Hughes.

Q. Any other sources of information?

A. I cannot say that I have had any definite information from any other source, simply conversation; I suppose I have conversed with almost every man in town of any importance whom I knew — that is, every man I have met.

Q. And your editorials are based upon the information that you received from the coroner's inquest and the conversations you have had?

A. Yes, sir; the stimulating effect of the conversations in regard to this whole matter have given birth to the editorials.

Q. What do you mean by the "stimulating effect"?

A. The excitement going on in the community: I wrote upon a subject about which people were talking, and as I thought, in the way they were talking.

Q. Were you giving the voice of the people in your editorials?

A. I supposed I was, a large majority of the community.

Q. Be kind enough to state, if you can, who in the community you have talked with about the matter?

A. With Mr. Armstrong, of the internal revenue office; Mr. Eaton, Mr. Doolittle, the late mayor — and I found him rather neutral; and I have talked with Mr. Capron who lives at Whitestown;

and with Mr. Dennison, Mr. Lewis, Mr. John Buckley, a merchant; and various other persons.

Q. Were those editorials based upon information received from them?

A. No, sir; I cannot say that they were.

Q. Was your judgment or opinion influenced by your conversations with them?

A. Certainly, but not fixed; the people seemed to sympathize with my view of it.

Q. Do you know who wrote the article that appeared in your paper of February 15, signed "ex-attendant"?

A. I think I know who handed it into the office.

Q. Will you give the name of that person to the committee?

A. It was Dr. Tourtelot, I think.

Q. Are you familiar with the doctor's handwriting?

A. If that was his handwriting it was the first time I ever saw it, I never saw it before.

A. Have you ever conversed with Dr. Tourtelot upon this subject?

A. Yes, sir; but the only conversation that I ever had with him of importance was with reference to a pamphlet containing the proceedings of a former investigation.

Q. Can you give to this committee the name of any person who has written to your paper any article in reference to the Asylum management which you did not publish?

A. No, sir, I cannot give the name of any except this Mr. Halpin; I have torn up a great many communications that were sent in; a great many of them are not signed.

Q. All the communications you received from persons on this subject were anonymous, except Mr. Halpin's?

A. Yes, sir, and this man who brought his in that night, of which I have spoken, he appeared in person and brought it.

Q. Was this communication in your issue of the 15th February, 1884, signed by the writer's name?

A. I say I know who handed it to me; I do not know who wrote it.

By the CHAIRMAN:

Q. Did Dr. Tourtelot represent that that was his own communi cation?

A. No, sir, he did not.

Q. Did he state how he obtained it?

A. No, sir.

Q. What impression did you have at the time as to the authorship of the communication?

A. I don't know that I had any impression; it was brought in there late at night; I took it and gave it to the printers.

Q. He gave you no indication that he had written it?

A. No, sir; none whatever.

Q. Was any inquiry made of him as to its credibility, or whether he would vouch for it?

A. I assumed so because he brought it himself; I took that as a sufficient evidence of its reliability.

CLARA AMELIA FULFORD,

Sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside?

A. Florence, Oneida county.

Q. What is your age?

A. Fifty-seven.

Q. What is your husband's name?

A. Daniel Fulford; he is pastor of the Methodist church there at Florence; this is the close of our second year there; at the close of this conference year it will be two years come the 9th of April.

Q. Were you formerly an inmate of the State Lunatic Asylum?

A. I have been an inmate at three different times.

Q. When did you go there first?

A. In March, 1848.

Q. Were you then married?

A. Yes, sir.

Q. Where did you reside then?

A. I think Chittenango, Madison county; that was before my husband joined the conference; he was a teacher in the public school there; he and I both taught.

Q. How long had you been married when you went there?

A. Nearly four years.

Q. What time in the year did you go to the Asylum?

A. The 10th of March, 1848; the Asylum was then under the control of Dr. Brigham.

Q. Do you know by virtue of what process you were taken there?

A. Yes, sir; it is very distinct in my mind; I was confined with my first child.

Q. Whether it was upon the certificate of physicians and of the county judge and of the superintendent of the poor?

A. Yes, sir; it was upon the certificate of the county judge at Morrisville.

Q. Was the child taken with yon?

A. No, sir; it was five weeks old when I went there.

Q. Do you now recollect what the difficulty was with you?

A. I was very sick at the time and there was two or three days and nights that I did not sleep. Then the doctor commenced giv-

ing me morphine, our family doctor, and that seemed to make me wild. Then he gave me opium and asafœtida and every thing was used almost for anodynes, and it had an opposite effect upon me. There was about two weeks that I did not sleep at all and we had a great deal of company there, as we lived in the village, and I ought to have been kept quiet.

Q. Upon what ward were you placed?

A. The second ward; each time I went there I was placed on the second ward. The first time I was there I was there one week and was then taken to the fourth ward and I was there one week, and the remainder of the time, three months, I was on the first ward.

Q. That was the first time you were there in the Asylum?

A. Yes, sir; Dr. Brigham's niece was the supervisor.

Q. Taking the first time you were at the Asylum can you now give to the committee any ill-treatment that you received?

A. No, sir; nothing occurred the first time.

Q. Or any misconduct on the part of the attendants?

A. No, sir; I never saw any; the first time I had a very high opinion of the Asylum; I told my husband on my return home that if I was ever left to depend on my own resources I thought I would go there as an attendant.

Q. How long did you remain in the Asylum?

A. Three months and a half.

Q. And were then discharged as recovered?

A. Yes, sir; I do not think Dr. Brigham considered me a lunatic.

Q. You were discharged as recovered?

A. Yes, sir; he said I had been a martyr to quackery, and when I left there he came out on the steps, and as I got out into the hack the last words he said to me were: "Mrs. Fulford, be sure and get your natural sleep, and you will never come to this Asylum again."

Q. And then you returned home; were you keeping house?

A. Yes, sir; when I was taken to the Asylum we were keeping house; when I returned home I found my husband had put out the child and had gone to his home at Chittenango with his people.

Q. How long did you remain at that time before you returned to the Asylum?

A. I went there again in 1872.

Q. How long did you remain that time?

A. Eight months and a half.

Q. Who was the superintendent when you went the second time?

A. Dr. Gray.

Q. Upon what ward were you placed the second time?

A. On the second ward; I was, I think, about two weeks there, and was then sent up to three, and I was there — I don't remember just how many weeks — but it was in February when I went to the Asylum — I think it was about the 15th of February — and I think it was in March when I was sent from the second ward to the twelfth,

and remained there until I was discharged from the Asylum, and it was through the false report of the dining-room girl that I was sent there.

Q. Why was you sent there?

A. There was a poor woman from Otsego, and she seemed to think a great deal of me from the first she saw me; she was on the third ward, and had been in the Asylum a number of years, and had been on the back wards, and had been treated very unkindly; she said as soon as she saw me she thought I was going to help her, and she never had been to chapel, and wanted to go; I fixed over her clothing; it never had been fixed for her since she came there, and she went to chapel; she worked very hard in the dining-room, and one day I was helping; it was after breakfast, and the dining room girl—a Mrs. Burton — began finding fault with me; I said the lady helps you so much I think you ought not to speak so harshly to her; she went and told the supervisor I was minding what did not belong to me, and the supervisor, Miss Sayles, of the third department, she went down to the office and reported me; after I got through I went up and was helping the woman who had charge of the sewing-room on three; we were talking very quietly there when Miss Sayles came in, and she says I want you to come down to your room; you are going on to twelve; I asked her what for, and she said she was not going to answer any questions; and so I went on to twelve.

Q. As you view it you were sent on to twelve as a punishment for your friendship to the Otsego lady?

A. Yes, sir.

Q. And did you learn there what they regarded as offenses that the punishment was to be sending on to a more disturbed ward?

A. Yes, sir; if the patients did not work as much as some of the attendants thought they ought to, they were very often threatened with the back wards; they would report to the doctors, and the doctors never inquired of the patients in regard to this.

Q. When you were taken on to the ward for punishment it was on the twelfth ward?

A. Yes, sir.

Q. Was that ward a more disturbed ward than the one you left?

A. Yes, sir; but it is not considered as bad as seven or eight.

Q. And it was more disturbed than the one you left?

A. Yes, sir; some of the patients on that ward did not even know their own names.

Q. What effect did it have upon you transferring you to that ward?

A. I felt very much hurt to be transferred without knowing the reason why.

Q. Did it in any way affect your health or your condition?

A. I don't know, only it kept me awake nights; the ward underneath eleven and twelve — there were some patients very noisy underneath, it kept me awake nights.

Q. How long did they keep you on ward twelve?

A. Twelve weeks and a half, and then I went home from that ward.

Q. Did you at any time while on that ward request to be removed to some more quiet ward?

A. Yes, sir; I spoke to Dr. Gray when he passed through one Sunday; he said he thought I ought to be willing to stay where I could be useful; he said he thought I ought to be useful to those poor creatures who were there.

Q. How many times did you request the officers in charge to remove you back to your former ward or take you away from number twelve?

A. I requested them to let me go home a number of times.

Q. Did you more than once request them to remove you?

A. Yes, sir; I talked to Dr. Kitchen about it; he was the attending physician; he had charge of the ladies' department when I was there.

Q. What reply did he make?

A. Sometimes he would laugh, and he promised my brother — this brother who has been with me this afternoon here — he had been there about a month after I was there, and he promised him frequently that he would change me.

Q. But they continued you there until you were discharged?

A. Yes, sir.

Q. And you were there eight months and a half?

A. Yes, sir.

Q. And then did you return home?

A. Yes, sir.

Q. Did you return to Chittenango?

A. No, sir; my husband was not there then.

Q. Where were you living?

A. In De Kalb, St. Lawrence county; when I went there the second time he was a member of the Northern New York Conference, and has been a member for twenty-eight years — I mean my husband—and he had exchanged from De Kalb to Champion during the time I was at the Asylum.

Q. Did you go directly to his house?

A. I went to visit with a brother of mine; my husband came to the Asylum and made arrangement for my release, then my sister came and met me and I went to stay with her at Fayetteville, and then to my brother's at Syracuse, and from there to Champion where my husband was at the time.

Q. What was the cause of your second trouble?

A. We were burned out in 1872 and lost every thing we had; I worked very hard at the time of the fire, and then afterward I had one daughter, then her health was poor, and in the fall — it was July that our fire occurred — our horse had the epizootic and I took care of that horse; our son was away at school, my husband was away and I took care of the horse and I took the disease and was suffering from it when I came to the Asylum; I could not sleep nights, and had no appetite.

Q. When were you taken to the Asylum the third time?

A. It was in 1882, the 16th of June; our daughter died then; we were living in Florence then; our daughter died the second day of June, and on the sixteenth day I came here; I had the care of her; she was sick a long time; I had the care of her day and night, and I got so I could not sleep, I had been broken of my rest so much.

Q. Who went with you to the Asylum on that occasion?

A. My son.

Q. How old is your son?

A. He was thirty last July; he is a physician; he resides in Henderson, Jefferson county.

Q. Did they have an examination made of you by physicians?

A. I suppose they did; the night before I came I was at my son's; my daughter had been with him while we were removing, and her piano and other things were there; I went up after her death to see about her things, and the night before I came away I was making preparations to go home the next morning, and two doctors from Mexico — my son was then in New Haven, Oswego county — and these two doctors came to my son's house; I was acquainted with one of them, the other was the superintendent at that time; I don't whether he is now or not, but at that time was superintendent of the county house; they asked me a number of questions but I did not know whether they had any motive in it; I suppose I went there on their certificates.

Q. What time was that?

A. The 16th of June, 1882.

Q. How long did you remain at that time?

A. Until December; I think it was the 21st, of that same year.

Q. On what ward were you taken then?

A. On the second ward; I was examined by the doctor; the new Commissioner in Lunacy, Dr. Smith, had been appointed and they were having a meeting in the Asylum, and Dr. Brush came in and excused himself, and he introduced me to a doctor that had charge of the gentlemen's department; I do not remember, but I think I was examined by Dr. Josselyn.

Q. You were placed on ward two then?

A. Yes, sir.

Q. That is a quiet ward?

A. Yes, sir, though some of the patients there were quite excitable, but they are considered quiet as a general thing.

Q. How long did you remain on ward two?

A. I was there six days; I went there on Friday, and the next Thursday I was changed from there to ward twelve.

Q. Give us the reason of that change?

A. The day before I was changed, Dr. Gibson, the chaplain, came on to the ward and told Mrs. Bennett, a member of his church, that he was coming the next day to have communion service, and he spoke to her about speaking to some patients about it, and there was a young

lady there from Chittenango, and we were quite intimate when I learned where she was from, because she was acquainted with so many people that I knew, and particularly with Elder Erwin, our presiding elder for four years ; I presume the supervisor, not knowing the reason of our intimacy, thought we were too much intimate ; this young lady had been confirmed and expected to be received into the church in a few days by Dr. Gibson ; I told her to go and ask Miss Sterling, the supervisor, if I could go to the communion service; we have communed in some places with the Episcopals and they with us ; she went and asked her if I could go and Miss Sterling refused ; I stood by and I saw this young lady was very much excited ; she called Miss Sterling a devil, and I left her and went down to the verandah, and as I was passing a room where there was a patient who was sick, this patient called me into her room, and, as I was going in, I noticed Miss Sterling and this lady that I spoke of coming down the hall, she and this lady from Chittenango, and they took her into her room. I saw they were very much excited ; I went into the bath-room and closed the door and the first I heard was a cry of "murder," but I don't know whether it was the patient or the supervisor that made the cry ; I opened the door and I saw a number of attendants and patients rushing into the room, but it excited me so much that I went back to where this lady was sick, and in the afternoon Dr. Brush came on to the hall ; I supposed the supervisor had locked this lady in her room and I did not see her again until we were about half through tea and then I saw her coming into the dining-room ; I did not speak to her after that ; I thought I would keep entirely out of any difficulty ; in the afternoon Dr. Brush came on to the hall with Dr. Blumer ; he had been absent and had got home the night before ; he came up to me and said, "You are making a great deal of disturbance on this ward ;" Dr. Brush did ; he said, "That was your character when you were here before ;" I said, "It is a wrong impression you have, if you have that impression of me, and I think I can bring testimony to convince you that you are mistaken and that there has been wrong reports made ;" he said, "I shall put you on ward twelve if you are not careful ;" I said, "You can do so if you wish, but you ought to let me know what charges are brought against me," but he did not say any more and I went on to the verandah and commenced sewing, and an hour or two after that the second one in authority on the hall came to me, Frankie Davies her name was, and she said, "Mrs. Fulford, if you have any things in your room go and get them for you are going on to another ward ;" I asked what ward ; she would not tell me ; I went and got my things I went on to ward twelve ; I knew where I was, for the first things ; I saw was one of the same attendants that was there before ; Miss Frankie Davies went with me on to twelve, and Ann Burns had charge of the hall ; she was the second attendant when I was there before ; I saw her treat patients so cruelly that I had a dread of her ; I was very weak at that time ; I had become reduced ; Ann Burns had charge of the hall at this time.

Q. How long did you remain there?

A. That was in June, I think; I went there the 16th; this was six days after I went there, on Friday, and I was there until some time in August; I was on that ward until some time in August; then I was sent to ten.

Q. What is ten compared with twelve; what is the character of it?

A. The patients there are very much demented.

Q. Idiotic?

A. Well, not really idiotic, but most of them have been there a long time.

Q. Why were you sent to ward ten; do you know?

A. I don't know; this Ann Burns went with me; I supposed I was going — she came to my room and said, "if you have any thing, you had better get your things ready, you are going to another ward;" I asked her "what," and she said, "you are going on to a better ward;" I supposed I was until we got to the door of number ten, and then I says, "why, what does this mean?" she says, "they are going to put you here so that you won't see company;" sometimes visitors had stopped and talked with me and conversed, and some asked me questions; they thought I was an attendant, for I was generally at work when I came there, and I did most of the sewing on ward twelve, and I would answer their questions.

Q. How long did you remain on ward ten?

A. A little over two weeks, and then Dr. Blumer came on to the hall Monday morning and says, "Mrs. Fulford, I am going to send you on to three;" I told him I did not wish to go on to three; I told him I had been in Miss Sayles' ward and that she had given a false report of me at the doctor's office, and it was the means of my being kept twelve and a half weeks on ward twelve, and I did not wish to go on to her ward; and he went and told the lady in charge of the hall to take me on to six.

Q. What was six in comparison with ten?

A. It was very much improved; it was a pleasant ward and some of the patients were very nice; I think I was on ward six nine weeks, and six weeks of that time I was not permitted to go out of doors.

Q. Who was the attendant and supervisor on that ward?

A. Mrs. Pride; she was a widow.

Q. Why wouldn't they let you out?

A. It is rather a delicate matter to speak of, but this Ann Burns that I spoke to you of, who had charge of twelve, there was a patient that saw a transaction that was not very proper between her and the — well — I think his name was Jones; he had charge of fixing the windows; he came in and lowered the window so that they would have more air in the hall that leads from the dining-room — you know that hall — it is divided into two departments; this lady patient who saw the transaction did not like to go out with the

patients when it was hot; she was thrown from a carriage in Syracuse and her head was hurt; she said it made her headache to go out in the hot sun, and she hid under the bed because she did not want to go out, and she saw this man Jones come in; the rest of the patients, except myself, used to go out; I didn't go out much into the yard myself; this young lady was hiding under the bed and she had told of all that occurred that she saw; she told of it right before several attendants and patients out there in the yard, and they dragged her away and she was very much excited over it; there was a lady from Schoharie county, a member of the same church that I am, and she was quite interested in me; we met out in the yard frequently and she had heard of this occurrence, and she knew how I had been treated; she saw me when I was dragged out in the yard, one time by this Ann Burns, and she came up to me, it was out in the front yard and wanted to know about it; if I had heard of what this lady had seen and I told herwhat this patient had told me; well, there was an attendant from the third hall, and this attendant was standing right behind me and she heard what I had said about the occurrence and about Miss Burns, and went and reported to Miss Sayles, and Miss Sayles reported it to the office that I had been talking about Ann Burns, and I suppose she related the conversation as I had related it; the next day we were all going out into the yard, Mrs. Pride came and said, "ladies, prepare to go out into the yard," and I had my hat on ready to go out into the yard; she turned to me and said, "Mrs. Fulford, the doctor says you can't go out into the yard, that you are not to go;" I said, "why?" She said, "you have been talking about Miss Burns," so I put away my things; I supposed it was just for the time being that I could not go, and the next week, when they were going out, I made preparations to go and she gave me the same word, so then I never said any thing more about going out; I did not make any demand to go out, but I thought I would wait until they gave me orders to go before I went again, so that for six weeks I did not go out into the yard.

Q. What month in the year was that?

A. It was about the last of August that I went on to ward six, and this was, I think — I went on a Tuesday, this was on Friday that this conversation with the patient occurred; I think it was the next Saturday after I went on to the ward when we were going out.

Q. So that you were confined there all through September?

A. Yes, sir; and it was late in October before I went out; one of the attendants said to me "Mrs. Fulford, wouldn't you like to go out and get some fresh air and gather some leaves?" and I told her I would; it was so long since I had been out that I would like to, so we went out and gathered some leaves for pressing.

Q. What time did you leave the Asylum?

A. The 21st of December.

Q. And your husband was then at Florence?

A. Yes, sir.

Q. And you went home with him?

A. Yes, sir.

Q. How long did you remain on ward six?

A. I think I was there about nine weeks; but I have not got the dates.

Q. What ward were you then taken to?

A. Four.

Q. What is four compared with six?

A. I liked four very much; I think there was most pains taken there to make it pleasant.

Q. Was it a quiet ward?

A. Yes, sir; it is just about the same as number one; some of the patients prefer it to number one; things were quiet and orderly at the table and our food was very much improved over what it had been, and the attendants took pains to entertain, they had readings, etc., and then I had access to the library, but I was not permitted to have access to the library until I went to four; I spoke to Dr. Blumer about it; there were several books that I had seen when I had been there before, that I would like to read; he did not refuse me but he would laugh at me and would not say any thing; then Mr. Fulford had ordered sent to me *The Northern Advocate*, which is published at Syracuse; he ordered that to be sent to me but they refused to let me have these papers, even the paper that contained the obituary notice of my daughter, and I was just as capable of reading them as I ever was in my life.

Q. On the first occasion you say you saw nothing wrong?

A. No, sir.

Q. And on the second occasion that you were at the Asylum state what occurred as to mismanagement or cruelty?

A. This Miss Burns that I was speaking of was cruel; one day there was a patient, I thought by her appearance that she had had the small pox not long before, she came into the Asylum; her face was very red and very much pitted, and her head seemed to be very tender and she was quite deranged; one day she was sitting near me and I was sewing, and this Ann Burns she seemed to like to tease, it seems to be a propensity of hers; I cannot remember the name of this lady but she never would talk with me although I had tried to talk with her several times, so I cannot give you her name; she came up to her and kind of put out her hand to her and the lady did not take notice of it; then she struck her slightly in the face; then the patient struck back; then Ann Burns took a bunch of keys and struck her on the head very hard; then they had quite a tussle and Ann Burns called on the other attendants, and they are obliged to go whether they were willing or not, they are expected to go in assistance in such a case as that; and they had quite a serious time, and she was strapped down and the camisoles were put on to her before they got through; that patient came on to three from the Tuesday when I was there; then there was a lady from St. Lawrence county, from Heuvelton, I can't remember the lady's name —

Q. Wait a minute; have you described all the injuries that were inflicted upon this patient with the keys?

A. She was taken into the room and after that I didn't know any thing more about her.

Q. Did you see whether the keys lacerated her head?

A. Yes, sir, they did.

Q. So that the blood ran?

A. It started the blood; I don't think it ran; I don't remember seeing it; there were a great many that things I saw in her, Ann Burns, when I was there, when I was taken there the last time on ward 12, and I had a perfect horror of her.

Q. Of Ann Burns?

A. Yes, sir; she did not have charge of the hall when I was there before in 1872; I was going to speak of this lady from St. Lawrence county; she was a consumptive and frequently Ann Burns would keep her from the table; I can't tell her name but I could get it; she was a member of Brother Bates' church when he was pastor there; perhaps you (Mr. Olin) will know who he is; after I went on to that ward I was put into a room where there were eight beds; this was in 1872, and this woman — the Asylum was so crowded at the time that some of the patients had to sleep on the floor — she was put into a bed under a window where there was a draught; I spoke to the attendant two or three times; I thought it was a very bad place to put her because she coughed all the time in the night, but the attendants did not pay any attention to it; there was some patients in that room who were very violent and there was a lady from Syracuse, she was noisy and violent, and she took her vessel and dashed at another patient and broke it all to pieces, and so they were in the habit of locking them in the room; they kept her without food very often and would not allow her to go to the table, but they put her in this bed under the window; there was but one window in the room and it was kept open; there was eight beds in the room and her bed was made up on the floor right under the window, and very often there would be a heavy fog settling in the morning, that we would see when we got up, even in the summer time.

Q. Did that seem to affect this woman?

A. Yes, sir; when I left the hall she was in a bad condition, but there was nothing done for her; the doctor would inquire of Miss Hennessy who had charge of the ward, Mary Hennessy — she is married now; I am speaking of the second time I was there, now; this Ann Burns was under her, but when I was there the last time she had charge of the hall herself.

Q. Did she have any thing to eat on this hall, this patient that you refer to?

A. Sometimes she had things taken on to the hall and sometimes she did not have; she used to complain of hunger to me, and I spoke to the attendants two or three times about it at that time, but I did not dare to speak about it much.

Q. What did the attendants say when you spoke to them?

A. They gave me to understand that it was none of my business.

Q. Did any thing occur during the second time you were there?

A. A great many things occurred there.

Q. State them?

A. I never had any personal violence inflicted upon me during the first time or second that I was there.

Q. Did you see it inflicted on others?

A. Yes, sir; frequently.

Q. Describe it?

A. I saw them pounded, and once I saw a lady out in the yard; she had long curls; she was from New York; she was brought there with brain fever and she was on ward nine; when she received the treatment that I am about to speak of, her hair, here (indicating in front), was all pulled out; she was pretty well when I made her acquaintance and I asked her how her hair came to be out; she said that two of the attendants — I can't think of their names, but one had charge of No. 9, and she was a very tall Irish girl, she was not there the last time I was there; and another girl, that these two girls took her by her hair and dragged her from one end of the hall to another because she did not want to go to bed. They had a habit of making them go to bed right after supper, because they wanted to go down to the city. Those on the back wards were locked into their rooms.

Q. Did the patient who told you appear to be sufficiently rational to describe it, or did it strike you as being truthful?

A. Yes, sir; the lady was from Ilion who told me about it; she was a very intelligent woman.

Q. Don't you remember the Ilion lady's name?

A. I can't remember her name, and it is familiar too, but she was a member of the Baptist church at Ilion.

Q. Name some other instance where you saw the ill-treatment of patients during the second time you were there?

A. I saw them pounded during the time I was there then.

Q. Whom did you see pounded, and who pounded them?

A. I can't remember the names of the patients on No. 12, but I saw Ann Burns, Mary Hennessey; there were three attendants, these two and the dining-room girl, Miss Roberts; she was from Copenhagen, and she was very kind to the patients.

Q. What did you see the attendants do; and give the names of the attendants?

A. Miss Hennessey and Miss Burns; they would strike them and throw them down and tear their clothes and then they would go and report to the doctors that they tore their own clothes; I saw that done frequently.

Q. How do you know that it was reported to the doctors?

A. Because every thing of the kind got reported.

Q. Did you say the attendants tore the clothes of the patients?

A. Yes, sir.

Q. Then did you hear them make any reports to the doctors about it?

A. Of course they did not tell me every thing of that kind, of every unusual occurrence — but I heard —

Q. Well, it would hardly be fair to take that; you can state what you saw.

A. Of course the doctors would not tell the patients, but all heard Miss Burns say frequently to the patients, "I shall tell the doctor now about your tearing your clothes."

Q. After she had torn them herself?

A. Yes, sir; I fixed over a great many dresses that had been torn to pieces by attendants.

Q. How do you know that?

A. She tore it; they took them in this way (indicating) by the neck of the dress and dragged them; and I saw new dresses all torn to pieces; and I saw more than this the last time I was there.

Q. Confine yourself to the second time at present?

A. The second time I was there I was not on ward six or ten.

Q. Was this dragging of the patients during the second time you were there?

A. I saw considerable of it, but not so much at that time.

Q. Did you see considerable of the tearing of the patients' dresses by attendants the second time you were there?

A. Yes, sir.

Q. And on what ward was that done?

A. On ward twelve; there is very little of that done on the third department.

Q. What else did you see on ward twelve in the way of unkind treatment?

A. When the patients were sick there was scarcely any attention paid to them; I was sick myself and I know.

Q. Whose duty was it to take care of you when you were sick?

A. It was the duty of the one that had charge of the hall?

Q. Of the attendants there?

A. Yes, sir; Mary Hennessey; it was her duty to see that I had care.

Q. What was your peculiar sickness?

A. I was at that time very much subject to sick headache and "neuralgy."

Q. In what way were you neglected?

A. By not providing food for me, and not letting the doctor know I was sick.

Q. Did they do any thing in the way of giving you medicine?

A. Yes, sir; Dr. Kitchen found that I was in a bad condition one day and he sent me some physic; but I was there some time before any medicine was sent; he sent me some chloral and I took it the first time he sent it; it was Sunday night and I was reading the papers; I am not a very sound sleeper and I never go to sleep in my chair; I was sitting at my window reading, and I got right to

sleep and I didn't know what time it was; but I was awakened in the night by the attendant's coming in, and I was surprised; I undressed and went to bed, and I didn't wake up the next morning until between seven and eight, and I am a very early riser generally; I told Miss Sayles I didn't like to take any more of that medicine, it made my head feel very bad; that I did not like opium or any thing of that kind, and she said "speak to the doctor about it yourself;" I had asked her to speak to the doctor; she told me to speak to him about it myself; so when Dr. Kitchen came on to the ward I spoke to him, and he did not make any reply; he laughed, and that was all, and he sent me the same medicine that same night.

Q. Chloral?

A. Yes, sir; I spoke to Miss Sayles about it, and I said I did not like to take that medicine; she said, "well, he has sent it, and you can take a little of it and throw the rest away," and I continued to do so until I went on to ward twelve; I don't know why he sent me chloral; I could sleep when it was all quiet; and I told him that my friends would be opposed to my taking any thing of that kind because they knew that it did not agree with me; but he continued to send that along, and I think it was in August before it was stopped.

Q. Was there any thing else occurred the second time you were there in the way of cruelty or neglect?

A. There are a great many things that came to my knowledge, but I did not see them?

Q. What was told you by patients?

A. Yes, sir; it was by patients who I thought competent to tell the truth and to know what they were saying and to state how it was.

Q. Without stating all they said, what did they complain of generally?

A. There was a lady from St. Lawrence county and this lady from Otsego county, both of them said they were put into cribs; that they would throw wet sheets around them and put them over them and twist them around their necks and then throw them into the cribs and then put fastenings on to their feet and put the covers down and they felt as if they were more dead than alive when they were placed in that position; the lady from Otsego county was kept in one a long time; I think it was on No. 12; it was on No. 3 when I first became acquainted with her I think; I learn that they have given up using these wet sheets now; I never saw it in my own case for I was not on the ward where they used such things so much.

Q. What occurred in 1882 when you were there?

A. I told you about Dr. Brush coming on and sending me back to ward 12; that occurred when I was there on that occasion; I was given a single room on No. 12; something occurred during the time I was there that I thought I would speak of, and my husband wished me to speak of it; it was this: I went to the chapel one afternoon -- I was quite poorly when I went to the Asylum for I

had been broken of my rest; there was a German lady from down near Albany; she wanted I should read to her in the recess, and several patients came around while I was reading to them, and after a while she came up to me and said "I want you to sing to me," and brought me a singing book; there was a Mrs. S. of Otsego county; she said "Mrs. Fulford, don't try to sing, you look so tired;" that excited this German lady so she took this singing book and gave me a hard blow on the side of the face and my head began to ache very hard; I had had two or three slight attacks of paralysis in consequence of overdoing, and my limbs began to be numb and my heart beat so I could hardly speak, and this Mrs. S. of Otsego county took me back up to my room; she said "what shall I do for you;" I told her to get me a bowl of hot water and put my feet in it; I thought that would relieve me for I felt very cold; Mrs. S. was a patient; pretty soon the supervisor, Miss Sterling, came along up and she saw me with my feet in the hot water; she told me to take them out; I tried to raise them but I could not, and she sent one or two others and she pulled me right out and tried to sit me on my feet, but I fell down again; then they dragged me to the room where I slept; I can't tell the number but they took me there; she told me to undress and I could not for I had not the power; then this Frank Davies came in and they got off my clothes and some patients came in and they finally took off my clothes and put me to bed and then Dr. Brush came up to see me and he fetched me some pills, and after a while Miss Davies came with some medicine for me and that was all the care I had that night; my head pained me very hard and I did not sleep; this was Sunday night before I was sent back on Thursday to twelve.

Q How did you remain from Sunday until Thursday?

A. I was not well at all.

Q. Did you improve on Thursday?

A. My head felt better.

Q. Then they placed you on twelve?

A. Yes, sir; and I have told you the reason for that.

Q. Now state what occurred on twelve?

A. This Miss Burns I told you was one the that had charge of the hall.

Q. Where was it that this occurrence with Mrs. S. happened?

A. That was on ward two.

Q. What occurred on ward twelve?

A. I did not meet with any personal abuse until I had been there some weeks; my brother that was here this afternoon with me came there, I met him in the reception room on number four; he came in the afternoon; the bell rang for tea and Miss Burns came over for me to go to my supper, and my brother gave me some money as he always did during the time I was there before, so that if I wanted any thing I could have it; he says, "keep that and if you want to get any thing you can get it;" Ann Burns saw him give it to me

and as we were going back she said, "you had better give me that money;" I said, "oh, no, I can take charge of it, and my brother told me to keep it, and if I wanted any thing that I could send to the matron and have her get it for me;" she said, "well, if you lose it you must not think that any one is to blame;" I said, "no, if I lose any thing that is in my care I did not blame any one; I had a purse with me and I put it in my pocket; in about two weeks after that my husband came to see me and he said he intended to leave me some money but he did not think of it until after he was gone; Miss Burns knew that my husband had been there and I think she thought he had left me some money; I kept my clothes in my room and I had a bureau there; this money was in the pocket of my dress and my dress was folded up and put in there and the next morning I had been cutting patterns for one of the attendants who requested me to do so and these patterns lay on the bed; as I cut them I put them there; the patients had gone out in the yard, but I did not go; I stayed on the ward; they told me when I first went on to the ward—I was afraid of the excitable patients and did not dare to go out into the yard—they said I could go out in the morning or evening and not go with the patients; and after the patients had gone out into the yard, Ann Burns came in there and spoke to me and says "what a looking room;" I said that I was cutting patterns for Miss Simmons, the other attendant, and would have them all done up pretty soon; she says, "I want you to go out of this room;" I had just then commenced combing my hair; she says, "if you don't go out I shall get help and take you out;" I kept on combing my hair and did not go, and she called on other attendants, and went on to number eight and called two attendants from there; one of them was a great large Dutch girl; they came in and took hold of me and dragged me out into the hall and locked my door; she said, "now you have got to go out with the rest of them;" I said, "let me get my hat," and she said, "no, you have got to go just as you are;" and they took hold of me and dragged me through that hall and through the dining-room, down the stairs through the number ten dining-room, and through eleven into the lunatic yard, as they call it; some of the patients were surprised, because I generally kept my hair well; they came up and wanted to know what was the matter; she said, "now you have got to stay until the rest of the patients come up;" my head was aching very hard, and my heart beat very violently, and I came very near having a stroke then and there under the treatment; when I came back I wrote a note—one of the patients had a pencil and paper — she says to me, "I want you to write to the doctor at once and tell him of the treatment you have received from Miss Burns;" I wrote it, and when Dr. Bloomer came I handed him this note; I did not want to say any thing about it to the patients; he took the note, and the next day when he came up on to the wards I was sick a bed, and I was sick for several days; that afternoon the matron came over and was there quite a while; when I came back to my room from the yard

I found the room in a terrible condition; every thing had been ransacked over, every thing taken out of my drawers; my husband had given me some paper and envelopes and some postals, and they were all gone, and even the letters he had written, and that my son had written, were all gone; I did not say any thing about it; I did not mention it; I did not ask her the reason of it; the money was gone as well; it was in my dress pocket folded in the bureau; when I got so that I was able to go to the table again, a week from the next Sunday, I asked for my dress which had been taken out of the drawer at the time; the dress was brought to me, and when I put it on, I looked of course for the money which I had folded up in the pocket of this dress; I felt in the the pocket for the money, but it was gone; the dress was brought back to me by Ann Burns; I asked her where that money was and she said to me that she had taken it to the matron's room.

Q. How much money was there in the pocket of your dress?

A. There was ten shillings in the pocket of that dress, that is the money that my brother gave me when he called to see me.

Q. What time was it that this money was taken out of the pocket of your dress as you have stated?

A. It was in July, 1882.

Q. Did she tell you that she had given the money to the matron?

A. Yes, sir; but I do not think she gave it to the matron until a long time after I spoke to her about it; I spoke to the matron about the money.

Q. When you spoke to the matron about the matter, what did she say?

A. She said she had it, but I think it was some time before she did have it.

Q. What makes you think it was some time before she did have

A. Because I had sent for things to the matron and did not have them; generally when patients sent to the matron for things in that manner, and had money on deposit with the matron the things came.

Q. What did the matron say about your money?

A. When I came away she gave me a bill of the things I had had that she had got for me; if I wanted such things as lemons or oranges for myself or the other patients she would get them for me and they would be charged to me.

Q. Was there any balance coming to you when you came away?

A. My brother left me money afterward and so did my husband; I think I was owing her eleven cents when I came away from the Asylum, that is, that was the balance due to her at the time I was ready to leave.

Q. So that the ten shillings was finally accounted for?

A. Yes, sir; but I do not think she had any right to come in there like that and take my things away; I used to keep my room and my bureau in perfect order; when Mr. Smith came there he found my room in better order than he did the rooms of either of those attendants.

Q. What else, if any thing, occurred in reference to your ill-treatment during the time you were there in 1882?

A. There was a patient there by the name of Mrs. G——.; she was a young lady, and I was quite interested in her; she did not do very much, but I got her so that she did considerable; that was on ward twelve; well, she had not been to chapel since I had been there and one day the Jubilee singers came there; they came there to sing; they came up to me and said I could go up to the chapel if I wished, I asked Miss Burns if Mrs. G—— could go with me, she said "it is so much trouble to dress her;" I said that I would dress her and get her ready to go, and see that she was returned in safety, and finally she consented to let me take Mrs. G——.; I got her ready for the concert, and she wore a very nice dress, it was new; this was on Saturday so she kept the dress out and put it on Sunday morning; and afterward they let her go to chapel with me; she went to hear these Jubilee singers, with me, and she seemed to enjoy the singing very much. Just as she was going into her room to go to bed Ann Burns saw her, she stood right near by, she kind of struck at Mrs. G. and Mrs. G. at first did not notice it; so she did so again; that is, Ann Burns did so again, and then Mrs. G. struck back at Burns; then Miss Burns called for more attendants and they came; they threw her down on the hall floor, she was rather a small woman, but they sent for two attendants on number eight, and they came down and I went into my room, for I could not bear to see it; but I saw they were hurting her very much; there was a crib-room, the second room from mine, on that hall, and they dragged her through, and I saw that that new dress was all torn to pieces; I saw her as they dragged her past my room and into the room beyond; I heard them take her in there and put her in the crib, and she remained there all night; I never saw that dress afterward; I used to fix up the dresses, and one day I said to Ann Burns, I spoke to her and said that if she would get Mrs. G.'s dress that I would fix it up, as I used to fix the patients' dresses; I told Mrs. Barker, the matron, about it the day I left; she asked me what I had seen and so I told her about that occurrence.

Q. Describe this Ann Burns?

A. She is Irish; not very tall; she is rather thin, of slight build and she has very dark hair.

Q. About how old is she, should you think?

A. She said she was not but twenty-four, but she was an attendant when I was there before, and she had been there fourteen years; and I think she was older than that.

Q. Did you see this lady's dress again?

A. No, sir; not after that; I never saw it afterward.

Q. Is there any thing else that occurred during the time that you were there?

A. Yes, sir, there was a Mrs. A. there, she was from Auburn; she was a very quiet patient; but one day when we were eating dinner in the dining-room, something was said to her that excited

her very much; she was a very large woman; she became excited, and this Ann Burns got in five attendants; but before they did any thing Ann Burns came to me — she knew that I had a perfect horror of seeing such things — she came to me and said: "We are going to drag Mrs. A. through and put her into the crib-room, and if you do not want to see it done you had better go into your own room," so I did so; just before I went into my room I saw two attendants jump on to her stomach; I think they were afraid she were getting the mastery of them — they had her down then on the floor; they dragged her through the hall that leads right straight from twelve, they dragged her from that into the dining-room, and through there, and dragged her into the crib-room — the one next to the clothes-room, that is the room that they put her in; this occurred right away after dinner, about two o'clock; they put her in there and strapped her down; Ann Burns came to me then, and said it was a bad time for any thing like that to occur, that visitors were expected, that they were coming on the hall, and that this Mrs. A. was swearing and calling the attendants names, and she said to me "I want you should go in there and convert Mrs. A., as company will be along pretty soon;" I said "Miss Burns, that is not in my power to convert her," but I said I was willing to do what I could for her; she said, "Well, you can quiet her better than we can, you will have more effect with her;" she said "if you will go in there where she is, I will let you in;" I said I was willing to do what I could, and that I would go and try and quiet her; I went in there where she was, and she wanted I should let her have a hair pin, so that she could turn the lock of the strap — that was locked — I told her no; that I hadn't any right to do that; she said "I must get out from here, I can't stay here any longer;" she was strapped in this chair; says I "if you will promise me that you will be quiet I will go and see the attendants and I will persuade them to take it off, but I have not any right to release you myself," I tried always while I was there not to infringe upon their rules in any way, so I went to Miss Burns, and I says — and this Miss A — she had a very nice dress that was all torn to pieces in this struggle — I went to Miss Burns and I asked her about it and told her that Miss A. had promised to be quiet if she was released, and she went and let her out and she was quiet the rest of the afternoon; they had several attacks upon her at different times, she was a very large, strong woman.

Q. State whether or not she made any complaints after this jumping on her stomach?

A. Yes, sir; she had to get some medicine from the doctor; then there was a Miss S. from Auburn, I did not witness the act of violence on her; I took care of her after she came on to number six; she had the camisoles on, and the buckle came right behind; and there was a Mary Finnerty, from Florence, where we resided, she had charge of the hall; this Mrs. S. as on number two, when I was there and was always very neat about her person — always kept her

hair very nice, and was proud about her clothing ; they kept this camisole on her and she could not wash herself ; she said that she went into the bath-room and let the water run on one side of her face, and then on to the other side, and she would drink water in that way ; Miss Finnerty came and ordered her out of the bath-room, she said to her " this water feels so cool her, please let me be here " —

Q. Did you hear her say that ?

A. No, sir ; that is what she told me ; but I saw her afterward ; I saw her when she came on our ward.

Q. What condition was she in when she came on to your ward ?

A. Her back was in a bad condition ; she complained of her back, it was hurt where she was thrown down, and this buckle of the cami sole had hurt her also — had made it quite sore ; when they dragged her the buckle went into her back, and it was very sore ; I had vasseline in my room and I bathed her back with that ; she was finally confined to the bed, it affected her head ; she said she felt so strong and well before she had received that treatment ; but I did not think the woman would ever recover ; she was on number five, and I saw her the day I came away ; she said her back troubled her very much ; Dr. Pilgrim gave me permission to go and see some of the patients before I left — Dr. Pilgrim had just come there then, and so I went to see her before I left the Asylum.

Q. Did this woman have the appearance of having been severely injured ?

A. Yes, sir ; she told Dr. Brush about it in my room one day ; I heard her tell him.

Q. What was this lady's name who lived at Florence ?

A. Miss Mary Finnerty.

Q. Does she live at Florence now ?

A. No, sir ; not that I know of ; she was in the Asylum the last I knew of her.

Q. Was there any more such treatment that you saw yourself ?

A. Yes, sir ; I saw a great deal, I could write a book about it ; there was one woman whose death was caused, as I believe, by being put into a bath-tub ; her name was S. from Watertown ; I had met her before that time, at Loraine, before I came to the Asylum — she wanted to write a letter to her brother to come after her as they told her she was quite well ; Dr. Brush told her that ; she wrote a letter and brought it in for me to look over, she wanted to know if it was all correct, because they look at the letters as they go out of the Asylum ; she brought the letter to me, and it was all right — the grammar was quite correct ; but her brother did not come, and she was put back on number five, I think ; in the first place I met her out in the yard and I was surprised to see her changed appearance ; she looked so differently from what I had seen her before ; I asked her what was the matter, and she said oh ! I am ruined, my friends have forsaken me, I shall become a raving maniac and wont know any thing ; she said to me, if you go away from

here, write to my husband to come after me, and put me into the Watertown Asylum; she gave me her address, and the next I heard of her she was dead; she was put on to seven and they wanted to have her take a bath — although I do not know about that personally — the attendant told me about it, and so did two of the patients.

Q. What did the attendants tell you?

A. About her being put into the bath-tub; she told me that the doctor said to her — the attendants — put her in there and keep her in there two hours; she said that the doctor told her so.

Q. What was the name of that attendant?

A. It was one that had charge of the ironing-room; her husband's parents resided in the city here; I think I can recall her name soon, but I do not recall it at this moment.

Q. Any other instances that came under your observation?

A. I frequently saw patients compelled to go into the bath-tub when they ought not to have gone, by reason of their then condition, and I think a great many were injured.

Q. Whose business was it to put them into the bath-tub?

A. It was the business of the one that had charge of the hall?

Q. The supervisor or attendant, do you mean?

A. The supervisor does not generally have much to do with the ward, or about a matter like that, she has the general supervision.

Q. State what other thing you saw while you were there, if there is any thing else?

A. I saw a good many things wrong; I saw a great many patients have their hair pulled, and a great many that were dragged, and some were pulled by the hair.

Q. Can you give the names of any attendants who so dragged them or pulled their hair?

A. On number twelve there was Miss Simmons, Miss Burns and Mrs. Wood, who was in the dining-room, but she was an unwilling assistant; she was compelled to take part under the rule that the one who has charge of the hall can call for assistance, and the attendants have to go and assist; the one that has charge of a hall has a right to call on any one in the building; that is, any attendant in the building to assist them, and whether they are willing or not, they have to go; this Mrs. Woods left the Asylum because she was not willing to do it; her name was Mrs. Augusta Woods; she has left the Asylum; she was not there but a few weeks: she would not stay there because she said she would not be an unwilling helper in such cases of cruelty; she was from Canajoharie; she was there the last time I knew any thing of her; she was a widow lady, a very nice person; her daughter lived in this city — Utica — and boarded with Mr. Roberts' people here; then there was a Miss Van, something, on ward eight, Vanderburg, or something like that; she was a Dutch girl, and was frequently called upon to assist in such matters.

Q. Do you know whether she is in the Asylum now?

A. I do not know; I can't tell whether she is or not; there were

two sisters of them; one had charge of the dining-room on four and the other was on eight as an attendant.

Q. Are there any other cases of dragging the patients, or otherwise ill-treating them?

A. I knew of a good many patients sick who did not have the care bestowed upon them that they should have had in my judgment; the only care they had was such as the patients would give them.

Q. Do you mean by that that the attendants would not care for them as sick persons should be cared for?

A. No, sir; with a few exceptions.

Q. Can you name any patients who were sick and were neglected?

A. There was a Mrs. C——r, or C——s, or C——l; I do not remember the exact name; an Irish lady, she died on six while I was there; her room was an inside room next to mine; she was sick for quite a while, and the last time I saw her out in the hall was when she was put in the bath-tub and she was kept there quite a while — quite a long time.

By Mr. Olin:

Q. Was the name of the Dutch girl you mentioned, Vanderhoof?

A. Yes, sir, that was it; there were two of them; the one that was on four was very kind; the attendants all went by the name of "Miss" there, so that I could not tell you the first names of either of these Vanderhoof girls; I referred to the one on eight; she was a large girl and was frequently called upon in cases like I have mentioned — these dragging operations; she was obliged to respond, of course; she came in and helped drag me; she had charge of the dining-room of number eight; she assisted to drag me down to the yard on the occasion I spoke of, but I did not consider her responsible, because she acted according to the rules.

Q. During the times you were there, the second and third times, did you ever see any acts of immorality practiced there, other than the incident you have spoken of about the young lady who got under the bed?

A. I did not see any case; of course gentlemen are not admitted, unless it is some one who comes in there like that to do work on the halls.

Q. Did you personally know of any cases of immorality other than this one you mentioned?

A. No, sir; I used to see that some of the attendants were very free with this man who came on to the hall to do the work.

Q. What did you ever see in the way of familiarity between him and any of the attendants there?

A. I would not like to repeat.

By the CHAIRMAN:

Q. Did you see any thing that you regarded as immoral take place between them?

A. No, sir; I did not have the opportunity; but there were different times that Mr. Jones came on to the hall before this occurrence; he came and painted the bath-tub and the patients would be out at the time; they go out in the morning and afternoon.

Q. Who would be left in on the wards — any of the attendants?

A. Yes, sir; this Ann Burns would be there, she was not obliged to go out, and could stay on the ward, and generally did stay in.

Q. Did you see any familiarities between this man Jones and Ann Burns?

A. They used to be in the bath-room sometime, laughing and joking considerably together; I did not go into the bath room where they were, so that I could not say what occurred in there; as you go into the bath-room there is a closet like, just as you step out of the hall, and the bath-room is on beyond that, so that I could not see from my room what transpired in the bath-room; when they went in they shut the door of the bath-room.

Q. Was Jones at the Asylum when you left there?

A. Yes, sir; I believe he was still there; I saw him pass the yard frequently after that.

Q. He was employed to do odd jobs about the Asylum?

A. Yes, sir; that is what I understand about it; he was a kind of a mechanic about the place.

Q. He was not an attendant?

A. No, sir; not that I know of; I think not.

Q. Do you know whether he was a night watchman?

A. I don't think he was; I think that is a separate thing by itself; there was a night watchman on the other side, but there were lady watchers on the woman's side; Mrs. Stirling's sister was one of night watches; and Mrs. Hannah, something — it was a short name, but I can't remember it now; she was there a short time.

Q. Do you know whether any of the men night watchmen could get access to the women's side of the Asylum?

A. Of course they could, they had keys, every attendant had keys; and this Mr. Jones had keys, he could go into any room, he would go into the rooms if there was any little repairing to be done.

Q. Do the night watchmen have keys that will fit both sides of the Asylum.

A. I could not tell you as for that.

Q. Have you ever seen a man on that side of the house at night?

A. Only in case of a death or something like that; this Mrs. C—r or C—s died in the night and I heard them; I was wakened about twelve, the clock struck twelve soon afterward; I heard these men on the hall; I knew that she was very low; I was in to see her during the day, and I went in that evening and she could not speak; but she did not have no care or attention; the attendants

went down to the city that night; there were four on that hall; when they came home, they were dancing up and down, the attendants were.

Q. Did you speak to the attendants about this sick patient?

A. Yes, sir, I did; but they said, "Oh, well, they could not pay any attention to her;" I was in to see her but she could not speak; I tried to talk to her; she was very low; I think it was the consumption that was the matter with her.

Q. Did the doctors see her during that day to your knowledge?

A. The doctor went in and looked at her, Dr. Bloomer was just in to look at her.

Q. Was any one with her when she died?

A. No, sir; she was locked in her room alone; Mrs. Pride, who had charge of the ward, did not know that she was dead until the morning; Mrs. Sayles was the supervisor, and she says to Mrs. Pride, "Miss C. is dead;" that night Mrs. Pride was down in the city, they had a Catholic fair going on; when the night-watch came along that night she found that Miss C. was dead; I heard the men on the hall when they came up for the body, and so I knew she was dead, and it was the next morning after that that I heard Miss Sayles, the supervisor, telling the attendant, Mrs. Pride, that she was dead.

Q. How did it happen that these men came on to the ward?

A. They came to carry her to the dead room; I looked out of my window and I could see them carrying the body in the long basket that they used to put remains in, taking it to the dead-house; they had their lanterns with them; my window overlooked what they call the "court-yard"; the next morning as I passed by the room that this patient had been in I saw it was empty, the bed was gone and there were the springs on the bedstead visible.

Q. Have you ever, on any occasion, heard a man on that floor at night?

A. No, sir; only on occasions like that; the attendants are out sometimes quite late; I have heard them come in as late as eleven o'clock; they would make a noise when they came in at night, talking loud and like that.

Q. Can you name any other instances of injuries inflicted on patients by attendants?

A. No, sir; not in my presence, but I have heard of patients having broken limbs; I have known of a good many cases, but I never saw one when they had their limbs broken, that is I did not see it done.

Q. Have you seen any other instances than those you have called the attention of the committee to?

A. Yes, sir; I think Frank Davis treated the patients badly; I have seen her assist Miss Burns, they were very intimate, she would help to drag the patients.

Q. Did you ever see this Frankie Davis strike a patient?

A. I don't know that I ever did, but I have seen a great many

of the attendants strike patients; I don't think that the doctors know all that is done there; the attendants tell the patients that the doctors will not believe them, and, as a rule, they do not pay much attention to what the patients tell them, the doctors do not; the doctors would not believe any thing that a patient said against an attendant, and the attendants tell the patients so.

Q. Did you ever hear an attendant say that?

A. Yes, sir; I have heard them tell patients; and in my own case, when I told Ann Burns that I should complain to the doctor, she said "I shall inform the doctor myself first, and he won't believe a word that you say, he won't take the word of a patient," but I told her I should tell him all the same.

Q. Have you had occasion to make complaints to the doctors?

A. Yes, sir; I did it by writing, I wrote to him, I did not make personal complaints, but I wrote; I have written several notes, I did so when I was on six; finally Dr. Bloomer took my pencil away, it was on the bureau when he came into the room and he took it away; he took it away so that I should not write, he refused to let me have it, and refused me paper, and he refused to let me have papers that were sent to me.

Q. Did he make any response to you about those notes that you wrote?

A. The last note I handed to him he asked me where I got my pencil, I told him that Mrs. Wood gave it to me, the lady that left the institution because she would not abuse the patients.

By Mr. Morgan:

Q. How many times was Dr. Gray on the wards while you were there — during the first time you were there?

A. The first time I was there under Dr. Gray, he made a practice of coming on the ward once a month — I mean the second time I was there, but the first time since Dr. Gray were there.

Q. How was it the third time you were there — the last time — second time under Dr. Gray?

A. I went there the 16th of June, and I think the first time I saw him after I went there that time, was some time in October; I frequently sent him notes saying that I would like to see him, and after that I saw him in the chapel, the Welsh Club of this city (Utica) gave a concert for the benefit of the patients and I saw him there.

Q. Did you see him on the ward before that?

A. Yes; he passed through once with the county supervisors when they were there, I only saw him once to have a conversation with him until the time of this concert, and then he sat next to me.

Q. Did you see him in all more than twice on the wards the last time you were there?

A. No, sir; I went there the 16th June and it was not until October that I saw him; then I saw him the next time going through with the county supervisors; when I saw him at the concert I told

him that I would like to go home; I sent several notes to him and told him that I would like to see him and have a conversation with him, but he did not respond; he came on the hall with Dr. Bloomer one Sunday; I wanted to see him, for I thought if I could see him he would arrange about my going home; I thought I was well enough to go home.

By Mr. RICE:

Q. State whether or not you were permitted to correspond with your friends as often as you desired to?

A. No, sir; not as fully and freely as I desired.

Q. Was there any restraint put upon you in that matter?

A. They refused to let me have paper and I could not write without the permission of the doctor.

Q. Did you ever ask permission to write a letter to your husband when you were forbidden to do so?

A. Yes, sir; Dr. Bloomer forbade me from writing.

Q. How many times did that occur?

A. I think three times.

Q. How often were you accustomed to write to your husband?

A. I always calculated when I could to answer the letters I got; we kept up a frequent correspondence.

Q. Were you forbidden to answer letters that you received?

A. Yes, sir; they would not let me write always when I wanted to.

Q. Were the letters sent you by your friends inspected by the Asylum authorities?

A. No, sir; I only remember of one instance like that, and that was where a letter was sent for me inclosed in one addressed to Dr. Gray; but when I sent a letter out I had to send it unsealed.

Q. All your other communications came unopened?

A. Yes, sir; all of them with that one exception.

Q. When you wrote letters, did they require you to send them unsealed?

A. Yes, sir; always.

Q. If you sealed up a letter, would they refuse to send it?

A. I don't know as to that; I have heard patients say so; but I was told I must send my letters unsealed; Dr. Brigham's niece, she told me that was the rule; once I sealed one of my letters up before I sent it, but I made apologies to Dr. Bloomer about it, and I think the letter was sent.

Q. I understood you to say that you had seen some familiarities between male and female attendants that you were unwilling to state about?

A. I saw things that I would not like to speak about; it was between Mr. Jones and Ann Burns, and also toward a Miss Noon that was there.

Q. Were those familiarities in the ward where you were?

A. No, sir; this with Ann Burns was in the bath-room; the patients at that time would be mostly out in the yard; I was in the ward, for I did not go out very often; but I said I did not see any thing that occurred in the bath-room; when they went into the bath-room together, I was standing by those large windows on number twelve; I did not see what transpired out of my sight at all, but before they went in I saw him put his arms round her.

Q. When was that?

A. Just before they went in, there to the bath-room.

Q. Did you see him kiss her?

A. No, sir; I did not see that.

Q. Over what portion of her body did he put his arm?

A. He put it around her waist.

Q. Now you spoke about another attendant — a Miss Noon and this Jones; how was the familiarity manifested between those two?

A. That was right before the patients so that there was nothing wrong in that; but I thought they used a great deal of freedom; I saw him go into her room with her.

Q. You have stated that you saw what you considered were familiarities; now if there were any improper familiarities we want to know about them; and if you have such knowledge you should give it to us; I am aware it is a delicate matter, but we must ask you to state specifically if there was any thing improper occurred?

Mr. Goodwin — I want the reporter to take all that down; all those suggestions from the committee should go down.

Mr. Rice — I am willing they should go on the record.

Q. How long did they remain in her room?

A. They were in there quite a while; I could not tell you how long it was.

Q. Was the door closed during the time they were in there?

A. It was not entirely closed; almost.

Q. Do you know whether he had any business in her room?

A. She came to him and said that it was in the room she wanted him to fix it for her.

Q. Are you able to tell us any thing more that indicated familiarity on the part of attendants?

A. What I saw on the hall, and by their conversation I could hear them talk about attendants that were out nights; that there was a good deal that there ought not to be; they would tell about this one and that one and the presents they had, etc.; I told them at one time that I did not think it was very proper to talk like that before some of the patients.

Q What would they say when you would reprove them?

A. Sometimes they would take it well, and sometimes they would not.

Q. Now, is it not a fact that you received great relief at the Asylum?

A. Why, I don't think I was ever mentally insane?

Q. Whether or not your condition was better when you left the Asylum than when you entered it?

A. I was better right away as soon as I got a little rest and quiet; I was overdone; that was the only cause of my going there.

Q. Did you go to the Asylum voluntarily?

A. No, sir.

Q. It was at the instance of your husband?

A. I cannot tell you that; the first time I went there.

Q. Did you know that you were to go to the Asylum?

A. No, sir.

Q. When you left your home did you not know it?

A. No, sir.

Q. Were you conscious of the fact when you left your home that you were going away from home?

A. Why, certainly I was; I remember it very well; the first time I went there was when my baby was five weeks old; my husband spoke about going to New York with one of the merchants, and asked me if I would not like to go too; he thought the change would do me good; when we got here to Utica, on our way to New York as I supposed, we stayed here at the American House and took dinner; he asked me if I would like to go and see the Asylum; he said he had visited it as a teacher; I said yes, that I would like to go and see it; he called a hack and we went up there; when we got there Dr. Bingham was away, and Dr. Lee was the attending physician; he asked me if I would like to go up and see the ladies; I told him yes, I would; he said they were preparing for a fair; we went and saw some of them, and then we went into a parlor, and the doctor said "you are out of health, are you not;" I told him I was; he said "don't you think you had better stay with us awhile;" I told him no, I could not think of such a thing, that I had a little baby to take care of, and that I was just going to New York for a change.

Q. Were you left there against your will at that time?

A. I don't know what you would call it — I certainly had no idea that I was going to be left there.

Q. And your husband went away without your knowledge?

A. Yes, sir; I did not know he was going to leave me there.

Mr. Morgan — To cut it short, ask her if they left her there through deception.

The Witness — I considered it deception; I am opposed to that sort of thing; and Dr. Gray told me the second time I was there that he would rather they should bring patients -

Q. No matter about that; how long were you in the Asylum the first time?

A. Three months.

Q. At that time was your condition improved?

A. Yes, sir.

Q. You had recovered your physical health?

A. Yes, sir, and I could sleep nights.

Q. You felt better every way when you went home?

A. Yes, sir, I did feel much improved.

Q. When the time came again that you lost your health and went back to the Asylum, did you go under similar circumstances, or was it voluntary?

A. No, sir; I had no idea that I was going.

Q. Do you recollect the circumstances of your going to the Asylum on that occasion?

A. Yes, sir, I remember just what Dr. Kitchen said to me; I was left that time also against my will; they told me if I went there to the Asylum that I should have an examination, and if they pronounced me not insane that I should go home, and I went, believing they would find me not insane.

Q. Did you find yourself physically better off when you left the second time?

A. Yes, sir, I was in better health when I left.

Q. That is to say, you had experienced relief at the Asylum?

A. Yes, sir, I was better.

Q. When you went home the second time did your husband come for you?

A. He came, and then my sister came to Utica, and my brother that was here with me this afternoon, he came; my husband came and had me released.

Q. Did you, after your release the second time, make any complaints of ill-treatment?

A. Yes, sir, I did complain; I told my husband about it, and he felt very much displeased and dissatisfied at the way I had been treated.

Q. Do you know whether or not he made complaints to Dr. Gray?

A. I do not know; I don't think he did; I complained to Dr. Gray myself.

Q. Did you tell him of the treatment you had received?

A. Why no; he called me into the office when I went home, but I did not suffer any violence or ill treatment the first two times I was there, although I did receive treatment of which I complained; that is that I was not taken care of when I was sick.

Q. Did you make that complaint to Dr. Gray?

A. No, I told Dr. Kitchen about it; but a patient did not dare complain of an attendant.

Q. How do you account for the fact that you were returned to the Asylum the third time, notwithstanding you had informed your husband of your treatment the other times?

A. It was the last time I was there that I was treated the worst; when I went the third time I was not at home and did not go from there; I was at my son's.

Q. Did your friends know that you were going to be returned to the Asylum?

A. I think my son did not know, and did not intend himself that I should go to the Asylum, because when we got to Camden he sent my satchel and wrappings up by the stage driver; my son is a physician.

Q. Did your husband know that you were going to the Asylum the third time?

A. I don't know that he knew it until I had been taken there; my son told me if I would go to Utica quietly — when I got off the train, I met my son, he had been in another car; says I, "are you going home with me?" then he took me one side, and he said, "I have papers here from Dr." — I can't think of his name, he is from Mexico — he says, my son did, "I have a telegram to take you to Utica Asylum;" and I told him I was not going there, but they brought me here.

Q. On your discharge, on that occasion, did you communicate to your husband the abuses you had received?

A. Yes, sir, I told him about it; I told him before I was taken away.

Q. On your so telling him, what steps, if any, were taken to release you after you had acquainted him with the abuses.

A. My husband wrote to them about it.

Q. Was your physical condition better at the time of your discharge the third time?

A. It was better as soon as I rested; I should have improved anywhere with rest.

Q. Since your last discharge, have you communicated with Dr. Gray or any of the authorities of the Asylum as to the great abuses you received?

A. I wrote to Dr. Bloomer frequently about the treatment I received, but he paid no attention to my complaints.

Q. Did you ever communicate to Dr. Gray or the Asylum authorities the precise abuses you received?

A. No, sir; I told my husband all about it though.

Q. Has he ever communicated with the authorities?

A. No, sir; not since I left there, to my knowledge; when I left Mrs. Barker called me a one side and detained me there more than an hour; it was at the time of the excitement over Miss Lathrop, she had just left the institution; Mrs. Barker called me and wanted to know about the treatment I had received, and what attendants were unkind to patients; I gave her their names, and I told her then, said I, "many reports that you have from attendants that patients have torn their clothes were false, the attendants tore them themselves;" I told her that, and told her other things; she asked me for the names; she said, "we want to know these things if they occur, we are trying to find them out."

Q. Miss Peck testified about the use of wet sheets; did you ever see that done?

A. No, sir; I can't say that I ever saw it myself.

Q. Mrs. Fulford, you think you never had any mental disorder?

A. I don't think I was ever mentally deranged; I do not belong to an insane race; there has been none of it in my family.

Q. Do you think that at any time in your life your mind was unbalanced?

A. I do not think it ever was.

Q. Were you ever guilty of any acts of violence at home?

A. No, sir; I was not.

Q. Do you know upon whose advice you were taken to the Asylum?

A. The first time I suppose it was the doctors; I had too much doctor, and one of them, Dr. Manlius, came very nearly being my death; I had not slept for over two weeks.

Q. Did you ever have restraint put on you while you were in the Asylum?

A. No, sir; I was locked in my room but they never restrained me; one time when I asked Dr. Bloomer on ward ten to change me, I said, "I did not like to be with such a class of patients," he went out of the room and shut the door and held it on me, and was laughing.

Q. When they locked you in your room, was any cause assigned for it?

A. No, sir; and I cannot conceive of any cause for it.

Q. Did you ever undertake to refuse, by violent acts, any of the orders of the Asylum authorities during the time you were confined there?

A. No, sir; I never used any violence to a patient or an attendant while I was there.

Q. Was Miss Lathrop in the Asylum wile you were there?

A. Yes, sir; she had been some time; I remember that once when we were out in the garden together, Miss Lathrop told me she had communicated with Mr. Silkman, but she would not state to me by what means.

By the CHAIRMAN:

Q. State whether or not you consider that your mental condition during the time you were in the Asylum was as good as it is now?

A. Well, I don't know how to make a comparison; when I was there I was nervous; I went there because I had been broken of my rest; I will say this, I always took care of myself while I was there, I never had to have an attendant comb my hair, and I always took care of my own room, and took care of the attendants' rooms as well, and frequently cleaned their rooms — I had to be employed there.

Q. In your judgment, were you insane at any time while you were confined in the Asylum?

A. I don't think I was mentally insane; I think my nerves were unstrung; I don't think many could have gone through what I did; the last time I went there I think Mr. Fulford was more a subject for the Asylum than I was.

Q. Outside of your nervous condition was your mind as sound during your confinement in the Asylum as it is now, in your opinion?

A. I don't know as I can answer; I don't think my mind was ever affected; I never lost a day, and never had a delusion.

By Mr. Rice:

Q. Do you think your mind was as strong then as it is now; that you were capable of as much mental action as you are now?

A. I think I was.

Q. Do you think you could stand such mental strain then as you can now?

A. I think I could, aside from my nerves.

Q. I ask you whether you think your mind was as strong then as it is now — to-day?

A. Yes, sir; there were several attendants who said to me that they did not see what I was brought there for; that I was as sane as they were themselves.

Q. You say you talked with Miss Lathrop?

A. Yes, sir; she was one of the patients there when I was; she was one of those who complained to me about the use of drugs.

Q. That drugs were used for immoral purposes?

A. Yes, sir.

Q. What did she say to you?

A. She told me what condition she was in; she said she thought it was Dr. Brush that gave her this; she spoke in very high terms of Dr. Bloomer.

By Mr. Morgan:

Q. Mrs. Fulford, you will have to throw away your delicacy and state what she told you?

A. I don't know as I can tell; I would meet her out in the yard; she introduced herself to me; she told me why she was there, and she spoke about Dr. Brush, and about the condition she was in, but I did not understand that was the object she meant — I did not take it in that way.

Q. What did she tell you?

A. I say that I don't know as I can state definitely; she spoke of it; there were other patients around.

Q. Did you have a conversation with her more than once about drugs being used on the patients?

A. She spoke about it several times after we went out walking; she spoke about the condition she was in.

Q. What do you mean by that; state more explicitly?

A. About her insensible condition that she was in; she spoke something about Dr. Brush in connection with it; she said that he was a man who took a great deal of liberties, but that she thought Dr. Bloomer was a very modest man.

By Mr. Rice:

Q. Did she ever complain to you that drugs or ænesthetics had been administered to her?

A. Yes, sir; she complained about that, but I could not state definitely what it was she stated about that, it was when we were in the yard while the other patients were around, that she referred to it; I heard her speak at different times about being drugged, and not knowing any thing.

Q. What did she say to you about that?

A. I don't know as I can tell you definitely what it was.

Q Give the substance of what she said?

A. She intimated — I don't know as she told in plain terms —

Mr. Morgan — Did she say that they had taken improper liberties with her?

A. She said she thought Dr. Brush was a man who would use improper liberties there; and she spoke of other persons there.

By Mr. Haskell:

Q. Did she say what other persons — mention any names?

A. She thought he used a good deal of liberty with them; but I never had any cause to complain myself of that.

Q. Did she say that they gave her drugs?

A. Yes, sir; she stated that; it was when she first went there, when she was on No. 2.

Q. Did she say where she was when the drugs were administered to her?

A. Yes, sir; it was in her room, must have been, because she said that the next morning when Miss Stirling came to her and wanted her to get up she said she didn't have any life left.

Q. Did she say she knew that the drugs were being administered at the time they were administered?

A. I think she said they were administered to her in something; and she told me that she was drugged at the time she was brought to the Asylum, and that when she was examined there she hardly knew where she was.

Q. Did she say she was conscious of drugs having been administered to her while she was in the Asylum?

A. I don't know that she knew until after she felt the effects of them.

Q. How could she have drugs administered to her and not know it?

A. They could prepare them, I suppose, in some way.

Q. Did she say that was the way they were given to her?

A. She did not tell me that, but she said that at Rochester they were given to her in coffee.

Q. But at the Asylum, I mean; how they administered there?

A. On one occasion she said she woke up in the morning and could not recover herself.

Q. Did she undertake to describe to you the condition of her person in any way?

A. No, sir; I don't think she said any thing about that to me.

Q. Did she intimate to you in any way that her person had been outraged or violated?

A. Why, no, I never got that impression; I don't know whether she said that or not; she said to me "I have got to be very careful what I say about it, because they will report it;" but I don't think she carried that impression.

The CHAIRMAN — Did she ever tell you that her person had been violated?

A. I did not get that impression at all.

Mr. RICE — Was she there when you left the Asylum?

A. No, sir; she was taken out about that time — about two weeks before, I think; Mr. Silkman came and had an interview with her before she was released; they were having an examination at Poughkeepsie; Dr. Brush was absent there at the time I left, on the day that Mr. Fulford came after me.

JOHN H. HOUSE,

Sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside?

A. Miller's Mills, Herkimer county.

Q. What is your age?

A. I am twenty-seven.

Q. Were you an attendant at the Utica Insane Asylum in 1882 and 1883?

A. Yes, sir.

Q. You commenced there in April, 1882?

A. Yes, sir.

Q. And left the 1st of April, 1883?

A. Yes, sir; I think it was in April.

Q. On what ward were you?

A. On the fourth ward.

Q. On ward four, all the while?

A. I was on that ward most of the time.

Q. Who was the supervisor on your ward when you were there?

A. Mr. Dillon.

Q. Who was head attendant in your ward?

A. Mr. Weir.

Q. Who was the other attendant on that ward besides yourself?

A. They change round some; there was a number.

Q. While you were on ward four, how many times did Dr. Gray visit that ward in the year you were there?

A. I am not positive, but I think it was two or three times that I saw him.

Q. And he came once alone, did he not?

A. Yes, sir.

Q. The other times; state whether he came alone or whether there were visitors with him?

A. Visitors with him.

Q. And it was not then in a professional capacity, but to show visitors through and be with them?

A. Yes, sir; I should think so, by the appearance.

Q. How far is ward four from Dr. Gray's office?

A. There are two wards between, besides a couple of halls.

Q. About how many feet?

A. Perhaps one hundred and fifty or two hundred feet.

Q. On which floor is ward four?

A. First floor.

Q. So that to go upon ward four, Dr. Gray would not have to go up any stairs?

A. Yes, sir.

Q. The fifth ward is lower than the others, it is on the first floor, he would have to go down?

A. Yes, sir; he goes down instead of up.

Q. Do you remember how many steps or stairs?

A. Not exactly, perhaps half a dozen.

Q. Did you ever see Dr. Gray on any other ward while you were there?

A. No, sir; I think not.

Q. When you made the arrangement to go there state how it was done?

A. In the first place I had been attending night school at the business college; I had a friend there, my friend used to take evening lessons.

Q. You went to the institution and what was done there?

A. They gave me a rule book and requested me to study or read it through thoroughly.

Q. Now who did you see when you went up there?

A. I made a bargain with Mr. Dryer; I talked with him first.

Q. What was said between you and Mr. Dryer?

A. He wanted to know where I had lived and what my occupation had been, and similar cases.

Q. How much were you to have a month?

A. Nothing was said by Mr. Dryer, but supposed it was the rule to have $20 for the first six months, and $22 the second six months; they paid me $20 the first six months and $22 the second six months, except a few days I had charge of the ward, and then they paid me a little extra, at the rate of $28; it was a few days.

Q. That's while you were acting as head attendant?

A. Yes, sir.

Q. What was the rule in reference to putting restraints on patients?

A. We had no right to put them on without reporting to the supervisor of the department.

Q. What did the supervisor do?

A. It was his duty to report it to the doctors.

Q. Then what?

A. Just as they order I suppose.

Q. If they ordered restraints you could put them on?

A. Yes, sir; I don't know as it was really the rule, but in extreme cases we used to put it on and report to him directly it was done.

Q. How often did you see Dr. Gray on the wards while you were there that year?

A. I don't think it was more than half a dozen times; well, it was not over eight times; two or three times on the wards.

Q. Then where did you see him after the two or three times you saw him on the wards?

A. I saw him up in the theatrical room at the entertainment; and the day I came away, I saw him as I came out.

Q. What was the rule in reference to working patients out on the grounds?

A. I don't know as there was any particular rule; we used to have orders to take the patients out, those patients that we thought was fit to be outside; we were to take them out and work them as we thought proper.

Q. Work them until about eleven?

A. Yes, sir.

Q. And then go in and go out in the afternoon?

A. Yes, sir.

Q. Do you know how many horses were kept there?

A. No, sir.

Q. You had nothing to do with the barns?

A. No, sir.

Q. What do you say as to the number of hours an attendant is required to work, whether it is more than you think they ought to work, yourself — you had to go on at what time in the morning?

A. I don't remember the exact hours, but at different times in the year; I think at five o'clock in the summer, and half-past five in the fall and spring.

Q. And remain on duty until what hour?

A. We were supposed to be on duty all the time.

Q. At what hour were you permitted to retire?

A. It was about eight o'clock, I think; or half-past, perhaps.

Q. Then you were required to be on duty when they called in the night?

A. Yes, sir.

Q. In your judgment, was that more work and confinement than an attendant should be required to perform?

A. I used to think it was while I was there.

Q. In your opinion, should there not be more attendants and less hours required?

A. Oh, yes, sir; I think there should be.

By the CHAIRMAN:

Q. The doctors came through at about the same hours every day, did they not?

A. Yes, sir, nearly.

Q. And it is unusual to find them there at other times, is it not?

A. Yes, sir, unless they are sent for.

Q. Consequently at all other times the patients are under the treatment of the attendants?

A. Yes, sir.

Q. When the patients are violent, do the attendants ever use force to repress them?

A. Yes, sir; we have to hold them very often.

Q. Have you ever seen an attendant handle a patient too severely?

A. I don't think I have.

Q. Have you ever seen an attendant strike a patient?

A. No, sir.

Q. Have you ever seen a patient who has had bruises or black eyes?

A. Yes, sir.

Q. Have you ever heard a patient complain that he had been struck by an attendant?

A. Yes, sir.

Q. Have you ever had any reason to believe that it was true — now, we want to know the truth about that, I don't know whether it is favorable to the Asylum or otherwise?

A. I have no preference about the Asylum; that is a pretty hard question for me to answer. I am one of those persons that do not pick up hearsay as much as some do; if I hear something, I try to drop it soon as I can; sometimes I would believe it was so, and perhaps again I would hear some one else plead the other side, and I would think it was not so.

Q. Have you ever seen patients put in the covered beds?

A. Yes, sir.

Q. Have you ever seen them, when put in, struggle or violent?

A. Yes, sir.

Q. Have you ever seen attendants on these occasions use unnecessary force?

A. No, sir.

Q. Have you ever seen patients come out of the covered bed suffering from bruises or injuries?

A. Yes, sir; I have seen them come out when they were bruised,

but I cannot say whether they got it in the bed, or before they were put in; I have heard patients say something about their condition when they came out.

Q. Now state whether you have heard the patients make any complaints, coming out of the covered beds?

A. Yes, sir; they very often do when they get out.

Q. Have they ever complained of ill-usage?

A. Yes, sir — well, I don't know as they have — well, a great many think that it is wrong to be put in there.

Q. Have you ever heard them complain that they have been put in with unnecessary force?

A. I don't think I have; of course this class put in there are usually "incapable" of very strong reasoning, though usually there is some that can talk first rate; but the majority cannot.

Q. Have you ever been left alone in your ward without any other attendants?

A. Not that I remember now.

Q. Have you ever been left with only one attendant beside yourself?

A. Yes, sir.

Q. How many are there usually there?

A There should be four.

Q. And sometimes, you say, you have been left there with only one other attendant?

A. Yes, sir.

Q. In such cases, have you ever known of any violence taking place on the part of the patient?

A. I think I have, but cannot say what they were.

Q. Can you state whether any violence has taken place when two of you have been together alone, so that you have had to restrain patients?

A. I think not; I don't remember.

Q. During your attendance on ward four, do you know whether any complaints were made to the doctors, by any patients, of ill-usage, or not?

A. Yes, sir; very often.

Q. Can you recollect any such complaints?

A. Yes, sir; W. B. was one patient who complained of being hurt; I think it was Mr. Weir he laid it to.

Q. What did he complain of; how did he complain?

A. He complained that Mr. Weir broke his ribs.

Q. Were his ribs broken?

A. I don't know about that; I should judge not; I took care of him while he was there; while he was sick a-bed; the doctor said I should take care of him; he seemed to think more of him than of the others, and the doctor said I should take care of him.

Q. Did the doctor say whether his ribs were broken or not?

A. I think he told him they were not.

Q. I will read the entry: "Fourth ward, April 27, 1882; W. B. had a fight with J.; A. G. Weir, attendant, went to part them;

B. then pitched into Weir, and in the scuffle got his left ear hurt; also the right thumb;" do you recollect that affray?

A. Yes, sir; partially; I do remember something about it.

Q. You remember B. being injured?

A. Yes, sir.

Q. And this states that in the scuffle he got his left ear and right thumb hurt; do you know whether his injuries were any greater than that, or not?

A. He complained of his back; I don't know whether it was caused by the scuffle at that time; I know the doctors put a plaster on.

Q. Did he complain of any thing else;

A. I don't know of any thing more.

Q. Haven't you stated that he complained that his ribs were broken?

A. Yes, sir; I did state that.

Q. You used to take care of him?

A. Yes, sir.

Q. Was he confined to his bed?

A. Yes, sir.

Q. How long?

A. I think it was more than a week.

Q. Did he appear to suffer any pain?

A. Yes, sir.

Q. How frequently did the doctors call to see him during that time?

A. Quite often they called.

Q. Did you consider he was suffering considerably?

A. Yes, sir; of course he used to complain.

Q. Did B. make any statement about how he was injured?

A. Yes, sir; he thought that Mr. Weir done it.

Q. Did he tell you that Mr. Weir had done it?

A. I cannot say now; he made it very severe I know — that Mr. Weir was very cruel to him; that is the way he stated it to me.

Q. Were you present when the affray occurred?

A. Yes, sir; I was on the ward, at the other end.

Q. Did you witness it?

A. Yes, sir; I did.

Q. State what you saw?

A. I don't remember exactly how it started, but I know Mr. B. was a very rough patient; he had a little trouble in the dining-room; I think they asked him to go up on the ward; I don't know whether he didn't want to go or not, but any way he was put on the ward.

Q. How did Weir handle him?

A. He threw him on to the floor, well at least, they both — well, I don't know whether both got on the floor, but it was a sort of rough and tumble scuffle, in some way; I don't know how it happened.

Q. Did Weir get the best of it?
A. I think he did.
Q. Did anybody assist Weir?
A. No, sir, not that I know of; not that I remember; at the commencement some of the patients might have got into the fuss.
Q. Did any other attendant assist Weir?
A. No, sir; no other attendant that I know of.
Q. Was any other attendant present besides you and Weir?
A. I don't remember.
Q. Why didn't you assist Weir?
A. I was away down at the farther end of the room.
A. What doing?
A. I cannot say what I was doing, I hadn't been there a great while then.
Q. When Weir had him down on the floor, why didn't you then go to Weir's assistance?
A. They got right up then.
Q. What was then done by Weir?
(Not answered).
Q. What did he do with the patient?
A. I think he got him into a chair.
Q. Did he put him under restraint?
A. I think not then.
Q. Where was the supervisor?
A. I don't know.
Q. What report was made of this occurrence?
A. That I don't know, Weir was head attendant, he usually attended to the reports.
Q. When did the doctor first see the patient, after this occurrence?
A. I don't remember as to that, but I presume in the afternoon.
Q. Do you know whether any attempt was made to have a doctor attend at once or not?
A. I think not, I think he didn't appear to be injured.
Q. When did he first complain of injury?
A. I think not until the next morning, but I am not positive.
Q. Did you sleep on the ward that night?
A. I think I did, I am not sure.
Q. Didn't he complain, when he went to bed that night, of injury?
A. I don't remember of it now.
Q. When did he complain that his ribs were broken?
A. I don't know but it was the same night about — well I don't know when it was he complained of that, he spoke of it very often when he was sick a-bed.
Q. Was his face bruised?
A. No, sir; not more than his ear.
Q. Did you see that Weir used any unnecessary violence?
A. I didn't consider it so.
Q. Did he strike the patient at all?

A. Not that I saw.
Q. Did he use his feet at all?
A. He used his feet but not on the patient.
Q. Did he trip him up?
A. I cannot say, I suppose so; I could not see how.
Q. Do you suppose he tripped him up?
A. It rather seems that possibly he did, but I could not say.
Q. Did the attendants have to do that to overcome the patients?
A. I think it is sometimes necessary; yes, sir.
Q. And they do sometimes trip up patients?
A. Well, they sit them down in the chair sometimes — well, I don't know that that would be tripping up — I don't really mean that he — well, in some way or other in the scuffle — they were down, I don't mean to say he tripped him up.
Q. You say attendants sometimes have to trip up patients?
A. Yes, sir; sometimes when they are very violent and pitch into us.
Q. Then is it necessary to trip them up and throw them down by that means?
A. Yes, sir; when they are very violent.
Q. Have you ever seen an attendant kick a patient?
A. Not more than myself.
Q. Have you ever kicked a patient?
A. Yes, sir.
Q. What occasion?
A. One day I was shaving and Mr. F. came into my room when I was shaving, I took him out, he would not go, I took hold of, and led him out in the ward, and went back to shave, he followed me back, I took him out and led him into the day-room, he followed me back, I told him to go out, and he didn't, and I hit him lightly to scare him out, and he stayed out.
Q. Then you say you kicked him?
A. Yes, sir.
Q. And he stayed out?
A. Yes, sir.
Q. Have you ever seen any other attendant kick a patient?
A. No, sir.
Q. Have you ever seen an attendant punch a patient in the stomach or the abdomen?
A. I don't know; sometimes in a scuffle, possibly; I cannot say as to that; we usually grabbed hold, the best way to defend ourselves; sometimes they pitch in.
Q. And you have to defend yourselves?
A. Yes, sir.
Q. And you use motive force, if necessary, to defend yourselves, do you?
A. Yes, sir.
Q. That is necessary to complete your defense; did you ever have to strike a patient?

A. I don't remember as I ever struck a patient.

Q. Have you ever seen an attendant, in the course of struggling with a patient, strike him?

A. No, sir; I think not.

By Mr. GOODWIN:

Q. You say you saw Dr. Gray on the wards, or while you were there, eight times, one of which was at the entertainment, and the second time, on the day that you came away, were the last that you saw him?

A. I think I saw him more than once at the entertainment.

Q. Did patients in your ward go out?

A. Yes, sir.

Q. Did you go with them?

A. Some of the time.

Q. And whether Dr. Gray was on the ward when you were out you don't know?

A. No, sir.

Q. How do you know it was eight times?

A. I don't know that it was just eight.

Q. Why do you think it was about eight times?

A. I remember once he came down — he came down on the ward and had a talk with Mr. C.; he was violent and Dr. Gray talked with him quite awhile.

Q. You kept no memorandum?

A. No, sir.

Q. This Mr. B. was a very rough patient?

A. Yes, sir.

Q. Was he maniacal?

A. I don't know about that.

Q. Noisy, boisterous?

A. Yes.

Q. Fighting and striking?

A. Yes, sir.

Q. Kicking?

A. I don't know about kicking.

Q. He attacked patients at times?

A. It was usually more attendants than doctors; I have seen him throw stones at the doctors.

Q. On this occasion, when he fell on Weir, do you know how that affray commenced, whether it was an attack made by Weir on him or by B. upon Weir?

A. I don't remember how it commenced.

Q. Now, in reference to the tripping up of patients by attendants; when a patient attacks an attendant, does he close upon him?

A. He goes in any way, rough and tumble.

Q. And in that way an attendant sometimes trips a patient?

A. Yes, sir; tries to defend himself in that way.

Q. Now, in reference to your kicking this patient — did you strike this man hard when you struck him, this man F.?

A. I didn't intend to kick him hard, I meant to scare him away.

Q. Did you or not, as a matter of fact, kick him hard?

A. I don't consider I did; I did what I could to get rid of him out of my room; patients were not allowed to be in there because we keep razors, etc., in there.

Q. You were not discharged from the Asylum?

A. No, sir.

Q. You left of your own accord?

A. Yes, sir.

DANIEL BUCKLEY,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Where do you reside?

A. Two hundred and eighteen Bleecker street, Utica.

Q. What is your age?

A. About thirty-five or thirty-six.

Q. What is your present occupation?

A. I am keeping a grocery store and saloon.

Q. Were you ever connected with the Utica Insane Asylum?

A. Yes, I was an attendant there; I think it was along in 1873–4 or '75.

Q. Upon what wards were you situated?

A. On number twelve.

Q. Please state to the committee whether you ever saw any ill-treatment of patients by attendants while you were there?

A. It is such a while ago, that I don't know as I can remember very well now, but I will tell you just what I do remember; probably I could not give you all the circumstances of each case, but I will give you a general idea of it; there were three of us and we had from twenty-four to thirty patients to look after, or thereabouts; and those were the very worst class of patients, that is, they could not be got along with on the other halls; they would get worse and be moved from ward to ward, until they went to number thirteen, and that was the dead house, they could not get along any further than that, they were very generally cured when they got there; now, as far as violence was concerned, we had to use a good deal of it; and I claim that there is no three mem that could be put there that could get along without it: but, of course, I must say that I saw unnecessary violence there in some cases, and some things that I think should not be done; when a patient attacked us, and we thought he was getting the best of us, of course we had to get the

best of him, and in the best way we could, and it was the general rule to kick him in the stomach or in the ribs, and that should be done too, because I think if the crazy man got the best of a fellow that he'd kill him; we was so few and there was many of them, and it was only by the greatest physical exertions that we could defend ourselves in fact; I have seen patients choked with a towel sometimes.

Q. How was that done?

A. I'll show you; here is a towel (*taking one from the towel-rack*); now, I'll show you if you will let me (*the chairman then submitted himself to an experiment*); you take a strong towel and put it round their neck, and give it a twist like that (*indicating*), and you keep twisting it until the fellow was choked; I saw that done the first time I was there and I could not very well look at it; the first attendant on the hall he generally oversees the whole thing; he has to answer for every thing as a general rule; we used to let him do the most of it; that is, we would help him; but I remember one thing that occurred with me and another fellow that was there; it was when I was third attendant, there was a fellow from New York, I think it was, by the name of R., a patient; he was in the crib and the attendant went out and made him sit up, and then he got a towel and choked him, like I put it on you (*the chairman*); well, he went to this fellow in the crib and he choked him till he was dead and purple in the face, and after here covered he made him sit up again, but the fellow laid down and he made him sit up again and choked him and I think he poked him in the ribs with a broom in through the sides of the crib; I saw him do that myself.

Q. What was the name of that attendant?

A. It was Reece; on another day I saw him do this to a patient; I forget the patient's name, but he asked for a cup of coffee — a little more coffee — and he answered him by hitting him with the back of his hand a clout in the face; that I pitied the man, for he was a good patient, and we had so many bad patients that we appreciated a good one; and as soon as they got good, or better, they were taken away to a better hall, and we got bad ones in their place.

Q. How hard a blow did Reece hit this patient?

A. I should think just about as hard as he could.

Q. Did it knock him down?

A. Well, he was sitting down at the time, so that he could not fall down.

Q. What did the patient do?

A. He didn't do any thing; he took what he got and said nothing; he asked for coffee and got a clout.

Q. Can you recollect any other instances?

A. Well, in fact, it was a general thumping match all the way through; we were scarcely any day without one; we had a fight about every day — well, it is a fact now, I assure you; it was only some cases that I took particular notice of; another thing I would like to state to you, gentlemen, I think it would be better if the

attendants had permission to do a little fighting, so that when they did it they would not have to hide it; for the bleaching out process, in my opinion, is worse than a licking for a fellow; he does not suffer so much I think from a thumping, as he does in being put into a cold bath to take the black and blue spots out of him.

Q. Explain what you mean by the "bleaching out" process; explain a little more fully?

A. I mean this: when a patient is licked, of course there are black marks on him — bruises — and to put him into cold water and keep him there, why, it will take the discoloration out of his skin.

Q. By whose authority were the cold baths given?

A. The doctors were supposed to know nothing about that.

Q. Who ordered the baths then?

A. The fellow generally that licked the patient.

Q. He made the prescription for him then himself?

A. Yes; that was generally understood, that a cold bath would take the black and blue spots off the skin.

Q. How soon after the black and blue marks were given would the bath be administered?

A. Just at that moment.

Q. How long would the bath last?

A. I could not exactly state.

Q. Would you at once strip the patient and put him in the bath?

A. Yes, sir; right off after the licking.

Q. In what way did the attendants usually punish patients?

A. With their hands and feet; when an attendant was attacked by a patient, he defended more with his feet than with his hands.

Q. How did he use his feet?

A. In a natural way — kicked with them; generally kicked the fellows in the stomach and ribs.

Q. Why was that done?

A. In some cases the patients were so bad that the attendants had to protect themselves the best way they could; there is no man that will allow a madman to attack him without defending himself; in some cases — even if your father or brother was there, you would have to do that; a madman would kill you if he got a chance, and you must not let him get the chance.

Q. Can you recall any other instances where you saw patients struck by attendants?

A. I saw them struck most every day, but there was one case in particular — the patient's name was Heath.

Q. What occurred in his case?

A. The head attendant always goes away with a patient if one is sent off; the head was away, and me and this other fellow was left alone on the hall; I had a good deal to do in the dining-room, and I was in there at the time; the second attendant had told me that Heath had got a boot to hit him with, and he came to me in the dining-room and he said he thought the best thing we could do was to put this fellow in restraint; I told him I thought so too, because

it would keep him out of trouble, and keep us out of trouble too; I was working away in the dining room and I had some patients with me helping, and I looked through the glass door and saw this Heath out there; Reece asked me to come and help him as soon as he got the straps out of the clothes-room — you know what they are, perhaps; I kept looking through the door, ready to go out; as Reece came with the straps, this fellow, Heath, put up his hands in this way (pugilistically), and told Reece to come along; when I see that, I turned the key in the door and jumped out and I caught Heath by the hand and by the shoulder; then this Reece and another fellow, a patient named O'Hara, a fellow who committed suicide since at Buffalo — we took him (Heath) into the bath-room and got the muffs on to him; then this Reece he coked him with a towel, choked him and kicked him; he choked him and kicked him with the toe and heel of his shoe.

By Mr. Goodwin:

Q. Who was that — Reece?

A. Yes, sir; he never touched the man until he was tied and then he choked him and kicked him; then he gave him a cold bath; then he strapped him down to the chair; well, Dr. Gray came along that day, and I suppose he found the man in a bad condition; Dr. Gray came up to see the man; I was working away in the dining room; Dr. Andrews came into me and told me that Dr. Gray wanted to see me in the office, and I went down; the moment I went in the doctor said we had killed that man — that was, Dr. Gray said so; I was stunned; to accuse me of killing a man; it was something queer to me; when I recovered myself, Dr. Gray had started off then and he went along, Dr. Gray did; I started after him as soon as I could, but I did not overtake Dr. Gray; but I overtook Dr. Andrews on eleven, I think; I told him I did not want to be accused of hurting that man; he said he knew nothing about it; I said that I did, and that was the reason I spoke about it; then I made up my mind that I should leave, because I would rather leave than tell how the thing was done.

Q. Why?

A. I don't know; but I always had an idea that informers were almost as bad as criminals; I did not want to hang a fellow, and I thought my evidence would hang Reece, and I did not want to inform on him.

Q. Is there any understanding among attendants as to informing on each other?

A. No, sir; except it is the general rule that if a person tells any thing, he is supposed to be ——— if he makes it a practice to tell the doctors any thing, he is ——— well, he is called a "sucker," or some such name as that, and they all get down on him; so it is the general rule that one does not tell what happens.

Q. Proceed with what took place between you and Dr. Andrews?

A. He went off; he said no more about it; I think it was my night out; I do not remember the circumstances, but I would not go out without I got permission to; but this Reece went out without permission; the doctor told him he was violating the rules; he said he didn't care; I sent a fellow to see Mr. Bulger about the thing — the present city judge, but he was neither judge nor recorder at that time; he was in Seymour's office; I sent a fellow down to my uncle and told him to go to Bulger and tell him the circumstances; I am not certain whether Bulger was a judge or not at that time; I think he wasn't; the next day I was called down to the office by Dr. Gray; I was examined about the matter, but I did not tell him a word of truth; I told him the fellow fell in the chair and "hurted" himself in that way; when I went from the office he told me to send Reece down; I told Reece what I had told Dr. Gray, and for him to follow what I had told him; when the other fellow came back, I told him what Bulger said about it; Bulger told me that we could not be compelled to give any evidence that would criminate ourselves; he told me I had better be careful, that if the other fellow should make a statement and say that I did it, I should have to suffer; all my friends wanted me to tell how it was done, but I did not like to be an informer, I did not like to tell it; I thought if I suffered any thing it would be that I was innocent and that would help me to bear it; after he told me that, I was a little uneasy; and Dr. Ford, when he came along the next day, I told him I would like to have the case investigated; he said I had a right to go and tell Dr. Gray every thing I knew about it, and he thought that was the best thing I could do; he said he knew there was a rule amongst us that we did not like to tell on one another, but that in this case I had better tell all about it to Dr. Grry; but I thought myself that an informer was almost as bad as a criminal; I said that if I was sworn in a court of justice I would tell the truth, but not until then.

Q. Was there any inquest held?

A. I don't suppose there was any; I don't believe there was. (See page 100).

Q. Do you know any other patient who died from the results of injuries inflicted by an attendant?

A. No, sir; I do not know any.

Q. Can you recall any other case where an attendant inflicted any considerable injury on an attendant?

A. I don't know that I can in particular; but we had to do a good deal to protect ourselves, and we have to do a good deal of fighting.

Q. Explain what you meant by saying that the attendant used the toe and heel of his boot on the patient?

A. Kicking in this way, indicating with the toe, and stamping in that way, indicating with the heel.

Q. Where on his body would he stamp on him like that?

A. In the ribs.

Q. Have you ever seen a patient injured in the dining-room except the man you spoke of that was hit in the face?

A. It seems to me that we had to put some of them out of the dining-room sometimes because if they got to going it in the dining-room, it was a dangerous place, there was knives and forks round, and it was a bad place to have a row, in the dining-room.

Q. On those occasions were the men (patients) violently handled?

A. I can't recollect as to that particularly, but if such a thing was necessary it was done, and if they resisted, they were forced out, and as much force is used as is necessary to put them out.

Q. Did the doctors ever inquire of you as to the black eyes and bruises that occur from time to time?

A. I do not remember; I was third attendant, and for a little while I was first attendant.

Q. So far as you know, do the doctors accept the statements of the attendants as conclusive, or do they sometimes ask patients?

A. Sometimes they ask patients, but as a general rule the patients are too crazy to tell any thing.

Q. As a general rule then the doctors limit their inquiries to the first attendant?

A. I can recollect a case where I was asked on one occasion, and that was about an attendant and patient on another hall — the patient had marks about him; I was asked about it; I told you that it is not supposed that persons tell the truth up there; the question is asked and an attendant can answer just as he sees fit; of course no attendant is going to tell any thing that will do him any harm.

Q. Do you mean to say that the doctors know how the patients are treated, as you have described?

A. I should think that anybody of any common sense could tell that three men cannot take care of twenty-five or thirty mad men, without using a good deal of physical force — all they can use.

Q. What time in the year did this affair with Heath occur?

A. It was in December, I cannot exactly tell — it was November or December.

Q. About what year?

A. I should think about 1874 — 1873; I left there the 1st of January and it happened quite a while before that — probably a month or two before I left.

Q. What became of Reece after that event?

A. After a while he was discharged.

Q. How long after the death of Heath was Reece discharged?

A. Probably a month; I do not know whether he was discharged after his month was up or not.

Q. Do you know whether he was discharged or allowed to leave of his own accord?

A. Well, what he did was enough to get him discharged; he went down town without leave, and that is why he was discharged.

Q. How long was he kept in the institution after the violation of that rule?

A. I think he was kept until his month was out; whether or not he was kept longer than that I do not know; there was only two of us in the whole ward when Heath was injured — that is me and Reece, and the following day Reece went out in violation of the rules.

Q. Can you recall any other circumstances connected with the institution that, in your judgment, are to be criticised.

A. I don't know, but in a general way; the first introduction I got there into these matters was at time when we were alone — me and another fellow, and it was the first week I was there — there were two other attendants part of the time, two and myself; there was a man there, a patient from Albany, named P. R.

Q. Is that the one that you stated was from New York? You gave the name of a patient of that name from New York.

A. They were different men; the first R. I spoke of, I don't know, for sure, whether he was from New York or not; but this R. was from Albany, he used to keep a hotel; there was a chair in his room and there was a fellow there by the name of P., he wanted this R. to go into the dining-room and get some knives for to kill us; I heard this, and I was only a few days there; I heard this P., as he was passing me, say, he would give that fellow a through ticket for h—l before night; after dinner he wanted R. to come in and get the knives; R. would not join him, so he went and got a chair out of the sick man's room, and he went for the attendant with that; this attendant had told me that if ever there was any one man on that ward that he could not lick, himself alone, that he would leave the Asylum; he was not a very big fellow; he was rather light, and I thought he must be of extraordinary good material if he could lick any one on that hall; he was the head attendant; his name was Griffiths; well, this P. went for Griffiths, and I was going to interfere but he told me to leave it between himself and the patient; I obeyed orders and left it between them, but the patient was making sharp work of him, or was giving him too much, so I pitched in to help Griffiths and stop this P.; there was a number of patients there all round and they kept shouting for to leave it between the two, they were tickled to death to see a patient getting the better of an attendant; I had to do all I could to keep the others from pitching in to help the patient; me and the other attendant pitched into the whole crowd of them, and every man that had got up on his feet we locked them all in their rooms; after that when this Griffiths had rested a little, he wanted to go at this P. again and have another lick at him; he went to the room where P. was locked in, he went in and told me to lock the door; I locked the door, and after a while I thought I would look in to see how they were getting on, I opened the door and saw they were at it, I just saw that one was a top of the other, then I shut th e door again, and waited a little while, then all of a sudden I thought that I hadn't taken

particular notice to see which was a top — I opened the door again at once to see how it was, and there was the patient a top, and if he wasn't a pounding the very old Harry out of this Griffiths, so I went for the patient and give him a licking myself, I was most tired out by the time we got the best of him; then we went round to all of them that took part, and there was not one of them that got on his feet that we did not — well, we gave them all a "going over" they use that term when they mean that they gave them a good pounding, I held them and the other fellow pounded them.

Q. How did he pound them?

A. Kicked them with his hands and feet or kicked them with his feet I mean; we treated probably six or seven in that way; it was pretty hard work, I had fought so much that I was quite tired out at night; we had all broken bones and black eyes; I broke that finger of my hand — the little finger of my left hand; there was only two of us, remember, and if we had not got them in their rooms, and they had pitched on to us together, I think they would have killed us, sure.

Q. What report was made of this battle to the authorities?

A. I guess they were told the truth about that; this patient P. almost killed another patient, and he broke the chair by striking the attendant on the shoulder; it was a heavy boarded chair and it was split clean through, and one-half of it struck a patient named A. and almost killed him, he had to be taken care of.

Q. Did he go to the hospital?

A. Well, that is quite an hospital itself. I don't know what the doctors were told about that matter, I did not tell them any thing; we had to fight for our lives that day, and if the other fellow hadn't helped and locked them in their rooms before he went away, I think they would have killed us, I was strange there and many of them took me for a patient.

Q. How long a time did this battle last?

A. It lasted from somewhere about one o'clock to about half-past four.

Q. And during that time did not any of the doctors put in an appearance?

A. No, sir; you see it is one to so many; now imagine one man like this gentleman here [the stenographer] having to take care of twenty-five like me; why, there was one man on that ward — a patient — he could lick all the attendants on three halls if he only once got to going.

Q. Did he ever have any difficulty with the attendants?

A. Yes, he got into some trouble with them; he got roughly handled; there were all the attendants of two halls at him at once.

Q. Was he hurt?

A. I don't think he was, he was so stout that I don't think any amount of pounding could hurt him.

Q. Can you recollect any other instance of striking or kicking in the stomach?

A. Nothing, only that was the general rule.

Q. Why did they have that rule?

A. Well, because it would leave no mark, and it would be the quickest way to get the best of them.

Q. Did you ever see a patient struck in that way by an attendant?

A. I did, and I struck them so myself; I know at one time a fellow attacked me, he was a stout fellow, and I know that if I had not hit him like that just when I did he would have got the best of me.

Q. When you left the Asylum, did you leave of your own accord or were you discharged?

A. I don't know as I can say whether I was discharged or whether I left; but I will tell you how it was and you can see: It was after this Heath affair that I told about, and after Reece left; the attendants thought I had told on Reece, and I found I could not get along with the fellow on the ward with me, his name was Connors, and he had charge of the ward at the time; he found fault with every thing I did.

Q. Found fault with you to whom?

A. Well, grumbled; he wanted me to keep the milk from the patients so that the attendants could have it, and I would not do it; and he wanted me to keep things from the table; we did not eat them and they would only spoil, and I thought the patients ought to have them, they did not get any too much; they told me to take care of myself, and when I would be crazy to expect the same treatment; I thought it was not a good thing to be quarreling, so I went down to the office; I told Dr. Gray I could not get along with them fellows and wanted to be changed to another ward; I told him it was not a matter I was to blame in, that I knew I could give satisfaction on any other ward, but I did not want to go on any of the wards where his friends were; I told him I would rather go out in the snow and work barefoot, and if I did not get a change to some other hall, I would take one myself; I did not get a change, but I had a notice from Mr. Dryer, the steward; he told me that Dr. Gray had made up his mind that he would not make any change, so I left.

Q. How frequently did Dr. Gray visit the wards during the ten months you were there?

A. We expected him about once a month; he would probably come round with some visitors, but I don't remember of any time when he came to see any patients, except to see one fellow that had a sore leg.

Q. Was that the result of an injury received in the Asylum?

A. No, sir; I don't think it was.

Q. You say you did not see him oftener than once a month, to your knowledge?

A. I don't think he did, except to come around with some visitor;

I can only recall that one instance when he came to see a patient; I think he was there then.

Q. Did you write a letter to the "*Daily Press*" of this city in February?

A. I did; I took it there; I gave it to the one that I supposed was the editor.

Q. Do you know his name?

A. No, sir; I did not know him.

Q. Did you know Mr. McCauley the telegraph operator?

A. I think I had an introduction to him; I met him somewhere.

Q. Where did you have that introduction?

A. Mr. Welch was telling me that he introduced me to some young man, and he told me that was the man; it was two or three weeks ago.

Q. Was it before or after you sent the letter to the paper?

A. That I could not say.

Q. Do you recollect whether you subsequently met this young man McCauley at the newspaper office or not?

A. I could not say that I saw him at the newspaper office, but Lynch told me he gave me an introduction to him.

Q. How did you get introduced to the editor of the paper?

A. I have written different articles.

Q. Did you go alone to the newspaper office?

A. Not at that time, there was another fellow with me; Mr. William Mahoney.

By Mr. Goodwin:

Q. Were you upon any other ward but one?

A. No, sir; only on one ward — that was No. 12.

Q. Give us the names of all the attendants that were on that ward while you were there that you can now recollect?

A. When I went there first there was Griffith Griffiths, David Reece and myself; then Griffiths was changed and Connors took his place, and Reece left and a fellow named Dillon came — Tim Dillon, he is now a politician in Utica; that was all; that is the names of all the attendants that were on the ward with me at the time I was there.

Q. You only say you saw Dr. Gray on the ward on one occasion?

A. We expected him to come about once a month, I don't remember whether he forgot to come and make his monthly round, I don't remember; he was there to see this man with the sick leg.

Q. And when he was there at other times you say it was with people on the wards?

A. I could not say exactly, because it is so long ago; he came through with the supervisors, probably, or some visitors coming through; those are the only occasions that I remember.

Q. You saw him there when he was there with Dr. Andrews — that was another time?

A. Yes, sir; he was there at that time.
Q. Did you have any difficulty with Reece?
A. No, sir.
Q. Did you have any difficulty with Connors?
A. I could not say as I did until after this affair happened.
Q. Did you at any time report to the authorities any of these cases of cruelty, and injuries inflicted on patients?
A. I did not, and I would leave first.
Q. Did you ever tell Dr. Gray or any other of the physicians what did occur upon the wards?
A. I can't remember that I was ever asked except about this case that I mentioned; and I cannot remember just what I told the doctor at that time.
Q. Whatever you did tell him, it was not the truth, was it?
A. I did not tell him how the man was injured; I did not tell on the other attendant.
Q. You say that Dr. Ford said to you he understood that there was an understanding between the attendants that they would not tell what occurred on the ward?
A. I don't know that he said he was aware of it, but he spoke as though that was his opinion about it, he said that it was a rule, or he supposed it was a rule not to tell of one what another did, but he said that this was a different matter, it was a serious thing, and he did not think it was manly for me to deny what I knew about it; that was about Heath's case.
Q. How many patients have you put in baths for the purpose of removing black and blue spots from them?
A. I never put any in, not individually myself; I would help put them and I have helped to do it.
Q. What attendants have you seen put patients into baths to remove bruises?
A. I saw Reece; I don't know that I can recollect the instances to be positive about it, but I know that was the rule; I don't know that I can remember now any particular cases; it is ten years ago.
Q. Did you see Judge Bulger yourself personally?
A. No, sir, I could not get away; could not get permission to get out.
Q. Did you ever talk about this matter after you left?
A. No, sir, I did not mention it much.
Q. Did you ever tell any one connected with the Asylum as to the cruelties practiced upon the patients by the attendants?
A. No, I don't remember that I ever did.
Q. What is your best judgment whether you ever did or not?
A. I don't think that I ever did.

By Mr. Olin:

Q. Did you ever have any conversation with Dr. Gray about this case of Mr. Heath other than what you have stated?

A. When he called me to the office the night following after the night of that day, I told him he was a big, powerful man, and that we had a good deal of trouble to get the best of him, and that in falling, he fell on the seat of the chair, so as to give him an idea that he got hurt by falling on the chair.

Q. You told him that in answer to his questions and then he sent for Mr. Reece?

A. Yes, sir, he told me to send Reece down, and I told Reece what story I had told Dr. Gray.

Q. Have you any thing further to state about the Asylum?

A. I said we had to use force there, and we did; but I will say this, that one kind-hearted attendant was worth all the doctors that can be got into the Asylum; the other attendants claimed that I was making too free with the patients and was spoiling them.

By Mr. GOODWIN:

Q. When your communication was taken to the "*Press*" office, was there any alteration or correction made in the copy?

A. I cannot say whether he made any corrections or not; he might have substituted some words for others; but I think all he did to it was to cross the "t's" and pip the "i's."

Q. Did you see him erase any words?

A. I could not say that I did, I don't remember it; he read it over to himself when I took it; I can't tell what alterations he made, if he made any; I asked him if he would publish it, if he did not think it was fit for publication, if he did that I would send him in the rest of it; he said he would insert it; I gave him that part then and I went and got the other part and brought it that night.

Q. Did he read that over?

A. I can't say whether he did or not.

Q. Did he make any corrections in it—in the second part?

A. I can't say whether he did or not; I don't think he did any more than to cross the T's or dot the I's.

By Mr. OLIN:

Q. Did he ask you to furnish any other communications?

A. No, sir, he did not ask for any other.

JOHN J. HALPIN,

Recalled:

By Mr. RICE:

Q. Why were you discharged from the Asylum?

A. I saw from what you told me the other day that it was seduction.

Q. You said something here about your marriage the last time you were here?

A. Yes, sir; I stated about it.

Q. Did your marriage occur without much knowledge before hand?

A. No knowledge up there at the Asylum whatever.

Q. They had not heard of it?

A. No, sir; but if Dr. Gray had spoken to me like a man I could have shown him my papers.

Q. How long had your marriage engagement existed before the contract was consummated?

A. It had existed for a couple of months.

Q. Was any charge made against you on the part of the young lady before marriage?

A. No, sir; never; not at all.

Q. Then the marriage was had in pursuance of an agreement previously made?

A. Yes, sir; two months before.

Q. How long had the day been fixed for the marriage ceremony?

A. As near as I can remember it was a couple of months.

At a meeting of the committee, Senator Goodwin being present on behalf of the Asylum, and after a private consultation of the committee, the Chairman stated that the committee had agreed upon the rollowing programme:

To-morrow (Saturday) to examine the steward of the Asylum, and such witnesses as may there be found convenient to examine. That on Tuesday afternoon at 3:30, at the room of the present committee at the Capitol, Albany, they would examine certain business men of Albany concerning certain accounts of the Asylum; that on Wednesday afternoon they would examine Miss Augusta Woods of Canajoharie at the same place, and that then, unless other witnesses were produced on that afternoon not now anticipated, the committee would close the taking of testimony on their part until after the Asylum authorities have made such defense or rebuttal as to them seemed expedient. That the committee would endeavor to put the counsel for the Asylum in possession of all the testimony to date early next week, and of all testimony in which the Asylum had not

been represented by counsel by that time. That the committee will expect the Asylum authorities to commence their answer or rebuttal to testimony already taken at Baggs' Hotel, Utica, Thursday evening at eight o'clock. That they will sit to hear further testimony on the following day and on Saturday, either at Baggs' Hotel or the Asylum, or at Albany, as may be more convenient for the Asylum authorities and will continue to take such testimony as fast as the Asylum authorities can prepare and present the same, subject to such engagements in the Assembly as the committee may have.

Mr. Goodwin — I do not understand that the Asylum authorities are limited to any number of days to put in their testimony?

The Chairman — The committee will not now say how many days they will restrict the Asylum authorities to, but obviously there must be every effort made to limit it to as few days as possible, in consquence of the probability of an early adjournment of the Assembly and the necessity of the committee closing this testimony in time to prepare their report and submit it to the Legislature before its close.

Mr. Rice — I move that this committee close the taking of testimony on or before April 1.

Seconded by Mr. Olin, and unanimously carried.

Mr. Goodwin — I desire to ask the committee if the Asylum authorities will be allowed to present any rebuttal testimony to whatever evidence may be taken by the committee after the evidence required by the committee to be put in by the Asylum authorities commencing on Thursday evening next.

The Chairman — I will not bind the committee to that now, but my impression is such testimony as the committee may put in, in reference to the Asylum authorities, will be in and of itself solely in rebuttal or sur-rebuttal to their testimony.

Mr. Rice — But if the committee produce any more evidence-in-chief, the Asylum authorities will be allowed to answer it.

The Chairman — Certainly.

Mr. Goodwin — Will the committee require the managers to answer testimony that has not been placed in the hands of their counsel at the meeting on Thursday next?

Mr. Rice — Mr. Goodwin has part of the testimony and has taken notes of the testimony of other witnesses — of this old lady who testified this afternoon, for instance; I think the notes taken should enable him to prepare to answer that testimony.

Mr. Goodwin — If there is any evidence taken before the committee that does not require an answer on rebuttal from the managers of the Asylum, will the committee particularize?

The Chairman — I think that is for the Asylum to say.

Mr. Haskell — That views my sentiments to a dot.

Mr. Goodwin — I understood when I was presented to the committee as representative of the Asylum, that the understanding was that all of the testimony produced before the committee was to be submitted to the Asylum, and that after such submission counse

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were to have the right to present such testimony as was deemed necessary to meet it; by the ruling of the committee, I think that rule has not been fully carried out, if the committee now propose to make counsel rebut from notes taken by him at the sessions of the committee.

The CHAIRMAN — In answer to that the committee will undertake to furnish counsel of the Asylum in advance of the printed notes, a full stenographic report of all the testimony taken down to this date, by next Wednesday afternoon, if the stenographer can possibly get it out by that time; that the committee will see that a duplicate copy of the testimony is sent to the Asylum authorities at the same time that the same is sent to the printer.

Mr. GOODWIN — I understood from some of the managers of the Asylum that a number of names were presented to the attorney of the committee and chairman, of witnesses to be subpœnaed before the committee; and as I understood, it was agreed that such names as were presented would be subpœnaed by the committee.

The CHAIRMAN — No member of the committee has knowledge of any such list of names, but the committee are informed by their sergeant-at-arms — Mr. Henderson — that Mr. Swan did give to Mr. Morgan the names of two witnesses whom he desired to have subpœnaed; one of them was Mr. Eastman, editor of the Utica *Press*, and the other was Mr. C. W. Sherlock, correspondent of the Syracuse *Herald*; that Mr. Eastman has been, as Mr. Goodwin is aware, examined this afternoon, and cross-examined by Mr. Goodwin; that if desired the committee will subpæna Mr. Sherlock for such afternoon next week, Tuesday or Wednesday, as Mr. Goodwin may select.

Mr. GOODWIN — Now, I will ask if I may bring this subject before the committee when Mr. Morgan is present, to-morrow?

The CHAIRMAN — Certainly.

At this stage Mr. Morgan came in, and with reference to the foregoing matters said: "I was asked if I would have these witnesses subpœnaed, and I said I would submit it to the committee; that I thought if their testimony was going to be taken they would be called."

The CHAIRMAN — What names did Mr. Swan give to you?

Mr. MORGAN — He gave me the correspondent of the Syracuse *Sunday Herald*, and he gave me the name of the editor of the Buffalo *Express*, J. N. Matthews, that is all.

The CHAIRMAN — Did he give you the name of Mr. Eastman?

Mr. MORGAN — That was spoken of at the time, but you gentlemen had already spoken about calling Mr. Eastman; that was arranged already.

The committee then adjourned.

SATURDAY, *March* 15, 1884.

The committee met at 9:30 this A. M., in the reception-room, on the ground floor of the Asylum, and continued the investigation, as follows:

Present — Messrs. HOWE, HASKELL, OLIN and RICE.

EMMA BARKER,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?
A. Forty-four.
Q. What position do you hold in this institution?
A. Matron.
Q. How long have you been occupied with the institution?
A. Nearly twenty years; all that.
Q. What positions have you held during that time?
A. Attendant, night watch and matron.
Q. How long have you been matron?
A. Since 1867.
Q. What are your duties?
A. A general care, as I understand it, of the patients and their clothing, particularly with sick ones.
Q. What are your duties with reference to the inspection of the wards and of the bed-rooms?
A. I consider it one of my duties to see that their beds are properly cared for, clean and warm, and that the patients are warm at night.
Q. How often do you go through each ward?
A. Sometimes two or three times a day; sometimes two or three days; I don't go through all the wards; it is according to my other duties.
Q. Do you go through as often as two or three days?
A. Oh, yes, sir; I average it.
Q. How many attendants have you under you?
A. I believe we have forty-four now.
Q. These are all on the female side of the institution?
A. Yes, sir; including a dressmaker and plain sewing.
Q. And you are the head of the ladies' side of the institution?
A. Yes, sir; I suppose so.
Q. And directly under the doctors?

A. Yes, sir; Dr. Brush is the physician in charge.

Q. And Dr. Quinn is his assistant?

A. Dr. Backus was some time ago, but it has changed; it is Dr. Quinn now.

Q. What attention do the physicians give to patients under your observation?

A. I do not quite get what you want.

Q. How often do they go through the wards?

A. Twice a day and in cases of sickness oftener, several times if a patient is sick.

Q. In the absence of physicians who are in charge of the patients?

A. We are never without a physician.

Q. I mean when they are away from the ward?

A. The one that has charge of the ward, the supervisor of the department.

Q. How many patients are there to an attendant?

A. I think it is about an average of one attendant to ten or twelve patients.

A. Is there any difference in the proportion of the attendants between the violent wards and those where patients are quieter?

A. Yes, sir; we have more help on the disturbed wards.

Q. What are the violent wards on the ladies side?

A. Seven, eight, nine and eleven, seven, eight and nine are the worst, they are about the same classification.

Q. How many attendants are there on these wards?

A. Four on each.

Q. About how many patients are there on each of these wards, from time to time?

A. Twenty-one and sometimes twenty-four, as we have extras.

Q. Are there ever times when you are short of attendants on these wards?

A. Yes, sir; there have been a few times.

Q. How long at a time are you short of attendants on these wards?

A. We do not mean to be short very long on the ward, if we can take an attendant from a better ward, we send them back to the other wards, because of the danger on the disturbed wards.

Q. Do you examine attendants before they are employed, yourself?

A. Yes, sir; a short examination.

Q. They are first submitted to your examination before they are employed?

A. Yes, sir.

Q. How long an examination or inquiry do you make?

A. Not very long; it depends a little upon the attendant.

Q. How long have you been accustomed — how long have you been consulted in regard to the fitness of employees?

A. I hardly know, specially within the last few weeks or a month, or since the civil service came in; before that, sometimes I didn't see them until after they were engaged.

Q. What do you mean by civil service?

A. They pass a sort of examination, and in seeing them — the examination is passed in my room — that they can read and write, etc.

Q. Do you refer to a special rule of this institution created recently?

A. I don't know that it applied to this institution any more than to any others.

Q. You understand that the civil service law of the State applies to this institution?

A. Yes, sir.

Q. And applicants are subjected to examination?

Mr. Goodwin — I will state that the commissioners appointed Dr. Brush and Mr. Dryer, the steward, as such committee; I don't know when it commenced.

A. I think it was about the first of January it commenced.

Q. Is it a board of commissioners?

A. Yes, sir.

Q. Who composes that board at present in the institution?

A. The first assistant physician, Dr. Brush, Mr. Dryer and myself.

Q. What have been the duties of that board so far?

A. To examine into the condition of the attendants, if they are in health and apparently strong, and that they can read and write.

Q. Do I understand you to say that they have instituted an examination of the attendants in the institution?

A. No, sir; only those that come in since that time.

Q. How many attendants have come into the institution since the first of January?

A. Six I think have been examined, and one didn't come.

Q. Have you any idea how many on this side of the house?

A. No, sir; they have examinations of attendants on the ladies' side of the house, and are conducted by all three commissioners; I have nothing to do with the other side of the building.

Q. What do you require as necessary qualifications for an attendant?

A. As to good health and good nature mainly.

Q. What examination do you subject them to?

A. As to what?

Q. Any thing.

A. We have simple sums in addition and subtraction and require them to write, stating their age and generally what they have been employed in before coming there.

Q. Do you make any inquiry outside as to their previous circumstances?

A. We require now a recommendation.

Q. A written recommendation?

A Either that or if any one of the Board or any person who was acquainted with them and recommended them, it would be sufficient, I think.

Q. Was not that always the case, your requiring that?

A. No, sir; not always binding, it was often asked.

Q. Sometimes attendants were taken without such recommendation?

A. Yes, sir; on their good appearance.

Q. That is to say persons came here and applied for work, and if they seem to be respectable or trustworthy, are employed without a recommendation?

A. Yes, sir; they might be.

Q. Do I understand you to say that was the general practice for some time prior to the change just made?

A. Yes, sir, as I understand it.

Q. Have there been frequent changes in the staff of attendants during the past few years?

A. Yes, sir.

Q. Has the institution experienced any trouble in the matter of securing proper attendants?

A. I should not call it serious trouble; occasionally, of course, we have a little.

Q. How long did the attendant stay on the average, there?

A. Perhaps on an average two or three years; some stay for a long time.

Q. You think two or three years is the average?

A. Well, perhaps, that is not quite long enough; I have never given the matter very much thought; some of them have been there ten or fifteen years; I rather think it is not, on the average, long enough.

Q. Have you ever heard complaints from patients as to ill-usage by attendants?

A. Yes, sir, I have.

Q. Do you know whether attendants have ever inflicted any ill-usage on patients?

A. No, sir; I have never seen them abuse patients, not to recall an instance.

Q. When you have heard such complaints, what inquiry have you made in regard to it?

A. I generally go to the attendant and ask her what she knows of it; if there are two or three attendants, I go to one and then another, and sometimes talk it over with the patient, consider it and decide it as best I can.

Q. Have you never ascertained that injuries have been so inflicted?

A. Sometimes, in controlling a patient, there has been an injury, but not intentional; I know of one instance that occurred, but I didn't see it; the person admitted it; that was a case of a Miss Redner who struck a patient.

Q. When was that?

A. I should think about four or five years ago, some little time ago.

Q. What was done with Miss Redner?

A. She was discharged.

Q. Do you recollect any other case where a patient has been struck or badly used by an attendant?

A. I cannot recollect now, I cannot think of any just now.

Q. You can take your time, we don't wish to hurry you at all. Do you know of cases where patients have been seriously injured in the institution on the ladies' side?

A. No, sir; I do not recollect any now.

Q. Have you ever seen patients bruised, or apparently suffering from bruises, or injuries?

A. I have seen them bruised, of course.

Q. Is that an unusual sight?

A. It is not very frequent, only occasional.

Q. What inquiries are made when such injuries are observed?

A. How it occurred, what was the occasion for any difficulty.

Q. Of whom are inquiries made?

A. Of patients and attendants, and sometimes of the supervisor, of everybody from whom we think we can get any information.

Q. Do you regard the testimony of attendants, on this subject, as entirely trustworthy?

A. Sometimes I should entirely, and again I should rather make further inquiries, and do so, but generally speaking, I think I should.

Q. You think, sometimes, that attendants are not entirely to be trusted?

A. I should not think it would be justice to trust them, without making some kind of inquiry, that is if they were people with whom I had little acquaintance; if I had known them a long time, I should feel a little doubt about it.

Q. Do you know of any patients who have died in the institution of suicide, whose death has resulted from injuries received in the institution?

A. No, sir.

Q. Either by the hands of patients or attendants?

A. I don't recollect any now.

Q. Do you know Ann Burns, an attendant?

A. Yes, sir.

Q. Is she still here?

A. Yes, sir.

Q. What is her character?

A. We have always considered it good.

Q. Do you regard her as a considerate attendant?

A. Yes, sir; I do.

Q. Is she a person who is considered as truthful?

A. Yes, sir; I should think so.

Q. How long has she been in the institution?

A. Twelve or thirteen years.

Q. What is her present position?

A. She has charge of number twelve.

Q. Have you ever heard any story, or charge of any immorality on her part with an attendant?

A. Yes, sir ; I have heard it.

Q. Do you know any of the circumstances connected with it, whether it is true or not.

A. I haven't the slightest idea ; I don't know.

Mr. Goodwin — Ask her from whom she heard it.

Q. From whom have you heard remarks ?

A. From a former patient, Mrs. Fulford.

Q. Have you heard from any other source ?

A. No, sir.

Q. Was there a man here by the name of Jones ?

A. Yes, sir.

Q. Is he still here ?

A. Yes, sir ; he is carpenter here.

Q. All you know about it is what Mrs. F. told you.

A. Yes, sir.

Q. When did you first hear of it from her ?

A. I think it was after she left, Miss Burns was on the ward — she was on her ward ; I can hardly tell, which told me first, the attendant or Mrs. Fulford told me of it while she was on number four, that was one of our better wards, the attendant told me what Mrs. Fulford had said.

Q. Miss Burns came to you herself ?

A. She talked with me about it ; it was a long time after it happened.

Q. How old is this Miss Burns ?

A. Twenty-seven or eight.

Q. Have you ever heard of any stories, or remaks of immoralities committed in the institution, either upon patients or attendants ?

A. I have heard such talk, I have heard of it here.

Q. From whom have you heard it ?

A. Well, in regard to what Miss Lathrop had said, I heard it ; she never told me herself, only what I have heard from the testimony.

Q. From whom did you hear of that occurrence ?

A. I cannot tell now.

Q. From a patient or attendant or physician ?

A. I cannot recollect, if I can think, I will tell you bye and bye ; I cannot say who told me.

Q. Did you hear of it before the investigation of last year ?

A. No, sir, I did not.

Q. Are there any male persons connected with the institution who could get access to the female wards except the doctors ?

A. I don't know, I don't think so, still I cannot say positively in regard to that, whether a person who takes care of the heating apparatus would have any thing to do ; I don't know.

Q. Did you know whether or not the night watchmen have pass-keys that would admit them into such wards ?

A. I don't know whether they have or not.

Q. What is the system of night watchman on the female side of the building?

A. We have three night watchmen, two who pass through each ward every hour — they are women; then we have another, who has special charge of suicidal cases, she stays on the ward and takes charge of two large dormitories, and single rooms.

Q. What check is there upon the faithfulness of the night watchers in performing their duty; do they have any watchman's clock?

A. No, sir; we have to trust them; sometimes I go on the ward frequently myself at nights.

Q. But there is no check or supervision?

A. No, sir.

Q. How frequently do you go through the building at night after it is closed up?

A. I hardly know how to answer that; perhaps I should not go if it was a particularly cold night, sometimes I would go two or three nights right along, then two or three weeks I would not go at all, but I go when a patient is sick.

Q. Your visits at night are occasional?

A. Yes, sir.

Q. What I understand is, that after ten o'clock the wards are in charge of the attendants, supervisors and night watchers?

A. The night watchers, yes, sir; they are in charge, of course, but they are sleeping on their different wards, it is more especially in charge of the night watchers; they go on duty at ten; the attendants are never off duty entirely until half-past.

Q. How often did Dr. Gray visit this side of the building?

A. I do not know; I cannot state.

Q. What has been his custom during the last few years as to visiting the wards, as to frequency?

A. I don't know how I can tell that; I don't know how often he goes on, for I haven't any means of knowing; I might meet him there; I have no idea how often; sometimes I would go with him.

Q. How frequently would you say that he went over the wards on that side?

A. I don't know what to say, for I really don't know.

Q. How often have you seen him on that side of the building during the past year yourself?

A. I have seen him there many times, I have no means of knowing just how many.

Q. Does he make an inspection of that side every day?

A. No, sir; I should not think that.

Q. Did he go as often as once a week over the whole of that side of the building?

A. I don't know what to say in regard to that, for I don't know.

Q. Does he have any regular times?

A. No, sir; he goes just as he happens to.

Q. Are you aware that patients are sometimes controlled by attendants, by smothering them in wet sheets?

A. No, sir; I have heard that thing, but never saw it.

Q. From whom have you heard of it?

A. The first time I heard of it, Dr. Andrews told me about it, he was assistant physician, he had heard of it, and asked me if I had; I never had heard of it until that time, and that is all I know about it.

Q. Have you ever undertaken to investigate that matter by asking the attendants in regard to it?

A. Yes, sir, at that time.

Q. About what time was that?

A. I should think that must be ten years ago, but not more than that.

Q. Do you regard it as improbable that the attendants should sometimes treat patients in that way?

A. I don't know — I think — well I don't think it is impossible; I think it is, perhaps, probable — I don't think it is done now, and has not been for years, I think.

Q. Have any measures been taken to prevent it?

A. Closer inspection; it was watched for very closely about that time to find out if it was done, and who did it.

Q. Did you then find out that it was done?

A. That it had been, a few times.

Q. Have you made any further inquiry on that subject, since then?

A. No, sir; I have had no complaint, and no reason to suppose it was done.

Q. You have made no such inquiry, as you then made, to ascertain whether the custom may not have grown up again?

A. No, sir; I should have thought, if it had grown up again, some patient would be likely to tell me, if they had any trouble; I always asked the patients what they did, and I think they would be very likely to tell about it.

Q. Did patients make complaints frequently to you about matters in their wards?

A. Considering the number of them, it is not very frequently.

Q. Of what did patients sometimes complain?

A. Oh, abuses; and when you come to ask what it is, you fail to find any thing at all.

Q. What kind of abuses?

A. Oh, they are pushed and they are pulled, and not given their clothing; their things are put on them differently from what they like; and this does not fit them; and that hurts; and things of that kind; but the pushing and pulling is what they complain of more than any thing else to me.

Q. Do they complain of being improperly bathed?

A. No, sir; I never heard more than one or two complaints in all my life here of that.

Q. Do they complain of the medicine that is given to them?

A. Sometimes.

Q. Do you know whether patients are allowed to throw away medicine that the doctor gives them?

A. They are not allowed to; sometimes they will say they will take it and will not do it, but it is not supposed to be left in their charge to take it, with a few exceptions; it is in the charge of the supervisor generally; if it is a dose in the night, to the night watchers.

Q. Is it ever left to the attendants?

A. Occasionally, just a single dose to be given.

Q. What is the custom of the doctors, in sending medicine to patients; do they always send it by the supervisors — first how does it get to the supervisor?

A. The apothecary puts it up, and sends it up in a dumb-waiter, that comes up to the different departments; it comes up with a memorandum on the bottle or cup; each one is generally printed one the cup with directions for use; if it is a bottle, the directions are pasted on, if it is a single cup the attendants know about it.

Q. What is the practice of doctors visiting patients at night; do they always come or do they sometimes send directions, that such and such medicine shall be given?

A. They don't always come if it is a patient that they understand and just noisy, they send a dose of medicine to be given to that patient.

Q. What is the usual sedative given?

A. I don't know; I don't know any thing about that?

Q. Say whether you think a lady physician would be desirable on that ward?

A. I think, as far as I am concerned, I should say not.

Q. For what reason?

A. I don't know what a lady physician could do more than a gentleman does.

Q. Have you ever had charge of a patient who has been treated by a lady physician?

A. No, sir, I don't recollect any.

Q. Do you know of any special cases coming under your notice where lady physicians have been in charge?

A. Water cures — we have had one or two of those.

Q. Do you know of any objection to the presence of a lady physician?

A. No, sir, no special objection.

Q. Do you think it would be well to have a lady physician, who would be within call at night, on that side?

A. I don't know that there is any harm in it; I don't know how better it could be; if any one feels like it there is nothing against it, but each has their way of feeling.

Q. And you have a feeling against lady physicians?

A. No, sir; I would not be understood as saying that, only if I was sick I should not send for one; I have nothing against them; let them prosper if they come, and if they like it.

Q. What opportunities for exercise are given to lady patients?

A. Walking around, and croquet in the summer.

Q. What opportunities for out-door exercise is given violent patients?

A. They have a large yard, they are out forenoons and afternoons, for several hours, when it is suitable; during the proper weather they are allowed to be out every day, and some have to be carried out to go out.

Q. Are there any matters connected with the management of your department, which you think could be improved?

A. I don't know what there is that I might suggest.

Q. Is there any thing that you can suggest from your experience of twenty years, to make the institution any better than it is?

A. I don't know what to say about that; I don't know what there is really.

Q. Do you think there are sufficient attendants?

A. Sometimes they might get along to advantage with a few more, when they are particularly disturbed.

Q. Do you think that the character of the attendants and their qualifications are sufficiently high for their duties?

A. Yes, sir; I think so.

Q. Then you have no fault to find with the general run of attendants?

A. No, sir; we have generally had very good ones.

Q. Is there any system pursued of training the attendants for their duties?

A. Yes, sir; we have lectures in training them in caring for their patients; they have those once a week.

Q. What requirement is there that the attendants shall be present at such lecture?

A. Nothing special.

Q. Is it optional?

A. Yes, sir.

Q. As a matter of fact how many are there in average attendance?

A. About all that can be spared I should say, generally twenty-five, or thirty present well, perhaps, that's a little too high, twenty-five — we have had twenty-five sometimes, I am sure.

Q. How long has this system of lecturing been carried on?

A. Only a short time, and regular lectures perhaps a couple of months; I don't remember when it commenced.

Q. Did it commence before the accident to Mr. Hughes?

A. Yes, sir.

Q. Who gives such lectures?

A. The assistant physicians in turn.

Q. What are the subjects of these lectures generally?

A. Anatomy, physiology, hygiene, the care of patients, and what to do in emergencies.

Q. What is the character of the table?

A. I think it is excellent; it is plain, but it is excellent, it is

good — varieties of meats, vegetables in season, of meats and breads, and plain cooking.

Q. Is there any complaints from patients about the table?

A. Yes, sir; sometimes I think it would not be possible to set a table that they would not complain of.

Q. What is the nature of the complaints on the table?

A. They are not accustomed to eat such food, that is about the gist of the whole of it.

Q. Is there no effort made to supply delicacies, or special dishes, for sick patients?

A. Yes, sir.

Q. And they can get special dishes, on the doctor's prescription, sent to their room?

A. Yes, sir.

Q. Do you know whether any effort is made to see that it is given to them in a considerate and careful way?

A. Yes, sir; that is one thing I try to look after as well as I can.

Q. How much attention do you give to them?

A. I am in some of the dining-rooms every day when the meals come up, and go to the kitchen every once in a while to see that the extras or special dishes are properly prepared.

Q. Do you follow these dishes to the room and see that they are properly given?

A. Yes, sir; I have done that very frequently.

By Mr. Rice:

Q. Do you know of patients being removed from one ward to another, by way of punishment?

A. No, sir; I don't, though I think they are sometimes.

Q. Are you able to tell us why Mrs. F. was removed from one ward to a worse ward?

A. I should say from my knowledge of the woman, because she was a decidedly disturbing element on the ward.

Q. How was that manifested, that disturbing element?

A. Fault-finding, complaining, worrying other patients until she would get them nervous and excitable.

Q. She was a nervous person?

A. Yes, sir; and an inveterate talker, and sometimes she would talk to them beyond what they cared to listen to, and they would get nervous; she worried a good deal.

Q. She was not violent herself, was she?

A. I don't recollect any instance of violence.

Q. It was never found necessary to put any mechanical restraint upon her?

A. I don't know; I am not positive as to that; I think she may have been put in her room once or twice, but I think that is all.

Q. Her difficulty was extreme nervousness, was it not?

A. Yes, sir.

Q. Do you know the fact that for six weeks she was refused the privilege of going out of the house?

A. No, sir; I don't know that.

Q. How can you account for it if it were so?

A. I cannot account for it, she was able to go out.

Q. Would it be possible for the attendant to keep her in the house as a punishment for disobedience to their orders?

A. No, sir; I should think not, because she would be sure to tell the doctor, and the doctor would be sure to inquire of it, and they would see that it was remedied, it would not be allowed.

Q. Have you heard of her sending notes to the doctor?

A. Yes, sir; I think so.

Q. Do you know, as a fact, that no attention was paid to these notes?

A. I think there might have been attention paid to them.

Q. Do you know whether there was or not?

A. I don't remember any special note, but I know there has been a great deal of talk about her complaints; I wondered what there was about them, and I know the doctor spoke about her when she made complaints, but I cannot specify the complaints; I have heard him talk to Miss Burns about her; he was talking to her about Mrs. F.'s complaints.

Q. Do you know of any violence ever used toward Mrs. F. by way of several attendants taking hold of her and dragging her through the wards?

A. I don't know of it; I remember her telling me so.

Q. Did you make an investigation of it?

A. I asked the attendant what there was of it; I think it was a disturbance in the dining room, and they took her, one one side, and one the other; and took her to her room; she called it "dragging," other people would call it "taking her along."

Q. Did you do any more than to inquire of attendants?

A. No, sir; not very well.

Q. Did you take her statement?

A. I could not very well, because I had seen her so many times, and I could not take all she said.

By Mr. Haskell:

Q. Do you remember the occasion of Mrs. F. having some money taken from her?

A. Yes, sir; she reported that it was stolen by Miss Burns; but it was brought down to my keeping.

Q. Do you know where Miss Burns got the money?

A. She took it from Mrs. Fulford; that is what I understood at the time.

Q. Is there any rule of the institution prohibiting patients from having money in their possession?

A. Yes, sir; but sometimes they get it sent in a letter.

Q. Do you know whether Miss Burns took the money from Mrs. F. without her knowledge?

A. No, sir, I don't know; I don't suppose she did, but I don't know as to that.

Q. Did you ever make any investigation as to how Miss Burns got the money?

A. No, sir, I didn't; the doctor did before her husband and brother.

Q. Was not the occasion of violence being used to Mrs. F. the time she was taken from her room to the yard?

A. I don't recollect only that one instance.

Q. Your recollection is not very clear?

A. No, sir.

Q. Whether she was taken to the yard or not you cannot state?

A. No, sir, not positively; I have seen her in the yard many times; sometimes the doctor rather insists upon a patient going out, and sometimes they do not want to go, and will not go, and have to be taken out; sometimes if they do not go out walking, then they will complain about not going.

By Mr. Rice:

Q. Did you regard Mrs. F. as an insane woman while here?

A. Yes, sir, I think she was.

Q. Why?

A. I could not think a sane woman would act as she did.

Q. How was her insanity manifested?

A. Her special nervousness and general finding fault with people, it was not here alone but it was at home; her having ideas that people were abusing her so much; every thing that was done was with the idea, as she thought, of abusing her; her stories against her own people, her husband, in that line was that he had abused her.

Q. Do you mean to say that she manifested delusions about abuses to herself?

A. Why, I thought sometimes she did; she exaggerated and called things abuse when they were not.

Q. Do you mean to say that that is an evidence of insanity?

A. Well, I don't know that I am good judge enough.

Q. You have seen a good deal of insanity in your experience; do you mean to say that a person who has such manifestations would necessarily be insane?

A. No, sir; not if it was not different from what it was when she was well; when she is all right and in her better condition she is more quiet and has not so much to say; but when she is disturbed every thing is wrong and everybody has some motive in torturing her in some way.

Q. You say that her manifestation of insanity was mainly in finding fault?

A. Yes, sir; her general make-up; she used to adorn herself in such a queer way; when she was in her better condition she did not do so.

Q. What peculiarities did she manifest in regard to apparel?

A. Four or five different neckties on at once, a braid and ribbons on her hair, and all the pins that she could get on at once.

Q. Was that clothing put on for the purpose of attending some general gathering?

A. No, sir; sometimes right in the ward.

Q. Do you know what motive she had in doing it?

A. I don't know of any motive, only personal adornment.

HORATIO N. DRYER,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?

A. Seventy-eight.

Q. How long have you been connected with this institution?

A. I came here first in June, 1855.

Q. What positions have you held in the institution?

A. For two months I don't know what position I was holding; I did any kind of work, and on the first of August I received the position of steward, and I have held that office ever since.

Q. What are your duties?

A. They are numerous; they are better defined in the by-laws than I can state them from recollection; my duties, as I understand them, are to make the purchases, and have the general oversight of the farm, to examine the kitchen, etc., see about the supplies, and I am charged with the safe-keeping of the supplies when they are purchased.

Q. Please state the sytem that exists for the purchasing of supplies, for checking them as they are received and for charging the same on the books?

A. The system is that whatever is brought here — if it be a mixed load of grcoeries for instance — provisions, or any thing of that kind, to check them off as delivered; if they are brought here like beef — cattle — brought on foot, and weighed, the weight is taken and entered upon the books of the institution.

Q. Where are the supplies purchased?

A. Almost anywhere; largely — groceries, and articles of that kind in Utica of Butler & Hamilton, principally, and of almost

every one in the city ; Butler & Hamilton furnish the groceries; they have furnished them a long time ; the arrangement has existed further back than my knowledge or memory extends ; it was in existence when I came to the Asylum.

Q. Is there any arrangement with them as to the terms upon which they shall furnish such groceries ?

A. For a portion of them there is ; they sell to us at their original price where they purchase them, adding five per cent for expenses and commissions.

Q. What portion of the groceries does that include ?

A. I speak only now from an examination of one quarter's supplies ; a quarter aggregating about $2,200 ; of that $1,400 or $1,500 is of that kind ; and I think that fairly represents every quarter in the year.

Q. As to the balance of the supplies, upon what terms are they purchased ?

A. Just as they would be purchased of any other person independent of that arrangement.

Q. Purchased at retail, do you mean ?

A. No, sir ; not exactly retail — we buy in larger quantities than that.

Q. At what prices do you get those other articles — wholesale ?

A. Yes, sir ; wholesale prices, unless it may be some small things; we buy down to a shilling's worth of little items of whatever may be necessary ; I think on all those they give us wholesale prices, no matter how small the purchase.

Q. But with the exception of a few articles that may be bought in small quantities, and excepting what you have already stated, are all the rest upon the five per cent basis, or at wholesale prices ?

A. Yes, sir.

Q. Does that arrangement apply to any other house than Butler & Hamilton's ?

A. No, sir ; I do not think it does ?

Q. Please state how the drugs are purchased, and where ?

A. They are purchased largely in Brooklyn, of E. R. Squibbs.

Q. Upon what terms are they purchased, if you can state ?

A. They are purchased in this way, that when a certain amount is reached in any given month, they allow ten per cent discount.

Q. What amount of purchases entitles you to that ten per cent discount ?

A. I think it is a hundred dollars' worth in a month.

Q. So that if in any one month you do not reach as much as a hundred dollars' worth, you do not get your ten per cent discount ?

A. No, sir ; that is if that is the amount ; I think it is a hundred dollars.

Q. How—about how much do the drugs aggregate in the year in cost ?

A. I can't say without I refer to the books to ascertain ; I have

no idea; they vary in the different years; sometimes it is — and this is a mere guess at the amount — for a year, I should say from five to eight thousand dollars a year.

Q. Has any effort been made to secure by competition in the purchase of supplies any better rates than those you have referred to?

A. Not on general supplies, I think.

Q. Has it been made with reference to any supplies?

A. There has been an attempt made, or efforts made to unsettle this arrangement of Butler & Hamilton's and pass it into other hands, but never any terms offered that were considered as favorable as theirs.

Q. State what firms have made such attempts?

A. D. Crouse & Sons, of Utica, for one.

Q. When did they make such an effort?

A. It was some time ago, in 1866 or 1867, several years ago; and it has been made since by Comstock Brothers, and I don't know but others have competed; but that matter is in the hands of the board of managers more than mine; I only act under their instructions about it.

Q. What was the nature of the effort that was made by the firms mentioned?

A. A committee of the board of managers called on Crouse Brothers at the time for prices for the supply; for prices and samples, and they were furnished; and Butler & Hamilton did the same, it seemed; these samples were looked at, and some of the articles examined and priced; it appeared there was not much difference in the quality of goods; the percentage was the same, but the other firms added all the freight of the heavy goods.

Q. The next offer was made by Comstock, you say?

A. Yes, sir; I don't know the result of that; that was more recently, but I could not say the year.

Q. Within how many years ago?

A. Ten, or within ten, I should think; I don't know, but it may be more recently than that; I could not be positive as to that; I had nothing to do with procuring samples at that date; in the other case I had.

Q. Do you recollect any other case more recently than that of Comstock Bros.?

A. No other one has come to my knowledge.

Q. Do you know whether the board of managers, themselves, have instituted any proceeding to get better rates?

A. I don't know that they have; there has been nothing done to change it to my knowledge.

Q. Whom do you confer with, concerning purchases of supplies?

A. Dr. Gray, the superintendent.

Q. Do you do that daily?

A. I could not say daily, it depends whether there is any thing we are out of, some article they were wanting, groceries; I don't always consult with him if we want provisions of any kind; I didn't

always do it then unless it was some extra venture ; but he is entitled to consultation in every single purchase.

Q. And as a matter of frequent occurrence, you do consult with him ?

A. Yes, sir.

Q. Do you consult with any members of the board of managers about purchasing ?

A. No, sir, I don't know as I ever have ; their orders, if they issue any, come to me through the superintendent.

Q. Now are your accounts supervised ?

A. Our accounts are made, and always we have duplicate bills of every purchase; our custom has been to pay quarterly and get a continuous invoice of all the purchases of that quarter on two separate vouchers ; that was the case originally ; it has been changed to three now by law ; then those abstracts that they made were compared with books that were kept here, and when found correct, were paid by my order on the treasurer and countersigned by the superintendent.

Q. Who examines the books to ascertain if the vouchers corresponded with the amounts received ?

A. It is done by the auditing committee of the board of managers.

Q. Do they make such examinations prior to the payment of the bills ?

A. No, sir, they do not.

Q. They make them subsequently ?

A. Yes, sir.

Q. What disposition is made of the three vouchers ?

A. One is kept in my office, and the other by the treasurer, and the third one goes to the Comptroller of the State.

Q. In what manner are the State funds placed to the credit of this institution ?

A. In case of any appropriation by the State ?

Q. Yes, sir.

A. It is done on the treasurer's books ; that is, the treasurer of the institution.

Q. Do they then send cash to the treasurer ?

A. Yes, sir ; in some instances officers are paid that way ; special appropriations are paid by a draft on the Comptroller, I think.

Q. In what banks are the Asylum accounts kept ?

A. Oneida County National Bank ; James Sayre was the president, but he died recently ; I think his son is now president; the accounts have been kept in that bank as long as I have been connected with the institution.

Q. How much stock, cattle and horses are on the place ?

A. I have a memoranda of that and it is in my pocket.

Q. Do you know of the purchases recently of some blood stock for the institution ?

A. Yes, sir.

Q. Please state what it was?

A. It was a bull and two calves of the Holstein breed, imported stock.

Q Was it thoroughbred stock?

Q. It was imported and said to be full blooded; we bought it as such, bought it of the importers; it was bought of Smith & Powell of Syracuse.

Q. What was paid for that importation?

A. Something over $1,700; I have not the price here; between $1,300 and $1,400.

Q. Do you know what they paid for each animal?

A. I cannot state now, for the committee have my voucher; Mr. Brown and Dr. Olin took it when they were here; that is the one Mr. Brown took.

Q. Mr. Brown is one of the committee you referred to?

A. Yes, sir; a member of your committee.

Q. Is there any other blood stock on the place?

A. No, sir; there is some graded stock, but nothing that has cost an extra price.

Q. Is there any that you would call half or three quarters breed?

A. We have some half bred, I don't think any more than half.

Q. How much of such stock have you?

A. We may have three or four cows and a bull.

Q. What is that stock worth?

A. I think we paid for the bull $120, when he was fit for service, and the cows we buy as we do others, of the breeders or the farmers about, and if there is a good cow that promises well, we buy her; pay here $40, $50 or $60, and have paid in a few instances as high as $70, I think there are now fifty four cows about the place.

Q. What was the purpose of buying such expensive stock as this Holstein breed?

A. I don't know.

Q. Who made the purchase?

A. I went with Dr. Gray to make it at his direction.

Q. Where did you go?

A. Syracuse.

Q. Were any of the board of managers with you?

A. No, sir.

Q. Did they know of the expected purchase?

A. I cannot say.

Q. Do you know whether they were consulted?

A. I don't know to my own knowledge.

Q. What was the object of procuring such high-priced stock?

A. I don't know.

Q. What in your judgment is the value of such stock to the institution?

A. Simply as cows for daily purposes, I don't know as they are

any better than any other stock; the stock as well as the issue of that stock will sell at very high prices, having them registered.

Q. They are registered cattle?.

A. Application has been made to have them registered, but I have not received them yet.

Q. How many horses are there on the place?

A. Twelve.

Q. Have any been disposed of recently?

A. Not very recently; no, sir.

Q. When was the last disposition?

A. I think it was last spring or summer; I think we disposed of two.

Q. At what price?

A. They were horses that were worn out and bought at a small price; we exchanged them for another horse of good service — an efficient one.

Q. Are there any thoroughbred horses among the lot?

A. None that I know of; there are carriage and work horses.

Q. Are there any carriage horses?

A. Yes, sir; one pair.

Q. Are the rest of them farm horses?

A. No, sir; there are two horses that are kept for use and to ride round on the farm.

Q. So that there are four horses kept for use on the road?

A. Yes, sir; then there is one I have, that I drive; not now very valuable, like myself, getting very old in the service.

Q. So that five horses are kept for road purposes?

A. Yes, sir.

Q. To what uses are these horses put?

A. They go with the carriage, two of them, and the others go with single vehicles; one is kept in use on the lawn to keep that in order, and do other work in the winter keeping roads open; another does very heavy work in the summer, and such as we have in the winter.

Q. Who owns the horses?

A. The Asylum.

Q. What carriages are there on the place?

Mr. Goodwin — Ask him what he paid for these carriage horses?

Q. What was paid for the carriage horses?

A. Six hundred dollars for the pair; I could have taken $650 for them in a few months after they were bought of the same person who sold them to us.

Q. What was paid for the other horses on the place as near as you recollect?

A. We have paid $150 and $250; our farm horses are all well stricken in years, are getting old, but are still able to do good work and we hold on to them.

By Mr. Olin:

Q. How old is the one you drive?

A. Twenty-three or twenty-four.

Q. Now to return to the carriage, I ask you what carriages are there on the place?

A. We have a coach and a lighter two horse carriage, and a single horse carriage and four buggies.

Q. To whom do they belong?

A. The Asylum.

Q. To what uses are they put — the carriages and the coaches?

A. For riding purposes.

Q. By the visitors of the Asylum?

A. Yes, sir; occasionally.

Q. Are the patients ever taken out in the carriage?

A. No, sir; not that I know of.

Q. Or in the buggies?

A. Well, that is a mere chance, it is not the custom to do so.

Q. Who uses the carriage and pair, generally?

A. Dr. Gray's family.

Q. Do you know the prices paid for any of these carriages?

A. Eight hundred dollars, the coach was.

Q. Do you know what they paid for the double harness?

A. One hundred to one hundred and twenty-five dollars; the other carriages were bought here at Utica.

Q. Now about the purchases of these blooded Holstein cattle; do you know whether any of the present board of managers are aware of your having made such purposes?

A. I don't know to my knowledge; I presume they are fully aware of it.

Q. What is your opinion about the purport of the purchase of this stock?

A. I hardly like to give an opinion, but if it is demanded I will give it.

Q. We have asked you; I think you may give it?

A. If it had depended on my own judgment they never would have been purchased.

Q. Why not?

A. Because I think, as has been said here, that it is not the legitimate work of an institution like this; that is my private opinion and is not given as any thing else.

By Mr. Haskell:

Q. Was there any reason given to you by Dr. Gray for buying them?

A. I don't remember any now.

Q. Who made the purchase, you or Dr. Gray?

A. We were together when it was made, but the doctor made it.

Q. Is the doctor your superior officer?

A. He is in such matters.

By Mr. OLIN:

Q. If he had wanted to buy the cattle and you had not you could not have prevented it?

A. No, sir; he could have prevented me but I could not have prevented him.

By Mr. HASKELL:

Q. Did you state to Dr. Gray that your judgment was against the purchase of the cattle?

A. I don't think I did.

Q. Are purchases made of materials and things which are against your judgment?

A. I don't know really how to answer you; there have been expenses incurred that would not have originated with me in very many instances, sometimes by the superintendent, and sometimes by the managers.

Q. In these instances, have you stated to Dr. Gray or to the managers your disapproval of the incurring of these expenses?

A. I have, sometimes, to the superintendent but I never did to the managers; if I never have been consulted by them specially I have expressed a dissent sometimes.

Q. You have not always?

A. No, sir; I have not, simply because I was a subordinate, and didn't think it very becoming in me to dictate by an opinion.

Q. Will you state some instances where your judgment has been overruled by the superintendent?

A. I don't know now as I can fix the one single instance without it was on the purchase of a pair of horses for farm purposes; I objected to that and gave my reasons, and they were not purchased.

Q. Can you specify any cases where your judgment was not taken and your objections were of no avail?

A. I don't know as I can in the way of purchases but as to some work that has been performed I can.

Q. Have there been purchases made?

A. Yes, sir; that I didn't make.

Q. Then in a general way you are not at liberty to exercise your own judgment in transacting business for the institution?

A. Not in a general way; I am not at all anxious to be officious, for I am a subordinate officer.

Q. And you did not regard it that you are at all responsible for the transaction of the business where you are acting under directions of Dr. Gray?

A. Not legally responsible; I suppose I have some moral responsibility in obeying orders, even if I have tried to entertain such an idea as that.

Q. Dr. Gray's personal expenses are paid for by the State?

A. His table furnished by the State; and his furniture to some extent, I don't know how much.

Q. Of whom does his family consist?

A. He has a wife and three children living.

Q. All reside in the institution?

A. No, sir; one is away at school and the other is attending medical lectures at New York; the little girl, his daughter, is at home.

Q. And they have all resided here since you have been steward?

A. Yes, sir; he buried three children within a short time several years ago, all of them quite young.

Q. Has he any personal servants except such as are attendants of the institution?

A. None that I know of; in his own department, do you mean?

Q. Yes, sir.

A. Oh, yes, sir; servants for himself.

Q. Are they paid for by himself or by the institution?

A. By the institution.

Q. How many servants are there to attend upon himself and family?

A. Three girls.

Q. Any others?

A. Not that I know of.

Q. Any men servants?

A. Well, the coachman has charge of the barns and drives the horses.

Q. Do you say he has three servant girls now?

A. Yes, sir.

Q. Has the number been greater in the times past?

A. Never at the expense of the State that I know of; there have been occasions where he has had an extra one, but paid her himself.

Q. I suppose what you have stated in regard to Dr. Gray and what the State furnishes him is also true in regard to what the State furnishes the assistant physicians?

A. They all have their board and lodging here.

Q. Any special servants?

A. Yes, sir, in the kitchen; we are all supplied from the same kitchen, both dining-rooms.

Q. Has Dr. Brush any special servants employed by the State?

A. He has a nurse girl just now.

Q. Is she employed by the State?

A. Yes, sir, and paid by the State.

Q. Was she employed especially?

A. Yes, sir.

Q. To attend upon Dr. Brush's family?

A. Yes, sir.

By the CHAIRMAN:

Q. Suppose that a doctor were living in Utica near the Asylum, would you consider that an allowance should be made for him for his servants by the State, or that they should pay for his servants if he went in the institution?

A. I should suppose his salary would be sufficient to cover it if he were keeping house outside.

Q. Don't you think the same salary should cover the same services if the doctors are employed in the institution?

A. I don't like to give an opinion of that.

By Mr. HASKELL:

Q. Does the table supply of the doctors include wine and luxuries of that nature?

A. I don't know that he has them on his table; I don't see his table very often.

Q. You don't know whether he does or not; how about the other doctors?

A. Oh, the other doctors don't have any such thing.

By the CHAIRMAN:

Q. How many farm hands are there employed about the place?

A. There are six; I employ them.

Q. How is their time accounted for?

A. I want to say, in explanation, the rule for employing help in any department of the institution, inside or out, has to be done, in every instance, by the consent of the superintendent; by his direction.

Q. Subject to his approval.

A. Yes, sir; and by his direction.

Q. How are they employed — by the month?

A. Some of them, and some by the day.

Q. Those who work by the day — how is their time made up?

A. There is a man appointed to oversee all the work on the farm and keep the time of the employees.

Q. What is his name?

A. Russell.

Q. How long has he been employed?

A. He has been here about twenty-five or twenty-six years.

Q. Does he have a time-book?

A. Yes, sir.

Q. And in that book he enters the actual time?

A. Yes, sir; and that is subsequently entered on the books of the institution.

Q. How much examination is made as to the qualification of an attendant?

A. All that the civil service law requires; I examine them as to

health and character and degree of education; I happen to be one of the board of examiners.

Q. And you endeavor to keep up to the civil service law on this subject?

A. Yes, sir.

Q. Before we had a civil service law what system did you have in the matter?

A. We could not have any real system; we took the best people we could get; there have been times when we were overrun with applicants and at times it was difficult to find people.

Q. So that the test of efficiency varied somewhat with the market supply?

A. Yes, sir.

Q. When the market was full you were able to apply a stricter test than you were when it was difficult to get help?

A. Yes, sir; we more than often had to judge by their appearance than any knowledge that we could obtain of them.

Q. Did you always require written testimonials?

A. No, sir, I think not; there were some persons with whom some of us were acquainted, frequently.

Q. And they applied with written testimonials when you did not know them?

A. Yes, sir; and sometimes we have employed such persons; we have been obliged to do it sometimes.

By Mr. Olin:

Q. Were you examined last year by the legislative committee?

A. Yes, sir.

Q. Are these physicians employed in such a way that the support of their families has to be in addition to the salaries paid them?

A. I don't know any thing about the arrangement; it has been the custom when there has been an assistant physician with a family he has been cared for just as Dr. Brush has.

Q. And just as Dr. Gray is?

A. Well not to the same extent; they have another servant if there is a little child to take care of.

Mr. Goodwin — Ask him whether this girl that Dr. Brush has, if she does not clean the room and do the general work.

Q. How is it in that respect?

A. I cannot say, I suppose she does but I don't know; my understanding is that the physicians are employed at a good salary and their expenses of themselves and family, by expenses I mean living and board.

HIRAM H. WILSON,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. You are a patient in this Asylum?

A. Yes, sir.

Q. When did you come here?

A. Nineteenth of September last.

Q. State briefly the nature of your trouble?

A. I went to Middletown on the 31st of May; I was at Glens Falls; I assumed insanity for a purpose.

Q. Have you any criticism to make upon the management of this institution?

A. Not in the sense of adverse criticism; of course an intelligent man, a newspaper man, that has been in two or three institutions must have made some observation.

Q. What is your observation as to the manner and care of the other patients here?

A. My observation is that, judging from a comparison, which is the only way we can judge of any thing is, that there is a great deal more care for the general welfare of their patients here than either Poughkeepsie or Middletown.

Q. What wards have you ever been on?

A. The sixth ward and this one — that is, number one.

Q. Are there any violent patients on either of those wards?

A. Not what may be termed violent patients; there are those who are demented; there are one or two who have shown violence up there.

Q. Have you ever seen any harsh treatment of patients by attendants?

A. That is a matter of judgment; harsh —

Q. Have you ever seen an attendant strike a patient?

A. Yes, sir.

Q. Have you ever seen an attendant kick a patient?

A. Yes, sir.

Q. Have you ever seen an attendant strike a patient so violently as to cause a bruise or black eye?

A. No, sir; to answer strictly, truthfully, I had to say yes to those other questions; as a matter of simple justice I should say that in another case the striking or kicking, in my judgment, was censurable.

Q. State what those cases are?

A. A man named C., a patient on the sixth ward, a very powerful man who said little, apparently a quiet man, used to assist in the dining-room, then the towels with which the dishes are wiped

are washed in the bath-room; Mr. Jones, the supervisor, went into the bath-room one morning while they were washing the towels; some pieces of soap had been taken out of the wash-room, and they did not know who it was that took these pieces of soap; at this time I refer to, I happened to be in the bath-room; I did not hear the whole of the conversation, but a good deal of it, and I will state only what I heard and saw myself; Mr. Jones said to this patient C., he said, "Ah? C., its you that has been taking the soap;" when he said it he saw C. take a piece of soap that belonged to the bath-room; C. said nothing in reply, but he immediately turned round, took the wash-board in both his hands as a club and made a dive at Mr. Jones; Jones saw his danger at once and rushed near C. to close with him, and prevent his being injured by the wash-board; Jones was quick but not quick enough to avert the blow; it struck Jones hard enough to put him down on the floor; then C. jumped on to him, and tried to gouge his eyes out, but Jones shut his eyes; two or three of the patients ran up to protect him, but C. struggled violently; Mr. Hughes was the attendant in charge of the ward, and Mr. Torpey, attendant, and a Mr. M., a patient, assisted, and C. was overpowered; one of the attendants, I do not remember his name, kicked C., and Jones gave him a slight kick, like that (indicating), when he got through; I said to C. that he was not used half as severely as he would have been if it was at Middletown — I saw a man nearly killed there for doing less than C. did.

Q. Where did they kick him — where on the body?

A. It was on the left side they kicked him — in the lower part of the ribs, while he was down.

Q. What did they then do — put him in restraint?

A. No, sir; they watched him for a little; Jones saw him and asked him what he struck him for, etc., and in course of half an hour he was removed to another ward.

Q. How many attendants were there about him when they got him down?

A. Three, calling Mr. Jones, the supervisor, an attendant.

Q. Was there any occasion for kicking him when they got him down?

A. Well, had I been an attendant, and I am an excitable man, I am very sure the patient would not have been kicked.

Q. Then you do think the attendants are to be criticised for kicking him?

A. I think taking the average man and he would have kicked him, but I do not think a man like you gentlemen here — men of the world, who have sense enough to realize that the man was of unsound mind and not responsible for his acts — I don't think either of you would have kicked him under the circumstances; but here was a man who had been struck (I mean Jones), and it was a miracle he was not killed; but there was no wicked kicking, such as I have seen at Middletown; if it had happened at Middletown this man C. never would got up alone, he would have been picked up;

I, myself, had five ribs broken at Middletown; of course you can't go into that place, but I would like to say just a few words about that place; I was as sane when I went there as I am at this moment, and how sane I am now I do not pretend to say, perhaps I am not a good judge; the injuries Mr. Hughes received — although he died from the result of them — were nothing to what I received there, and nothing to what I saw inflicted upon a man from Glens Falls.

The CHAIRMAN — We cannot take up any matters relating to Middletown Asylum?

The WITNESS — Well, I know, I know; but I have an ax to grind, if I can, and this is a good opportunity.

Q. Do you know of any other cases of the striking of patients by attendants?

A. Do you confine me technically to striking?

Q. No, state generally and briefly?

A. Well, a short time after this occurrence with C., that I have related, there was a patient by the name of W., a perfectly quiet man, his mental condition you might call "demented," yet a man who knows what he is about; it was probably eight weeks ago; the patients on the second department were about to go for a walk; by way of promise I ought to state that we had been out walking before this time.

Q. Just give us the circumstance, never mind that?

A. Well, it is absolutely necessary, and you, as a lawyer, will recognize that it is before I get through; when they went out, this man W. jumped on to the horse car, and the attendant had the trouble of taking him off again; the next day when they were making up the party to go out, W. put on his overcoat; the attendant says "you made us all this trouble yesterday, you cannot go out to-day," but he kept his overcoat on; Hughes, the attendant, said again, "it is no use your putting on your coat, you cannot go out to-day; several patients were going out, and W. tried to pass out with them; Mr. Hughes stood by the door and shoved W. back; he made another attempt to pass out with a like result; he tried again, then Hughes grabbed him by the back of the neck of the coat, here (indicating), and made this motion (indicating), giving him a twitch which he evidently knew how to do, at the same time he tripped him with his feet and W. fell heavily to the floor; he jumped up at once and Hughes treated him the same way.

Q. Did the patient strike his head on the floor?

A. Well, that I would not like to undertake to say, of course a man would instinctively raise his head and try and strike on his shoulders.

Q. Did he throw him as heavily the second time as he did the first time?

A. Well, that is asking for too much judgment to be exercised, I could not gauge the force of the throwing each time or make a

comparison of one with the other; to my mind at the time it was not so much to make the blow heavy as it was to throw the patient to the floor; he was allowed to get up again, and like a demented man unable to reason with himself, he again started toward the door; the attendant again stepped in to prevent him, and he did this (indicating), put up his fists and squared off, but not with much apparent energy, not as I would if I were going for a man; Hughes says, "Ah, you would fight, eh;" and he was then put down again; then there was about the same striking and kicking that I described to you in the case of C———.; they kicked him, W———., more in the side than anywhere else; when W———. showed fight at first my own feelings were enlisted on behalf of Hughes, who had been a good friend of mine, that I stepped up to help him; W———. was a strong powerful man, but they got him down and I did not interfere.

Q. How many attendants were there about him then?

A. There were three including Mr. Jones; just then I was told to go out with the party, and I went, so I did not see what occurred but I was informed of what followed by Mr. R———., a patient who is in the next room to me; I understood from him that there was some more kicking afterward, but of course that would not be evidence, for I did not see it myself.

By the CHAIRMAN:

Q. Did you afterward hear the patient complain of being hurt?

A. No, sir, he was not hurt much, and did not complain to me.

Q. Do you recall any other case where you saw a patient struck by an attendant?

A. No, sir; those are the only instances I recall.

By Mr. MORGAN:

Q. What was your occupation before you came here?

A. I was a journalist, and had been for some time.

Q. Oh! — a printer?

A. No, sir, not a printer, a journalist — a newspaper man; I was at Glens Falls, but I had had editorial positions on two daily papers.

Q. How long since is it that you were connected with any newspaper?

A. I was connected with a newspaper the day before I was committed to the Asylum.

Q. Do you write at all while you are confined here?

A. No, sir, I am not allowed to write, except an occasional letter.

Q. Do you think they would not let you write for a paper here?

A. I presume not, but I have not asked them to let me do that.

Q. What is your age?

A. I am forty-three.

Q. Are you a married man?

A. I am; I would like to state here with reference to my commitment, I was not insane, I feigned it.

Q. You say you feigned insanity for a purpose — what was the purpose?

A. The main purpose was to learn something about them; I had heard of cases of flagrant abuses that were rife at Middletown.

Q. And you feigned insanity to get in there and see how it was?

A. Yes, sir; in 1877 I did feign insanity, and I went to Poughkeepsie, I was there ten days, during which I wrote an expose, of about ten columns which was published in the "*Albany Press.*" Gentlemen, my own case here is deserving of attention; while I may be entirely wrong, I have been confined here under peculiar circumstances, and there should be an opportunity given me, I think, to show that I am not a proper subject of incarceration; I was transferred from the other Asylum here.

Q. And do you complain that you are illegally detained?

A. I cannot say I am illegally here because there was a proper commitment, but I claim I have not been insane a moment since I have been here; I ask the authorities to define wherein I have manifested signs of insanity; all I want is an opportunity to have my case tested before the courts, although I have no doubt I shall soon be discharged.

Q. Do you wish this committee to cause any representations to be made to any of your friends?

A. I do.

Q. Are you here as a county patient?

A. I am.

Q. Do you wish us to communicate with any person on your behalf?

A. I would like to see a lawyer; I would like to have a copy of the seventh edition of the Revised Statutes; three or four sheets of foolscap paper, and a notary public, and a messenger, and I will take care of my own case; and I will say this —

The CHAIRMAN — If you have any thing more to state about the Asylum, here, you can state it, if not, that is all, our time is limited and we have other witnesses to examine.

The WITNESS — Well, let me finish, hold on; I will say that if I am released, I shall go before the State Charitable Institutions with a very important communication — an excessively important one.

Q. Are you allowed to communicate or correspond with your friends?

A. No patient in any asylum is allowed to communicate with his friends, except under duress, all his correspondence is known to the Asylum people.

Q. Do you receive letters from your friends?

A. I have received them, but there is not a patient in this institution who has the sense, or knows enough to wash his own face who would undertake to communicate with his friends outside of the Asylum frankly and freely, and as fully as he felt he would like to do.

Q. Are you not permitted to write letters and seal them up before sending?

A. No, sir; it never has been done; if you send for a sheet of paper and get it, and if you only use half of that, and should put half in your envelope, the supervisor asks where is the other half; I asked the privilege of using a pencil when I came here, but I was not allowed it; I have a pencil now, here it is, but it was given to me clandestinely; I have no paper to use it on. I have been told by the physicians — by Dr. Josselyn and Dr. Pilgrim — that the history of my case as they received it from me and the authorities at Glens Falls indicated periodical insanity — in other words that I had been insane at certain times.

HENRY RICHARDSON,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?

A. My age at my last birthday was forty-eight.

Q. Are you at present a patient in this Asylum?

A. Yes, sir.

Q. What is your residence when you are at home?

A. My residence from which I was brought to this place was at Lansingburgh; my occupation was treasurer of the Troy & Lansingburgh R. R. Co., secretary and treasurer.

Q. You stated to the committee when they were on the wards that you wished to be heard by them; have you any communication to make?

A. I have my own grievances to present before the committee.

Q. Does that relate to yoar commitment?

A. Yes, sir; I claim that I was falsely arrested, and more than that, that the motives were unworthy and criminal; the motives on the part of those who sent me here; their names appear on the books of the Asylum; the leading one is now the president of the railroad company — William Kemp, his name is, and it corresponds with the commitment which was used in my case.

Q. What was the motive in having you placed here?

A. The motive is this: the directors who ought to have sustained me in prosecuting a crime and conspiracy — highway robberies and burglary — robbing the cars containing the United States mails; a prosecution began about the month of February, 1876; instead of sustaining me in prosecuting and punishing, they treacherously caused me to be arrested and put under lock and key; these were certain directors of the road who purported to me to be strongly in favor of prosecuting this crime.

Q. Do you say that all the directors of the road were concerned in incarcerating you?

A. None of the directors' names appear on the document except that of this one man; but the others were sufficiently parties to it to acquisce in it; the affair was at that time known publicly, it was something that Mr. Kemp at that time acknowledged my faithfulness in very strong language, but he was intimidated and in some way declined this prosecution.

Q. Have you any complaints to make about the way in which you are treated here?

A. I have this complaint to make, that I am detained here improperly; I had this case brought before Dr. Ordronaux, he produced certain documents here, but I claim those documents are forgeries and the signature of the judge is wholly bogus and fraudulent.

Q. How do you know they are bogus and fraudulent?

A. Simply this; I lived a long time in Troy, or in the village of Lansingburgh, except one year in Buffalo; I was book-keeper in a bank ten years, and was in a railroad office; my occupation was such as made me familiar with handwriting and signatures; and I can swear positively that the names are forged; I would like to have produced the document that I was committed under and have you inspect it; I believe it was prepared in Utica, and I believe I can prove it; I believe I ought to have legal counsel, and an opportunity to present this case before a lawful court, and if I can sustain my charges then I ought to be released as having been confined here from unworthy and criminal motives on the part of those who sent me here; my wife is the person who is supporting me while I am here.

Q. How much does she pay for you?

A. I have been told it is six dollars a week as a private patient; my clothes come here to me occasionally; I have only seen my wife once from the time I came here; my wife came here once and I refused to see her or to have an interview with her; I had the little children with me and I was passing to the green-house, and did not speak to her, and the reason I did not speak to her was because she had aided and abetted and counseled this false imprisonment by false accusations of insanity.

Q. Have you any complaint to make, aside from the injustice of your detention; have you any complaint to make of the manner you are treated?

A. There are some things that are general in their nature, but so far as the usual treatment has gone, I have been treated about the same as private patients usually are.

Q. Do they treat private patients different from pauper patients?

A. In some respects they do, and in others they do not; that is to say, they are usually treated with rather more respect and consideration.

Q. What ward are you on?

A. The sixth ward north; I was on the first ward for some time,

then on the ninth ward; then I returned on to the sixth and I am still on that ward.

Q. Have you ever seen a patient struck by an attendant in the institution?

A. Yes, sir, I have, more than once.

Q. Have you ever been struck by an attendant?

A. I have never been struck by an attendant, nor has an attendant ever laid hands on me, excepting once, and then not with violence.

Q. Do you see Dr. Gray on the wards very often?

A. Not very often; he comes there very rarely, I might say.

By Mr. Rice:

Q. Do you remember an incident that occurred at any time in relation to one W., a patient?

A. Yes, sir; he desired to go out one day, and he was rudely withheld; I cannot say, for certain, which attendant struck him, but he was struck once or twice, and he resisted very little; the violence was not severe, but it was uncalled for; the ward I am on is seldom disturbed in that way by such occurrences as that, as it is not what is called a "violent" ward.

Q. How did the attendant treat W.; what was the nature of the violence?

A. I was in my room and heard some disturbance, and stepped out, but only in time to see the close of the affair; when I looked out Mr. Wilson was making a motion as if to assist the attendant, but the patient quieted down so suddenly that there was no occasion for his interfering; it was a man named W. that was kicked and struck.

Q. Did you see that?

A. I am quite sure that I saw him kicked and struck; he did not fall down that I saw; when I saw him he was standing up.

Q. Where did they kick him?

A. I did not notice; it was a confused, momentary affair, soon over, and I could not testify to the details of it; I only saw the close of it, just as he was submitting and coming back to his place quietly; I have written a letter of eighteen pages long that was sent to Dr. Smith, and the last time I saw it, it was in the hands of John C. Devereux, of the State Board of Charities; that letter goes more into the details of my case than I can go now; you can make that letter the basis of your action, so far as my grievance is concerned.

GEORGE TUTTLE,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Please state your age?

A. I, sir, am fifty years old the fourth of this month.

Q. How long have you been an inmate of this institution?

A. I came here on the 30th day of December, 1875.

Q. You state to the committee that you would like to be heard; have you any criticism to make upon the management of the institution?

A. I don't know that I have, personally, any fault to find with the management; they have always treated me, as far as I know, very fairly.

Q. Have any cases come under your personal notice where you think attendants have treated patients unfairly?

A. Yes, sir; I think there have; but most everybody that I know any thing about in that respect has left here long ago; as far as I am concerned, gentlemen, we as patients are here under intimidation as I may say; I do not mean to say that there is any physical domination out and out, but when a patient has been here a little while he realizes the immense power there is over him.

Q. State if you have ever seen a patient treated with violence by an attendant?

A. Oh, yes, sir; I have; I saw an attendant by the name of Halpin on the tenth ward, during the first three months I was here; I went on the tenth hall the 20th of April, 1876; I saw this Halpin come along with a patient, he shoved the patient into an open door into a room, went in himself and shut the door; I saw that man when he came out, and he looked as though he had been through a threshing machine.

Q. Did he look that way before he went in?

A. Oh, no, sir; he was all right when he went into the room; but there has not been so much bad usage since we have had two or three investigations; investigations do a great deal of good, if it is only in that direction; it would not be out of the way if we had one every winter, it would help the boys along somewhat.

Q. Did you ever see Halpin strike any other patient?

A. No, sir; I don't remember that I ever did.

Q. Describe the condition of the patient a little more fully?

A. He looked as though he had been pretty roughly handled, perhaps I was not as well able to judge at that time, but I knew enough to see and know that the patient had been badly misused.

Q. Any other cases?

A. Well, I suppose I can answer as I please here, answer or not;

I have a little the advantage of the attendants and doctors just now, and it is a little sweet to have an advantage, even though it is brief; I suppose if I decline to answer some questions you will not do with me as the Senate did with McDonald at Albany last week; so having such advantage I shall decline to answer some of your questions because the attendant was very good to me; I saw a man on ward eight strapped and kicked three times, he was a violent patient at the time; this patient, having an opportunity, grabbed him as he was strapped in the chair, and they both went to the floor, attendant and patient, the patient bit him, and he kicked the patient three times in the ribs.

Q. Did he kick him pretty hard?

A. Yes, sir, pretty hard.

Q. Was the patient able to get up?

A. Yes, sir, he could get up.

Q. Did the patient complain of being injured?

A. No, sir; he was not in a state that he could; he was afterward removed to another ward, and finally after his discharge from the institution he committed suicide in Chicago; he was from Buffalo.

Q. What was the attendant's name?

A. That is one of the questions I don't want to answer; I shall not give his name; he was always very kind to me.

Q. We think it is only just that your testimony on this point may be corroborated that you should give us the name of the attendant?

A. Oh! no, gentlemen, I shall not give that, he was very kind to me; not only that, but some others connected with him have also been good to me; it was a long time ago, 1876; I went on to the eighth hall the 26th March, 1876; I was only there a month, and it was during that time.

Q. What other attendants were there at that tine?

A. They are all gone now; one was a private attendant; he was in charge of a patient who is here now; but he is off in the western part of the State somewhere, that is one of the attendants and another is dead.

Q. And what was the name of the other one?

A. Ah! that is the one I don't want to tell you.

Q. Can you give us the name of any other patient who was injured by an attendant?

A. As far as I am concerned most of the time for the past two years I have been on good wards; I will say this, gentlemen, some of the time there is got to be force used to keep the violent patients down, if they were not, there would not be any rest for the quiet men who are there.

Q. Have you any fault to find with the management of affairs here?

A. Nothing, only as I intimated about the secret way of getting men into this condition of domination; in my own case particularly.

Q. That is a belief you have?

A. It is a fact, it is not a belief; I know it is so; when Dr. Hammond and Prof. Jennings go to work and show it publicly, I do not think there is any harm in my saying a few words about it; matters that are current in the newspapers may be mentioned, and that matter is one that has been written about; and I see that our friend over there (Mr. Haskell) got a clip in one of the papers here the other day, the Utica *Herald*, speaking about this investigation, said it emanated from the empty mouthings of an obscure legislator.

Q. State to what you referred in your statement about yourself?

A. The only way I could explain it is to say that I know I am under that influence and can feel it at work on me, not only that but I hear it talking to me, that there is a system by which one person has power of will, for instance, over others; I can explain it in a few minutes; I was in a Catholic asylum at Buffalo; I had secret voices talking to me; the voices asked me one day if I had ever thought that there was going to be a system of communication between houses without the use of wires or mechanical connection; I had always thought that there would be, and I said that I had, that I did think there would be such means of communication from house to house; the voice asked me if it would be by the power of mind; "no," I said, "I had not any clear idea just how the thing was going to be done;" then the voice said to me again, "do you know what ails you;" I says, "no, I don't, but I know there is something ails me that had not ought to be ailing me;" the voice then told me that I had been controlled by animal magnetism, and that I had been so controlled for fifteen years; that was in 1875, so that would take it back to 1860; now the mass of stuff that emanates from so-called lunatics most of it is unreliable, but this is reliable; I am a man of large property, I have lost control of it, and here I am, I do not know whether I will ever get control of it again; I was in business — grain, flour and commission business; I was on the docks in Buffalo; my father went there in 1847, and I went there in business with him in 1853, and stayed there until he died.

Q. Are you comfortable here; as to table and bed, etc., are they satisfactory?

A. Yes, sir, fairly so; I was going to say one thing, and perhaps I hadn't ought to say it; you were asking me about unkind treatment; I think that sometimes a little too much unreasonable force is used in giving medicine; extra force it amounts to sometimes; I mean a great deal of force; if a patient will not take it the attendant says he must, and he has to.

Q. Are the doctors present on such occasions?

A. No, sir.

Q. Do you think more force is used than there would be if the doctors were present?

A. Oh, yes, sir; there is more force than I would use; if I were an attendant I would not make myself liable to a charge of such a thing; but I have never taken any medicine and don't need any; I am now on ward number nine.

WILLIAM L. PALMER,

Called.

By the CHAIRMAN:

Q. You stated to the committee that you wanted to appear before them; will you be sworn?

A. No, sir; I think I will affirm;

[Thereupon the witness affirmed and said: "I do not affirm to answer every question you ask me, but what I do tell I shall tell the truth."]

Q. You stated to the committee that you had some complaint to make about the institution; if you have any such complaint you can now state it?

A. It is a simple story and soon told; I came here February 8, 1879, with a person called deputy sheriff Burns, and William O. Palmer, a man I have always considered to be my father; I suppose him to be so, and suppose he is the person after whom I was named.

Q. What fault have you to find, if any, with the institution?

A. You must excuse my personality if I tell my own story; I was brought here without knowing the cause why I was brought here.

Q. Have you any thing to complain about your treatment here?

A. Yes; I want to be examined by an impartial, able body to prove to them that I am in a fit condition to be a member of society at large.

Q. Have you any complaint to make about your treatment, except what you have stated; how do the attendants treat you?

A. I was on the fourth hall the 25th of June, 1883, and I was treated at times as a human being should not be treated; I will tell you one little incident — perhaps you can explain it to me; one morning I was taken and given a bath; there are two bath-rooms, and this was in the old bath-room; while in the bath I was rubbed and scrubbed with a broom; and I did not mind that, I assure you; but after that, when I was cleaned outside, a rubber tube about so long (about three feet) was brought, one end was placed in my mouth and the other end was placed to the cold water tap; the water was turned on and permitted to run until it ran over out of my mouth; I was so full; they filled me up; I don't know why it was done; I spoke about it and they laughed; I think it was wholly unnecessary, for I am a clean man inside and try to be outside.

Q. What other treatment were you subjected to or what other things occurred there?

A. Well, it is hardly necessary to go into these petty details, I think.

Q. Your chief complaint is as to your unlawful imprisonment here?

A. Yes, sir; that is all I wish to say; if they have the power to confine me here, why, they have the power to confine everybody; I wish to be examined by an impartial body, able and disinterested; I merely alluded to this little washing incident as a little by-play, you know — a diversion; I hope we shall meet again, Mr. Chairman, good-bye; I do not like to say any thing that will result to the injury of any of my friends, good-bye.

Mr. RICE — I want to put in evidence the papers upon which Miss Lathrop was committed to this institution.

Said papers were then marked, respectively, "Exhibits Nos. 14, 15 and 16, J. H. M.," and are as follows:

EXHIBIT 14 — COPY.

STATE OF NEW YORK, }
County of Monroe. }

I, Peter W. Neefus, a resident of Rochester, N. Y., in the county aforesaid, being a graduate of New York Homœopathic Medical College, and having practiced as a physician three and a half years, hereby certify, under oath, that on the 17th day of October, 1880, I personally examined Clarissa C. Lathrop, of Rochester, N. Y., a female thirty-three years of age, unmarried, and by occupation, teacher, and that the said Clarissa C. Lathrop is insane and a proper person for care and treatment under the provisions of chapter 446 of the Laws of 1874.

I further certify that I have formed this opinion upon the following grounds, viz.: For at least two years she has complained of many imaginary symptoms, especially of the brain and nervous system generally; being obliged to give up all mental labor. Her conversation would always turn to her brain symptoms. Has been growing worse gradually and is now controlled by the delusion that she is being poisoned by a lady boarding with her people. She believes the poison is neutralized by an alkali externally and she continually wants to apply soap, soda or ammonia. Her people can do nothing with her; she will not stay at home; will eat nothing in the house or wear any thing from the house until thoroughly neutralized of the supposed poison.

And I further declare, that my qualifications, as a medical examiner in lunacy, have been duly attested and certified by W. C. Rowley, county judge, Monroe county.

PETER W. NEEFUS, M. D.

Sworn to and subscribed before me, this }
21st day of October, A. D. 1880. }

W. C. ROWLEY,
County Judge.

EXHIBIT No. 15 — COPY.

STATE OF NEW YORK, }
County of Oneida. }

I, James G. Hunt, a resident of Utica, in the county aforesaid, being a graduate of Jefferson Medical College, Philadelphia, and having practiced as a physician nine years, hereby certify, under oath, that on the 19th day of October, 1880, I personally examined Clarissa C. Lathrop, of Rochester, N. Y., a female 33 years of age, unmarried, and by occupation a teacher, and that the said Clarissa C. Lathrop is insane and a proper person for care and treatment, under the provisions of chapter 446 of the Laws of 1874.

I further certify that I have formed this opinion upon the following grounds, viz.:

Complained of a pressure in the top of the head for the past two years; gave up the study of German at that time on the account of it; felt that her general health was failing her and her memory was not as good; this condition, both physically and mentally, continued up to within two months; when she was controlled by delusions such as she suspected that she was laboring under the effects of some kind of poison administered by a lady who boarded in the same house with her people, the purpose was to put her out of the way so that she could get the young man with whom she had been keeping company with; the nature of the poison was sulphuric acid, and occasionally she feels the effects of it now, then she very promptly takes something to neutralize it; she says by taking an alkali will do it and her remedy generally when she cannot get any thing else is soap in the mouth; cannot sleep nights.

And I further declare, that my qualifications, as a medical examiner in lunacy, have been duly attested and certified by W. B. Bliss.

JAMES G. HUNT, M. D.

Sworn to and subscribed before me, this }
19th day of October, A. D. 1880. }

W. P. CARPENTER,
Notary Public, Oneida Co., N. Y.

EXHIBIT No. 16 — COPY.

STATE OF NEW YORK, }
Monroe County, } *ss.:*

It having been made to appear to me by the sworn statements of Jemimah W. Lathrop, Nellie C. Lathrop and P. W. Neefus, M. D., all of Rochester, in said county, that Clarissa C. Lathrop of the same place is now insane; that her insanity has come upon her

within one year last past; that she is thirty-two years of age and unmarried; that she has no money or means by which to sustain or support herself while under the infliction of insanity; that she has no relatives or friends of sufficient property or means to so support her,— thereupon I do order that the said Clarissa C. Lathrop be supported in the New York State Lunatic Asylum at Utica, as an indigent insane person at the cost and charge of the said county of Monroe.

[SEAL.] W. C. ROWLEY, *Co. J.*

Dated *October* 26, 1880.

No. 1.

MONROE COUNTY, *October* 26, 1880.

The consent of the board of trustees of the Monroe County Insane Asylum is hereby given to the commitment of the said Clarissa C Lathrop, in accordance to the within order.

HENRY CHURCHILL,
CHARLES S. WRIGHT,
J. W. CRAIG,
Trustees.

No. 2.

No. 14,060. Clarissa Lathrop, Rochester, Monroe county. Admitted October 19, 1880.

The committee then adjourned until 3:30 P. M., Monday, March 17, at Albany.

ALBANY, N. Y., *March* 18, 1884.

The committee met in room "B," New Capitol.

Present — Messrs. HOWE, HASKELL and BROWN.

JOHN W. VAUGHN,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Please state your age and residence.

A. My residence is Jefferson, Schoharie county; my age is thirty-two in May.

Q. What is your business?

A. Farmer.

Q. Have you any special familiarity with stock and cattle?

A. Yes, sir; I am a breeder of Holstein stock and have been for three or four years.

Q. Do you buy stock in the market?

A. I have bought thoroughbreds and sold them.

Q. Where do you keep your stock?

A. On my farm.

Q. Are you familiar with the market values of that class of cattle?

A. I am somewhat; I pretend to be and I calculate I am; I have taken considerable pains in the matter; I have bought and sold several.

Q. What is a yearling Holstein bull worth — a thoroughbred?

A. Of course it depends considerable — of course there is as much difference in them as in any thing else; I should say from — well, I sold one the other day myself for $125 — a very fine animal — a thoroughbred, registered, and from an imported cow; you want a good, fair price; it varies — we have to average it — it varies according to the quality.

Q. Within what limits does it vary?

A. You can put them all the way from $75 to — well, I should count a good one worth what I sold mine for, $125.

By Mr. BROWN:

Q. What would you consider a fair price for a thoroughbred bull — of good stock — coming two years old this spring?

A. There is quite a variation in them of course; sometimes they refer back quite considerably to milking records, etc.; you want the price of one — a two-year old coming in this spring?

Q. The price of a bull coming two years old this spring?

A. Oh, a bull two years old, it would not be worth as much as a yearling to me — a yearling is just as good for service as one older; I would consider a yearling worth more money, and I think I could get more money for a yearling than I could for a two-year-old, but probably there would not be much difference.

Q. What would you consider a good price for a two-year-old heifer, coming on this spring — a full-blooded thoroughbred?

A. Two hundred and fifty dollars would be a good price; there is them that is worth that, and there is them that would be worth more, and some less; but I would count that a good price.

Q. What do you consider a cow worth — at an age that would be considered the best; a good full-blooded Holstein cow?

A. It would depend whether she was wanted for making butter at present; for a cow of a good serviceable age, I should say $300; I call that a good price; I have got one that is worth that, and she is a good imported cow; that is a good price, I should say.

By the CHAIRMAN:

Q. Have you ever known of a Holstein bull, within your own personal knowledge, to be sold as high as $500?

A. No, sir; I never knew of that price being paid.

Q. What is the highest price you have ever known to be received for a Holstein bull of any age — of your own personal knowledge?

A. I don't know as I know of any under my own personal knowledge that beats my sale that I made a year ago; I speculated on one and he turned me $160; he was a yearling.

Q. State whether or not an older bull would be worth more than that?

A. They are not worth as much in my estimation; I will tell you why he ain't; the older a bull gets he gets a little vicious, and is worse to handle than a younger one; most stock men had rather give a good price for a young one, good for service, than they would for an old one.

Q. How high have you known Holstein cows to be sold — of your own knowledge?

A. The most that I know, except reading, is what I bought myself; I have read a good deal; I paid for one that I bought, and she was five years old, I bought her and paid $201 for her; she is an imported cow and a very fine one; I have got her now.

Q. What is the highest price you have known one to be sold for, other than your own purchase?

A. I can tell you of a heavy sale of a calf the other day, but that is not a cow; Smith & Powell paid $4,200 for a young calf, a thoroughbred Holstein; it was from Secretary Wells, secretary of the American association; it was from his cow, "Mercedes," that made the most butter of any cow on record.

Q. What is a good fair price for a thoroughbred Holstein cow?

A. For a thoroughbred, and a likely cow, I say that I should put it three hundred dollars.

Q. Have you ever known of a cow to sell for a higher price than that within your own personal notice?

A. I never have.

[A paper was then marked "Exhibit No. 17, J. H. M."; it is admitted by Mr. Goodwin, that said exhibit is a bill taken from the files of the Asylum, and is a bill for the Holstein cattle purchased by Dr. Gray, and referred to by Mr. Dryer in his testimony given March 15th.]

Q. Look at this bill, "Exhibit 17," and state whether or not you are familiar with the particular strain of Holstein stock represented by the bull, "First Duke of Stansted"?

A. I cannot tell you as I think that strain is any better than a good many other registered.

Q. Have you ever heard of it?

A. I do not call this to my memory just now; I could look my herd books over and tell, but I don't think the strain of that is any better than a good many others registered; I don't remember much about that.

Q. Look at the bill — Exhibit 17 — please state whether or not, in your judgment, the prices charged in that bill are high?

A. Well, I count it a high price.

Q. I now ask you to state what you would consider stock so described could be purchased for in the market?

A. I estimate that a bull — knowing what I do about this bull, I should put him at $150; the heifer and the cow at $300; I know I could buy three pretty good ones at that.

Cross-examined by Mr. Goodwin:

Q. You say, "knowing, as I do, about this bull, I should put him down at $150?"

A. Yes, sir.

Q. What do you know about this bull?

A. I don't know much about this bull.

Q. Do you know any thing about him?

A. I never saw him.

Q. What strain of blood do you say he was from?

A. Well, it was said here that it was — I cannot tell you the name — it was the Duke of Stans, something, I can't tell you.

Q. You are not familiar with it, are you?

A. It is in my herd-book, I suppose.

Q. Yes, sir; but are you not familiar with the name of this strain?

A. No more than I am with others.

Q. How many head of Holstein cattle have you got on your farm?

A. Four head of thoroughbreds.

Q. What are they, what sex?

A. One is a male and the other three females.

Q. What is the highest price you paid for the highest one?

A. Two hundred and one dollars — an imported cow.

Q. What is the lowest price?

A. The other one that I bought was not a year old, and I bought her and gave $100 for her.

Q. Where did you buy the $201 one?

A. I bought her of Dr. Elwood of Schenectady, and I bought the heifer of him also.

Q. How many have you bought altogether — how many head of Holstein?

A. How many, strictly thoroughbreds?

Q. Yes, sir?

A. I haven't bought, right out, of myself, but three head.

Q. Did you ever attend a State fair?

A. Yes, sir.

Q. Have you ever priced the animals there of the Holstein variety?

A. No, sir.

Q. Did you ever examine them?

A. I have looked at them.

Q. Never inquired the price of any?

A. Not at the State fair.

Q. Never knew what they sold for?

A. No, sir.

Q. Do you know any thing about Smith & Powells?

A. Yes, sir.

Q. What do you know about them?

A. I know this much, that when I went into the Holstein business, I wrote them and several others, and they were so high-toned, I could not do any thing.

Q. Do you know any thing about Gerrit Smith, and Miller, of Peterboro, Madison county?

A. I corresponded with them.

Q. Did you find them "too high-toned"?

A. I don't know as I had him price any to me.

Q. Did you ever buy any of him?

A. No, sir.

Q. Did you ever inquire prices of him?

A. I can't say as I ever did.

Q. You never bought an imported cow in your life, did you?

A. Yes, sir, I did; I bought her of Dr. Elwood.

Q. How do you know that she was imported?

A. I know they told me so, and more than that I have got the papers.

Q. Dr. Elwood told you she was imported; do you regard her as a first-class cow?

A. Yes, sir, and she is; I count her as good as any I know of.

Q. Do you regard this cow that you bought of Elwood one of the best in the country?

A. I do; yes, sir.

Q. Would it make any difference in your mind as to the value of these animals whether they were with calf or not when they were bought?

A. Yes, sir; it would make from seventy-five to a hundred dollars difference.

Q. Would it make any difference in your judgment who was the sire of the calf; what bull got the calf?

A. Yes, sir.

Q. How much difference would it make in your judgment?

A. There is a wide range there; I understand we are talking only of thoroughbred Holsteins?

Q. Yes; you may take as wide a range as you please from the highest to the lowest?

A. Well, I will give you — fifty dollars.

Q. Then in your judgment it would make no more difference than fifty dollars, no matter what bull the calf was got by?

A. No, not if it was a full-blooded thoroughbred bull; we are talking of thoroughbreds.

Q. How old was the cow that you bought of Dr. Elwood?

A. Five years old; a good, sound cow, as straight as a horse, and a good deal straighter than most of them; she is a cow that has taken several first premiums; her weight is 1,400 pounds.

Q. How long have you been dealing in these cattle?

A. About three years.

Q. Do you regard any Holstein cow as being worth $450?

A. No, nor any other cow.

Q. Do you regard any Holstein heifer as being worth $400?

A. No, sir, I do not.

Q. Do you regard any Holstein bull as being worth $500?

A. No, sir, I do not; nor any other bull.

Q. Do you regard any full-blooded cow that is with calf worth $450?

A. No, sir, I don't count them worth that, although they get it sometimes.

Q. Do you regard a heifer with calf as worth $400?

A. No, sir, I do not.

By Mr. Brown:

Q. Have you a neighbor opposite you who deals in Holstein stock?

A. Yes, sir.

Q. Do you know how the prices he gets for his stock compare with the prices on this bill, "Exhibit No. 17?"

A. He does not get as much; J. K. Odell, president of the Delaware County Stock Breeders' Association, told me, and I know what they have sold for.

Q. Did you ever know of the sale of any Holstein stock at prices as high as those on this bill?

A. No, sir, I never did.

By Mr. GOODWIN:

Q. Are you a dealer in Holsteins?

A. I just said I was.

Q. You buy and sell?

A. I have bought and sold.

Q. Did you buy these cattle for the purpose of breeding or grading your stock, or to raise stock for the market?

A. I bought them to raise thoroughbred stock to make some money out of it, and I am making money out of them.

GEO. W. JONES,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your business?

A. Shoemaker and farmer, and run a saw-mill and grain elevator.

Q. How old are you?

A. Fifty-four.

Q. Are you at present a member of the Assembly?

A. Yes, sir, from Seneca county.

Q. What relation do you sustain to the Willard Asylum?

A. I am a trustee and one of the farm committee.

Q. Will you please state what system is pursued at that Asylum for the purchasing of supplies for that institution?

A. What kind of supplies?

Q. Groceries?

A. We issue circulars monthly.

Mr. GOODWIN —I think if you are going to compare asylums, you must compare them in other ways and other manners, as well as in the purchasing of provisions.

Q. I am going to show what their system of purchasing is as compared with the system of purchasing at Utica, so as to show what knowledge or care is exercised by the board of managers; proceed, Mr. Jones?

A. We issue what we call quotations, once monthly, to different persons that we have been in the habit of buying of; if it is groceries, we send a quotation to John Crouse, of Syracuse, also to two or three New York firms.

Q. For the same goods and the same amount?

A. Yes, sir; for instance, if it is so many barrels of sugar, we name "A" sugar or "B" sugar, or whatever they are called by, we want so many barrels, so much tea and so much coffee, naming the kind, "Rio" or "Java," or whatever we want; "What will you

furnish so many pounds of these goods at, at your store;" then they send a sample in small packages; we have a table like this one we are sitting at, and once a month we examine the different sugars, coffees, steep the tea, weigh so much of it out, and steep it and taste it; then they purchase what they consider is the cheapest for the price.

Q. And the same way in purchasing goods for clothing?

A. They have some goods that the steward purchases out and out; take clothing, for instance; if we are going to buy some clothing, we ask the different houses, of a Syracuse firm, sometimes we purchase of a Rochester firm, New York firms, we ask them to send us a sample of a suit of clothes, if you please, naming the kind of goods that we usually require, and we buy these and pay for them; whether we accept the bid or not, we pay for whatever is sent, and we take whatever we regard as the cheapest for the money.

Q. To what extent are such purchases made without such competition?

A. My judgment would be that the majority of our purchases are made in that way; there are some purchases with which we could not do that; for instance, we buy our own wheat; the wheat is bought by the steward, and it is ground at Ovid and we pay so much for the grinding.

Q. Do you buy all your flour and wheat?

A. Nearly all; when we can buy wheat at the market price at Ovid, we have it ground and use our feed for the cows.

Q. How often are bills paid?

A. Monthly, on the 10th of every month.

Q. What system do you have of auditing bills?

A. When a man sells any thing at the Asylum it is weighed, and the man that weighs it gives a receipt for the weight, and he makes a bill and a duplicate bill, and sends it to the steward; then the steward takes the one bill and he makes a bill from that upon our heading, "Willard Asylum"; he makes that and attaches the original bill to that; the bills are made out in that way, and these bills, after being made out, are certified to by the superintendent, Dr. Chapin, and the steward; then the auditing committee is notified that the bills are ready for auditing for the month, usually about the first of the month; it may vary three or four days, but hardly ever later than the fifth; three of us are on the auditing committee, named yearly, and two of us audit those bills — that is a majority.

Q. Before they are paid or after?

A. Before they are paid; then those bills are handed to the treasurer, and he, at the tenth of every month, pays those bills, the contractor gets a duplicate or triplicate rather (for there are three) and then of course there is an account kept of all bills on the books of the Asylum; a list of the bills is kept; after we audit, we compare the numbers of the bills and the names and amounts, with the bills as they are made out; then the chairman of the auditing

board retains these lists as we call them, monthly lists, and at the end of every year we report what bills we have audited during the year; that you will find in our reports every year.

Cross-examined by Mr. GOODWIN:

Q. How is Ovid located as to a city; where is the Asylum located?

A. The Asylum is three miles from Ovid.

Q. About how large a place is Ovid?

A. It has about eight or nine hundred inhabitants.

Q. What are the nearest large cities to Ovid?

A. Syracuse and Rochester.

Q. How far is Ovid from Syracuse?

A. About seventy miles.

Q. And about the same from Rochester?

A. Yes, sir.

Q. And the village of Ovid does not keep the supplies on hand, necessarily?

A. No, sir.

Q. Is that the reason you apply to Rochester and Syracuse?

A. We apply wherever we can buy the cheapest; the steward applies.

Q. Where do you buy beef?

A. We buy it through the country in the locality.

Q. And your butter and eggs, etc.?

A. Yes, sir.

Q. Have you ever purchased cattle for the Asylum?

A. I have purchased one bull.

Q. What kind of a bull?

A. A Holstein bull; I bought him of Mr. White, of Syracuse.

Q. How old was he?

A. Two years old and past.

Q. Thoroughbred?

A. Yes, sir; imported stock; we gave for that bull $150.

Q. Did you buy any cows?

A. No, sir; we only bought the bull, and the reason we bought him was in order to improve the rest of our stock, and to improve the milking qualities of our stock; he was a pretty good animal.

Q. In your judgment the purchase of a blooded animal does improve the rest of the stock?

A. Yes, sir.

Q. And that purchase met your judgment and approbation?

A. Yes, sir.

By the CHAIRMAN:

Q. How much stock have you on the farm?

A. I should say 140 or 150 head of cattle.

Q. Have you any other thoroughbreds in your stock?

A. We have another bull calf there at present, he is a Holstein; we purchased three head in all; this one of white, which was $150; we bought one of the Oneida Community, for that we paid $100; and the other one, a calf, we paid $250 for.

By Mr. Goodwin:

Q. How long have you been a manager of Willard Asylum?

A. Eleven or twelve years, I should say.

Q. How many meetings do you have of your board of managers in the course of a year?

A. Do you mean full board meetings?

Q. Yes, full meetings of the board?

A. We have a meeting quarterly — four a year; we have other committees, we have a building committee, for instance, that meets — I should say we average six or seven meetings a year.

Q. How often do you visit the asylum at Ovid personally?

A. I visit the asylum probably twice a month now, since I have been at Albany; when I am at home I visit it about every week.

Q. How many times in the last year have you seen Dr. Chapin on the wards of that institution?

A. I could not state; I don't think I could tell, I should say half a dozen times

Q. Have you ever seen any black eyes on the wards there?

A. No, sir; I can't say that I have; I suppose you refer to patients; I never have.

Q. Yours is an asylum for the chronic insane?

A. Yes, sir.

Q. How many patients are there in there?

A. One thousand seven hundred and ninety-four, that is my impression.

The committee then adjourned until to-morrow afternoon.

ROOM B, NEW CAPITOL,
WEDNESDAY, *March* 19, 1884, 3:30 P. M.

Met pursuant to adjournment.

Present — Messrs. HOWE, HASKELL, RICE and BROWN.

Messrs. MORGAN and GOODWIN, of counsel.

Proceedings continued as follows:

MARY A. FELTON,

Sworn and examined, testified as follows:

By Mr. MORGAN:

Q. Where do you reside?
A. New Hartford.
Q. With Mr. Comstock?
A. Yes, sir; Gilbert Comstock.
Q. What are your duties in his family?
A. Doing house work, and taking care of Mrs. Comstock, or looking after her.
Q. She is insane, is she not?
A. Yes, sir; I have been there three years in May.
Q. Do they have any other female help but yourself?
A. No, sir, they never have had since I have been there.
Q. What is your age?
A. Thirty.
Q. You have been an inmate in Utica Lunatic Asylum, at Utica?
A. I have; I was there as a patient.
Q. When did you go to the Asylum?
A. It was five years ago.
Q. How long did you remain there?
A. Fifteen months.
Q. Upon what ward were you placed when you first entered the Asylum?
A. On twelfth ward.
Q. Who was supervisor on that ward?
A. Anna Burns.
Q. Who were the attendants on that ward?
A. Jane Bolton, and Frankie Davis assisted her.
Q. How long did you remain on ward twelve?
A. Just about two weeks.
Q. While on ward twelve, did you see any unkind treatment by the supervisor or attendants of the patients on that ward?

A. I think I did see a great deal; Anna Burns would fasten me in the stationary chair, and did so several times; after I was restrained, she took my wrist and twisted it as far as she could, until I begged her to stop; then she says, "there," just as if she had conquered me; she twisted it as far as she could, clear over; another time she strapped me so tight in the chair it took the flesh off my left side; it was drawn so tight it took the skin off; I could hardly breathe; I was there about two hours in that way.

Q. Did you complain that you were strapped too tight?

A. I did to her; told her she would kill me; she only laughed and said I could stay there.

Q. What other unkind treatment to yourself or any other patients?

A. I suffered with cold on ward twelve terribly; it was not warm enough there; I asked for my shoulder shawl one day and she would not give it to me; I sat there shivering with cold; there was a Miss M. there who was abused terribly; I don't know where she was from; I think her name was Ellen; I should say she might be forty years old, by her looks.

Q. What occurred with her and by whom?

A. Anna Burns, she used to twist her wrists a great deal worse than she did mine; she would scold when she was eating in the dining-room.

Q. Was it enough to make Miss M. cry out?

A. Yes, sir, it was.

Q. What else did Anna Burns do to Miss M. beside twist her wrist?

A. She used to get talking in the dining-room a great deal and they used to drag her out into the ward and feed her there; take her very violently and feed her there.

Q. Describe the manner in which they would take her out?

A. There would be two, one take one arm and one another, and if she refused to go they would pull her arms back behind her and push her forward; she was scolding because she was there so much.

Q. What other treatment on ward twelve was there?

A. If patients refused to take their medicine willingly — Miss K., she was a patient there; she would hold their nose and Miss Stirling would pour it down them; if that wasn't enough they would call for another attendant, and she would hold their arms behind them; sometimes it would seem to strangle them; Miss Stirting would put her hands over their mouths; they used her bad, that is Miss M.; Miss Stirling was supervisor on two ward, and she came there with the medicines for eight, twelve and six, and, I think, five.

Q. Was there any other occurrence on ward twelve that you noticed?

A. There was a patient sick and she complained a good deal about Anna Burns' treatment, she didn't pay much attention to her; she complained to me about the way she was used.

Q. Did you go to the bed of this patient that died and see her?

A. The one I am speaking about now; she didn't die.

Q. I thought you said she died; was it a common way and practice by Anna Burns to twist the wrists of patients, take hold of their hand and twist their wrists?

A. Yes, sir; it seemed to be.

Q. To what ward did you go from ward twelve?

A. On to ward two.

Q. How long were you on ward two at that time, when you went from ward twelve — how long were you there?

A. I should think it was not much more than a week, I don't remember exactly.

Q. Who was supervisor on ward two?

A. Emma Stirling.

Q. Do you remember who the attendants were, when you went on to ward two for the first time?

A. Hattie Leonard and Miss Curtis.

Q. What if any thing occurred on ward two, that was unkind?

A. I didn't see any thing there very much; I was not there a week the first time.

Q. From ward two, where were you sent?

A. I went back to ward five.

Q. Do you know why they sent you on ward five?

A. Yes, sir; I took off my shoes and went in my stocking feet one night, and annoyed the patients by going into their rooms.

Q. And you were sent to five ward; who was supervisor on ward five when you went there?

A. I think her name was Miss Roberts, I cannot say for certain.

Q. Do you remember the names of the attendants?

A. Miss Roberts, Mabel Allen and Nellie Jones; it was either Roberts or Reynolds, I think it was Roberts.

Q. How long did you remain on ward five?

A. I think I was there two or three weeks.

Q. Did any thing occur while you were on ward five that seemed unkind to you?

A. No, sir; I don't think there was any thing, only they didn't pay as much attention to some sick patients as they ought to.

Q. Do you remember any patient that they neglected?

A. Yes, sir; but I never knew her name

Q. Do you remember what the trouble was with the patient they neglected, and, so far as you can, describe the manner in which the patient was treated?

A. The first thing I saw of her, I went into the dormitory, she sat there strapped in the stationary chair, and was dying, I knew she was by her looks; I went and told Miss T., a patient, I told her; she said she was dying; I said I knew she was dying, but I didn't know what was the matter; she said "they fed her with that stomach tube," and she thought they hurt her; one of the attendants

saw me, and told me not to go into that room again ; that night she died, and I never saw her after that.

Q. What was the name of the attendant who told you not to go into that room again ?

A. I think it was Mabel Allen.

Q. Did you learn whether she did die ?

A. No, sir ; she was almost dead when I saw her, just breathing, her head clear down.

Q. From five where were you sent ?

A. To ward four.

Q. Who was the supervisor there on number four ?

A. It was Mary Gowen.

Q. Do you remember who the attendants were on number four ?

A. Mrs. Williams; I don't remember that there were any more than two on ward four.

Q. How many patients were there on number four when you went there ?

A. I cannot say for certain, twenty-five I should say ; I don't know as I ever counted them.

Q. Was that a more disturbed ward than five, or less ?

A. It is more quiet than five — five is a demented ward.

Q. How long were you kept on five ?

A. About three weeks, before I went to number four.

Q. How long did you remain on number four ?

A. The first time I don't think I was there over two weeks.

Q. Did any thing occur on ward four while you were there that was notable ?

A. No, sir ; I don't think there was any thing.

Q. Where did you go from ward four ?

A. Back on to five again.

Q. Were the same attendants there when you got back on to that ward ?

A. No, sir.

Q. Did any thing occur at that time, while you were on number five ?

A. No, sir ; I don't know as there was.

Q. How long did you stay on five the second time you were there ?

A. I guess I was there some six weeks, perhaps.

Q. Where were you sent to from ward five ?

A. On to ward six, but I was only there three or four hours ; I asked them to let me go on to number five ward, and I would be quiet.

Q. What was there about ward six that you didn't like ?

A. I was afraid of the patients ; they were so wild there and noisy, I was afraid of them ; Dr. Russell said I could go back.

Q. Do you know why they sent you on to six ward ?

A. Yes, sir ; there was a young lady there ; she was a Catholic ; I used to take some water and tell her that I was going to sprinkle

her; I called it holy water, and she got mad and complained of me and they put me back; her name was E. B.; I would unbutton her apron, too, and that provoked her; she was a patient.

Q. From five where did you next go?

A. I think they put me on eight — seven or eight — I always get these two wards mixed up.

Q. Seven and eight are more disturbed wards than five, are they not?

A. Yes, sir.

Q. Do you remember who was supervisor on the ward to which you were sent, whether it was seven or eight?

A. I do; of number eight ward Hattie Payne was there; Sarah Stirling was the supervisor there; and Lucy Morris was there.

Q. Did any thing occur on eighth ward while you were there?

A. Yes, sir; Miss Morris after I would go from the dining-room to the ward, she would stand at the door and take the keys and punch me in the back with them; she punched me three or four times, but the last time and the third time I said if she dared to do it again, I would report it to Dr. Curtis, and she said he would think it was a delusion, but I didn't think delusions were so striking as that.

Q. Did she hurt you by punching you with the keys?

A. Yes, sir; of course; it was like a little hammer pounding in the back; she would laugh and seemed delighted at it.

Q. At any time when she punched you in the back with these keys had you been doing any thing out of the way?

A. No, sir; I had been at the table and ate my meals quietly, and went out quietly; she didn't do it after I told her I would report her.

Q. What else occurred on ward eight?

A. There was another patient, Mrs. T., she had a very bad arm and hand, her hand was broken, and they said Lucy Morris broke it for her, and it was not set properly, it was in a sling.

Q. Who told you that Lucy Morris broke her arm?

A. I don't remember, some of the girls told me.

Q. Do you remember how long she carried her arm in a sling?

A. All the time I was there, all the summer; I was there, I think, about two weeks.

Q. Was there any thing else you saw on number eight?

A. I have seen patients put in the stationary chair, soon as they were dressed in the morning, and kept there until night; they were quiet and seemed stupid, and were kept in the chairs and fed there; they were allowed no exercise at all.

Q. What kind of patients were they who were put in chairs like that; did they seem to be patients who had lost their reason mostly?

A. They did not seem to know any thing; you had to feed them; I fed them myself there day after day.

Q. Were there intervals when they were not kept in the chair?

A. Sometimes they would not be in the chair.

Q. What was their conduct when not kept in the chair?

A. One was an old lady; she seemed mischievous; she would go for the patients, and they would have to strap her down in the chair again.

Q. Any other ill treatment on ward eight?

A. Well, some of the patients had to sleep on the wards in a straw bed in the day-rooms, on the floor, and they would be strapped by the wrists to a chair.

Q. The bed would be put where?

A. Right up close to the stationary chair, and the patients strapped to the chair so that they could not stir in the night; it was a straw tick they were put on.

Q. What do you know, if any thing, in reference to a change of the bed, when it came night in the crib beds?

A. In the day time, there would be mattresses in the crib for the inspection of visitors; when it came night there would be a lot of straw tick put in its place; the mattress would be carried out into a kind of a closet; it would look very nice in the day time.

Q, What else occurred in ward eight; any thing that you remember?

A. I don't know as there was any thing else.

Q. From eight where did you go?

A. Back to number five; they kept me on eight quite a while; on eight and five together.

Q. How long were you on eight altogether while you were there?

A. May be it was quite a month.

Q. Did you say they took you from eight back to five?

A. I think I went on No. 10, but was not there but one day on No. 10 ward.

Q. Do you know how they came to take you to No. 10 ward?

A. No, sir; I do not.

Q. Why were you taken from No. 10?

A. I never knew why; two of us girls went back together, and they put me on five; I suppose it was because we were quite sociable; she was from New York, Miss M.; they would take us and put us on different wards if we were too sociable; I don't know where they put her; from ten I was taken back to five.

Q. From five, where were you taken to?

A. No. 2; that is a quiet ward.

Q. When you got back to No. 2 ward, was there any thing occurred there that was notable?

A. The most I saw was bed bugs; I don't know whether they are notable.

Q. From ward 2, where were you taken?

A. To four.

Q. Did any thing occur on ward 4?

A. I don't know as there was any thing.

Q. From four, where were you taken?

A. I was taken home; I was discharged from No. 4 ward.

Q. Is there any other ill-treatment that you saw while you were in the Asylum?

A. I shall have to look on this memorandum.

By the CHAIRMAN:

Q. Did you make that memorandum yourself?

A. Yes, sir.

Q. Refer to your memorandum?

A. I was on the dormitory one night, on No. 5 ward, and saw Emma Stirling drag a patient from her bed; she refused to take her medicine; she left the door open, I looked through, she dragged her on the ward; Emma Stirling had her hands resting on her lungs; this Miss K., who always carried the medicine tray for Miss Stirling, was holding the patient's nose; she poured it down her throat very harshly.

Q. When she was pouring medicine down her throat, where did the patient lay?

A. On the floor of the ward; she had her knees right up close here (indicating) on the chest so as to keep her from moving her head; I saw a patient on eleven ward that was dying in the crib, there was a sheet thrown over her; as I was going in the back yard I looked and saw it, and lifted the sheet to see what was under the sheet, I saw she was just alive; I says, "Why don't you go in and brush the flies off her face;" they were mad at me and pushed me out, jerked me out; I saw her the day before in the yard, and she was dead the day after that; it was very warm weather; I told the girls to take a fan and brush away the flies; the attendants, when I told them, said I had better mind my own business; I cannot give the names; if I saw the names in print I could tell you very quick; I cannot think of them now.

Q. When did you next see or hear any thing of the patient that was in the crib?

A. I never saw her in the yard after that; they said she was dead; I learned she had died in the crib.

Q. Was there only you went in there; was there any one in there caring for her?

A. No, sir; if there had been I should not have been there; I had to step quick to get there; when they saw me they had me come right out.

Q. Did you go in there again?

A. No, sir; they told me never to go in there again, and never do that again there.

Q. When you asked them why they didn't take a fan to keep the flies off, what did they say?

A. They told me to go out in the back yard and mind my own business; they jerked me out by my arm.

Q. Is there any thing else that you remember to have seen?

A. I had a basket of different kinds of fruits, brought me while I was there, and all I received was one kind, a few peaches given

me by Miss Stirling, it was in seven or eight ward, I don't know which, I get those two wards mixed up; my sister told me she brought one of the different kinds of fruit.

Q. Were you quite well at that time?

A. Yes, sir.

Q. Was there any time, from the time you were taken to the Asylum, until you left, but that you were in a condition so as to know what was going on and know what you were doing?

A. The first two weeks I went there I did not realize what I was doing, but from that time I knew what I was doing, I seemed to realize what I was doing, I knew, but Icould not help it.

Q. Do you know, then, of any other cases there?

A. No, sir.

Q. Was there any thing more you remember, that was done by Anna Burns?

A. The first meal I had there, I remember, she offered me two bowls of bread and milk, I hadn't eaten so much before for two weeks, I told her I could not eat it, but she made me; next day I was worse and didn't feel able to sit up, but she jerked me off the bed if I laid down; I was sick all day and vomited all day long, she would not let me lie down but jerked me off the bed?

Q. Any thing else about Anna Burns that you recollect?

A. She wasn't good to the patients, she seemed to like to torment them, if she could in any way, shape or manner; she said if I didn't take the bread and milk, I would have to have the stomach tube used, I told her then I would take it and eat it.

Q. Any thing else that you remember?

A. I never saw Dr. Gray there but once except when he went there with company.

Q. Not but once all the fifteen months?

A. No, sir; not alone, except when he went there with company. By that I mean men that came and went through the committee, I mean,— visitors.

Q Do you remember when the board of supervisors passed through?

A. Yes, sir; he was with them that time, but he was in Europe when I was there, during the summer, and Dr. Andrews took charge.

Q. What did you see of Dr. Andrews?

A. I think he was very good to the patients as far as I ever saw.

Q. Did you ever see any thing about putting wet sheets on the patient's heads, or round the neck?

A. No, sir, I never saw any thing of that.

Q. Describe Anna Burns — her appearance?

A. She has got a crooked nose, she is stout looking, a little more than medium height.

Q. How old is she?

A. I should think 33 or 34 years old.

Q. What was Anna Burn's manner of treatment to patients, was it different to any other attendant?

A. Yes, sir, she used them worse.

Q. In what respect?

A. Twisting wrists, and fastening them in stationary chairs, so that they could not breathe, hardly; she did that to me; she didn't seem to care for the patients at all or their comfort in any way; she didn't care how they were treated.

The CHAIRMAN — Do you wish to ask any questions, Mr. Goodwin?

Mr. GOODWIN — No sir.

The CHAIRMAN — It is understood that Mr. Brown will produce a witness who will testify as to the accounts and purchases, etc.; that witness can be produced when a convenient opportunity may arise; with that exception the committee have no other witness to examine at present, so that you (Mr. Goodwin) can produce such witnesses as you may desire to.

Mr. Goodwin — I would like very much to have subpœnaed somebody from the *Evening Journal* who will give the name of the Utica correspondent who wrote the article appearing in that paper last Saturday evening.

The CHAIRMAN — We will telephone for somebody from that office.

Mr. GOODWIN — Mr. Chairman, Professor M. B. Anderson, President of the Rochester University, and ex-President of the State Board of Charities, was subpœnaed to appear on Friday of this week, and to bring with him a report made by him as chairman of the committee who investigated the affairs of Utica Asylum in the year 1876; Mr. Anderson telegraphs that he has made all his preparations to go South, and that it will be extremely inconvenient for him to appear before the committee at the suggestion of the chairman; I yesterday telegraphed Mr. Anderson in substance that if he would appear at Albany on any day of this week except Saturday, the committee would give him a hearing immediately and allow him to go on his journey; to which he replied that he had sent the report made on that occasion, which contained all his views and whatever evidence he might be able to give upon the subject; I now offer in evidence that report and desire to read it for the information of this committee; it is a report signed by M. B. Anderson and E. W. Forster, and is not dated, but I understand it was made in December, 1876.

Mr. HASKELL — I do not see how that report can be admitted.

[The matter of the admission of the report was then considered by the committee, with the following result.]

The CHAIRMAN — I will state generally for the committee that inasmuch as this report is unaccompanied by any testimony — is not verified in any way — that one of the signers besides Mr. Anderson is accessible and can be subpœnaed, there appears no reason why the report should be accepted; furthermore, it appears to have been a report made in 1876, and the scope of the investigation then made and upon which the report is based does not appear; the committee

regard it as a species of hearsay, of the same character as letters or reports from any other persons who have been in the Asylum who may relate what they have seen and their impressions.

Mr. RICE — I desire to say that I vote against the admission of this report, because it appears not to have been made upon the authority of any person having power to make it; it is addressed to nobody, and so far as it appears, is entirely private; furthermore that it is a whitewashing report, absolving the officers of the Asylum from all blame of any character without assigning any reasons whatever for the report.

Mr. GOODWIN — Have you read the report?

Mr. RICE — I have.

Mr. HASKELL — Mr. Anderson, if he is telegraphed to to-day, will appear before this committee by Friday.

Mr. GOODWIN — What is your authority for that statement?

Mr. HASKELL — The sergeant at arms; I will also say, as to the report offered, that there is nothing before this committee to show whether the report is genuine, and no facts before us upon which it is based, or how it came to be made; in fact we know nothing about it.

Messrs. Olin and Brown concurring in the foregoing remarks of the committee, the report was rejected.

Mr. GOODWIN — I will telegraph Mr. Anderson; I desire to ask if Mr. Forster will be subpœnaed by the committee?

The CHAIRMAN — Certainly; we will subpœna anybody you name.

Mr. GOODWIN — I desire to offer in evidence from the fortieth annual report of the managers of the State Lunatic Asylum at Utica, a letter on page 15, which is sent by Rev. M. B. Anderson, D.D., President of University of Rochester, to Dr. John P. Gray.

The CHAIRMAN — Inasmuch as Dr. Anderson is living and accessible, the facts contained in the letter should come to the committee from the mouth of Mr. Anderson himself, as testimony; we will telegraph Mr. Anderson to be here, and we have no doubt he will respond.

After a consultaion between counsel for the Asylum and the committee it is agreed that the committee will sit on Thursday as long as possible; Friday afternoon and evening, Monday afternoon at 3 o'clock, until the evening session of the Assembly; Tuesday and Wednesday in Albany, in the afternoon at 3:30 o'clock, and Thursday, Friday and Saturday at Utica to hear testimony produced on behalf of the Asylum authorities.

ALBANY, *March* 20, 1884, 3:30 P. M.
ROOM "B," NEW CAPITOL.

Met pursuant to adjournment.

Present — Messrs. HASKELL, OLIN, RICE and BROWN.

Messrs. S. S. MORGAN and A. T. GOODWIN, of counsel.

Proceedings continued, as follows:

MARTIN B. ANDERSON,

Sworn and examined, testified as follows:

Mr. GOODWIN — Mr. Chairman, I would prefer to have the committee examine Mr. Anderson, reserving the right to examine him myself on such topics as are not touched upon by the committee; I do this because I do not want Mr. Anderson, or any other witness presented by the Asylum, to be regarded as a witness for the Asylum in any sense; the persons I shall present are simply for the enlightenment of the committee on the subject under investigation

Mr. MORGAN — The committee do not know where to begin or where to leave off with the witness, they know nothing about his knowledge of the Asylum, or what he will testify to; my idea is that Mr. Goodwin had better examine these witnesses on such points as he may deem necessary, and that the committee make such further examination of the witness as they may see fit.

Mr. RICE — I think it will be quite proper for the Senator (Goodwin) to examine the witness.

Mr. HASKELL — That is the view I take of it.

By Mr. GOODWIN:

Q. Where do you reside and what is your occupation?

A. My residence is at Rochester; occupation teacher; I am president of Rochester University.

Q. Were you ever a member of the State Board of Charities?

A. Yes, sir, I was; I was appointed when the board was organized by Governor Fenton; I do not remember the date now.

Q. How long did you remain a member of the board?

A. My impression is about thirteen years, then I resigned; I cannot tell, I resigned about four years ago, three or four — perhaps three; it was during the administration of Governor that I resigned.

Q. Were you ever president of that board?

A. I was, one year; I cannot remember the year.

Q. While you were a member of the State Board of Charities,

did you give any attention to the management of the insane of this State?

A. I did, a good deal of attention.

Q. Be kind enough to state to the committee what, if any, asylums you investigated?

A. I was a member of the board before the Commissioner in Lunacy was appointed; for several years the charge of the State lunatic asylums of the State was in the hands of the State Board of Charities; for some years previous to the appointment of the Commissioner in Lunacy; during that time, and even subsequent to that time, the board was accustomed to visit and examine all the asylums in the State in turn; different commissioners — sometimes one, sometimes another, and the secretary of the board also visited by our directions very frequently.

Q. Was it through the investigation of an asylum that the State Board of Charities recommended the appointment of a Commissioner in Lunacy?

A. It was not recommended by the State Board of Charities directly; there was a charge made in the New York *Tribune* against the Bloomingdale Asylum and its management; so much disturbance was created by it that Governor Hoffman appointed a special commission to visit the Bloomingdale Asylum and report to him, apart from the State Board of Charities; General Barlow, then Attorney-General, Dr. Thomas Hunn of this city and myself, were appointed a commission to inquire into the charges against that asylum — Bloomingdale, we spent a good deal of time there and found —

Mr. MORGAN — Is it at all important to go into the investigation of Bloomingdale Asylum, Mr. Chairman?

The CHAIRMAN — It does not seem to me so.

Mr. GOODWIN — I desire to know if the attorney for the committee will have the right to object to any testimony offered by the Asylum, or the manner of its presentation to the committee?

The CHAIRMAN — I am inclined to think it is entirely within the provisions and scope of his duty.

Mr. GOODWIN — Then I would like to ask the Chairman what distinction he makes between the rights of the attorney for the committee and the attorney for the Asylum in this investigation?

The CHAIRMAN — We do not make any.

Mr. GOODWIN — Why, then, has there been a ruling of the committee that in the examination of witnesses presented by the committee's counsel, that the attorney for the Asylum has not had the right to cross-examine or make any suggestions except through the mouths of the committee?

The CHAIRMAN — My recollection is that every witness who has been sworn since the Asylum was represented by counsel — the liberty of cross-examination has been extended to the counsel, and my recollection is that every time I have been present, that the

committee have considered very definitely any objections that the counsel for the Asylum desired to present.

Mr. MORGAN — I do not make any objection ; I simply ask if it is proper or necessary to go into the matter of an investigation made of the Bloomingdale Asylum.

The CHAIRMAN — Unless there is something in regard to this Bloomingdale Asylum investigation that is pertinent to this inquiry —

Mr. GOODWIN (interrupting) — I do not understand that the attorney for the Asylum has had the right to cross-examine witnesses, but that under the rule established by the committee upon his introduction to the committee, he has refrained, supposing he had no right to cross examine witnesses ; it is true that the committee have been courteous in allowing such questions to be put by the attorney as he desired to ask witnesses, but without reference to his right to cross-examine.

Mr. RICE — Have not suggestions been made to you at the close of the testimony of each witness, that you could cross-examine if you desired ?

Mr. GOODWIN — Nothing of the kind.

Mr. RICE — I understand it so.

Mr. GOODWIN —I desire to say that on being introduced to the committee, under the rule adopted by the committee when I was not present, I regarded myself as not being allowed by the committee to cross-examine or make objections to testimony, as I would in a court of justice.

Mr. RICE — At the close of the testimony of each witness the counsel has been asked to cross-examine ; in some cases he has done so, and in several, to my knowledge, he has declined to.

Mr. GOODWIN — With regard to that I want to say that this matter —

The CHAIRMAN — There is no use wasting time in this discussion, go on with your witness if you regard the Bloomingdale matter as relevant, go on ; if not, go on with something else.

Mr. GOODWIN — I do regard it as material; go on, doctor.

The WITNESS — I merely state that I was appointed on a commission to examine Bloomingdale Asylum ; was there a week, and the result was that we discharged all the claims or accusations made against Bloomingdale Asylum ; and we recommended that the State appoint a Commissioner in Lunacy, who should be — whose business it should be to look into the Asylums of the State, and to report each year as to their internal condition ; that is all I wish to say about the matter ; before that time the insane asylums of the State were put in charge of the State Board of Charities, which I happened to be a member of at that time.

Q. Have you ever visited the Asylum at Utica ?

A. I have, several times.

Q. In your official capacity, have you visited it ?

A. Yes, sir.

Q. When was the first time you visited it?
A. I cannot remember, I went there several times.
Q. About how long after you were a member of the board?
A. Well, every year or two for thirteen years.
Q. When you were there did you investigate its management?
A. I did look into it.
Q. Did you go upon the wards?
A. I did.
Q. Did you talk with its superintendents and officers?
A. Yes, sir; and with attendants and patients, sometimes.
Q. And made a thorough investigation of its affairs?
A. Yes, sir.
Q. Did you visit the Asylum in the month of September, 1876?
A. I did.
Q. What carried you there specially at that time?
A. I was appointed a committee by the State Board of Charities, to take into account a series of charges by Dr. Tourtellot.
Q. Who was the other committee man?
A. Mr. E. W. Foster, of Potsdam; shall I go on and state the facts of the matter?
Q. Yes; go on?
A. There was a series of charges made, in writing, to the Secretary of State, by Dr. Tourtellot, who had been a physician there and who had been discharged for incompetency, or some reason; he made these charges and sent them to the Secretary of State; he being an *ex-officio* member of the Board of Charities, he turned the charges over to the board, and the board appointed myself and Mr. Foster a committe to investigate the charges and to take testimony regarding their truth; I appointed a time to meet Dr. Tourtellot in the city of Rochester, and Mr. Foster and I met him there.
Q. Come down to the time you went to Utica, to investigate charges that occurred there?
A. After Dr. Tourtellot had withdrawn his charges (he withdrew them), we met him, and I was prepared to put him under oath, and go on with the investigation; he appeared with a lawyer and withdrew, in writing, all the charges he made; consequently, we were discharged from investigating that subject; but we thought it proper, the board did, to visit the Asylum; we did so, and spent three days there examining into the condition of the Asylum and with special reference to these charges that had been withdrawn, but not with a view of meeting them in detail.
Q. Be kind enough to state to the committee what you did in the way of investigation at the Asylum on that occasion?
A. I went through every ward, every part of it from garret to cellar, investigating it in that way then, and spent the better part of three days in examining Dr. Gray and other officials, especially Dr. Gray; I examined him in detail, regarding all the internal administration of the Asylum, and took down his answers in writing at the time.

Q. (By Mr. HASKELL.) Did you examine Dr. Gray under oath?

A. No, sir, I didn't put him under oath.

Q. You stated that you visited every ward of the Asylum; state what you did upon the wards in the way of examination?

A. I went into them and looked at the condition of the patients, investigated the amount of restraint that was given their food, their attendance, and the ventilation, their employment, the amount of air, what opportunities to be driven out in the air, and what opportunities for exercise in the way of labor; we investigated the character of attendants especially, and the degree of supervision exercised by the physicians over the wards, the dress and bedding, and foods, etc., of the people in the Asylum.

Q. Did you talk to the patients in reference to their treatment?

A. I did, to some that were capable of talking.

Q. And listened to all the complaints that came to you from persons whom you considered sufficiently rational to answer questions and ask questions?

A. Yes, sir; we didn't go through the wards for that purpose; that is, didn't go through all the wards, because in a great many of them they were perfectly wild, could not make a coherent answer, or understand a coherent question.

Q. But those that could understand and answer coherently?

A. I had investigated all the charges that had been made of whatever kind, wherever I got information on the subject of the charges.

Q. Wherever a patient made a charge to you, about cruelty practiced upon them, either by attendants or patients, did you investigate it?

A. No such charges were made.

Q. Did you ask the patients in reference to their treatment?

A. I did some of them, and there was a man who was a personal friend, he was a Rochester merchant, I had him down and talked with him in detail.

Q. State, if you please, the condition of the ward?

A. They were all cleanly, well ventilated, all well cared for and all the attendance, so far as I could see, that was needed was given to the patients, and every means taken to have the wards well ventilated and cheerful and light; a very considerable amount of expense had been made that year in giving cheerfulness and light and warmth to the different wards.

Q. How was the bedding?

A. Good.

Q. How did you find the food?

A. Good.

Q. Did you see patients under restraint?

A. I did not at that time; I investigated the subject of restraint, however.

Q. Did you examine the means of restraint?

A. Yes, sir.

Q. What articles of restraint were used when you were there?

A. Muffs and cribs, those were the only ones.

Q. The camisole?

A. Occasionally, but generally muffs and the crib.

Q. In reference to the muff, was there any thing in that that could of itself inflict an injury upon a patient?

A. Not at all; it was intended, as I understand it, to prevent them from inflicting injuries upon themselves or the patients on the ward.

Q. How in reference to the crib bed?

A. The crib bed would not injure a person put into it at all; allow me to give my opinion on that; I have investigated that in detail several times; contrary to my impression about the crib, I heard a good deal said against it; I reached this conclusion that the crib was, on the whole, beneficial to the patient; a person wild, instead of being put into a padded room, it is better to put him in the crib, because patients very soon find that they are confined, that they cannot get out of the crib, and they give up their frantic efforts, and they are saved from exhausting their vitality by efforts to get out; contrary to my first opinion about the crib, I reached the conclusion that the crib was beneficial in that respect; the crib was so arranged it could not injure them in the slightest degree.

Q. So that upon investigation you changed your mind, on the nature of the crib and its purposes and objects?

A. Yes, sir; from my own observation and conversation with a great variety of gentlemen engaged in asylums in this State and elsewhere.

Q. Be kind enough to give to the committee the character of the examination which you made of the superintendent and officers of the Asylum, on that visit?

A. I examined Dr. Gray in reference to this point, especially in reference to the character of the attendants; what kind of supervision he gave to the attendants, about kindness and care to the patients in the different wards while the physicians were not present; he gave me a series of rules, which he applied to every attendant in the establishment, very severe rules as I thought at the time, to the effect that if any man injured a patient, in any way, or was cruel to him, or showed want of patience, he was instantly discharged. That was the rule of the institution, written, which he gave to me at the time. I may say in passing, if the chairman will permit me, that the great difficulty in managing insane asylums comes in right here: the character of the attendants in charge; physicians cannot always be present, and patients must be for a considerable part of the twenty-four hours in charge of the attendants; these attendants are persons hired for comparatively small wages, as the appropriation given by the State will not permit the employment of persons of high intelligence; and there is danger always that these attendants will not be sufficiently kind, courteous and considerate to the patients — and the severity of these rules, of which I spoke, were justified by the important relation which these attendants sustained to the patients; every one of the attendants at Utica understood, that if

he injured, struck or was cruel to a patient in any way whatever, as I understood it, it would be followed by instant expulsion from the institution.

Q. While on the subject of attendants, tell the committee what the character of the men employed there is, as far as you were able to investigate?

A. They are generally a very respectable class of men and women, because the rules were such that no other class of persons could be retained there; many of them are persons that have become adjusted to the work and have stayed several years, and the moment they showed any disposition to be cruel or severe to the patients, they were discharged, and they have been sifted out one after another, and only the best ones retained; those good and satisfactory were retained for many years, as I understood.

Q. What impression, if any, did the examination of that Asylum leave upon your mind; what was your conclusion from your examination?

The CHAIRMAN (Mr. Haskell) — Perhaps before you get down to that you had better let him go through in detail and give as far as possible the facts and not his impressions.

Q. At the suggestion of the Chairman, state every thing you did there?

A. I have stated already that I examined the institution in detail, in all parts, its food, clothing, ventilation, and specially I gave my time to the investigation of the character of the persons in charge of the ward, the employees, and the means by which the superintendent secured kindness, consideration and care on the part of those attendants, in the absence of the physician in charge; physicians going through the wards a certain number of times each day, and then when they were out the attendants were in charge of the wards, of course.

Q. Did the whole investigation that you made at the Asylum, at that time, increase your confidence in the administration of the institution?

The CHAIRMAN — The doctor has stated what he did as an expert (and in that view he is presented here); he may give his judgment based upon what he did; but as to whether he felt better or worse about the institution than he did before, does not seem to me competent or proper.

Q. In your opinion were the methods adopted by the Asylum authorities the proper methods to be used at the institution?

A. I will say I do not profess to be expert; I am not a physician; I have not studied the subject of insanity, except during the thirteen years of my official relation to the State Board of Charities, but as far as I am capable of judging, my impression and opinion regarding the administration of the Utica Asylum at that time was exceedingly favorable; I have been in a great many asylums, and on the whole I think I have never seen any asylum whose internal administration was superior to it, either in this State or any other State.

Q. While you were a member of the State Board of Charities, were any suggestions made by the board to any asylums of this State and particularly to that of Utica, which were not acted upon by the Utica Asylum?

A. We had, so far as I remember, we had no occasion to make any suggestions of any significance, except with relation to air, exercise and employment; and when we made points on the matter of work, of exercise and employment, Dr. Gray always expressed sympathy with our views and manifested an earnest desire to carry out our views, for the purpose of increasing the amount of exercise and variety in employment given to the inmates of the institution.

Q. You have stated that during the time you were a member of the State Board of Charities you paid a great deal of attention to the insane; did you hear a great many complaints of persons who had been confined in asylums, after they were discharged?

A. I have had some complaints made to me of that sort.

Q. Did you make any investigation of these complaints?

A. Those complaints, made to me by persons who had been discharged, I found were universally unfounded, but they were not many; I have heard a great many such in the course of my connection with the Board of Charities.

Q. Is there a period of canvalescence in which it is difficult to determine the degree of confidence to be attached to charges made by patients against asylums?

A. I wish to answer that other question a little more definitely; my own observation, limited as it is, I found it was exceedingly difficult to determine the point at which a person who had been insane became sane and was fit to be discharged; I have known a great many persons discharged before they ought to be; I never personally knew a patient kept in the Asylum longer than was fit, and I have often found many persons who were sane after discharge, still retain their notions, prejudices and ideas which they had while insane and were unable to discriminate in their memory, between the events which occurred to them while they were insane, or the notions in their mind, while insane, and those that came to them after they were sane; they were intermingled; the memories of their period of confinement and insanity were intermingled with their ideas, which came into their mind after they were insane, so that I was led always to doubt the testimony of a person who had once been in an insane asylum regarding his experience while insane, unless it was corroborated by other evidence; that was very strongly impressed upon my mind, and is to this day.

Q. Would you give credence to the statements of a patient who had been confined in an asylum without corroborative evidence?

A. I should be very slow to do it; I cannot say but there may be instances in which I might believe a person, but from the experience I have had, I should be very slow to believe it without corroborative evidence from elsewhere — other sources.

Q. Has it been your experience that patients discharged from

asylums are likely to give currency to delusions which they have received in the asylum, honestly believing them to have occurred?

A. Yes, sir; it is not a question of insanity at all, it is a question of deceit — incapacity to discriminate between the imaginations of insanity and the facts of their sane life; when I speak of the doubt regarding the testimony of persons who have been insane, I do not call into question their honesty but their capacity.

Q. What is your opinion, if you have one, upon the subject of the pay which attendants receive in the Asylum, and number of the hours which they are employed?

A. My impression has always been that the weak point in asylums was the small amount of money available to trustees for the payment of persons — attendants — to take charge of the patients on the wards.

Mr. Rice — Do you think that is a fair answer to your question?

Mr. Goodwin — That is responsive, and, even if it was not, I do not see any objection to its being taken, do you?

The Witness (continuing) — With larger funds they might command men of higher capacity and better character.

Q. Is this the report (producing the same, and handing it to witness) that you presented to the State Board of Charities?

A. It is.

Mr. Goodwin — I now offer that report in evidence.

The Chairman — My own individual judgment is that it is not admissible; the doctor has given us his judgment and conclusions, and he has stated what he did, and what he found.

Mr. Goodwin — I ask for a ruling of the committee on this question.

Mr. Rice — Mr. Chairman, I suggest that the matter be held in abeyance until the chairman (Mr. Howe) is present and we have a full committee.

The Chairman — The paper will be marked as an exhibit and the question of its acceptance be reserved.

[The report in question was then marked Exhibit No. 20, J. H. M.]

Q. I now call your attention to a letter which appears in the Fortieth Annual Report of the Managers of the State Lunatic Asylum for the year 1882, on page 15; did you write that letter?

A. I did; it is a letter written to Dr. Gray in view of the serious charges that had been made against his administration.

Mr. Goodwin — I now offer to read that letter and have it incorporated in the record.

The Chairman — The matter of its admission had better be deferred, as the report has been, to await the action of the full committee; it can be marked as an exhibit.

Mr. Goodwin — Mr. Chairman, I would like here and now to make a statement in reference to what I deem to be the duty of this committee in taking this testimony; I do it because I think that

the position in which I am placed requires me to do it in order to do justice to my clients —

The WITNESS — I can state the substance of that letter.

Mr. GOODWIN — Is there any objection to that?

The CHAIRMAN — He can state the result of the investigation he made.

Mr. GOODWIN — Go on, then.

The WITNESS — The result of that three days' investigation at that time was this, on the part of the committee, myself and my colleague, that the internal administration of the Utica Asylum was good in all parts; not that there could be no suggestion made for its improvement, but, so far as regards the criticisms made against asylums, we found it entirely free from unjust cause for any such criticisms; I think the administration of the Asylum was as good as that of any asylum I have ever visited in this State or any other State.

By Mr. MORGAN:

Q. Are you a physician or have you ever been?

A. No, sir.

Q. Never read medical works as a profession?

A. No, sir.

Q. Have you ever made the subject of insanity a specialty in your reading or practice?

A. No, I never was a physician.

Q. What has been your calling?

A. A teacher.

Q. In what?

A. Psychology, moral philosophy and political economy.

Q. When you were in the Insane Asylum at Utica, I understand you to say, you saw no patients in restraint?

A. I don't recollect I saw any one the day I was there; it is very seldom that they are in restraint.

Q. What would you say to the practice of putting an insane person in a chair, and strapping them into that chair, so that they could not get out, the chair being stationary, and keeping them there without exercise, the entire day?

A. The answer depends on the circumstances of the case; I cannot tell — I cannot answer such a question intelligently unless I knew the circumstances of the case.

Q. Would you think it desirable to keep any person under close restraint, sitting in a chair and necessarily in one position from morning until night, would you think that desirable in any case?

A. I cannot answer the question; I should suppose, ordinarily, it would not be; it depends on the condition of the patient, and the degree of the acuteness of his insanity.

Q. Would it not be better to put a sufficient restraint on to pre-

vent the patient from injury to himself or any one else, and give that patient some exercise during the day?

A. I suppose it would be under ordinary circumstances.

Q. In your judgment it would be very injurious to the health of any person to be strapped down to a chair, without exercise, for an entire day, would it not?

A. No, sir; I made no such statement.

Q. I did not ask you if you had; I asked you, in your opinion, would it not be injurious to the health of that person to be strapped in the chair the entire day?

A. It depends entirely on the physical and intellectual condition of the patient; I am not a physician and cannot answer it as an expert in managing insane people or asylums, consequently my opinion on such a subject would be worth very little.

Q. You would not regard it as humane treatment, to throw a patient on the floor and get upon that patient's breast with your knees, would you, and hold the patient down by your heft upon the patient's breast?

A. Of course not.

Q. Can you, in your mind, think of any case where it would be necessary to throw a patient down and break the patient's ribs, and cause the death of a patient?

[Objected to.]

Mr. Goodwin — That is a hypothetical question not in this case, and it is not right to ask it.

The Chairman — It is so much in this case that it is substantially the case of Hughes; the witness is offered as an expert and I think it is proper to test his knowledge.

A. The question is an ambiguous one; it may be necessary to grapple with a patient in order to keep him from injuring others, and in the grappling he might be injured by accident; there are two questions involved there; the question is mixed; I cannot answer it.

Q. Would you think it proper treatment of a patient that an attendant should strike a patient a hard blow with a large bunch of keys?

A. No, sir; I do not.

Q. Would you regard it as proper treatment to a lady patient to pull her out of her bed, drag her out of her room on to the ward, and there hold her down upon her back and turn medicine into her mouth?

A. I should not, unless there was some special circumstance justifying it.

Q. What circumstance, in your mind, would justify that?

A. That is ambiguous, there are two things stated — pouring the medicine down the woman's throat would be proper under some circumstances; pulling her out of bed would not be necessarily proper.

Q. In order to give the patient medicine you would not regard it as necessary to drag them out of bed, and out of the room, and on to the ward, and there hold her down and give the medicine, would you?

A. No, sir; I should not think it necessary.

Q. Would you regard it as proper treatment by an attendant to strike a patient a severe blow in the stomach?

A. No, sir, I should not, unless it were in order to save a patient's life; if an insane man attacked you or me, and the only condition for me to save my life would be to strike him, I would strike, so would an attendant, and he would be justified in doing it.

Q. Would you regard it as proper treatment for an attendant to strike a patient upon the bowels a severe blow?

A. I should not.

Q. Would you regard it as proper treatment of an insane person, as a punishment for some offense, that they should send that person from a quiet ward, to which they were adapted, to a very greatly disturbed ward?

A. If the offense was due to an excess of acute insanity, the unquiet ward would be the proper place.

Q. What would you say about a patient that was upon a quiet ward and she takes her shoes off and walks upon the ward in her stocking feet; that being her offense she is transferred to a more disturbed and excitable ward?

[Objected to as hypothetical question not within the case.]

Q. Would you regard that as proper treatment of a patient?

[Objected to.]

Mr. Goodwin — She said she was teasing patients.

Q. I will add then, "and teasing patients" and going into their rooms?

A. If the continuance of a patient in any ward was a decided injury to others in the same ward, the removal of her would be perfectly competent and proper.

Q. And to put her into the more disturbed ward you think would be proper?

A. It would be proper to remove her I said.

Q. I am asking about putting her in a more insane ward?

A. It would be proper to put her on a ward where she would have no opportunity to injure others.

Q. That does not answer the question; is it not injurious even to a convalescent patient to put them into a greatly disturbed ward among greatly disturbed patients; is it not injurious to them?

A. It would depend upon the character of the patient's condition; it is a question, however, which I am not competent to answer.

Q. In your opinion putting a convalescent patient into a highly disturbed ward would be liable to bring on nervousness, and result in making that patient highly disturbed, would it not?

A. I should think it might.

Q. When did you last visit the Utica Insane Asylum?

A. I cannot recollect the date.

Q. About how long ago was it?

A. It must have been three years ago, for I resigned from the Board of Charities three years ago.

Q. Did Dr. Gray have notice that you were to be there on a given day?

A. When I went there?

Q. Yes?

A. No, sir; I went without any notice.

Q. How long did you remain in the office of Dr. Gray before you commenced your travels through the wards?

A. Dr. Gray was not there; he was not at home.

Q. How long did you remain in the office before going on the wards?

A. I went immediately to the wards; I said Dr. Gray was not in his office.

Q. Some one was there to receive you, was there not?

A. Yes, sir; I presume so; we had official authority to go about the wards.

Q. Do you not remember whether some one did receive you or not?

A. Yes, sir; some one opened the doors and took us round.

Q. That was an orderly that opened the door?

A. Yes, sir.

Q. Who was it that received you in the reception-room or office?

A. I cannot recollect the name or any thing about it?

Q. Who went about the wards with you?

A. Various persons; Dr. Andrews went around with us, one of the attendants went around and Dr. Gray went round with us, during the three days we were there we were carried around by various persons; Dr. Gray was there, because I cross-questioned him, as I have testified, or questioned him.

Q. At your investigation, you at no time took evidence under oath?

A. No, sir.

Q. It was simple inquiries that you made?

A. Yes, sir.

Q. Do you say that there was no instance where a patient complained that they received injury?

A. No one complained to us.

Q. And still you inquired in every ward, did you?

A. No, sir.

Q. There were wards you did not inquire in?

A. Some wards we went through we did not.

Q. Do you remember which was the most disturbed ward in the Asylum?

A. No, sir.

Q. Do you remember the class of patients on ward two?

A. No, sir.

Q. Or on ward number one in the male department?

A. No, sir; I cannot remember any thing about the numbers of the wards at all.

Q. Do you remember what class of patients were on ward four?

A. I cannot remember any thing about the numbers of the wards.

Q. How many times did you visit the Asylum while you belonged to the commission?

A. I cannot tell you.

Q. About how many times?

A. I cannot tell you.

Q. Half a dozen times?

A. I presume as much as that.

Q. And at any time did you see a patient under restraint?

A. I cannot say that I did.

Q. You don't remember it?

A. I cannot say; I very likely did, but I cannot distinctly recollect; very likely, I might have.

Q. Do you remember now of seeing a patient under restraint?

A. I don't distinctly identify a case.

Q. Then of course you cannot state on what ward it was; did you visit the female department?

A. I have just stated that I visited the whole Asylum from top to bottom.

Q. I mean at each time that you visited, did you then visit the whole?

A. No, sir, I did not, not every time I visited the Asylum.

Q. Did you learn the names of any supervisors, or attendants?

A. I did, at the time.

Q. You don't remember them now?

A. None except Dr. Andrews.

Q. How many patients and attendants, outside of doctors — did the board of managers meet you at the Asylum at any time?

A. I cannot recollect that they ever did, not at the time I went there; I may have met some of the managers there, but not at the time I spoke of when I made the examination.

Q. Have you a personal acquaintance with Samuel Campbell — ex-Senator Campbell?

A. I cannot recall any such acquaintance; I have heard the name, but cannot identify the man.

Q. Then of course you don't remember whether you met him at the Asylum or not?

A. I do not, sir, I cannot state.

By Mr. Haskell:

Q. The last time you were at the Asylum was the time you made the investigation, which was the basis of the report that has been specified here?

A. I cannot say with confidence whether that was the last time; my impression is it was, but I am not certain.

Q. How long ago do you think that was?

A. I cannot recollect.

Q. How long would you place it?

A. It must have been four years ago, certainly.

Q. This investigation and report was entirely voluntary on your part?

A. No, sir, it was officially; I was appointed a committee by the State Board of Charities.

Q. But you stated that the charges by Dr. Tourtellot were withdrawn?

A. Yes, sir, they were withdrawn.

Q. But you still went on and made the investigation?

A. Yes, sir; we were directed to investigate the question, so far as we thought proper; these charges being withdrawn, we thought it proper to go personally, notwithstanding.

Q. Will you state briefly what was the character of the charges preferred?

A. I cannot; there were a great many of them; charges of financial maladministration against directors, the body of them; and of maladministration generally against Dr. Gray.

Q. In regard to his care of the insane?

A. The time is so long ago I cannot undertake to specify the details of the charges.

Q. But your general recollection is that they related particularly to the financial management?

A. Part did and part didn't; I think it covered both grounds.

Q. You directed your investigation at the Asylum particularly to the business management of the Asylum?

A. No, sir, to the internal management, and not the business management.

Q. And your investigation did not cover the business part?

A. It did not cover the management, or the action of the board of trustees, in their disposition of funds for building, or this, that and the other, but did cover the financial matters, as far as provisions and clothing, etc., were concerned.

Q. Did you consider the manner in which they made their purchases?

A. Not at that time; we did at other times.

Q. Subsequently?

A. No, sir, I think previously; allow me to say that while examining the Batavia Blind Asylum I came in contact with the question of purchases very much in detail, and made a report at that time to the State Board of Charities, recommending, as a special feature, changes in the mode of making purchases for all State institutions; that was accepted by the board, and subsequently, a year or two afterward, a plan was carried out in accordance with which purchases should be made by all institutions of the State.

Q. How did that affect the Utica Insane Asylum?

A. It affected it as it did the others; but before that plan was

applied I retired from the board; if a man wanted to buy — if the Asylum want a certain number of pieces of sheeting or blanketing, we suggested that they send for proposals to three or four different dry goods dealers, asking them to send prices and samples, and telling them they would pay for the samples if not returned.

Q. And, generally, that same proposition in regard to supplies?

A. Yes, sir, supplies at large, as far as it was applicable.

Q. Do you know whether the Utica Insane Asylum purchased their supplies on that method of obtaining bids?

A. I cannot say, because before this plan I recommended —

Q. Did you ever investigate to know whether they did or not?

A. Before this plan which I recommended went into action, I resigned.

Q. I mean before that time, do you know whether they did or not?

A. The principle upon which I made that report and recommendation was this, that it had been the custom of all State institutions to buy locally to a very considerable extent; I consider it liable to abuse, and I presume they did the same at Utica as they did anywhere else.

Q. Did you ever investigate to know whether they did or not?

A. No, sir; I took up very carefully the mode of purchasing at Batavia, but not at Utica, only that I had the general impression that the purchases were made the same way as they had been made at Batavia.

Q. Who, besides Dr. Gray, did you converse with in regard to the institution so far as its management was concerned and how it was carried on?

A. With Dr. Andrews particularly.

Q. Any other persons?

A. I asked questions of persons about the establishment whose names I cannot recollect.

Q. And this examination of Dr. Gray and Dr. Andrews and others occupied how long?

A. Three days, as I stated.

Q. How long were you in making a tour of the wards?

A. I can't remember just how long it did take.

Q. Did you accomplish that tour of the wards in one day?

A. We made several different tours for different purposes; I think we spent one entire day in the wards as near as I can recollect.

Q. Do you recollect the manner in which attendants were employed at the institution at that time?

A. They were in care of the wards.

Q. How were they employed; what was the contract of employment?

A. I can't recollect it; I asked very particularly at the time, I know, I asked the conditions on which they were employed, and the specific contract which they made, but I can't recollect the de-

tails of it, only this, that any violation of those rules, I understood, subjected them to immediate expulsion.

Q. Do you now recollect what the system was then in vogue at the Asylum for discovering whether the rules were violated or not?

A. It would be impossible for me to answer that question, generally — any disturbance was investigated by one of the physicians.

Q. That is your general recollection?

A. Yes, sir.

Q. But you do not recollect distinctly, as I understand you, what particular system was then in vogue, in regard to discovering violations of the rules?

A. No, sir; I don't remember any particular system about it, only the physicians all visited the wards twice a day, if I recollect right, and in case of any disturbance, the attendants called one of the physicians.

Q. How much of Dr. Gray's personal attention to the patients did you understand that he gave?

A. I can't answer that question; I don't know; I never did know precisely how much time he spent in the Asylum.

Q. And without knowing how much personal attention he gave to the patients, do you think you could fairly form a judgment as to how he was discharging his duties?

A. The physicians and attendants were equally competent with Dr. Gray for the details; I want to say in answering that question, a physician like Dr. Gray, having charge of so great a variety of interests, finds it necessary to have, and they always do have, a physician substantially equal in professional reputation to himself; Dr. Andrews, now in charge of the Buffalo institution, was then second in charge, and I understood was there with him at the time.

Q. That is not quite responsive to my question; the stenographer will read the question.

[Question read.]

A. The statement I made was that the institution was well administered by him, but how much time each individual person gave to the administration of affairs I can't tell, and I don't know.

Q. And is it your recollection now that you did not find out?

A. I cannot tell whether I did or not; my only point was to know that the institution was well administered; that was the objective point.

Q. Do you think that a physician who is the superintendent of an institution of that character should devote his time principally to the care of patients, or should he have charge of the business details of the institution?

A. My own impression is, and always has been, that so far as possible the business details of an institution of that sort — purchases and such like — should be carried on by a steward or clerk, so as to relieve, except for general supervision, the physician in charge.

Q. So that he would be able to devote more time personally to the care and welfare of the patients of the institution; if the su-

perintendent of the institution gave very little time personally to the care and welfare of the patients, do you not think that fact would have a bad influence upon the attendants?

A. My impression is that it is better for the superintendent of an asylum — if it could be done, if the appropriation was large enough — to have his attention directed mainly to the medical supervision of the establishment; if the State puts upon him both functions, the financial function and the medical function, he must discharge them in the best way he can.

Q. How old are you?

A. Sixty-nine.

Q. How long have you known Dr. Gray?

A. I cannot recollect, it must have been something like fifteen years.

Q. Are your relations with him very friendly?

A. Not particularly; I began my work in the Board of Charities with perhaps something of a prejudice against him; we have never been on intimate terms, although we never had any disagreement; we never have been on intimate terms.

Q. How is it at the present time; do you still entertain that prejudice that you originally had against him?

A. My intercourse with the institution, and knowledge of the institution led me to set aside my prejudices which I had regarding the internal administration; my first knowledge of Dr. Gray was through an old friend, Dr. Wilbur, who was a violent enemy of Gray's, and that accounted for my prejudice.

Q. Does that prejudice still exist?

A. No, sir; it does not; not that I indorse every thing Dr. Gray says or does, but the prejudice passed away.

Q. It was not a personal prejudice?

A. No, sir; a prejudice against his administration.

By Mr. Rice:

Q. Dr. Anderson, do I understand you to say that the appropriation for this Asylum is insufficient?

A. No, sir; not under the present law.

Q. You consider that is sufficient?

A. I think the appropriation sufficient under the present system, but if the appropriations were large enough, better attendants could be employed, and a division could be made between the medical superintendent and the purchaser of supplies, but it would require two persons in the administration, possibly, to do the work now done by one, and larger salaries to be paid to the attendants in the wards.

Q. You think then that the attendants should have larger salaries and a better class of people be employed?

A. Yes, sir, I do; that is to say — that is the line in which improvements are to be made in our asylums beyond any other.

Q. I understand you to criticise the Legislature, or the appropriating power, for the amounts given to this Asylum; do you mean that?

A. No, sir; assuming that the system is right, the appropriations have been generous.

Q. Do you mean to say that from the appropriations they now have that they cannot employ a better class and a higher paid class of attendants?

A. My impression, from the knowledge I have got, is, that they get the best class of attendants possible for the salaries they are able to pay.

Q. Suppose you knew the fact that within a year past they have paid $1,300 for a bull and two cows, what would you say about the appropriation?

A. It would depend on what use they made of them.

Q. For any purpose?

A. If they wanted them to go into breeding, it might be a good investment.

Q. This is a charitable institution; I ask your judgment of such a purchase?

A. My impression is that they had better buy cheaper cows and cheaper bulls.

Q. And have a better class of attendants?

A. Yes, sir.

Q. How did you learn the character of the attendants that were in the institution at the time you visited it?

A. By looking at them, and talking with them, and inquiring of the physicians; my statement about attendants refers to institutions all over the State.

Q. Your knowledge of the character of the attendants is confined to the statements made to you by the physicians of the Asylum, and your personal interviews with the attendants?

A. Yes, sir; and from accidents that are taking place on account of the moral incapacity of the attendants employed.

Q. It was not stated to you that attendants had from time to time seriously abused patients, was it?

A. It was not put in that form.

Q. No such fact was brought to your knowledge?

A. It came in this form; whenever an attendant in any way injured or abused a patient he was instantly discharged; I understood that to be a standing rule.

Q. I understood you to say that the attendants of the Asylum seemed to be familiar with the rules and regulations there?

A. I do not remember saying that; I supposed that they were; that when they were employed they were employed under certain conditions, a contract, and that they were made familiar with the idea that they would be turned out or discharged, if they injured a patient.

Q. Then it is merely a supposition on your part?

A. It was so stated to me by Dr. Gray, when I examined him.
Q. What was so stated to you by Dr. Gray?
A. That the rules were read to them.

By Mr. HASKELL:

Q. Do you know what salary Dr. Gray receives?
A. I do not.
Q. Do you know what salaries are paid to the assistant physicians?
A. No, sir.
Q. Do you know what salary is paid to the steward?
A. No, sir.
Q. Then you do not know whether sufficient salary is paid to the steward to employ a man who can attend to the business transactions of the institution, and thus relieve the doctor from that branch of the management?
A. No, sir; I do not know.
Q. And you do not know whether sufficient is paid to Dr. Gray so that he could afford to devote his whole time, substantially, to the personal care and attention of the patients?
A. No, sir; I take it for granted it is, but I do not know what his salary is; I don't know that I ever knew; I only know that his salary is not as large as the income of a physician of his reputation in any of our cities.
Q. Do you not think that Dr. Gray, or any other superintendent of a charitable institution who retains the place should devote his entire time to the personal care and welfare of the patients in the institution?
A. I think it would be well; there is a question of difficulty comes up there; if he is summoned as an expert, having knowledge of insanity, by courts, I suppose he is bound to go.

By Mr. OLIN:

Q. I understood you to say that you approved of the cribs as places of confinement for excited persons?
A. Yes, sir; under proper — under the supervision of a physician, of course.
Q. Do you know whether they are used in all insane asylums in the State, or not?
A. They were; whether they are now or not I cannot tell.
Q. Did you ever visit the Kings Connty Lunatic Asylum?
A. No, sir; I never did.
Q. Do you know whether the crib is employed there or not?
A. I do not.
Q. Is the crib employed at Buffalo?
A. I don't know.

By Mr. GOODWIN:

Q. You have made special exertions, while you were a member of

the Board of Charities, to secure to the insane all the freedom and comfort possible, have you not?

A. Yes, sir; I wrote a report on that subject, specially.

Q. State what you have done in that regard?

A. I formulated this idea that, — patients in insane asylums should have good air and exercise, and freedom, consistent with safety, as conductive more to their improvement than medicine.

Q. I will ask you this question: if the superintendent of an Asylum has reported to him daily the condition of the patients on the ward, and has knowledge of the fact that his assistant visits each ward in the institution twice a day, in your judgment is it necessary for that superintendent to visit the wards daily?

A. I suppose not; I suppose he would be in the condition relatively with other physicians, in the condition of a consulting surgeon or physician in difficult cases.

Q. Upon the supposition that Dr. Gray is a distinguished member of his profession — a distinguished alienist — is it his duty to give the benefit of his knowledge to the profession and to the public, if not inconsistent with his duties as superintendent?

A. I suppose it is his duty to write the results of his investigations and experience in his reports to the medical journals for the public at large.

Q. Would he be justified in making visits to persons outside of the Asylum, provided it did not interfere with his duties as superintendent?

A. I suppose he would if it did not take him into the condition of a practicing physician in special cases.

By Mr. Rice:

Q. Suppose it did interfere with his duties, what would you say then?

A. I should say that he ought to devote himself to the Asylum.

Q. What would you say as to the propriety of his giving lectures in the city of New York before a medical college — a course of lectures during the winter. Do you say that is consistent with his duties at the Asylum?

A. I should hesitate to answer that question, because I am not a physician, but my impression is against it.

Q. What do you say of the propriety of his attending the trial of a lawsuit, over the contest of a will, in the city of New York, and acting as an expert under the employment and pay of one side or the other?

A. My impression is that he ought to do as little of that work as he conveniently can; but where medical skill is required, I suppose his duty to the public at large would require him to give a certain degree of attention to that sort of thing, but I should think as little as possible.

Q. What do you say as to whether that sort of business is consist-

ent in your judgment with his duty as superintendent of the State Lunatic Asylum?

A. I think — well, any absence of that kind ought to be reduced to the lowest point possible.

STEPHEN SMITH,

Sworn and examined, testified as follows:

Mr. GOODWIN — I make the same request with regard to the examination of Dr. Smith.

By Mr. GOODWIN:

Q. Where do you reside?

A. New York city.

Q. What is your occupation?

A. Physician and surgeon.

Q. How long have you been physician and surgeon?

A. Over thirty years.

Q. Please state to the committee what positions you have held as a physician?

A. Professor in the University Medical College, surgeon to Bellevue hospital, Charity hospital and St. Vincent's.

Q. Have you been connected with a sanitary commission?

A. Yes, sir.

Q. Are you connected, or were you, with the National Board of Health of the United States?

A. I was.

Q. Also board of health of New York?

A. Yes, sir.

Q. Are you now in connection with Bellevue hospital?

A. I am, as consulting surgeon.

Q. When were you appointed Commissioner in Lunacy?

A. In May, 1882.

Q. Please state what your duties are?

A. To examine into the condition of the insane and the institutions in which they are kept in the State.

Q. How often do you visit the State asylums?

A. I have endeavored to make it a rule to visit them every quarter.

Q. Have you visited all of them?

A. Yes, sir.

Q. And are all of them governed by the same laws and statutes?

A. Not all; there are two — the Asylum for Insane Criminals and for Insane Emigrants; other than those they are under one form of government, and the same rules and regulations in general, although they vary in the different asylums.

Q. Are the duties of the superintendent the same in all the asylums?

A. It is the same, as I understand.

Q. Can you tell the committee how often you have visited the asylums generally?

A. I have visited — I think the least has been three, and the most has been six times in the year; it might vary a little, according to circumstances.

Q. Have you visited the Utica Asylum as frequently as the others?

A. Yes, sir; I have visited that as frequently as any.

Q. Can you give how often you have visited the Utica Asylum since your appointment?

A. I visited it during that time — a little over a year and a half — I visited it six times.

Q. How much time have you spent in your visits to Utica Asylum?

A. Two and three days.

Q. Have you conferred frequently with Dr. Gray, the superintendent, in regard to its management?

A. Yes, sir; I have.

Q. Do you know the medical staff of that institution?

A. Yes, sir.

Q. Will you state to the committee its efficiency, to your knowledge?

A. I regard them as very capable medical men, and compared with other asylums, they have ranked as high as any asylum in the State as a body.

Q. There is no asylum in the State, in your judgment, which has a more efficient medical administration?

A. I think not, in view of the capability of the medical men.

Q. If you visited the wards of that Asylum, please tell the committee in what way you have visited them?

A. My method of visitation has been to endeavor to look into every thing connected with the internal affairs of the Asylum at each visit; sometimes I have devoted most of the time to examination of patients and their complaints, and at others to other special subjects that have been brought more particularly to my attention; but the rule I have pursued has been to never give notice of my coming; I always go unexpectedly and at times go at once into the wards, at others examine the records first, and other matters that I have to inquire into, and while I am there to visit at all hours of the day and night; frequently alone, frequently with the physicians, or sometimes with physicians and other times with the matron and supervisor, etc.; in such way as would as far as possible give me a thorough knowledge of the affairs of the institution and its every day management.

Q. Have you visited the wards at night?

A. I have.

Q. Alone?

A. Yes, sir; and early in the morning, before breakfast, alone.

Q. You have visited them at all hours?

A. Yes, sir; I have; at all hours in the day.

Q. And either alone, or with attendants, or with physicians, or with the superintendent?

A. Yes, sir.

Q. Have you talked with attendants and supervisors in regard to the condition of their respective wards?

A. I have.

Q. And in regard to their duties?

A. Yes, sir.

Q. In regard to patients?

A. Yes, sir.

Q. Have you seen patients alone and talked with them?

A. Yes, sir.

Q. Have you listened to their complaints?

A. Yes, sir.

Q. And investigated them?

A. Yes, sir.

Q. Was there any complaint made at any time that you have not investigated?

A. I think not; I have endeavored to let nothing pass unexamined.

Q. Has the superintendent brought to your notice certain cases of patients which he desired you to see and who desired to see you?

A. Yes, sir.

Q. Persons who have told him they desired to see the Commissioner?

A. Yes, sir.

Q. And persons whom he has asked you to see upon complaints having been made?

A. Yes, sir.

Q. Has he sent letters written to you by patients?

A. Yes, sir.

Q. Now, on the question of the supervision of correspondence by officers of the asylum, please state to the committee your views in relation to that subject?

A. I can state my views; the superintendents put aside all the correspondence they do not send; I have reason to believe that, since I have inquired into it, all the correspondence has been saved, and when I visit I look it all over by myself; I think, during the year and a half I have been engaged in it, I found but one letter that I had any question about the propriety of not sending, and that, on inquiry, I found was a person who had been habitually writing to one person in a village, and the superintendent could not find that any such person lived there; no returns were made to the letters and the letter was retained; I have found the correspondence, a lot of it, incoherent as few marks on paper; some patients will write on bits of paper, I presume I have a bushel; all that has been carried home, a great deal of it has been sent that is entirely incoherent to any-

body, even though written so as to be read. A great many of them are mere marks and figures, etc., inclosed in letters to be sent away. Then there are other letters I find are very indecent, vulgar and profane, and very little coherency about them. For instance, I find patients sending out for poisons to make use of in the Asylum, and in several instances find correspondence going on with persons outside of a very lewd character, and in one instance shockingly so, disgutsingly so; in that case correspondence had been allowed to run on. The character of the patient — a lady — being such as to disarm any suspicion of the nature of the correspondence she was having carried on; it was being carried on with a gentleman outside who was endeavoring, in various ways, to get her outside of the Asylum and have some meeting with her. That was a perfectly indecent one — obscene — the letters he wrote to her and the figures he drew were shocking. I don't know that letters are retained, so far as my examination goes, no letter has ever been intercepted that was sent to me, and has never been unsealed until I unsealed it; and letters complaining bitterly they are forwarded and I take those with me when I go round and make as full and careful inquiry as I can into the nature of the complaints. I am not prepared to say that the correspondence of the insane is under a right kind of supervision, but my belief from examination is, that it should be supervised by some one, and that the superintendents in this State, as far as I can discover, are very conscientious in that matter. I have met a great many patients who have recovered, and have written these letters in their furious conditions of mind, and when recovered expressed to me the greatest horror to have letters sent that they recollect to have written; that they had a dim recollection of having written.

Q. Then you think there should be a supervision of the correspondence in the Asylum?

A. I do; I think it would be in the interests of the patients themselves and of their friends; a great many efforts have been made to control it; in Massachusetts there is a box hung up in every asylum and patients are allowep to put their letters in there, and it is only opened by a State officer who goes round once in so long and takes the letters out; the result of that has been an entire failure; pieces of paper and tobacco are put in, but scarcely ever a letter.

Q. (Mr. Haskell.) Do you understand by that that the correpondence of the insane is stopped by that means?

A. I don't think they care, they are indifferent about making use of that method; I know an insane woman in an asylum, a very capable lady, a good writer; she writes on some days as many as thirty letters, very lengthy; she cares nothing about their being sent; she gives them to me in bulk and throws them out of the window and anywhere; she is under the impression that she is

managing a large telegraph company and that these are her methods of distributing letters; some are very well written, but on some foreign subject.

Q. Have you discussed this question of letters being sent by patients to you with the superintendent?

A. I have.

Q. And did he make the proposition to you that they should be sent?

A. I don't know; I think they have always been sent.

Q. Have you found any difficulty at any time in getting at matters relating to the Asylum, patients' records or any thing of the kind?

A. No, sir; I think not.

Q. Has any and all information you desired been furnished you by the superintendent or his assistants?

A. I think so; I never met any obstruction of any kind.

Q. Have you seen, when at the Asylum, the records of accidents and restraints?

A. Yes, sir; I always examine them.

Q. Have you inquired into them after examining the records?

A. I have.

Q. Have you seen the record of injuries that is kept in that Asylum, the record-book at Utica?

A. Yes, sir.

Q. Have you made investigation of the injuries recorded in those books?

A. I have, a large portion of them.

Q. All such as you thought were worthy of investigation?

A. Yes, sir.

Q. Have you examined the records of medicines?

A. Yes, sir.

Q. Please state to the committee what you have done in that regard?

A. The feature of that, that I have given most attention to, is the giving of narcotics to patients to make them sleep, about which there has been great discussion; I have endeavored to see all the patients that were under that kind of treatment, and to be familiar with the progress of their cases, to see how far they were wrongly dosed, or over-dosed, in all the asylums; I have made it a point of study.

Q. Outside of the wards, have you visited the store-rooms?

A. Yes, sir.

Q. Have you visited the apothecary shop?

A. Yes, sir.

Q. And the kitchen and barns?

A. Yes, sir.

Q. And every part of the institution?

A. Yes, sir.

Q. What condition have you found them in?

A. Usually good; I have seen nothing wrong about them.

Q. Have you examined into the quality of the food?

A. Yes, sir.

Q. And the quantity?

A. Yes, sir.

Q. How did you find that?

A. I have always found it good, and on the whole, I think the largest supply of food of any asylum I have ever visited.

Q. Have you investigated the distribution of food?

A. Yes, sir, I have seen it distributed.

Q. Have you investigated the subject of feeding the patients; I mean in reference to feeding by the stomach tube?

A. I have seen that, and examined a good many cases.

Q. Who does that feeding?

A. The physicians.

Q. Do you know of any cases of accident from that system of feeding in the Utica Asylum?

A. No, I don't recollect any.

Q. Have you given the subject of heating and ventilation of that Asylum any attention?

A. Yes, sir; I went through it once, very thoroughly with reference to that matter.

Q. What is its condition in that regard?

A. At that time I regarded it as the best heated and the best ventilated institution that I knew of; it is ventilated by blowing air in by a fan, and in all parts of it, then the ventilation was admirable; the heating is also good, I believe.

Q. Have you ever been on a ward in that Asylum that was improperly heated?

A. No, sir; I don't know that I have.

Q. Were you ever on a ward in which you regarded as being too cold for the health and comfort of the patients?

A. No, sir; some of the wards are not heated as much as the main wards, but they have always been comfortable when I was there.

Q. Did you ever have complaints from attendants or patients, in reference to the coldness of their wards; that they were too cold for comfort?

A. I think not; I don't recollect any; in fact I always regarded it as rather overheated in the main wards.

Q. How is the temperature of the wards; is there much difference in them?

A. I think those in the older building were warmer than those in the out-buildings.

Q. Have you examined into the system of baths, and water-closets and such arrangements?

A. Yes, sir.

Q. How do you find them?

A. They are good, considering the time they were built, the best

ideas that architects and engineers had at the time; but they are very defective in my estimation, as a system of getting rid of the waste and foul maters of the Asylum.

Q. What are they as to cleanliness?

A. Always clean; I never saw them when they were not as clean as they could well be made; they are not always free from odor; some of the floors are wood, and they are liable to get saturated, and there is a urinous odor about a water-closet; I recollect but one that I thought was in bad condition, I talked with Dr. Gray about it, and there has been some change made in that part of the building or was to be; that water-closet connected with it was to be removed, and the room devoted to some other purpose.

Q. (By Mr. HASKELL) —When was that?

A. I think that was this last spring.

Q. (By Mr. HASKELL) — Had the changes been made that you just spoke about?

A. The last time I saw it it had been cleaned out and was in much better condition, but the alterations, or changes in the room had not been made, but it had been all cleared out.

By Mr. GOODWIN (resuming):

Q. Have you examined into the character and quality of medicines and system of medication there?

A. I have inquired into the system of medication; as to the drugs, I have simply seen the apothecary shop.

Q. You never had occasion to find fault with their quality?

A. No, sir; I judged more by the manufacturer, than any thing else; you cannot tell about drugs, they are very often liable to be adulterated.

Q. Have you talked with the superintendent about the duties of the officers of that institution, including assistants, attendants, and those employed about the establishment?

A. Yes, sir.

Q. And about patients?

A. Yes, sir.

Q. State to the committee, if you please, how familiar he has been with those matters?

A. You refer to Dr. Gray, the superintendent, I suppose; a good deal of the time I have been serving in this capacity, Dr. Gray has been incapacitated by injuries; when I first visited the Asylum, he was suffering from this gun-shot wound; I think I visited three times before he returned home, he was then very much out of health. There were several cases in the wards that attracted my attention; their complaints and condition I spoke about, and I remember he was very familiar with them, and I was very much surprised because I knew he hadn't been on duty steadily during that time, but it seemed he gave me all the information that one would who was familiar with the cases; since that occasion, when I have visited, he seemed to be very familiar with all the cases, especially the more important ones of the institution.

Q. Showing a familiarity with all the cases?

A. It seemed so; I questioned particularly to see how familiar he might be with patients; with regard to Utica Asylum, I heard patients complain that Dr. Gray didn't visit them frequently enough; but I would say, that is a very frequent complaint in asylums, and in one where I know, the superintendent himself goes round three times a day and knows his patients as familiarly as a man could know his family; but the patients feel they don't get attention enough or something of that kind.

Q. Have you examined into the matter of extra diet at the Asylum?

A. Yes, sir; I have seen the diet lists.

Q. And of wines and stimulants?

A. Yes, sir.

Q. What are their character?

A. I think it is very liberal at Utica; a liberal supply.

Q. Good?

A. Yes, sir; good quality, at least — good for any well-conducted hospital — for hospital purposes.

Q. Have you examined any cases in that Asylum committed there as criminals?

A. Yes, sir.

Q. Upon whose request have you examined them?

A. Upon the request of Dr. Gray, and upon the request of a judge in one case.

Q. How have you found the cases; were they insane?

A. Two had recovered and were examined with reference to their discharge, and one for a transfer to the asylum at Auburn.

Q. Did you examine in the case of Mr. Silkman?

A. Mr. Silkman came into the room or wanted to have a hearing; always, in these cases, I had a room by myself and had them come in and make their statements.

Q. Did you examine the case of Stanton?

A. Yes, sir; I examined him two or three times.

Q Did you examine the case of Miss Lathrop?

A. I have heard her statement fully, and examined her.

Q. We want all the light and information we can get upon the subject of Miss Lathrop; will you be kind enough to state what her complaints were, and the nature of them?

A. She made two complaints, one was, that her correspondence was not sent; I would say, I received the first letters — I received letters from her by the way of Syracuse, the first letter she sent me, and that had been sent out by a visitor, I should say; Dr. Wilbur sent them and told me she sent them to him, and he to me, they were letters addressed to me; then she made a series of complaints, and the chief one in regard to herself, the one she attached most importance to, was in regard to her supposed intimacy, or her intimacy with doctors on the —

Q. (By Mr. Rice.) Do you put in the word "supposed" or did she?

A. I do, I use that word.

Q. (By Mr. Rice.) She made the charge directly, didn't she?

A. Yes, sir — well — her statement to me was, that there was a prevailing opinion among the women of the ward — or at least it was a prevailing opinion that the doctors took liberties with the women, and mentioned that there were two or three that were especially talkative on that subject, and that, it was in that way her own suspicions were aroused, that there might be improper liberties taken with her; the statement to her was, that they etherized the patients through the space under the doors, and she asked me, if I had ever noticed them, I said "yes"; she asked me what I thought they were for I said, "to ventilate — air the rooms;" she said (and this is as near her language as I can give it)—she said, "did you ever notice those spaces under the door"; I said "yes"; she said, "do you know what they are for"? I said, "yes, for heating the rooms, the hot air is supplied in the hallway through radiators, and these spaces are left open, for the free flow of hot air into the rooms;" she said, "no they are not used for that purpose"; then I inquired what they were used for, and she said the way the doctors used that was as a means of etherizing, putting the patients under ether, so that they could come into the rooms, and find them under the influence of an anæsthetic, and then of having improper relations with them; then she told me of her experience about it; that on three occasions she believed they had come into her room, in that way, and had.

Q. (By Mr. Rice.) Now, let us see; did she use the word "believed," or did she say that she knew it was so?

A. Oh, well, she said she.

Q. (By Mr. Rice.) She said it was so, did she not?

A. No, sir; I do not think she said so, because I questioned her thoroughly about it, and she said, "is it possible I am deceived about it? Is that a delusion?" She stated that she woke up one night and there was a smell of ether in the room; and she was very positive; and she had some blood on her clothes and some strange feelings about her hips, etc.; and then her suspicions — the conversation they had had was brought to her mind so strongly, that she believed they had been in her room, and that improper liberties had been taken with her.

By Mr. Goodwin (resuming):

Q. You were going to state a conversation in which, you say, she asked if she had been deceived?

A. She wanted to know what I thought of it; I told her, in the first place, that it was impossible to etherize her while she was asleep; in the second place, it was impossible to etherize her through that hole; I did not believe that ether enough could be blown through there, blowing it in all the time, to etherize her, for I had worked over patients in small rooms like that, by the hour, where ether was freely

given, and the room was saturated with it; I sometimes got a headache and nausea, but that was all; she replied to that, "is it possible that I have been — that that is a delusion — that I have been deceived?" I told her I thought it was, that she could not find a physician who was accustomed to the use of ether that could see the least credibility to such a statement as regards the possibility of her being brought under the influence of ether, and ravished under such circumstances.

Q. Now, doctor, is that a common delusion in asylums, in females?

A. A good many nervous and excitable women suffer from it — it is a sexual excitement.

Q. Believing that they have been ravished?

A. Yes, sir; to such an extent that I would not, in my visits — I would not, I never think of allowing myself to be in a room alone with some — a great many patients have sexual excitement, that leads to the delusion that they actually have sexual congress with men that they see, or even think of; the last time I was at Utica, I found one of those patients in that state that she was having, as she supposed, connection with some man she knew in the western part of the State, and that it was a nightly affair with her; such delusions are common in certain cases, it is generally with young ladies with disturbed menstruation; they have these delusions, they are extraordinary.

By Mr. Haskell:

Q. Do you know whether there was difficulty of such a disturbed nature in the case of Miss Lathrop?

A. She stated that she did have, and that several other women had it, and that they always alleged, whenever they had that, that the doctors had connection with them, and that they were having abortions, she mentioned that to me.

Q. Do you recollect positively that she stated that her menses had been disturbed?

A. I won't state positively that she did as to herself.

Q. Then do you know whether as a fact there was or not any disturbance in her menses?

A. No, sir, I don't recall that statement in regard to herself.

By Mr. Goodwin (resuming):

Q. You regarded these statements of Miss Lathrop's to be delusions?

A. Well, I don't know as it was a delusion — it was a misapprehension, I think — well, her attention had perhaps been called to it by two or three women that she alluded to, who talked to her a great deal about it; she is a lady of great refinement and intelligence, and nervousness; I think her feelings had been wrought up until she was in that state of nervous excitement and apprehension.

By Mr. Rice:

Q. What evidence was there of that? Why do you say you think it was a misapprehension on her part? What was it you saw about her case that leads you to say now that it was a misapprehension?

A. I say it is an impossibility that the thing could occur.

Q. A physical impossibility?

A. I was trying to say that I would not say it was a delusion, I was trying to explain it otherwise.

Q. Do you say it was a physical impossibility?

A. Yes, sir.

Q. Why, in your opinion, is it a physical impossibility?

A. Well, you could not etherize her in that room in that way.

Q. If a person was by the bedside, could it be done?

A. No, sir, and simply because ether almost strangles a person administered in that way at the outset, and they wake up; several efforts have been made to etherize sleeping patients but without success, you can give them chloroform, but not ether.

Q. Could any alnalsthetic be given during sleep to deprive a person of consciousness?

A. I think there has been but one instance where chloroform has been supposed to have been successfully used, that is all; that was in the case of a child; it has been tried a great deal and has been regarded generally in the profession as an impossibility; I believe recently there have been one or two cases where it has been reported to have been successful; but ether is different — it strangles.

By Mr. Haskell:

Q. Do you regard it as impossible that persons could be placed under the influence of chloroform during sleep?

A. I say that there have been two or three instances recently, but until lately it has been regarded as impossible.

Q. Are you not aware that persons have been chloroformed in cases where houses have been burglarized, or do you regard that as impossible.

A. I should regard it as impossible; at least, I should want the strongest evidence that it was correct, efforts have been made so many times and have failed.

Q. (By Mr. Olin). I would like to ask you, doctor, if, as a matter of fact, there is any anæsthetic that could be injected into a room so as to put an occupant of the room into unconsciousness?

A. I do not think there is; I don't know but with a bellows you might blow enough ether to do so, but I can take my own experience; I have been in a room saturated with it, where the ether is open all the time, going through with long operations.

Q. (By Mr. Rice). But you say that when a person is asleep it

cannot be given under any circumstances so as to destroy consciousness?

A. No, sir, it wakes a person immediately with strangulation — a suffocation — they wake up with a suffocation, that is with ether; chloroform is different.

By Mr. Haskell:

Q. Is there any anæsthetic that could be given to a person standing by the bedside of a sleeping person that would render that person unconscious?

A. Chloroform is the only one that is ever believed to have been successful.

Q. Do you regard the presence of blood upon her clothing as also a delusion?

A. Well, I don't know; no, I should not think that was a delusion.

Q. And her feelings, as she described them, do you consider those also delusions?

A. Well, I should want to know if she was menstruating properly; if she was not, she might have those pains, and also the blood; that could be accounted for; in the cases I mentioned, irregular menstruation was regarded by them as a positive sign of having had liberties taken with them.

By Mr. Goodwin (resuming):

Q. Have you ever had complaints made by patients with reference to abortions being committed on them?

A. Yes, sir, I have had such instances brought to my notice.

Q. Is that a common complaint?

A. Not very common; it has been made, that they have taken medicines, and that the medicines were intended for that purpose.

Q. And those complaints — there was no foundation for them?

A. No, sir, I saw no evidence of it.

Q. Did you investigate the complaints at the time they were made by different people?

A. I have in regard to the medicines being given, and of the reasons given.

Q. And found no truth whatever in the representations?

A. No, sir, I think I have found no evidence of an instance in which medicine was given to procure an abortion.

Q. (By Mr. Haskell.) Did you make any investigation of the two specific instances that Miss Lathrop called your attention to in regard to a young girl in the institution?

A. No, sir, I do not think I did; there were three or four on that ward that made similar complaints; whether those were the ones she alluded to, I cannot recollect; it is a subject that I have investigated a good many times.

Q. Be kind enough to state to the committee about these impressions; whether or not they are usually effaced after recovery; impressions of having been etherized for immoral purposes; whether such impressions once obtained are easily effaced from the memory?

A. No, sir; I think they never are.

Q. Is it a common thing for persons who are suffering from that delusion at any time to honestly believe that such were the facts?

A. Yes, sir; I think nothing is more honestly believed by patients than those impressions.

Q. Have you found in the Lunatic Asylum at Utica any person that was illegally committed or detained there?

A. I have always found their commitment papers correct, and I always examined those.

By Mr. HASKELL:

Q. Did you examine those of Miss Lathrop?

A. I did if she was commited while I was — since I was appointed.

Q. You do not recall any thing particular about them?

A. I recollect her case.

Q. You do not recollect making an examination of her papers?

A. No, sir; I cannot say that I recollect examining them.

Q. Do you recall that you ever saw her papers?

A. No, sir; I do not recall her papers particularly.

By. Mr. GOODWIN (resuming):

Q. After you were appointed Commissioner were you called upon to act in connection with the Attorney-General in the examining of the law relating to lunacy in this State, with a view of ascertaining whether it needed any amendment or changes?

A. Yes, sir; I was.

Q. Please state briefly what was done by that commission?

A. The laws were revised and a copy of the amendments and revisions were sent to the Senate, from which the resolution emanated; that was last year that was done.

Q. Have your recommendations become law?

A. No, sir.

Q. They have not been acted upon by the Legislature?

A. No, sir; they have taken no action on the report yet.

Q. From your general experience as Health Officer and as Commissioner, examining into all the institutions in the state, have you suggested any changes or amendments as to their working?

A. I have made suggestions to the superintendents.

Q. Have you examined into the scientific work of the Utica Asylum?

A. I have; I have regarded it as very important and very successfully carried out.

Q. How is it in reference to the application of the microscope in the investigation into the condition of patients?

A. It is good and very useful, I think, and very important in every large institution for the insane.

Q. Do you regard the examination of urine as important?

A. Yes, sir; I do regard that as an important feature.

The further examination of Dr. Smith was then postponed until Monday afternoon next, March 24.

Adjourned.

ALBANY, *March* 21, 1884.

Pursuant to adjournment the committee met in room "B," New Capitol, at three o'clock, P. M.

Present — Messrs. HASKELL, RICE and BROWN.

A. T. GOODWIN, counsel for the Asylum.

Proceedings continued as follows:

SAMUEL O. VANDERPOEL,

Sworn and examined, testified as follows:

By Mr. GOODWIN:

Q. Where do you reside and what is your profession?
A. I reside in New York and am a physician.
Q. How long have you been a physician?
A. Between thirty-five and forty years.
Q. Are you connected with any hospital at the present time?
A. I am consulting physician of the State hospital at Ward's island.
Q. How long have you been such?
A. I cannot say, I think it is about a year and a half.
Q. Have you been health officer of the port of New York?
A. Yes, sir, I have for eight years.
Q. Have you held any other official position in the State?
A. Several; I was surgeon-general under Governor King and also under Governor Morgan during the war.
Q. Have you been connected with any hospital in the city of Albany?
A. I have been visiting physician and consulting physician to both the hospitals, the City hospital and St. Peter's.
Q. Were you ever a manager of the State Lunatic Asylum at Utica?
A. Yes, sir; I have been on the board of management.
Q. When were you appointed?
A. It was after Doctor Townsend's death, in the fall of 1867, I was appointed to take the vacancy made by the death of Dr. Howard Townsend of Albany; I do not remember by whom I was appointed.
Q. How long did you continue a manager of the Asylum?
A. Until within about a year since; I must have been a manager fourteen or fifteen years.
Q. Do you reecollect whether you attended all the annual meetings of the board during the time you were manager?

A. I think there was one while I was health officer, while I had sickness in my family and I could not get there, I don't remember what year it was.

Q. And you do not remember of being absent at any other annual meeting?

A. No, sir; I attended at different times quarterly meetings, but not regularly, my meetings were intended only for annual meetings, but I have been, I have attended quarterly meetings.

Q. State generally about what time you, living away from Utica, would arrive at the Asylum, and how long you would stay?

A. It was always my practice, I do not recollect any time now that I did not usually, I generally went up the day previous to the annual meeting and remained until either the close of the following day, or sometimes the day after, that was my rule when I was health officer.

Q. State what you did as manager in visiting the wards of that institution?

A. I cannot except in a general way, it was always understood by the board from the time of my appointment, that my functions in the board were always rather of a medical man than a business man; I took very little interest in the business management of the institution, I may say none whatever, because I went there at intervals, and my visits were made previous to the meetings of the board; so that if there were any questions of a medical character to bring up, I might be able to understand them and present them to the board; and so in going through the wards, it was generally to examine the wards more in relation to, so far as I could—to examine in relation to seeing the manner in which the patients were treated; the condition of the wards in relation to ventilation and heating; and almost all those changes that have taken place in the Asylum, most of the heating and ventilation that took place while I was manager was particularly under my suggestions, and the building of those extensions, those air-rooms in the winter season — those rooms were constructed at my suggestion to make up for the defect in the original construction of the building, which had always a jail-like and cell-like look, and we wanted as far as possible to do away with that appearance, and allow the patients an opportunity to get sunlight and air in cold weather when they could not get out of doors; for these purposes those projections were made.

Q. Did you visit generally all the wards of the institution?

A. Always, when I was there.

Q. Ddi you inquire as to the treatment of patients?

A. Not as to medical treatment.

Q. But as to treatment by attendants?

A. Yes, sir; I used to linger a good while in the wards; generally spent quite a time going through the wards; much longer than the rest of the managers, and stopped and talked with the patients, and went into their rooms to see how they compared, and then

asked the patients how they were getting along and how they were pleased.

Q. Did you hear complaints made against attendants?

A. Not specially; I would hear patients that said they wanted to go home, were kept there wrongfully, and that I ought to let them go; that I ought to speak to the superintendent to let them go; nothing as to the — I don't know that I ever — nothing that I remember was ever said to me about harshness.

Q. Had you any complaints made to you about the cruelty practiced by attendants in any way?

A. No, sir, it was never mentioned to me; and if it had been, I should have taken no notice of it on the violent wards, should not have taken notice of any such complaints; for in going through the wards, I have seen patients very violent, seen them come up and seize an attendant and try and—where the attendants had to use some force, use force to settle them down, they would rush out and have some imaginary trouble; and that is the case with insane people when strangers go through the wards they would become violent; I do not think any thing of that specially; the very fact of a stranger going through the ward would excite them to more or less irritability.

Q. Did you pay any attention to the subject of restraint in the Asylum while you were manager?

A. I watched the progress of the stages of restraint while I was there; I think when I first went there all those or very many of those dark cells still existed in which patients were confined when they were very violent; those cells, none of them are left now, they were on the ground floor in the rear, and during my service as manager every one of those cells were done away with, and other methods of restraint were adopted.

Q. Was there or was there not great improvement in the methods of restraint?

A. Instead of isolation in a dark cell, the camisole was used or the patient was strapped to his chair, or, if very restless at night, was put into a crib, a covered crib, which was considered the least offensive.

Q. Do you regard the camisole or muff as instruments of cruelty?

A. They are necessities, because for this reason: a patient put in the camisole or seated in a chair in that way becomes quiet, whereas if allowed to move round he becomes more and more violent all the time; his violence goes on increasing; if he is forced to sit still he will remain perfectly quiet; he must be perfectly quite; it is the least painful of any form of restraint, I think, which is known; I don't know of any form of restraint less painful; it is certainly less so than from the hands of attendants.

Q. Did you regard any form of restraint practiced in the Asylum while you were a manager not necessary for the good of the patients at times?

A. I acted under my best judgment at the time; there are — there have been — as you can see there has been great amelioration in the treatment of the insane within the last ten or fifteen years.

Q. Please state to the committee what you think as to the advisability of using what is known as the crib-bed?

A. I have seen a great many patients in the crib-bed, and I have seen patients put into the crib-bed; been in the wards at times when they were compelled to put them there, they were so violent in the wards; I have seen many patients in the crib-bed; I don't know that I have seen any males, I do not recollect any; I have seen females, when I have been on the wards, placed in the crib-bed because they were so violent and screaming, and tearing their clothes and acting so violently that the atendants could not restrain them, and after they had been placed in about ten or fifteen minutes, would become perfectly quiet; they cannot hurt themselves in the bed, because there is plenty of room for them to turn over and yet there is not space enough for them to strike their heads or strike their bodies so as to injure them.

Q. Now, doctor, you stated that you paid particular attention to the medical administration of the Asylum. Did you at any time offer a resolution, which was adopted by the board of managers, requesting the superintendent and the medical staff to make a thorough and sufficient pathological investigation?

A. Yes, sir; I offered a resolution for this reason: the amount of material for pathological research was enormous in that institution, with its six hundred patients, and I felt that if the profession at large were ever to be benefited by it, it was necessary that scientific investigations (and I mean by that microscopical examinations of the changes which take place in the nervous tissues) should be regularly made and recorded, so that the profession at large could have the benefit of it, and if possible have a positive pathology established in relation to this form of disease; up to that time, you make a simple, what is called a microscopic, examination, that is, an examination simply by the eye, of the brain of a patient who died of insanity, and nothing can be observed, because changes are so minute in their character; when the brain is prepared for microscopic examination, you will find that the nutrition of the brain is very seriously affected; all along the course of the blood vessels — the smaller blood vessels — you will find these organic changes going on, showing that very many of these forms of insanity are changes really in the nutritive structure of the brain; things not really understood or comprehended until within a few years, when this form of investigation has become general in all asylums throughout the world.

Q. State who they appointed pathologist under that resolution?

A. Young Dr. Hun, of Albany, was appointed first, and afterward Mr. Deeke, who is still occupying that position.

Q. Did you offer at the annual meeting, held December 8, 1874, the following resolution:

"Whereas, The State, appreciating the importance of utilizing as far as possible the large experience to be derived from this institution, authorized the appointment of a pathologist; and

"WHEREAS, The labors of this office, under the direction of the superintendent, have already produced most valuable results, and

"WHEREAS, The Bellevue Medical College has invited Dr. Gray to give a course of lectures at that institution, therefore

"*Resolved*, That the managers of this Asylum recommend that Dr. Gray accept the invitation, as being one of the most desirable avenues whereby the result of his experience and recent investigations can be given to the profession."

Did you offer such a resolution as that?

A. Yes, sir, I did; and for this reason — it was adopted unanimously — and for this reason —

Q. Explain to the committee the object and purpose of that resolution?

A. While, as every one knows, the profession at large knew little or nothing of insanity in its various forms, and great complaint was made, and is still made, that the commitments to the Asylum by physicians, the statement of their cases on commitments, which was imperfect from the fact that physicians really did not comprehend the different forms of insanity; that it was very desirable for a gentleman who had so large an experience as Dr. Gray, that he should if possible go down to this, one of the largest medical schools and give a simple, a series of lectures; they were only eight or twelve in number; merely to explain to the students the different forms of insanity, so that they could recognize them and illustrate them with cases, which he did, from the Ward's Island Insan Asylum, before the class; it was discussed in the management at the time, the managers discussed the question that it would compel the absence of about only three or four separate times to New York, of Dr. Gray; and it was understood that he was to give three lectures each time, and the number of lectures, in all, was not to exceed twelve; that was the understanding at the time, and I believe the doctor went down and gave two lectures, one one day and one the next, and usually returned, I think, in the afternoon of the second day.

Q. And that you regarded as a duty which would be of eminent service to the profession and the public?

A. Well, I was a teacher at the time in the school here, and I felt every thing we could do to give the young men a knowledge of the different branches of medicine was very desirable, and we wanted to get the best authority for that purpose.

Q. What is your opinion of Dr. Gray as an alienist?

Mr. RICE — What was that question?

Mr. GOODWIN — As an alienist, if that is the word.

A. Yes, that is correct; an alienist is a man who — the word "alienist" means one who takes charge of men whose minds are unsound — alienation of mind; I regard him —

Q. (Interrupting.) Do you regard him as having great knowledge on that subject?

A. Yes, sir; he has had a very long experience, and I consider him a very bright man.

Q. Are his services in that regard — would his services be valuable to the public, and to individuals?

A. Yes, sir, very valuable, I regard it.

Q. Do you regard it the duty of Dr. Gray, or any other man with his abilities and experience, to give his services to the public, or to private patients, when such services do not interfere with the administration of the Asylum of which he is superintendent?

A. Yes, sir, I do.

Q. Will you give to the committee your reasons why you come to that conclusion?

A. Well, for the simple reason that it is a branch of study and a branch of knowledge which no one, except those who are brought into contact with insane persons, can possibly acquire; no amount of study can give it to one unless he has the observation, and can apply his study and observation constantly; I may not, in private practice, see a case once in three years, or once in five years, whereas he sees all these cases daily, and of course his judgment in a matter of that kind would be just as much, worth just as much more, of course.

Q. Have you known of Dr. Gray as having been called on by very many prominent people in this State?

A. That I only know from hearsay; I have no personal knowledge of it?

Q. Do you think, doctor, that a man possessing the ability of Dr. Gray should be encouraged by the State to give his knowledge both to the public and to private patients, when it does not conflict with his duties?

A. Yes, I think it is his duty to do it; I think that is the custom all over, now.

Q. Now to go back to the Asylum: have you talked with Dr. Gray in reference to the management of the Asylum at any time.

A. Our conversations were wholly upon matters connected with the Asylum; when I was there my rule was always, as I told you, to get there in the evening; we spent the evening together, and always a few hours — three hours the next morning — in talking over every thing connected with the Asylum before the board met; it never met before half-past eleven or twelve, and I would frequently go into the wards, and would talk over the management of the Asylum with him.

Q. How did you find his knowledge as to the cases in the Asylum?

A. What do you mean; in what respect?

Q. His knowledge of the cases of the patients, individual cases; his acquaintance — his knowledge — familiarity with the cases, I mean.

A. I never mentioned a case, of course; knowing I was a manager of the Asylum very many people would write letters to me

before I would go there, and ask me to inquire about them or their friends in there, and I don't think I ever mentioned a case to Dr. Gray, but what he had it at his fingers' ends and could tell me all about it, and would then call my attention to the case as we went through the ward; he has a wonderful memory in that respect; it is marvelous how he can retain the history of every one of those cases, and keep them in his mind all the time; you cannot speak of a case in the Asylum but what he will give you almost a transcript of it from the history in the record book of the case.

Q. You were acquainted with the medical staff of that institution as they were from time to time during your service as a manager?

A. Yes, sir; I was acquainted with them more or less.

Q. How did you regard their qualifications and fitness for their position?

A. I think he was remarkably fortunate in securing the gentlemen he did; there was care exercised always, whenever a vacancy occurred, in the selection of a man; in the first place Dr. Gray made a thorough examination as to the medical attainments of the gentleman; and for the last ten or twelve years he would take no man as an assistant unless he had had a previous hospital experience; that is, had gone and made the hospital service in some hospital previous to going there; for, as he said, no man could serve there intelligently as an assistant physician who had not gone through the discipline of an ordinary hospital experience; there are some habits of life — you take a young man when he first graduates in medicine — and you have got to take your assistants from that class of men.

By Mr. Haskell:

Q. With reference to this subject of assistants, is that a matter of your own knowledge or from information given you by Dr. Gray?

A. I was going to come to that; they were selected; he always consulted with me in relation to selections he was about to make; and those were the questions which were gone over first, were as to the qualifications of the man.

Q. And you, yourself, personally examined them?

A. I did not examine them, but I went over their record as it was given to me by Dr. Gray.

Q. And that was prior to the making of any appointment?

A. Yes, sir; prior to the appointment.

By Mr. Goodwin (resuming):

Q. Now, will you be kind enough to give your opinion to the committee as to the necessity of the superintendent visiting the wards of the institution?

A. In what way?

Q. In frequency; the frequency of his visits?

A. Well, I suppose the superintendent should visit his wards frequently enough to keep himself thoroughly familiar with the changes

of every case; that is sufficient in my judgment; for instance, I can only illustrate that by analogy and example; the visiting physician of an hospital — for instance, take the City hospital here; there is a house physician, the same as there are house physicians there; when I enter the wards of the hospital I do not go to every bed in the hospital by any means; I go to the house physician and I ask him: "What have you that you desire to call my attention to to-day, specially?" And if there is no case that he desires to be advised upon, which is obscure to him, or any unusual circumstance has taken place since my last visit, or some case like that, why the thing is discussed and a course of treatment defined at that time.

Q. (By Mr. HASKELL.) Do you regard your duties as a visiting physician in the City hospital similar, in respect to visitation of the patients, as those of the superintendent of an insane asylum?

A. To a great extent, as far as the mere wards are concerned, I do, because the superintendent — it is almost an impossibility for the superintendent to go from patient to patient and see them; he could not, the day would not be long enough, nor would his strength, or the strength of any individual; I do not think it is done in any asylum in the world; it is a physical impossibility; I mean to do it daily, that is.

Q. (By Mr. RICE.) What do you say about doing it weekly?

A. I should suppose the superintendent would go through his whole building at least once a week and probably oftener; I do not mean to limit the time; I only speak of the general plan of visiting; I think he should be familiar with the cases of the patients; he should make a more or less perfect examination of all new cases; but you take the chronic cases, where changes do not take place once in six months, and which are virtually incurable, when he lays down a general course of treatment, it is probable that he looks very little at that case afterward, except as he sees it in passing through the wards, unless some new development takes place.

Q. Would you regard it necessary for the superintendent to visit such wards in his Asylum as contained cases of dementia, and chronic cases of insanity, as often as he would wards where the acute cases were found?

A. Except to look after the general administration, not as often I should say, except to look after the general administration.

Q. Is it reasonable, doctor, for the superintendent to take the condition of patients from his assistants?

A. Is it what?

Q. Reasonable and proper for him to take the condition of the patients from the assistant physicians?

A. I think he is compelled to; he cannot in every case visit them; to illustrate that by my own executive function, as health officer; it was utterly impossible for me to visit patients personally, every sick one, or every sick vessel; I had to take the statement of my deputies as to the condition of things; I could not visit them in person.

Q. (By Mr. Haskell.) Do you consider your position as health officer, in regard to the various ships, etc., an exact parallel to the position and with the duties of a superintendent of an insane asylum, and his patients?

A. Only in this way, where a man is performing executive functions, he is necessarily compelled to take the representations of his deputies, as to very many things in that position; I do not speak — I am now only speaking of the general position of an executive officer

Q. Did you pay any attention to the character of the attendants upon the wards of the several wards of the Asylum?

A. I could not give an opinion about that; I was not — so far as when I went through the Asylum — I think no one could judge of them unless he went on to the wards a great many times, and became personally intimate with the men; I went through the wards, and, as you can readily understand, the attendants would appear to their best advantage; I cannot pretend to give any opinion about that.

Q. Doctor, do you understand that Dr. Gray, as superintendent of the Asylum, superintends both the medical and business departments of the institution?

A. Yes, sir; he does.

Q. Do you regard it as the best policy for the State to have the medical and business administrations united?

A. Yes, sir; I believe in centralizing the responsibility.

Q. Can you give any other reason than you have for it?

A. I don't know that it is necessary; only on the general principle, that is all; you cannot work it well if you leave one man to run the supplies and another the medicines; you never could make the thing run.

Q. Are you familiar with Frederick Norton Manning?

A. No, sir; I am not.

Q. Did you ever look at his "Report on Lunatic Asylums?"

A. No, sir; I can't say that I have.

Q. Do you know of any asylums which have the medical and business administrations divided?

A. No, sir; I do not; I am not familiar enough with the workings of other asylums to judge.

Q. You don't know whether they are or not?

A. No, sir; I am not familiar enough to judge.

Q. Would you regard an asylum best managed, in which the superintendent was supreme in his management?

A. Yes, sir.

Q. That it would be better managed by him?

A. That is, subject to the control of the board of managers.

Q. Do you think that it would be best that he should have the appointment and the dismissal of all the attendants?

A. Yes, sir.

Q. And that the steward or business manager of the institution should be under him ?

A. That is comprised in the answer which I gave to your general question ; I don't know that it is necessary to go over all these separate subdivisions of the management.

Mr. Goodwin — That is all I want to ask you.

By Mr. Haskell :

Q. I understand you to say that you gave no attention whatever to the business of management of the Insane Asylum ?

A. Yes, sir ; I gave none whatever.

Q. And that all the attention you did give was in regard to the medical treatment of the patients ?

A. Not the medical treatment of the patients, because I know nothing of the treatment of individual patients, but as to the general medical conduct of the wards.

Q. That is, you mean the general sanitary—

A. (Interrupting.) The sanitary arrangements of the institution and the division of the patients and their modes of restraint — methods of restraint.

Q. And about how long a time would you spend in the personal examination of the vicious wards of the institution when you went there ?

A. It usually took me from three to four hours, and I usually went through twice at each visit I made.

Q. Usually twice during the period ?

A. Yes, sir ; that is, I would go through the men's ward in the afternoon and the women's ward in the morning.

Q. And as I understand, you paid very little attention to the highly disturbed wards, but rather devoted your attention to those wards in which the convalescent, and cases of that kind were ?

A. No, sir, I went into the highly disturbed wards quite as much as into the others, except the wards of dementia and paresis, those are the ones I did not go into — the wards of dementia and general paresis I paid very little attention to.

Q. Are you familiar with the numbers of the various wards so as to refer to them by number ?

A. No, sir, I cannot.

Q. I understood you to say that you do not recollect any complaints being made to you of harsh or cruel treatment by the attendants ?

A. No, sir, I don't recollect any.

Q. I further understood you to say that if any such complaint had been made by patients in the highly disturbed wards, you would not have regarded them ?

A. No, sir, I would not have regarded them for a moment.

Q. So that while you were connected with the institution as manager, you never investigated any case of cruelty or harsh treatment by the attendants upon any of the patients ?

A. No, sir.

Q. Your business was never with that branch of the institution?

A. No, sir.

Q. Do you recollect ever examining a series of books known as injury books, that were kept by the supervisors of the several departments of the institution?

A. No, sir; I never did.

Q. While you were a manager of the institution was your attention called to deaths of patients caused by violence?

A. No, sir.

Q. And you never made investigation of any such cases?

A. There was one case — I beg your pardon — almost the last meeting I attended, of this gentleman from Troy, a minister or something of that kind; I made a report of that case.

Mr. Goodwin — I hand Dr. Vanderpoel a copy of the Woodin committee investigation, at page 499; that refers to the case?

A. That is my report that I made about that matter.

Q. You may state when your attention was called to that case and by whom it was called?

A. I think my attention was called by the superintendent, Dr. Gray himself.

Q. Upon one of your visits there?

A. Yes, sir; our visit took place immediately after the occurrence of this event.

Q. You may state what you did in regard to investigating this matter?

A. I will look at the report and see.

Q. Do you mean to say that your recollection of the particular events of that investigation is so vague that you cannot tell without refreshing your recollection in regard to this case?

A. Yes, sir; because I have a great many hundred matters on my mind, a great many hundred matters, and this occurred in 1880.

Q. And the fact of this death has entirely passed from your recollection, until your attention was called to it by Senator Goodwin at this time?

A. Yes, sir.

Q. Having now looked over that report you made in regard to that case, have you any recollection, independent of what is contained in the report of the case, as to what you did?

A. No more than we had the physican, Dr. Russell, before us, he gave us an account of the manner of his death, and we all agreed upon the fact that it was a case of apoplexy.

Q. You came to the conclusion that it was a case of apoplexy?

A. Yes, sir.

Q. Was your attention called to the various injuries about the body?

A. I read in the Troy papers at that time the accounts published in those papers; I remember perfectly well (I have forgotten now

the specific points), and we weighed them with the evidence presented there before us.

Q. Was there any evidence presented before you, in regard to the injuries upon the body of the deceased?

A. I don't remember.

Mr. Goodwin — Look at that page of the report (indicating Woodin committee report).

A. I have forgotten the circumstances connected with that, entirely; I don't remember about it; I know Judge Coxe and myself made an investigation with Dr. Ordronaux, who was present at the time.

Q. Aside from this case, you have no recollection of investigating any other case of violent death?

A. No, sir.

Q. You will not say there was no case of violent death that occurred at the institution during the term of your being a manager?

A. No, sir; I will not say that, because I was not familiar with what took place in the intervals of my visitation.

Q. You depended very largely for your knowledge upon the statements of Dr. Gray and the attending physician when you were there?

A. You mean as to the condition of the Asylum and patients?

Q. Yes.

A. Yes, sir.

Q. You don't recollect any individual or particular cases in the Asylum?

A. In what way do you mean; do you mean cases that I saw there at different times; I remember a great many cases of patients there?

Q. Independent cases?

A. Yes, sir, a great many; I had a great many personal friends there, that is I kept track of every one from Albany, and there were a great many there from Albany.

Q. When the question of Dr. Gray's giving lectures at Bellevue hospital was before the board of managers, and under consideration, the amount of time that it would take him from the institution, was one of the elements considered by the board?

A. Yes, sir.

Q. And it was regarded as an important feature that the time be reduced to the smallest possible minimum?

A. It was stated at the time that so little time would be required — that at each visit he could deliver three lectures.

Q. So that you, as a manager of the institution, regarded it as highly important that Dr. Gray should be at the institution as much as possible?

A. Yes, sir, I should say so.

Q. While you were a manager of the institution was there any action of the board taken in regard to his attendance as an expert witness in private cases?

A. No, sir, I don't think there was ; I don't recollect any.

Q. Was your attention called to the fact that he was giving more or less time to matters of that nature ?

A. I was with him twice; sent by the Governor each time; once by Governor Hoffman and once by Governor Dix, to make examinations of that character.

Q. That would hardly be a private case ?

A. I knew nothing of his private matter.

Q. So that your attention was never called to that branch of the matter ?

A. No, sir; we examined R——f, under the direction of the Governor, and some man in Buffalo, at the time Governor Cleveland was district attorney; he was feigning insanity.

Q. I understand you to say you regard it as highly important that a manager of an institution of this character should give his personal attention and be present at the institution as much as possible of the time ?

A. Yes, sir.

Q. And do you think that the superintendent of such an institution should not allow a private practice to carry him away from the institution ?

A. I was not aware that he ever did do so.

Q. I am asking you the question whether you think the superintendent of such an institution should not allow a private practice to carry him away from the institution ?

A. Well I should say very little.

Q. He should not do it at all, should he ?

A. Well, on abstract principles, no.

Q. And you think he should not attend private lawsuits as an expert witness where they will carry him away from the institution and where an investigation of the case will occupy a great deal of his time ?

A. I was under the impression that it was not a matter of option with the superintendent, that when he was subpœnaed by the court he was compelled to go, but as an abstract principle, when a man occupies such a position the closer he attends to that position the better.

Q. And you think that the question of the amount of compensation should not in any event be a material factor in the matter of the superintendent absenting himself from the institution in attending to a private case ?

A. Not unless he obtained the consent of the board of managers, or of the executive committee of the board, there is an executive committee of the board of managers.

Q. You say you know nothing personally in regard to the employment of the attendants, as to how they were employed, or as to their general character ?

A. Excepting that the matter was often spoken of, but nothing personally as to attendants, merely how much they received a month,

I knew that, and also he often talked about their character, how careful he was in selecting the men ; Dr. Gray did.

Q. You had no knowledge, personally, of that matter, except as you derived it from Dr. Gray ?

A. None whatever ; not at all ; I have often talked with him ; he said it was almost impossible for him to obtain the right kind of attendants for the meagre salary he was paying them ; I could not myself see how men whom I should think good, for $25 per month, would be willing to take positions of that kind.

Q. Did he ever find fault with regard to the amount he was allowed ?

A. He said they were always looking for better places, he could not —

Q. Did you ever hear him state that he thought that a larger appropriation should be made for the payment of attendants ?

A. I don't know as it was ever discussed in the board.

Q. Either in the board or in personal conversation with him ?

A. Yes, sir ; he thought that better or higher pay would bring better men and women.

Q. But I don't understand you to say that he complained that the appropriation was so small that he was not able to hire more competent help ?

A. Oh, no, sir.

By Mr. Goodwin :

Q. I call your attention to a report made in the matter of the death of J. G. Brown, reported on page 500 of the Lunacy Investigation, ordered by the Senate on May 25, 1880, of which the Honorable W. B. Woodin was chairman, did you make that report ?

A. Yes, sir.

Q. In conjunction with whom ?

A Judge Cox and Mr. Ordronaux.

Q. I call his attention to that report, and the testimony accompanying the same made by Mr. Ordronaux as Commissioner in Lunacy, and the testimony that is in that report ; you knew while you were a manager of the Asylum, that Dr. Gray visited private patients, and had private patients, that he had been consulted by physicians ?

A. That is a different term ; you say that he had private patients, I never knew that he had private patients, but frequently physicians would come with patients to consult with him, and that he had gone short distances, that is what he gave me to understand ; I have known of his going to Ilion to see Mr. —— the gun man there, I forget his name ; and sometimes to Oswego, when he would be sent for in case of brain trouble to see a patient and the physician, that is all I know of his private cases.

Q. Would there be any objection if the duties of his office were not interfered with in his going to see such persons?

A. Well that is a difficult question to answer, you put it as an abstract question, and a man is hired by the State, the State demands his services they will say, and yet as a personal matter, I don't suppose the State would suffer in the least if he was not absent too long, providing it did not interfere with his duties; that is purely a relative question, and I do not think it is a question to which I can give a categorical answer.

Q. Was there any difference of opinion in your board at any time in reference to the employment of women physicians?

A. No, sir; it was never fully discussed in the board, it was informally presented once or twice, and the expression was so decided, and so opposed to it, that it was never agitated; it was never brought up formally in the board.

Q. Are you opposed to the employment of women physicians in the Asylum?

A. Yes, sir; and for this reason, in the first place a woman's mental constitution is not adapted to managing that form of — that is, you want some one — some person who will have mental power to control them; a woman's sympathies are more easily aroused than those of a man, they are not as judicial in their character, and you will find as a rule throughout the world that women prefer a male physician rather than a female; there are very few exceptions.

Q. Were you ever asked by patients on the female wards of that Asylum to procure female physicians?

A. No, sir; I believe in female physicians in certain things; I have been instrumental in having female physicians appointed in an institution I had supervision of, the country branch of the Nursery and Child's Hospital at Staten Island; but the young doctors down there in cases where women had been seduced — the young doctors went to repeating the dose, and we had second editions while they were there; I said to the managers, "this thing cannot go on," and we had female physicians appointed, and it acted remarkably well; I think it was desirable and proper there; I think in the care of children female physicians are better, they have more of the motherly feeling necessary to take care of sick children; I do not think that applies to insane patients; so that in the broad sense I am not absolutely opposed to the employment of female physicians.

Q. In your experience have you had patients who have complained to you of being etherized for immoral purposes?

A. No, sir.

By Mr. Haskell:

Q. In regard to this question of the right of the superintendent to absent himself from the institution, for private practice whether it did not interfere with his duties as superintendent of the institu-

tion; in answering that question, who do you regard its judge as to whether his business interfered with his duties or not?

A. The executive committee were usually the judges of that, of which President Campbell was chairman; it was always understood if Dr. Gray was to go away that he called a meeting of the executive committee, and stated the circumstances, and was not to leave without their approval.

Q. The objection you raise to the employment of female physicians in the Insane Asylum is that you think that the female physicians would be so constituted, or that females generally are so constituted, that they would not be adapted to properly care for the insane?

A. Yes, sir.

Q. If that is so, how is it with female attendants who have the care and control of the patients for substantially all the time; how is it that they are able to properly discharge the duties of attendants?

A. Well, they merely carry out the instructions of the visiting physician.

Q. But they have the real control of the patients?

A. Well, I don't speak of it in the matter of control, because a physician has nothing to do with the personal control of the patients.

Q. Is that your understanding of the position of the physicians — that they have nothing to do with the personal control of the patients?

A. No more than directing it.

Q. And you think that while a female attendant could take the full personal control of a patient, yet a female physician would be incapable of directing it?

A. I think they are more emotional in their character; I speak of the abstract constitution of the female.

Q. They would be more tender-hearted do you mean?

A. Yes — more emotional.

Q And that, therefore, they would hardly be strict disciplinarians in an institution of that character?

A. Yes, sir; I would not say strict disciplinarians, because I think they would err just as much in being too strict as the other way; I think that from their emotional character they would go to one extreme or the other.

Q. You think the male mind is better balanced?

A. Yes; I think one has the "judicial" element more strong than the other; I think in that respect the male has the superiority.

Q. Do you think female physicians would be apt to be too harsh?

A. Yes, sir; too harsh.

By Mr. Rice:

Q. What do you say as to whether or not anæsthetics can be

administered to a person while asleep, so as to deprive them of consciousness?

A. That has been a very debated question until of late, you know; physicians, as a whole, have decided that the thing could not be done; I believe some experiments have within the last two months — I forget where it was, but I saw it in one of the medical journals, where the thing had been accomplished; where patients had been anæsthised while asleep; but nothing but chloroform would do it; you cannot use ether; ether is too irritating and requires too much in quantity.

Q. Do you understand that crimes have been perpetrated by the use of anæsthetics administered during sleep?

A. It has been so stated, but has always been denied by the profession until recently when some examples were shown in which the thing has been performed; whether they were exceptional cases or whether the thing can be ——; well it is not considered settled as yet, and yet the fact that some experiments have succeeded perhaps shows that it is not impossible.

Q. What do you say of the propriety of the superintendent of the State Lunatic Asylum at Utica for a reward and compensation lending assistance on one side or the other in the prosecution or defense of a private lawsuit?

A. It is a matter of taste, I should not want to do it if I were superintendent.

Q. I ask you how far in your judgment it is consistent with his duties as superintendent?

A. Well, unless he had the sanction of the board I should think he had better be at home.

Q. What would you say of a board that would sanction a thing of that kind?

A. Well, there might be circumstances in which he can leave; you are asking me a self-convicting question; I have been a member of the board, you know, myself, although I was not present at all the meetings, or at that meeting.

Q. I am speaking now of the general rule; of course there may be exceptions, but I ask you what in your judgment you would say generally, of a board which would consent that a superintendent should permit himself to be employed in that capacity?

A. As a matter of taste I should think he had better not be.

Q. As a matter of right, sir, what do you say?

A. In a private case I should say as a matter of right he had better not be.

By Mr. Goodwin:

Q. During the period of convalescence, a patient having been insane is it difficult to define the degree of confidence to be attached to the charges made by such patients in reference to what occurred during their lunacy?

A. I do not think that a person who has recovered from an attack of insanity has a clear appreciation of what took place during the time their mind was unbalanced; it is a period of delusion from beginning to end.

By Mr. Haskell:

Q. Have you ever noticed as to whether the memory of a person who is insane — as to how much that is affected by the mental derangement?

A. Yes, I say to you, that they cannot separate the true from the false, entirely.

Q. But their memory is very distinct, very frequently, in regard to occurrences, and they recall with a great deal of accuracy very many of the minute details, dates, and things that have occurred?

A. Yes, sir; they can remember a great many isolated facts, there is no question about that; but it is difficult to say which are the facts and which the delusions; what they are stating to you may be facts, and on the other hand, they may be part of their delusions also which they have had at the time.

Q. But the mere fact that a person had been laboring under insanity would not wholly discredit their evidence in regard to what had occurred during that period?

A. I should not give it very great weight; you cannot separate the true from the false, nor they cannot, that is the essence of insanity — it is a series of delusions.

Q. Do you think they would be able recall that which really occurred?

A. Yes, I think they would.

Q. Was your attention ever called to the matter of the transfer of patients as a method of punishment, from a ward to which they were advanced, to a more disturbed ward?

A. Yes, sir; but not as a matter of punishment.

Q. I am asking whether you know it has been done as a matter of punishment, for disturbance, or violation of the rules, or for refusing to perform some labor?

A. No, sir; I don't know of any such case.

Q. What would you say as to whether it was a proper or improper thing to do as a matter of punishment for disturbance or for disobedience of the rules?

A. I should not say it was advisable as a matter of punishment.

Q. For instance a patient refusing to perform some menial labor; would you consider it proper to punish them by sending them back to a disturbed ward?

A. I should not think so.

Q. In your judgment would it be a dangerous thing to do so far as the mental condition of the patient were concerned, would you so consider it, or not?

A. Yes, sir, I should; I should not think it a very desirable thing to do.

Q. The increased excitement would have injurious tendencies?
A. Yes, sir.
Q. And you would not consider it a justifiable thing to do under any circumstances as a punishment?
A. I have seen patients that have been removed to other wards because they have been brought too soon into a quiet ward.
Q. Did you ever hear any complaints of that nature while you were a manager — that patients were transferred as a matter of punishment?
A. No, sir; my attention was never called to that; this is the first I have heard of it.
Q. Was Mr. Silkman an inmate of the institution while you were a manager?
A. Yes, sir.
Q. Was your attention ever called to his charges in that respect?
A. No, sir.
Q. Was your attention ever called to his charges in that respect?
A. No, sir; that was after the Commissioner in Lunacy was appointed; that was considered his peculiar province to investigate in reference to those cases; but my attention was never called to it for that very reason, the Commissioner in Lunacy took charge of every thing pertaining to that.

By Mr. Goodwin:

Q. If the superintendent of an asylum were subpœnaed in a civil case to go and give evidence, would it be his duty to obey the subpœna?
A. I don't know any thing about that; that is a legal question, and I am not a lawyer.

CHARLES R. SHERLOCK,

Sworn and examined, testified as follows:

By Mr. Goodwin:

Q. Where do you reside?
A. In the city of Albany.
Q. What is your age?
A. Twenty-seven.
Q. What is your business?
A. A journalist by profession.
Q. Are you the Albany correspondent of the "Sunday *Herald*," Syracuse?
A. I may say I am; yes, sir.

Q. I call your attention to an article — a communication in that paper of February 17, 1884. Are you the author of that article?

A. I am; I wrote it.

Q. I call your attention to one special paragraph in the article, you say: "Not even such an exposure as the '*Herald*' made, of the horrible death, within the Asylum walls, as the result of foul play, of David Poulton was allowed to cast a shadow on the management, despite the fact that the authorities had disregarded the law of the State most flagrantly in not at once calling on the coroner to investigate the murder, the unseen influence encircling the Asylum removes the superintendent and its corps from the range of blameworthiness." Where did you get your information for that paragraph?

A. I was somewhat familiar with the case.

Q. Had you any other information except your own knowledge?

A. Nothing, except what was published at the time the exposure was made.

Q. From whom did you obtain the information "that no coroner was called"?

A. That was the evidence, if I remember right; that is my recollection of the evidence, that the case was not made public for a month or so after its occurrence.

Q. Do you know when that case occurred; the time?

A. I don't remember.

Q. Did you consult the reports of the managers of the Asylum in reference to the Poulton case?

A. No, sir.

Q. Did you know that case was reported to the Legislature on January 10, 1883?

A. I did not know that, no, sir.

Q. I call your attention to page 44 of the report of the managers to the Legislature, and ask whether that is not the case?

A. That is the man, David R. Poulton.

Q. That is the case to which you referred in the article you wrote?

A. Yes, sir.

Q. When was this article written?

A. Two or three days before its publication; February 17, 1884; two or three days before that.

Q. What is the date of that report?

A. January 10, 1883.

Q. Does it appear from that report that the coroner was notified?

A. I will read it and see. (Reads it.) It mentions the coroner subsequently; the coroner seems to have been called.

Q. Do you know, and does it appear in this report to the Legislature, that John C. Devereux, Oscar Craig, and E. W. Foster, members of the State Board of Charities, and Dr. Stephen Smith, State Commissioner in Lunacy, came to the Asylum to investigate the matter?

A. I know that the matter was investigated.

Q. Does that appear in this report I have just read?

A. It seems to, yes, sir.

Q. Are you now of the opinion that the coroner was not called to investigate that matter?

A. It seems by that report, I don't know any thing about that, the report says that he was.

Q. I ask you generally whether you are of the opinion that the coroner was not called?

A. I should say that he was, according to that report, but how soon after the occurrence of the event is a different thing.

Q. I call your attention to this paragraph: "There is evidence enough in the mangled body of Evan D. Hughes, of Madison county, whose barbarous murder by the brutal hirelings of the superintendent has provoked this inquiry." Where did you get your information as to there being a "barbarous murder" committed by the "brutal hirelings of the superintendent?"

A. From the published evidence of the case.

Q. What published evidence?

A. The evidence was published in the different papers of the State, the "Utica *Herald*" and "New York *Herald*."

Q. Do you mean the evidence taken by the coroner's jury?

A. I do not recollect who it was taken before.

Q. Where did you get your information from?

A. From the published accounts of the investigation.

Q. You do not know whether it was from the evidence of the coroner's jury or afterward?

A. I did not make a note of the matter, I should think it might have been, because that was the only investigation made.

Q. Did you take the evidence — the coroner's evidence?

A. I read the evidence; I don't know whether it was the coroner's evidence; I read the evidence of the case, and a great deal of it.

Q. I call your attention to this paragraph: "Hurried and insufficient, as the committee of last winter were compelled to make their investigation, many things were proven by it which for the first time laid bare the abuses of the management." Will you please state what those abuses were?

A. That matter is based on the statements of members of the committee, and on statements made on the floor of the Assembly.

Q. You obtained this information from a member of the House?

A. Not all of it; part of it from members of the House.

Q. Did you obtain the information from the gentlemen of the House whose names appear in the article?

A. In part; but the substantial part of it not from him?

Q. What part of it did you obtain from him?

A. Simply a general statement that the investigation proved business abuses; I think he used a word not quite as significant as that, that would warrant the State in appointing a purchasing agent.

Q. Give me exactly, as near as you can, the words he used on that occasion?

A. I cannot; that was the substance.

Q. Now then I call your attention to this paragraph: "A suppression of it was easy enough * * * were to offend the immaculate Dr. Gray, was to shock the sensibilities of all the first families in the town." Where did you get your information for that statement?

A. I know very well that Dr. Gray is very highly thought of in Utica; and I know any thing that would tend to injure the reputation of the Asylum would be received with a great deal of sorrow and regret by the people of Utica.

Q. Is that your only explanation?

A. That is the only one that occurs to me now.

Q. I call your attention to this paragraph: "This Asylum is probably the only public institution of the kind in the world where the milk squeezed from the udders of the cows purchased by the State, fed by the State, and milked by demented labor, and supported by the State, is sold to the State at the market price per quart." Where did you get your information for that statement?

A. That statement was given by a member of the committee who investigated the Asylum last year; he stated it on the floor of the House.

Q. Now, I call your attention to this matter: "In the rough and tumble of adjournment, when it (the report) reached the Clerk's desk, of course no heed was paid to it, for every recommendation made came too late to be acted on, and from that day until this the report and the evidence accompanying it have never been seen; provision was made for printing it as a public document, but inquiries at the printer's revealed the fact that it never reached his hands. For several days Messrs. Geddes and Benedict have been searching high and low in the State archives and cubby-holes for the missing manuscripts, but they have given up the task as a fool's errand. The matter was undoubtedly filched from the rubbish on the desk during the exciting hours attending adjournment." Now, be kind enough to state you knowledge for that statement made in that paragraph?

A. If you will take up the last paragraph you read about its being filched; that part of the article was true up to that point; the other part, as it turns out, the report was found, it had disappeared from the desk; there is no question about that; it traveled all round Albany, and finally turned up in Weed & Parsons' office.

Q. You say it traveled all round Albany? Where did it go?

A. I don't know.

Q. How do you know it traveled all round Albany?

A. I have the word of one of the Mr. Parsons — young John D. Parsons, Jr.

Q. Then John D. Parsons, Jr., is responsible for that statement — that it traveled all round Albany?

A. He is responsible as far as this (this is all hearsay): that he stated to me that the report had, according to information given to

him, had gone by the order of the Clerk, Mr. Bunn, first to the "*Argus*" office, and they kept it there for some time, and came to the conclusion that if they printed the report, they would not get any pay, for the reason that no order of the House had been given for its publication, outside of the State printers, and for that reason the "*Argus*" people, as I am informed, gave it to the stenographer, Mr. Ruso.

Q. That is what Parsons said to you?

A. Yes, sir; and that Mr. Ruso, when this agitation was made about the missing report on the eve of the investigation —

Q. That is what Mr. Parsons said to you?

A. Yes, sir; that he produced this report, and I think his statement was, gave it to Mr. Benedict or Mr. Earl; I don't know which; and in course of time it got round to Weed, Parsons & Company's office; where it had been in the mean time neither I nor anybody else knows; that was the substance of it.

Q. Was this conversation with John D. Parsons before or after you wrote this letter?

A. That was after.

Q. Then where was your information obtained upon which you wrote this letter?

A. General report

Q. Cannot you give us any better answer than that; did any particular person tell you?

A. The fact that the report was missing first came to my knowl. edge from the discussion in the House, and nobody had seen the report there; it was stated by some members that an investigation had been made for it and it was not to be found, and that was the basis of that statement.

Q. And that is the only basis you had for that statement that you have given?

A. Yes, sir, I should think so.

Q. What was the basis of your statement that for several days Messrs. Geddes and Benedict had been searching high and low, etc.?

A. That I got from one of the gentlemen named; I suppose they did not use that language exactly.

Q. How in regard to the assertion that "the matter was undoubtedly filched from the desk," etc.?

A. That is something I am not satisfied with; I do not accept, as positive proof, the statement made about that report getting into the "*Argus*" office, or any thing of the kind.

Q. Have you any other information than you have given us for this assertion or statement?

A. No, sir; I have not investigated that matter and I have some doubt about it; but I am willing to admit that part is, perhaps, conjecture; it was a natural inference to draw.

Q. Did you make any inquiries of Charles H. Bellew of Utica, assistant clerk of the House?

A. No, sir.

Q. What is your authority for this " inquiries made of Charles H. Bellew of Utica, assistant clerk of the House last year, didn't aid the search for the stolen document" ?

A. I do not know ; I cannot say ' my impression is that I was told by somebody, but I do not know ; I must have been informed in some way.

Q. I call your attention to this statement, " it would be reckless, perhaps, to say that the removal of the report and evidence was made at the instigation of Dr. Gray, or his friends" ?

A. That would be a reckless statement.

Q. Is that all you have to say ?

A. Yes, sir.

Q. Did you intend to have this paragraph have that meaning, that it would be a reckless statement ?

A. I meant that ; still that was a flying rumor of the day.

Q. What was a flying rumor of the day ?

A. That somebody had filched, as I used the word, filched the report from the desk.

Q. Was the prevailing remark of the day that Dr. Gray had done it ?

A. No, sir.

Q. Or instigated it ?

A. The Asylum authorities ?

Q. I mean Dr. Gray ; that he did the filching of the report ?

A. I should think not.

Q. But it was the prevailing remark that the managers had done it ?

A. The authorities — the Asylum people.

Q. Who told you that the Asylum people had filched that report ?

A. I cannot say.

Q. Can you name any person ?

A. I cannot now, and if I could I would not.

Q. You don't now remember that any person ever told you that ?

A. No, sir, I do not ; nobody would have positive knowledge of that, and nobody could say that was so, but that was the report.

Q. Can you state any person who told you that the Asylum authorities had filched that report ?

A. No, sir, I cannot name anybody now.

Q. I call your attention to this paragraph ; the fact that three or four Uticans had official places in the Legislature by the grace of General James McQuade, etc. ; will you be kind enough to state the gentlemen who had been placed in the Legislature by the grace of General James McQuade ?

A. I don't know their names.

Q. Why did you insert this paragraph ?

A. Because I know General McQuade had used his influence in securing places for two or three people.

Q. Who ?

A. I don't know ; that would be something that is merely a rumor of the day ; if a man comes down here and is supported politically by somebody, they say, " who is backing him? " they will say General McQuade or Senator Kernan, whoever it may be, but that might not be the case.

Q. Is that all the basis you have for this assertion in the paper ?

A. I should think so.

Q. I read further from the article "there had been statements detrimental to the management regarding the acceptance of special fees for paying patients for special privileges ; it is known that Dr. Gray has sadly neglected his duty while drawing the salary of the Asylum, he was flitted all over the country as an expert in mental diseases;" where did you get your information from, for that ?

A. That he had flitted all over the country ?

Q. Well, the whole of it ?

A. I wish yon would divide that up.

Q. Take it down to the word "privileges"; what do you mean by that ?

A. That the patients who paid had special privileges in the Asylum for paying for them ; there was some account in there about his refusal to make it known to the State Board of Charities.

Q. Did you know Dr. Wilbur in his life-time ?

A. Yes, sir; very well indeed.

Q. Have you talked with him in reference to the Asylum ?

A. I have frequently talked with him.

Q. I call your attention to this article: "The iniquities which were perpetrated in the secret places of this Asylum have, it is ventured, cost many a life, and of these the late Dr. Wilbur of the Idiot Asylum at Syracuse was knowing, under the imposition of a promise to refrain from their publication; he has told your correspondent the most harrowing tales. This much I may here write to you without breaking a pledge to the dead." Will you state to the committee what harrowing circumstances were told you about Dr. Wilbur ?

A. If I told you, I would break a pledge to the dead.

Q. Do you refuse to give them ?

A. I do, if the stenographer takes down what I say, I will say it privately.

Mr. Goodwin — I ask the committee if the witness is privileged from answering that question.

The Chairman — Do you desire to press the answer to this question ?

Mr. Goodwin — I do.

The Chairman — And desire the witness to state what Dr. Wilbur told him there ?

Mr. Goodwin — I do

The Chairman — And do you claim that the answer of the witness in giving statements of Dr. Wilbur to him, in regard to this Asylum, is in any way material, or affects the institution ?

Mr. Goodwin — Yes, sir.

[The committee excused the witness from answering the question, upon the ground that the evidence is immaterial, incompetent, and could be of no service to the committee.]

Q. When were these conversations held with Dr. Wilbur?

A. I think that there are none of them earlier than three years ago.

Q. When was the last one?

A. I mean by that, I should think it must have been certainly two years, and perhaps three years, that I had the last conversation, that is what I mean to say.

Q. When was the first conversation about as to time?

A. I cannot place it by a date; I can by a circumstance.

Q. Is it four or five years ago that you first commenced to talk with him?

A. Four or five years ago; it was the time of the agitation about the use of the crib in the Asylum; the "New York *Herald*" started it; that was the occasion I first went to see him.

Q. Were these statements made by Dr. Wilbur at that time, that you have referred to in this paper?

A. Yes, sir; a great many of them.

Q. And you say the last was certainly two years ago, it may have been longer?

A. Yes, sir, it may have been longer; I made no note of that at the time.

Q. Were a majority of these statements that you say Dr. Wilbur made to you — were they previous to the year 1879?

A. I should say not.

Q. Were they previous to the year 1880?

A. I cannot say; that is as near as I can place it; it would be, I should say; the last one was, perhaps, two years ago, and the others covered a period of a year or so; I cannot place it any closer than that, for the reason that I made no note of it.

Q. How long previous to his death?

A. A long while; he died since I have been in Albany, and I have been in Albany for a year.

Q. About how long ago was the last conversation you had with him on this subject; how long was that before his death?

A. Over a year.

Q. Do you know whether or not Dr. Wilbur was examined by the committee known as the Woodin committee?

A. I do not; I think he was examined at some time regarding the Asylum; I have an impression of that kind; I don't know any thing about it.

Q. You don't know whether he was examined by that committee or not?

A. No, sir.

Q. The committee that he was examined by — you say you think he was examined by one committee?

A. I have an impression he testified somewhere.

Q. Were these statements you heard before or after that?

A. I cannot say, because I cannot place that time, and do not know it, only I know he came here at one time.

Q. Do you know that Dr. Harvey B. Wilbur was examined by the Woodin committee at Albany, on the 24th of February, 1881?

A. I did not know that.

Q. You never have read his testimony?

A. I do not know; I may have done so at the time; I have no recollection of it.

Q. Did you get any information from that testimony for any assertion you made in that article?

A. I did not, certainly; but every statement I made in there is based on a personal interview with Dr. Wilbur.

Q. Do you think Dr. Wilbur if he had been cognizant of any eniquities indicated in this article would have refused to have given them to an investigating committee of the State, under oath?

A. I cannot tell.

ALBANY, N. Y., *March* 24, 1884,
ROOM "B," NEW CAPITOL.

The committee met at 3:30 P. M.

Present — Messrs. HASKELL, OLIN and RICE, and Mr. A. T. GOODWIN, of counsel.

Proceedings continued as follows:

Dr. STEPHEN SMITH Recalled:

Examination by Mr. GOODWIN continued:

Q. Did the State Board of Charities ever make any complaints in relation to patients and other matters of the Utica Asylum to you?

A. I think not, I do not recollect of any now.

Q. And ask you to remedy them in any way?

A. No, sir.

Q. If they did call your attention to it, would you have called the attention of the managers or superintendent of the Asylum to it?

A. I should have.

Q. Have you ever found it necessary, in the discharge of your duties, to suggest any change in the matters of administration of that Asylum?

A. No, I don't think I have in reference to that Asylum alone; I have talked over a good deal with the superintendent and the physicians and others the question of the methods of administration, and changes, but there has never been any single thing that seemed to require from me any thing more than a suggestion.

Q. How have the suggestions that you have made been received by the managers or superintendent?

A. They have been well received, so far as discussing subjects freely and cordially; there have been some differences of opinion.

Q. Have they usually been acted upon?

A. I don't think I have made any of a kind — of a specific kind, with regard to any special occasion other than such kind of discussion as would lead to some changes in the methods of administration; they have not been connected with the institution particularly, as far as particular things are concerned, but have applied to all the asylums.

Q. What position has Dr. Gray in the profession as an alienist?

A. I think he ranks among the first; I think that is conceded by the profession at home and abroad?

Q. What is the sentiment of the profession regarding consulting with such men as Dr. Gray?

A. Do you refer to his standard?

Q. Yes, sir.

A. He is regarded in this city, and perhaps in this country, as one of the best consulting alienists.

Q. Is he regarded as a man of whom a large portion of the profession would seek advice upon matters of his specialty?

A. I think so; yes, sir.

Q. In your judgment, have they a right to demand of such a man his knowledge and experience?

A. I don't understand the question.

Q. Being, as you say, a distinguished alienist, one whom the profession regard as occupying a very superior, elevated position in his profession, I ask whether a physician would not feel that they had not a sort of right to consult with him upon diseases which would come under his specialty?

A. I think they would have a preference for him; whether they would regard it as a right I do not know, in his relations to the Asylum.

Q. I am speaking now in reference simply to his knowledge in that particular line?

A. I think he would be preferred, perhaps, to any one outside of the city of New York, at least.

Q. I understood you to say the other day that you were the consulting physician at Bellevue?

A. Yes, sir.

Q. From whom do you obtain your information in reference to the condition of patients in that hospital?

A. From the staff.

Q. Why from the staff, doctor?

A. They are in immediate attendance all the time.

Q. Do you deem it your duty to visit all the patients of that hospital?

A. Not at every visit, but I daily see all the new cases that come in, and all the cases of acute disease where disease is progressing rapidly; there are always a large number of chronic cases that I see or examine but seldom.

Q. Why do you see them but seldom?

A. Their disease changes but very slowly and very slightly, and the daily observations of the young men are regarded as sufficient—the daily care of the young men — as sufficient for their treatment.

Q. In your opinion, how often is it necessary for a physician who is in constant communication with the attending physicians to see a patient in there to know all that is necessary?

A. Well, that would depend on the nature of the disease.

Q. Now as to the Utica Asylum, doctor, it would not be necessary for the superintendent to see all the chronic cases often?

A. I should think not.

Q. And in reference to the acute cases, if, as you say, he has a competent medical staff from whom he obtains thorough knowledge

of the condition of the patients, how often would it be necessary to see them personally; what are your views in reference to that?

A. Well, I should think there might be some that would require to be seen daily; possibly, a great many every second or third day; or some every second or third day, but the larger number once a week, or once a fortnight; still I think that depends altogether upon the competency of the staff and the accuracy with which they report all the conditions of the insane from day to day and hour to hour.

Q. You stated, I think, that you have made examination as to the methods of the reports made at Utica by the assistants to the superintendent?

A. Yes, sir.

Q. And how have you regarded those reports?

A. I think I can cover it all in a very few words by saying that I think the system of reporting the condition of patients during the day and during the night there, so accurate and so thorough, that the superintendent can at any time keep himself very thoroughly familiar with the changes in the condition of a patient every day; at any rate, as a medical man, I think it would be sufficient for him in examining these returns, to feel himself sufficiently familiar with cases, even acute cases, to see them at comparatively long intervals; that is, not see them every day; see them at longer intervals than a day.

Q. In your judgment is it advisable for the consulting physician personally to investigate, or to receive his information immediately from the attending physicians?

A. He has got to do both usually; it is largely derived from the attending physicians as a matter of necessity, but in certain diseases, the personal observation of the consulting physician or surgeon is important.

Q. From your knowledge of Utica Asylum, do you think that the public service has suffered because of Dr. Gray's absence?

A. No, I should think not, that would be my impression, but I would like to qualify that by saying, it is because I have great confidence in the staff of officers he has, and their qualifications for the positions they hold.

Q. In your opinion, is a physician better qualified to superintend such an Asylum as that at Utica, by reason of his knowlege gained by contact with physicians or disease outside of that Asylum?

A. I think that adds to his qualifications and improves them.

Q. Will you be kind enough to give the committee your views, if you have any, upon the duty of a man standing in his profession as Dr. Gray does, to impart his knowledge both to the profession and to individuals when it does not conflict with his duty as a superintendent of a State institution?

A. With that last qualification I think it is of great value to individuals and of great value to the state — his opinions — given as they are — and are very desirable; and I think it reacts on the insti-

tution; and I think he himself becomes a better qualified man; at any rate we regard it so in every branch of our profession, if a man is a consulting physician and surgeon, his hospital attendance and private practice must be combined to make him a thoroughly successful man in his profession.

Q. Have you known Dr. Gray to visit people outside of the Asylum?

A. Not to my knowledge.

Q. Has your attention ever been called to a case in Herkimer county?

A. Yes, sir.

Q. Please give that to the committee?

A. That was a case in which a woman recently confined became insane, as they do occasionally, who was in very great danger, from the history of the case as I received it, of losing her life, when he was called, I think at night, and went, in the winter, and attended her, and from the course of treatment he pursued during the night it seemed to have saved her life. It was so regarded and believed by her physician and friends.

Q. Has your attention, as Commissioner in Lunacy, been directed to the two plans which seemed to prevail in Asylum management in which the administration and medical departments have been separated?

A. I have seen them under both; institutions managed under both systems.

Q. Which, in your judgment, is the most advantageous system?

A. That where there is one executive head, and where the superintendent is the general excecutive officer.

Q. I call your attention to a report of lunatic asylums by Frederick Norton Manning, published in 1868. Are you familiar with this book?

A. I know the man very well, and his reports; I don't know which one you have there; he has written specially on hospitals for the insane.

Q. This is a report in which he says that he has examined the hospitals at Trenton, Utica, Harrisburgh, Northampton, Blackwell's island, Philadelphia, Washington, the Hospital for the Insane, Philadelphia, Boston, Criminal Asylum at Auburn, Asylum for Idiots at Syracuse, and at Boston, Asylum for Inebriates, at Binghamton, New York, and the Hudson River Asylum at Poughkeepsie, also twenty-six asylums in England, nine in France, four in Germany, five in Belgium, and in Ireland.

Witness — In Canada?

A. I think he visited Canada also.

Q. You think he also visited Canada?

A. Yes, sir, I believe so.

Q. I read from page 79 of his report, "on examining closely the general condition of asylums, those are always to be found to be the

best managed in which the physician is the superintendent, one and supreme, in which the committee of visitors act only through him, and with his advice, and in which the appointment and dismissal of all attendants are delegated to him; and those are found to be the least satisfactory in which the responsibility is divided in which the committee of visitors or controlling board meddle in the internal management of the institution and direct themselves, or through their officers, any part of it; appoint and dismiss attendants, or clip in any way the authority of the medical superintendent; I ask you, doctor, do you concur in that opinion?

A. I do; I do as our asylums are organized in this city and in the United States; they are all on the same basis.

By Mr. Haskell:

Q. Do I understand you to limit your concurrence to the asylums in this State?

A. I say as they are organized in this State and in the United States, the method we have of organizing asylums.

Q. And do you concur with him as to those asylums in England that he examined; that those are best managed which are under one head, and those are worst managed which have a divided responsibility?

A. Yes, sir.

Q. And you also concur that those in Germany are in the same shape?

A. I never visited those asylums at all.

Q. Then in your concurrence with him, it is not as to the fact whether they are or not; I understood you to say you agreed with him that these separate asylums were —

A. (Interrupting.) I concur in the sentiment he expresses.

Q. And not in the fact that he states?

A. Well, it is based on examination of certain asylums, and mine is on certain other asylums where both systems are followed.

By Mr. Goodwin (resuming):

Q. Have you examined asylums in which both systems have been at work?

A. I have; yes, sir.

Q. Have you found a general complaint from superintendents where the system prevailed as to the want of efficiency?

A. I have found complaints; and my observations went further than that, that they were well founded — the systems of two, three or four responsible parties, separated in the management of different departments of asylums; there has been great inefficiency everywhere that system has prevailed.

Q. Can you state the differences, in order that the committee may see the difficulties which this divided responsibility entails?

A. I would like, if it is a proper thing to do, I would like to state, without having it taken down, the result of my observation in Canada.

[Witness then made a statement which was not taken by the stenographer.]

Q. Are you acquainted at all with the number of patients that are usually in English asylums?

A. Not any further than the reports of the Commissioners.

Q. Can you state to the committee the number of assistant physicians in an English asylum as compared with ours?

A. My impressions are that they are less; that we have double the number in this State in the same class of asylums, what are called mixed asylums, acute and chronic cases.

Q. Do you know by reputation of the establishment at Colney Hatch?

A. I only know it is a very large asylum; it is like our Willard Asylum.

Q. Where there are upwards of two thousand patients, and more?

A. Yes, sir, they rarely have less than that.

Q. And about how many physicians do they have for these two thousand patients?

A. I think their staff never exceeds three or four.

Mr. Goodwin — Mr. Chairman, you can examine the doctor.

By Mr. Olin:

Q. They use for purposes of restraint at Utica the "crib" and the "chair," and a patient is fastened into it; is that uniform in all the asylums in the State?

A. No, sir.

Q. Are there any asylums where they are not in use?

A. I think it is only in use at Utica and Buffalo?

Q. How are patients, who are recognized insane patients, restrained at the Kings County Lunatic Asylum?

A. They are not under any restraint; they are allowed to move about, and with no other care than the ordinary attendants looking after them.

Q. Do you look upon that system there of absence of restraint as being any better system to that at Utica?

A. Well, there is a very different class of patients at Utica; Flatbush Asylum has largely a class of chronic insane, but you never see as many acute maniacs, what we call violent persons, in the acuteness of their disease anywhere as you see at Utica; I believe as largely as possible in what is called the non-restraint system, supplying attendants instead of any kind of appliances and apparatus.

Q. Is it not a fact, in your judgment, that that system of restraint tends to excite and irritate?

A. I don't think it always does; I think with a certain class, I know it is very subduing and quiet; I know some patients who ask to have the apparatus put upon them if they have violent fits come

on ; but with the most of them, I think it is to a certain extent irritating ; I don't know that it is any more than to have an attendant watching all the time at the elbow of the patient ; that is very annoying to them.

Q. What would you say as to the number of hours, consecutively and habitually, that an attendant should be on duty ?

A. I think an attendant should not be on duty more than the ordinary hours of a person at ordinary work, say from nine until five or six o'clock.

Q. Eight or ten hours a day ?

A. Yes, sir, as an extreme ; attendants should not only be entirely relieved, but should have a separate building and be able to go entirely away from the noise and confusion and excitement of the patients.

Q. What in your judgment would be the effect upon an attendant upon those wards where the patients were excited, what would be the effect upon him, being on duty from five o'clock in the morning until eight o'clock at night ?

A. I think he gets worn out very much.

Q. Is it reasonable to expect he would be harsh in his treatment to patients under those circumstances ?

A. I think he would be very likely to be under the circumstances.

Q. Get nervous and irritable ?

A. Yes, sir, that is why ; I think the hours should be shorter, and the absence should be complete from the building and all connection with them, so that a man or woman attendant returns perfectly fresh from the out-door air.

Q. Is it allowable in your judgment that a patient who is a little boisterious and uproarous should be passed from one ward to another with the understanding that it was because of that uproariousness ?

A. It is disciplining very decidedly with a great many patients, and I think the great mass of them feel a great deal the changes of one ward to another ; and I think many endeavor to be on their good behavior and exercise their will-power to the last degree to be on good wards ; I have seen that often.

Q. Then you think that if they understand that their going on to a bad ward depends on their behavior, they would be likely to behave better ?

A. Yes, sir, and if they think that for a given time if they would behave perfectly well they could go home, a great many of them would, during that time, control themselves and behave well ; and (except in those forms of diseases of the brain like epilepsy where they must necessarily lose all control of themselves) they become very docile indeed.

Q. You talk about having the entire management of the Asylum in one person,—

Mr. Rice — I want to ask one question before leaving that subject.

By Mr. RICE:

Q. Do you wish to be understood as approving of the removal of patients from one ward to another as punishment?

A. Yes, sir; where it is without effect.

Q. I am speaking without regard to the effect?

A. I do where it has the effect of correcting the habits of the patient.

Q. Do you approve generally of that course of correction in the Asylum, that is, about moving them from ward to ward according to their conduct as a matter of punishment?

A. Well, I should not like to use the word "punishment."

Q. Well, we will say discipline?

A. Yes, sir; as discipline I should say it was very desirable.

By Mr. HASKELL:

Q. Do you know whether that system of discipline is in vogue at Utica Asylum?

A. I think it is in all the asylums of the State.

Q. And it is at the Utica Asylum?

A. Yes, sir.

By Mr. OLIN:

Q. Your judgment, as I understand you, is decidedly in favor of the government, inside and outside, being in one person?

A. I think that leads to the greatest efficiency, and is decidedly so in my experience.

Q. Would it not also lead to the prospect of the greatest neglect?

A. No, sir; I think not neglect in any particular.

Q. Is it a fair thing to presume that a skilled physician must necessarily be skilled in all the other departments of life, such as would be necessary to run that institution?

A. Well, I have not a very high opinion of a doctor's executive ability, any way; but there are men who combine that in a very high degree; and I do not know of a superintendent in this State that has not good executive ability with a very high standing in his profession.

Q. You think all the superintendents have that?

A. Yes, sir; all the superintendents in this State.

Q. You think that Dr. Gray has that ability remarkably developed, do you?

A. I do; the only question of divided responsibility, it seems to me, would be where there was a large farm like the Willard Asylum, or something like that, where there is an immense industry going on.

Q. How large a farm is there at Willard?

A. Nearly eight hundred or a thousand acres.

Q. Have you visited the asylum at Binghamton?

A. Yes, sir.

Q. You would not be in favor, then, as I understand you from your examination of this report that was read to you by Mr. Goodwin, you would not be in favor of the managers being too inquisitive about what was going on there?

A. I think the superintendent is the executive officer of the managers; I think they are the responsible men for the appointment of the superintendent and of all of his acts.

Q. Then you think the managers ought to be very vigilant in knowing what was going on?

A. Most decidedly they should be.

Q. What would you think about it if they did not know any thing about what was going on?

A. I should not think they were very vigilant; but I ought to perhaps qualify that in this way: that asylum boards are generally large and scattered, but I think in all instances, within reasonable limits of the asylum, there are a certain number who act as executive committee.

Q. Is it your judgment that the managers ought to regularly, although not at stated times, perhaps, but regularly visit the Asylum to know what is going on inside and outside of it?

A. Yes, sir; I think they should be held to the highest responsibility in that of knowing all of the internal affairs of the institution and that by personal and constant familiarity with it; there is no question about that; I would not by any means say that because there is a superintendent at the head of the institution that he should run away with the board and do every thing himself; if he does so, I think that is the fault of the board itself; here is a board of managers appointed by the Governor and the Senate, as State officers, with a direct responsibility upon them; if they abandon their trust and give it up to the superintendent and let him run the Asylum because he is the executive officer, and they know nothing about it, it would be the highest degree of delinquency.

Q. So that you think the board of managers ought to visit the Asylum often enough to know what is going on?

A. I do.

Q. And that they ought to go there without the superintendent or the authorities knowing that they are coming?

A. Yes, sir; I think they should do so.

Q. You would say that, in your judgment?

A. Yes, sir; I think they should go through very much as the superintendent ought to do — at odd times, and any times, and by the back door, or the front door, so as to be thoroughly familiar with the internal affairs of the institution.

By Mr. Haskell:

Q. You say that you are consulting physician at Bellevue hospital?

A. Yes, sir.

Q. Is there a salary attached to that position?

A. No, sir.

Q. Do you regard your duties as consulting physician at Bellevue hospital the same relatively as Dr. Gray's, as superintendent of the Utica Insane Asylum?

A. Yes, sir, so far as the medical care of the patients is concerned.

Q. That is your understanding of your respective duties, that they are similar?

A. Yes, sir, very much the same; they are different, it is true, but they are very much on the same basis.

Q. You have no responsibility for the personal care and attention that is paid to the patients in the Bellevue hospital, have you?

A. While I was on duty as a visiting physician I was responsible.

Q. As a consulting physician?

A. Well, I wish to distinguish there; we have visiting physicians and surgeons, and consulting.

Q. I am referring to your duties as consulting physician?

A. Well, as a consulting physician I am called in; but I am speaking more with reference to my duties as a visiting physician; we have a class of consulting physicians and surgeons.

Q. You have testified before the committee that—

A. (Interrupting.) Wait a moment, please, I would like to have that corrected so as to have it perfectly understood; for about twenty years I was visiting surgeon at Bellevue hospital; I served it so long in that capacity, latterly I occupied a different position, now it is as consulting surgeon. Now, as to the visiting physician; my position as visiting physician was very much like that of Dr. Gray's, or the superintendant of an asylum, though I am not a resident of the institution, but I am responsible for the wards that are under me, and their management and the management of the patients and every thing connected with them; during the time I am not there on duty I have a staff of three resident officers under me, the house surgeon and his two assistants, and they are responsible directly to me, for the care of the patients.

Q. That is when you were visiting physician?

A. Yes, sir; that is what I alluded to in reference to the relations between the visiting physician of a general hospital and the superintendent of an asylum. The position of consulting physician and surgeon is rather honorary, though while I am in that position I still attend the at wards occasionally.

Q. Was there a salary attached to the office of visiting physician?

A. No, sir.

Q. You consider your duties as a visiting physician, in relation to the patients, the same as those of a superintendent of an insane asylum?

A. They were not unlike them as regards responsibility for the management.

Q. And you consider that a visiting physician of one of those hospitals has as much responsibility in regard to the care and attention that is paid to the patients as the superintendent of an insane asylum has to the inmates of his asylum?

A. Very much the same character, the only difference would be in the number of patients.

Q. So that you do not regard it as the duty of the superintendent to give a great deal of personal care and attention to the inmates of his institution?

A. Oh, no; I should be very sorry to go on the record in that way. But going into Dr. Gray's office in the morning and examining all that occurred the day before, and the night before, I say that I could, if I knew the condition of each patient as they came into the Asylum I could keep a very acurate idea of the progress of each case.

Q. Are you not now confining yourself to the medical treatment of the patients?

A. Yes, sir; I refer entirely to their mental condition, and medication, as far as required.

Q. I refer to the personal care of the attendance upon the patients — the personal welfare of the patients?

A. That is the very point I want to try and make clear; if a man came into Bellevue yesterday with a broken leg, and I saw him, and to-day there is a report taken every hour of his condition, pulse, temperature, etc., a full report of the condition of that man, I should have as good an idea as if I went to see him. I would not like to be down as saying that the superintendent should not visit his wards; I think it is provided in the rules that he shall visit them, and I think he should visit them as often as is necessary for the welfare of the patients under his charge.

Q. What is your judgment in regard to how often a superintendent should make a systematic and thorough vistation of all the patients in his institution?

A. I think that should be done once a week; the entire institution, in all its departments, should be thoroughly examined at least weekly, patients and all; and I think there are a large number who should be seen oftener than that, in an asylum where most of them are acutely insane.

Q. So that whatever remarks you have made, you do not desire to be understood as indicating your idea that a visitation is not required — personal visitation of the patients?

A. Oh, no; not at all.

Q. What are your duties as Commissioner in Lunacy, as you understand them?

A. I am required to examine into the condition of the insane, and the institution in which they are kept; their care and custody, public and private, in the State.

Q. And how often have you visited Utica Insane Asylum?

A. Six times since I have been on duty.

Q. When were you there last?

A. I do not recollect the date; I think it was November last.

Q. And how long a time did you spend there on that occasion?

A. I spent two days there.

Q. Has your investigation, such as you have made, of the Utica Insane Asylum been in regard to its sanitary condition only, or has it been also in regard to its business management?

A. I have endeavored to look into all departments of it; I have looked into its business management as well as into all other departments.

Q. What have you to say in regard to their manner and method of purchasing supplies?

A. I should very much prefer the method adopted at Willard or Binghamton.

Q. Then you do not approve of the method adopted at Utica?

A. I do not think it is — no, sir; I should prefer the other method.

Q. What steps have you taken to correct the system in vogue at Utica?

A. No further than to have recommended the — to have expressed my preference for the method at Binghamton and Willard.

Q. To whom did you make this recommendation?

A. To Dr. Gray and the steward.

Q. When did you make the first recommendation of that character?

A. I think it was at my third visit; that was the latter part of 1882, I think; Dr. Gray was away most of the time; I do not know but it was the first visit, in 1883; he had been injured.

Q. It was either the latter part of 1882, or in 1883, that you made this recommendation?

A. Yes, sir.

Q. Have you ever spoken of the matter since to Dr. Gray or to the steward?

A. I don't know that I have; I would like to say that I looked over all their articles purchased, and their prices, and as far as I was able to discover there was little, if any, difference in the quality of the goods and prices, as compared with the Willard and Binghamton Asylums; but it is the system I am speaking about; I prefer the others.

Q. How did you ascertain that there was very little difference, if any, in the prices, between what was paid at Binghamton and Willard and the prices paid at Utica?

A. By personal examination.

Q. How did you make a comparison?

A. I made a memorandum of the articles and of the prices in the different asylums.

Q. And then from your memoranda you made comparisons?

A. Yes, sir.

Q. Did you make a memorandum of what was paid for sugars at the Willard Asylum?

A. I do not recollect that particularly.

Q. Did you make a memorandum as to what was paid for flour?

A. Yes, sir, I did, but I do not remember the difference in prices; yes, I made a memorandum of that.

Q. Do you now think you did of the sugar?

A. Yes, sir, I think so.

Q. Did you see that there was any difference?

A. No, sir, I did not take the list through; I did not see much variation; some were higher and some were lower.

Q. That is at one institution they paid more for one article and less for others, and Utica they paid less for some of the articles and more for others?

A. Yes, sir, but I did not notice such a difference as I anticipated.

Q. How close and thorough an investigation did you make in reference to that matter?

A. Well, as much as a medical man would make.

Q. We do not know how much a medical man would make; I asked you how much did you make?

A. Well, I took the prices of the articles as nearly alike as I could.

Q. Upon how many articles?

A. Most of the articles that they had in store — clothes, shoes, hats, flour, meats, etc.

Q. Do you know any thing about the contract of the Utica Insane Asylum with Butler & Hamilton of Utica?

A. No, sir, I do not recollect it.

Q. Do you know that these other institutions that you referred to pay as much as five per cent advance on staple groceries?

A. No, sir, I did not know that.

Q. Now in regard to the divided management of the institution; I understand you to say that you originally believed that that would be wise?

A. Yes, sir.

Q. And that you have changed your mind?

A. Yes, sir, I have.

Q. Do you mean to say that the best interests of an institution would not permit the purchasing of supplies and the general disbursement of moneys to be in the hands of a man independent and apart from the superintendent of the institution?

A. It has not been in those institutions I have examined; I think there might be exceptional cases where it could very well be, but not as a system.

Q. Are all the institutions in this State under the general management of the medical superintendent?

A. All except two — the State Asylum for Insane Criminals and the Emigrants' Asylum.

Q. Now, take the Asylum for Insane Criminals at Auburn; what is the system there?

A. There it is under the State Prison Inspector.

Q. Who is the superintendent of the medical or sanitary part of that institution?

A. Dr. MacDonald.

Q. And under whom is the business management?

A. Under Mr. Baker.

Q. And do you mean to say that it does not work well there?

A. It works very well, very well.

Q. I understood you to say that in all institutions where there had been a divided management you found it did not work well?

A. I do not say in all, I say in general.

Q. In regard to the institution for insane emigrants; who has the management of that?

A. The Commissioners of Emigration; they transact the business.

Q. And under whose administration or management is the medical department?

A. It is Dr. ———; I cannot recollect his name.

Q. Does it work badly in that institution?

A. I do not think it works as well; I do not think the institution is in as good condition as the State institution; and I might say in regard to the asylum for insane criminals that it is the superintendent's and the inspector's opinions—both of them—that the institution would be better if they had a board governing the institution — a local board, and had the management of it, like it is in other asylums; and I believe there is a bill before the Legislature to that effect.

Q. In regard to the absence of the superintendent on private business: I understand you to say you do not see any objection to it, with the qualification, "providing it did not interfere with his duties"?

A. Yes, sir.

Q. Suppose it does interfere with his duties in the institution, what then?

A. He should not leave.

Q. Who is to judge whether it does interfere with his duties or not?

A. That should be the duty of the board of managers.

Q. Then you think, do you, that in each case, before the superintendent should leave on any private business he should have the consent of the board of managers, upon a submission of the case to them?

A. I do; yes, sir.

Q. Is it a part of your duty to make recommendations in regard to such changes of administration and management as comes to your attention?

A. No; I do not regard that as part of my duty, but to report on the condition of the insane, and of the institution as I find them.

Q. To whom do you make your report?

A. I report to the Legislature.

Q. Have you made a report to the Legislature now in session?

A. Yes, sir; I have reported to the present Legislature.

Q. In that report do you say any thing in regard to a change in the method of purchasing supplies at the Utica Asylum?

A. No, sir; not in particular.

Q. Why did you not do so?

A. I have spoken of it only generally — that the system at Willard seemed the best system.

Q. Did you not, in your report, call attention to the method of purchasing supplies at Utica, and say that you thought a change was advisable?

A. I mentioned it in regard to all the other asylums, Utica as well as others.

Q. Do all the asylums purchase as they do at Utica, except at Willard and Binghamton?

A. Yes, sir.

Q. What is the difference in the manner of purchasing in those two institutions?

A. In Willard they send out for proposals.

Q. And is it the same at Binghamton?

A. Yes, sir; Binghamton adopted the Willard system.

Q. And at Utica how do you understand it?

A. They purchase as they want the articles.

Q. From local business men?

A. Pretty largely locally, judging from the list that I took there.

Q. What action have you taken, if any, with regard to a change in the hours that attendants are employed?

A. I have taken no action further than to report the facts.

Q. Is there any asylum where any different system prevails?

A. No, sir.

Q. All the asylums in the State have the same system of continuous service during the entire twenty-four hours?

A. Yes, sir; there is only one exception, and that hardly comes under this head of insane institutions, and that is at Bellevue hospital, we have an insane pavilion there, and the trained nurses have regular hours of duty, and when they come off of duty, they go right out of the hospital. But in the asylums principally, this system of residence in it, and of almost continuous attendance is in operation.

Q. Which asylums, did you say, retained the use of mechanical restraint?

A. Well, they are retained to some extent in all the State institutions, except the Asylum for Insane Criminals; I do not think there has been any restraint used there; there was not when I commenced my duties and there has not been since, and I think for a year or two previously.

Q. You said there were only two asylums, as I understood you, where it was not used?

A. That was about the crib, that is only used in the State asylums at Utica and Buffalo, not in any other State asylums; it is used at some county institutions.

Q. And also the stationary chair?

A. That is in use in all the asylums, except at Flatbush, they are not used there.

Q. In your visits to the Utica Insane Asylum, have you examined the books known as "injury books" there?

A. Yes, sir.

Q. Have you made any examination of any cases recorded in those books?

A. I have examined; I make it a rule of examining all that have occurred during the interval of my visits, where the patients are still there.

Q. State what examination you have made? When were you there previously to November?

A. I think I was there in August, and I think in April or May.

Q. What examination did you make into cases recorded in the injury books?

A. My method of examining has been to take the name of the patients, and in my rounds find this patient, take him aside and make inquiries, if they are in a condition so that I can learn any thing from them, and I get their statement of the injury and how it occurred.

Q. Do the patients at any time complain that they have been unkindly or brutally treated by attendants? Have they so complained to you?

A. Yes, sir, that was not an infrequent thing.

Q. What pains did you take to find out whether it was so or not?

A. I have examined — I usually ask patients who make complaint if there are any other patients on the ward to whom he can refer as having seen it and been a witness to the affair; and if they give me the names of other patients, as they not infrequently do, I take those patients aside and ask them.

Q. What has been the result of such inquiries?

A. I not infrequently find that they have been; well, I find all sorts of results, and allsorts of complaints, and all sorts of terminations to those inquiries.

Q. Have you ever found that the attendants have been guilty of ill-treatment?

A. Well, that they have been rough in their usage of patients, but it has been very rare that it has not been made clear that the efforts that they had to make were of such a kind as would be interpreted as rough, when after all they used no more violence than was necessary; it has been a very frequent thing that other patients have testified to that, and a great many examples I find have been patients who are very filthy and become so much soiled in their clothing that they had to be cleaned, and then in taking their clothing off for that purpose, they would resist, straighten out, and resist all efforts to get their clothing off of them; it will take two or three attendants, and sometimes a patient or two to accomplish the result.

Q. Do you ever find in your inquiries that patients had been treated more harshly than you thought they ought to have been?

A. Yes, sir.

Q. Can you specify any cases?

A. Yes, sir; I can specify a number of cases; several.

Mr. Rice — You are confining him to Utica, are you not?

The Chairman (Mr. Haskell) — Yes; I am confining you to Utica, doctor; do you not so understand it?

A. No, sir; not in that respect; I was going to speak of another asylum, because there I went into an elaborate investigation of the facts.

Q. Now, confining yourself to Utica, state any particular cases that you have in mind?

A. I don't know that I can say that I found that the attendants there had used more efforts than were necessary to accomplish their purpose; I don't know that I ought to say that they have used unnecessary force; that they have acted unwisely in the use of force, but I have seen — on my fourth visit there I saw a woman — insane woman — when I was on the ward, attack an attendant, struck her and kicked her, and it required three or four to control her; she was a very stout woman; in that case considerable violence was done to the patient; they used all the force they could to restrain her, and it was as much as they could do to prevent her doing a great deal of harm.

Q. Do I understand you to say that you did in no case in making investigations regarding the complaints at Utica Asylum, that you in no case found that an attendant had been cruel or harsh to a patient?

A. I did not find any where they had been cruel in the sense of unnecessarily assaulting or abusing a patient; it was only in their efforts to manage a patient that they may have used more force than was necessary; I remember of one case being referred to me in which two of the patients, who were present and saw the assault, stated that perhaps there was more effort or violence used than was necessary, but both said that they had as much as they could do to control the patient, and both said that if they had been engaged in the scrape they should have used more force than was used.

Q. Did you so tell the attendants?

A. No, sir; I examined them privately; I never examine them in the presence of the attendants.

Q. You have spoken of taking the evidence of patients; do you regard what they have stated to you as reliable?

A. I had a good opportunity to judge by allowing them to make their statements, and then questioning them; very frequently it was entirely unreliable; there is a patient now in Utica, who at the commencement makes apparently a very clear statement, but before he gets through it is a perfectly absurd one.

Q. I am referring to those who are not personally interested in a matter, who make statements in regard to what has occurred between attendants and other patients?

A. In regard to the testimony of patients looking on?

Q. Yes.

A. Well, I regarded that as very good testimony, generally; of course I used some discretion with regard to the patients I inquired of, and as to their methods of stating it; but where four or five

patients of different grades of insanity, and some of them having apparently a very clear recollection, all confirm one fact that they saw, it has seemed to me very good evidence.

Q. Was there any complaint made to you by patients, especially on the fourth ward, and other disturbed wards at Utica, — male department — in regard to the treatment of patients by attendants?

A. Yes, sir; I have had several made there.

Q. What did they complain of?

A. Well, it was harsh handling of them — abusive treatment.

Q. Striking them?

A. Yes, sir, using force on them.

Q. Striking them in the region of the stomach?

A. No, sir; I do not know as I had any specifications of that sort; it has been in general, I think, in all cases in that direction, it has been in the effort to change the filthy patients; it has been the filthy patients who have made complaint, and it has been in the effort to change their clothing.

Q. Have you ever made any investigation into the matter of the death of Mr. Hughes in the Asylum?

A. No, sir, I have not; I did not because it at once went to the coroner; and in that respect my methods of procedure have been governed by the method of the lunacy commission in England, which is very much on the same basis; these cases are always examined first by the coroner in England.

Q. Are you sole Commissioner?

A. Yes, sir.

Q. Is it a general practice of the superintendents of the various asylums in this State to do quite a large outside business — of a private character?

A. I think they all do some; it differs very much, according to the location they are in and their reputation.

Q. And as Lunacy Commissioner of this State you are in favor of their doing an outside practice, as I understand?

A. If it does not interfere with their duties in the asylum.

Q. And that you would leave, in each individual case, to the board of managers who are responsible for the appointment of the superintendent?

A. I think the board of managers are responsible.

Q. And you would leave the question as to the interference of private matters with the duties of the superintendent, you would leave that to the board of managers?

A. Yes, sir; I do not think any of them do much private practice; I think they are mostly called by the courts, and are summoned to give their testimony.

Q. What do you think of the superintendent of an insane asylum making himself a witness in a private case for a large compensation?

A. It would depend upon how much it interfered with his duty; if it interfered at all, I think he should not do it.

Q. Can the superintendent of an institution of the size of Utica,

with the large number of acute cases there, give his time to the consideration of private cases, thoroughly examining them for the purpose of making himself a witness, without interfering more or less with his duty, in your judgment?

A. I think he might if it did not take him very much from the asylum.

Q. If he was at the asylum and give a large part of his time to that case, would it not, in your opinion, seriously interfere with his duties?

A. Well, it is difficult to say; if I knew the case I could probably state; but I should give the same opinion; I do not think that a superintendent should be very much away from the asylum; I think being gone a day or two might not interfere at all, but long absences, I think, are very wrong, under all the circumstances.

Q. Do you think it would have a very injurious effect upon the usefulness of the attendants if the superintendent appeared to be slack and careless about his duties?

A. Yes, sir; decidedly, I should say it would.

By Mr. RICE:

Q. How do they get along with patients in the asylum where they use no restraints at all, as for instance, Auburn Asylum for Criminals?

A. That is a small asylum, and they have a large corps of attendants; and their patients are generally the chronic kind, not very many acute insane.

Q. What, for instance, would they do with a man who attempted to do violence to himself, by pulling out his hair, or mutilating his person?

A. He would be watched by an attendant almost constantly; enough to prevent it; and frequently put in a room by himself when he was liable to do injury; otherwise put in seclusion.

Q. But that would not be a means of prohibiting him from doing injury to himself?

A. No, sir; in that case there would be an attendant watching him.

Q. How many patients are in Utica?

A. Last year I think the average was about six hundred.

Q. And Dr. Gray is the sole manager of the business and medical department there?

A. Yes, sir.

Q. The whole charge is assumed by him?

A. He supervises it all, I understand.

Q. In your judgment are his duties there constant with his delivery of a course of lectures in the city of New York?

A. I think so.

Q. That is to say you think one man could manage that Asylum with its six hundred patients, and still find time to visit the city of New York and deliver twelve lectures?

A. Yes, sir; with a competent corps of officers; he never stays more than a day or two.

Q. Is your judgment influenced in any way by the fact that you are interested in Bellevue hospital?

A. No, sir; not at all; it is interested the other way; I am not a friend of the school; I think some five or six of the superintendents are now lecturing in the schools and to my personal knowledge the value of those lectures to the recent graduates is very great, we have never had so many competent young men able to deal with the insane and to give certificates as we have within the last four or five years; I examined all the commitment papers and invariably the commitment papers made by the young men who have had these course of lectures are minute and accurate as compared with older physicians who have never had any training.

Q. Would not the corps of assistants at the Utica Asylum be entirely competent to run that institution without Dr. Gray?

A. I regard Dr. Brush as a very competent man indeed, and those under him are less experienced, but they are among the best young medical men of the State.

Q. You do not answer the question I put to you. The stenographer will read it to you.

(Question read by the stenographer.)

A. Well, I think Dr. Gray is infinitely superior to any of them; I should rather have him one hour than them a week, so far as the power of managing and organizing.

Q. Managing what, the business department?

A. The whole of the department; he is practically familiar with every department of such an institution.

Q. And suppose it to be a fact that Dr. Gray did not visit the wards of the Asylum of that institution oftener than once in three weeks, what would be your opinion as to whether he was doing his duty or not?

A. I think he might still be very familiar with his cases.

Q. I wish you would answer the question directly, if you can, please, whether or not in your judgment a visit of once in three weeks is entirely consistent with his duty at that Asylum?

A. No, sir, I should think not.

Q. If you knew that Dr. Gray had excused his infrequent visits to the wards of that institution by reason of ill-health during the last year or two, would you still say it was consistent with his duty to deliver lectures in the city of New York?

A. You mean as regards his health?

Q. Yes?

A. Yes, sir, I think so.

Q. Then you think it is of more importance that he should deliver lectures in the city of New York than that he should visit the wards of the Asylum as often as necessary?

A. No, sir, I don't say any such thing — that he should not attend to his duty to the Asylum; I don't say that.

Q. I understand you have said that substantially; I will repeat my question. Suppose he had excused his infrequent visits to the wards of the Utica Asylum during the last two years by reason of ill-health, do you still say that it is consistent with his duties there that he should be delivering lectures in the city of New York within that period of time?

A. I would like to say this, it would be possible for a man to deliver a lecture very easily when it was not so easy or possible for him to walk; as I understand Dr. Gray's illness from the physician in the city who is attending him, he has always found it very difficult to walk about, especially up and down stairs; now, as to the delivery of a lecture, I think a man could do that when he could not so well walk about; I do not wish to be understood as saying what he ought to do, or what he ought not to do; but as to the matter of physical possibility, I think he could lecture with a great deal more ease than he could go around the Asylum.

Q. You understand his injury to be a shot wound in the face, do you not?

A. Yes, sir.

Q. Do you consider it consistent with his duties of that Asylum that he should receive compensation for his services as an assistant on one side or the other of a private lawsuit?

A. I should not like to judge as to that.

Q. Why not?

A. I know nothing about the circumstances.

Q. The circumstances are all combined in the question, and that is whether or not you would regard it as consistent with the performance of his duties as superintendent of the Utica Insane asylum, that he should receive compensation for services as an assistant on one side or the other in a private lawsuit?

A. It would depend upon the amount of time it took him away from the Asylum.

Q. Suppose it took him any time away?

A. Do you mean as its effects upon the Asylum, or as a matter of moral obligation?

Q. I speak of the effect upon the Asylum?

A. I do not see that being in a private suit would make any difference; I think it is a question of the time he would be taken away from his duties.

Q. Do you think it is proper that he should devote any portion of his time as an assistant in a private lawsuit?

A. I see no objection to it.

By Mr. Haskell:

Q. I believe your attention was called to the matter of the surveillance of the correspondence in the Asylum?

A. Yes, sir; I testified about that.

Q. Do I understand you to say that you think it proper that the letters of patients should in all cases be supervised — for instance,

a wife to a husband, a child to a parent or a parent to a child; is it your opinion that in such cases the correspondence should be withheld?

A. It depends upon the contents of it; I have seen those that ought to be withheld, and properly, in a good many instances; that would be my judgment.

By Mr. Olin:

Q. Are there any criminals in the Asylum at Utica — insane criminals?

A. Yes, sir; a number of them.

Q. What is your judgment as to the propriety of keeping in that Asylum, with people who are not criminals, those insane criminals?

A. I think they should not be kept there.

Q. Don't you think that is an outrageous arrangement?

A. It is, and it ought to be remedied; it is the same in the Homœopathic Asylum; they have several insane criminals there.

Q. Can you explain, as Commissioner in Lunacy, how it is that criminals are sent to such institutions to associate with others who are not criminals; or why it is that they send insane criminals straight from Auburn to Utica?

A. It is a matter that is left to the discretion of the court; but it ought to be remedied.

Q. At the Kings County hospital, or any of the hospitals where they do not have these restraints, do they use anæsthetics, more, or drugs of any sort, to control the patients?

A. Not more than they do elsewhere; they do use them there, but not to any greater extent than they do elsewhere. I think they probably use more at Utica, for I look upon that as containing more acute insane than any other institution in the State as a rule; but at Auburn and Flatbush they do not use any more restraint by medicines than in any other institution for the insane.

By Mr. Goodwin:

Q. What weight in your judgment, as Commissioner in Lunacy, familiar with the management of insane asylums in this State, what weight should be attached to the evidence of discharged employees and ex patients, in investigating the management of an asylum?

A. I think every case would have to be judged on its own merits; I can conceive of an ex-patient, or an ex-attendant telling the truth; but in general I should receive their testimony, naturally, with a certain amount of allowance, until they proved to be credible.

Q. (By Mr. Rice.) Would you receive the testimony of ex-attendants with that allowance?

Mr. Goodwin — I said "discharged" ex-attendants.

A. The rule, in by far a large majority, I have investigated or been brought into contact with, have been prejudiced witnesses, and their statements have not proved to be reliable.

By Mr. Goodwin (resuming):

Q. In reply to a question by the chairman, Mr. Haskell, in reference to punishment inflicted by removing patients from one ward to another. You do not know that that system is practiced at Utica of your own personal knowledge, do you?

A. Well, I do not want to talk about "punishment"; I do not believe in punishing the insane in any way.

Q. I am not speaking in reference to "discipline" put "punishment," and the word "punishment" was used in his question in its broad sense, and I use it in that way, as it was put to you by the chairman?

A. Well I — my impressions are all very strong that in very many institutions that method of discipline is followed; that is, patients generally aspire to be on the first ward, what they call the first ward, they are generally very anxious to go there, and they understand that if they will preserve themselves in perfectly good order and condition, as against certain conditions that they are accustomed to, they may be changed, or that they are changed from the first ward to another, if there is an outbreak.

Q. As Commissioner in Lunacy, upon an order of the Legislature you would have made a thorough investigation of this Hughes difficulty, or the Hughes accident at Utica, would you not?

A. I should have made it any way.

Q. And you would have reported your conclusions to the Legislature?

A. Yes, sir; I should have investigated and reported.

Q. Do you regard the investigation of asylums by a committee of investigation, rather than by the proper officer, to-wit, the Commissioner in Lunacy, as beneficial, either to the asylum or the people?

A. I regard an investigation by the Legislature as greatly preferable.

Q. Why do you regard it preferable?

A. Because I think the more the people, and their representatives, are brought in contact with asylums the better it is; infinitely better; if there was an investigation every year, nothing could be lost, and I do not think popular feeling toward the asylums would be in the end damaged; I think the more people know about the inside of asylums, and asylum life, the better it will be for asylums, and for superintendents; I was very glad when I heard that a committee had been appointed, and I am very glad myself that they have taken the course they have in taking the testimony of ex-patients and ex-attendants.

Adjourned until to-morrow afternoon at 3:30 o'clock.

ALBANY, *March* 25, 1884,
ROOM "B," NEW CAPITOL.

The committee met at 3:30 P. M., pursuant to adjournment.

Present—Messrs. HOWE, HASKELL, OLIN and BROWN; Mr. A. T. GOODWIN, of counsel.

Proceedings continued, as follows:

Mr. GOODWIN—Mr. Chairman, I desire to call the attention of the committee to an article which appeared in the Albany *Evening Journal* of Saturday, March 22, entitled the "Utica Asylum Investigation," and concluding "An inquiry into its abuses and management," which purported to give a part of the testimony given by Dr. Vanderpoel at the meeting of the committee on Friday afternoon. While Dr. Vanderpoel was being examined Mr. Charles R. Sherlock, correspondent of the Syracuse *Sunday Herald*, was present, waiting examination. He was requested by me not to make public any matter which came to his hearing, and I would ask the stenographer if he gave to any one any information relative to what Dr. Vanderpoel testified to on that occasion?

The STENOGRAPHER—I gave no information of that kind to any person.

The CHAIRMAN—In reply to the remarks made by Mr. Goodwin, the committee feel that it is a matter of great regret that any testimony taken should have been published in violation of the express resolution of the committee that all the testimony should be given to the public at the same time that the committee gave their report.

EDWIN HUTCHINSON,

Sworn and examined, testified as follows:

By Mr. GOODWIN:

Q. What is your residence and occupation?

A. Utica; I am a physician.

Q. Of how long standing in your profession?

A. Twenty odd years; over twenty years.

Q. Have you any hospital under your charge?

A. St. Elizabeth's Hospital, Utica.

Q. Have you made the subject of hospital study a matter of special investigation?

A. I have.

Q. State to the committee, if you please, your experience in the investigation of hospitals, both at home and abroad?

A. I was stationed as a medical cadet in the general hospital for a year, from 1861 to 1862; I was on duty in 1863–4–5 as surgeon for the Second Division Hospital, Twentieth Army Corps, and for about a year of that time I had charge of that hospital; had charge of the Twentieth Army Hospital Corps, in Savannah, for some months; since 1866 I have been in charge of St. Elizabeth's Hospital, Utica.

Q. Have you made any examination of hospitals abroad?

A. I have; I visited the principal hospitals in most of the cities of the continent, and I have visited the hospitals in many cities in this country; I have always been interested in the study of hospital management and hospital construction.

Q. Have you visited the Utica Asylum?

A. I have, frequently.

Q. During how many years have you been accustomed to so visit it?

A. During the last twenty years, I should say.

Q. What has been the average number of your visits there in a year?

A. It would be impossible to say; sometimes I would be as often as once a week; say from ten to fifty visits, perhaps, in a year; I went there any time I wanted to.

Q. Have these visits been frequent within the last few years?

A. They have not within the past few years, during my invalidism; not so frequent as heretofore.

Q. Have you inspected that building throughout?

A. I have.

Q. Been in all its wards?

A. I have, over and over again.

Q. What would you say as to its ventilation and sanitary condition?

A. I consider it the best ventilated public building of which I have any knowledge.

Q. What have you to say in reference to the care and treatment of its patients?

A. So far as I have been able to judge by my visits and inquiries, which have been frequent, and in many instances where I have had strong personal reasons to follow individual patients, I should say it was efficient and humane.

Q. Have you any persons in the Asylum, as patients, in whom you have had an interest?

A. I have.

Q. Have you had patients that have been placed in the Asylum?

A. I have.

Q. State what, if any, complaints have ever been made by them to you in regard to their treatment while in the Asylum?

A. I never have had any person in whom I have been interested as a patient before entering the Asylum, and whom I have followed during the period of their treatment and imprisonment, complain in any way that I thought the complaints were other than the complaints of a lunatic.

Q. What complaints have those been?

A. I do not recollect at this moment any particular complaint; it might occur to me in thinking over certain patients.

Q. Have you ever heard any complaint in reference to the treatment of patients or attendants?

A. No; I do not remember any patient telling me of any cruelties received at the hands of attendants.

Q. Have you ever noticed in any wards of that institution, at any time, a deficiency of heat?

A. Never; on the contrary it is the most uniformly warmed public hospital I have ever been in. The records, if you will allow me to state, not from personal knowledge, the records which have been kept and published, show for months and for years as uniform a temperature through the various wards as would be found in any hot-house; certainly vastly more regular and uniform than any public institution of which I know any thing. I know how difficult that is to do; it is well known to be a difficult matter in our climate, the most variable climate in this latitude; in Utica we have the extremes — the cold extreme of Montreal, and the heat extreme of Philadelphia; it is most extraordinary there; the isothermal line runs down to Utica from Canada, and runs up from about Philadelphia region.

Q. State to the committee your impression of the character of the attendants?

A. I have known a great many attendants in and out of the Asylum; they seem to me to be selected for their efficiency and steadiness of conduct, if I might describe it in this way; I am familiar with men; I have had a large number of men under me, nurses, and these seemed to be steady men, and men of reliable disposition and character as far as I can tell.

Q. Have you examined into the food?

A. I have frequently.

Q. How do you find it?

A. Good, plain, nourishing, well cooked.

Q. In regard to the extra diet of that Asylum for the sick; has your attention ever been called in that direction?

A. It has.

Q. How do you find that?

A. Good, nourishing, and of good variety, especially well cooked; the beef tea is the best I know any thing about; it is well made; the things are well cooked; I have tasted them.

Q. In reference to the medicines and stimulants, can you say any thing in reference to their quality and character of them — their efficiency for the purpose used?

A. I don't know any thing about the medicines, except from the packages I have seen in the apothecary's shop; there would be no other way for me to tell, but I suppose they are of good quality; I think they almost necessarily must be; and as to the stimulants, I can say that such as I have tasted has been, if I am allowed to speak

from general information — if I may state hearsay — I understand from them that they buy their liquors in a quantity and keep them; they undertake to give the sick, not new liquor, but old whisky, such as would not be apt to hurt them ; in other words, the quality of the stimulants would be good.

Q. What position does Dr. Gray occupy in the profession as an alienist?

A. He occupies a position at the head, or nearly at the head ; I know of none with a better reputation than he in this country.

Q. Is he a man whose knowledge and experience is sought for by the profession?

A. He is.

Q. Do you regard it as the duty of Dr. Gray to impart his knowledge to his profession and to the public generally, if by so doing it does not interfere with the management of the Asylum?

A. I most certainly do ; if I may be allowed to state, a man who has been placed in a position to acquire a large amount of valuable information which will aid his fellow men, fellow citizens, and sufferers, I think he would be cruel indeed if he refused or declined on any pretext to give information which would be of service in the treatment of any desperate case.

Q. How do you regard the assistant physicians, the medical staff of that Asylum, from your own knowledge of their character and ability?

A. From the first of my acquaintance I might mention some of those gentlemen, and the positions they have since occupied ; I consider that the young men who have been connected with that institution are unusually bright, humane and intelligent, and faithful men, well informed in their profession, and kind, I might say, in their duties ; one of the earliest men I knew was Dr. Cleveland, who is now at the head of the Hudson River Asylum ; another gentleman was Dr. Kellog, who is now principal assistant at the Hudson River Asylum ; another is Dr. Kempster, who was at the head of the asylum at Oshkosh, Wis.; another is Judson B. Andrews, at the head of the asylum at Buffalo ; another is Dr. Smith, at the head, I think, of the Morristown Asylum at New Jersey.

Q. Without spending any further time about that, how do you regard the management of the Asylum — Dr. Gray's management?

A. I consider that institution wonderfully well managed.

Mr. Goodwin — Mr. Chairman, will you examine Dr. Hutchinson?

The Chairman—I have no questions to ask at present.

By Mr. Haskell :

Q. Are you able to state whether or not one of the wards, on any occasion, was too cold for comfort—ward ten on the women's side of the Asylum?

A. I don't remember any thing of the kind, for I certainly don't know where number ten is.

Q. All you intend to convey by your statement that the halls have always been properly warmed is in relation to those wards whose temperature your attention has been called to?

A. I stated more than that; I stated that the average temperature throughout the Asylum — that it was remarkably uniform.

Q. You intended to convey by your statement about the temperature of the halls that they had been properly warmed; you intended it to apply to those wards to which your attention had been drawn, did you?

A. I intended to convey more than that.

Q. You have testified generally that the attendants were reliable, and you have spoken about the manner in which they were employed — what do you know about the manner in which attendants were employed there?

A. I did not say that; I said from the appearance of the men.

Q. I ask you then this questien: Do you know any thing about how the attendants were employed there in the institution, or have been employed in it during the past ten years?

A. I know how they have been employed when I have seen them in employment; when I have moved about the wards.

Q. Do you know any thing about what examination is made of attendants to ascertain their fitness to fill the position?

A. I don't know any thing about that; nothing whatever.

Q. So that what you have said in regard to the attendants is merely the impression you have formed in regard to their character from your personal observation?

A. Precisely; that is the only thing I intended to convey, and as to those I was personally acquainted with.

Q. How many of the attendants enjoyed the pleasure of your personal acquaintance?

A. I am not prepared to answer that question, because I think that is a proper question to ask the attendants, whether they took any pleasure in my acquaintance or not.

By the CHAIRMAN:

Q. Did you ever know an attendant named Reece there, some time ago?

A. No, sir.

Q. Do you know Mr. Weir, Mr. Bills, or Mr. Brown?

A. I do not.

Q. Have you ever known an attendant named Buckley, who was there some time ago?

A. I know two Buckleys, but I don't know whether either of them were attendants.

Q. There is a Buckley who keeps a grocery store at East Utica— Daniel Buckley; do you know him?

A. I do not; I do not recollect him.

Q. Were any of the patients whom you caused to be committed there at any time on ward four?

A. I don't know where ward four is.

Q. It is one of the violent wards; do you know whether any of those patients were on any of the violent wards?

A. No patient that I ever caused to be confined there was ever on any violent ward, that I remember.

By Mr. HASKELL:

Q. Do you mean to say that you know so little of the institution that you do not even know the location of the wards by number?

A. Humph! what? I mean to say —

Q. That is a simple question and susceptible of a direct answer?

A. I don't know how the wards are numbered now, I used to know how they were numbered.

Q. When did they change the arrangement of the numbers?

A. I could not tell you.

Q. Give us, as near as you can recollect, the date, or about the date, they changed the wards by their numbers?

A. I should say it was — I should say, well, let me see! it was about five or seven years ago; what I was taught to call ward number eleven I believe was changed to ward number four; I am guessing at it.

Q. There is a good deal that you have given has been guess-work, has it not?

A. I don't think I have stated any guess-work.

Q. None with the exception of this last information?

A. Not at all; you asked me a "catch question" and I answered it in my way.

Q. You say that five or seven years ago you were well enough acquainted with the institution so that you could name the location of the wards by their numbers?

A. I did not say that; I say that five or seven years ago I could remember that the violent ward was called No. 11 (eleven); I have since been informed that it is called No. 4.

Q. Was that the only ward you knew the location of by its number?

A. That is the only ward I can remember the location of by number.

Q. So that you never were familiar enough with the institution yourself to know the location of the wards by their numbers?

A. I have known the location of the wards by the numbers, but I have forgotten them; I could not give them to you now; neither can I tell you of all the changes that have been made.

Q. I did not ask you to give the numbers; my question is this: were you ever so familiar with the institution as to know the wards?

A. A number of years ago I should say that I was.

Q. About how many?

A. I should say that I suppose I knew the number of many of the wards from five to seven years ago, when I went there more frequently than now.

Q. Then for the last five or seven years you have not been very familiar with the institution?

A. With the numbers of the wards I mean; I beg your pardon, I have been there very often, but as to just how often is a matter which I would not care about any more than the number of the patients.

Q. Then for the last five or seven years you have been very familiar with the institution?

A. I have been there very frequently.

Q. Then for the last five years you have been very familiar with the institution?

A. I have been very familiar with very many things about it.

Q. Please specify the things you have been familiar with?

A. I have been very familiar with the physicians; with the admission of patients; I have admitted a great many patients, that is — I have been there when they were admitted, I mean.

Q. You have been familiar with the physicians and methods of attendance of patients; what else have you been familiar with during the last five or seven years?

A. I don't know what information you wish to get, and I don't know how to answer the question.

Q. Have you been familiar with any other features of the institution than those you have mentioned, during the past five or seven years; if so, please state what?

A. Only so far as my attention has been called during my visits to the Asylum, and walking about it, like any professional visitor.

Q. At this time — five or seven years ago — were there any features of the institution that you were more familiar with than you have been during the last few years?

A. Yes, sir.

Q. What features are those?

A. In regard to the details of its management; in regard to the heating, the steam apparatus, and the arrangements of its ventilation.

Q. And for how long a period were you familiar with the heating apparatus of the institution?

A. I think that was about one of the first things I paid attention to; I suppose about ten years ago, but that is a matter of indistinct recollection.

Q. Then for a period of about three years you were very familiar with the steam-heating apparatus?

A. I won't state that in that way.

Q. We will pass that then; what other feature have you been familiar with during the period you name of five or seven years ago?

A. Medication of patients, in regard to remedies that they were taking.

Q. Can you specify somewhat in regard to the remedies they were taking?

A. I was particularly interested at the time in the use of bromide

of potassium, when it was used with great effect to quiet restlessness and procure sleep.

Q. Can you mention any other remedy that you were familiar with?

A. Yes, sir; I was familiar with the use, in the Asylum, of hydrate of chloral, for instance, which has been used with great effect to quiet maniacal excitement.

Q. Can you mention any other matter?

A. I was familiar with the experiments which were tried in the use of carbolic acid, when that was a new remedy introduced to the profession and to the world.

Q. When was that, if you can state the year?

A. It was about 1869 or 1870; I cannot tell you positively.

Q. Can you specify any other one, any other remedy that you were familiar with?

A. Do you mean any remedy that I was familiar with — any subject that they were investigating, do you mean?

Q. Do you fail to understand the inquiry?

A. I do, precisely; yes, sir.

Q. Then, passing the subject of what other remedies used there you were familiar with — what other feature connected with the institution have you been familiar with during the last five years?

A. You are pinning me down to some hypothetical three years.

Q. You made the division of three years yourself; you mentioned your familiarity during the past few years, and you stated as to your familiarity with the institution about five or seven years past; you have stated that there were other things you were familiar with; now, I want to get at what those other things are?

A. My distinct answer was that when I first commenced my familiar visits at the Asylum, I went there frequently, and I informed myself as to methods of ventilation, and methods of management, cooking, heating, methods of painting, and all those details of hospital work, which interested me very much; after you have learned how a building is ventilated, you can see how uniform it is kept by watching the thermometer.

Q. On what wards have you watched the thermometer?

A. I have watched it by those tables. I did not say that I actually watched the thermometer; I have seen the tables and records of the average temperature. If the steam pipes had broken in one of the wards or it was torn up and no patients there, that would be cold perhaps; I would not expect it to be very hot.

Q. Was there any occurrence of that kind that you recollect?

A. I never knew any thing of the kind; I have seen wards torn up and no patients there.

Q. Then why did you suggest the breaking of steam pipes?

A. Because you called my attention to some ward which was supposed to be cold.

Mr. Goodwin — Is there any thing else, doctor, that you desire to state about; well I will ask you another question.

By Mr. Goodwin:

Q. You told me in your examination that you regarded Dr. Gray as an eminent alienist, and one that the profession were entitled to his services, if consistent with his duties as superintendent, as I understand you?

A. I believe that to be the case.

Q. Do you know that Dr. Gray has been called frequently to prominent men, in their extremity, by their physicians?

A. I do know that he has been so called.

Q. Do you regard it as his duty to give his knowledge and information under such circumstances?

A. I do.

Q. What do you say as to the advisability of his lecturing at colleges, with the consent of the board of managers?

A. I think it is his duty to lecture, if he understands the subject and is well informed, as I think he is and does; he should spare a few weeks in the winter to devote to that matter.

Q. Why?

A. Because he instructs large numbers of young men who are to become physicians, and who are to go all over the country; those physicians are to see the insane of the future, and it is right and proper that they should be properly instructed; and I know of no man more capable to instruct them than he.

By Mr. Haskell:

Q. In your judgment how much of Dr. Gray's time does he owe to the institution of which he is superintendent?

A. I can say this, sir —

Q. Please answer the question?

A. I am going to answer it very deliberately and carefully; I can say that in my deliberate judgment, as a man who has been connected with institutions more or less, that the longer experience Dr. Gray has in this particular Asylum, the less time will it take him to transact the ordinary routine business. I should say that a very few hours of the day would be all that was necessary for that particular man to give to his duties, and have them thoroughly and perfectly done.

Q. Then I understand, that in your judgment you regard it that only a very few hours every day is all that is necessary to be given on the part of Dr. Gray in the attention to the institution as superintendent?

A. Now you see how easy it is to be misunderstood; I said — his personal attention to the ordinary duties and details of that institution; I think a few hours a day in the morning would be all that is necessary for him to attend to it, personally, as you would understand if you knew any thing about institutions. He could receive and read the reports of the doctors, steward, cook, book-keeper, and the various officers; I do not mean that he should forget it immediately after.

Q. And as soon as he has spent those few hours that are necessary, in your opinion, to perform his duties — as soon as he has done that, and looked over these reports, after that, in your judgment, his time should be devoted to his private practice?

A. Do you put that question in my mouth?

Q. I put the question in order that you may answer it yes or no.

A. I do not like to answer any such question as that, and I will answer it no, but I do not think it is a fair question.

Q. What would you say in regard to what the doctor should do with the rest of the day after he has used the three or four hours that was necessary to examine the reports, etc., as you have specified?

A. I do not undertake to include all the duties of Dr. Gray; I would leave the duties of Dr. Gray entirely with Dr. Gray; if there were patients to be seen, or part of the building to be inspected, or any letters to be written, or other affairs to be attended to, I should suppose Dr. Gray would know enough to attend to them.

Q. Then with regard to Dr. Gray you would make him "A law unto himself"?

A. I most undoubtedly would in regard to the matters of his jurisdiction and executive function, and I don't see how you can help doing so.

Q. And whatever course Dr. Gray took as to attending private patients, being an expert witness for compensation in private lawsuits between individuals, giving lectures upon the subject of insanity, and matters of that kind, you would consider right, because of your implicit faith in Dr. Gray's good judgment?

A. I will answer that by saying that Dr. Gray never has given me any cause to doubt his good conduct and faithfulness, and I would say certainly I would let him do just what he saw fit, and use his judgment in any such matters.

Q. I will repeat the question, and please answer it, if you have any answer to make to it, either yes or no. Whatever course Dr. Gray took as to attending private patients, being an expert witness for compensation in a private lawsuit between individuals, giving lectures upon the subject of insanity, and matters of that kind, you would consider right, because of your implicit faith in Dr. Gray's good judgment?

A. If I have to answer that yes or no, I will answer it yes.

Q. Do you desire to add any thing to your answer, or qualify it in any way?

A. In a general way I will say that I have that confidence in Dr. Gray, as I have answered (if I have answered it fairly), so that I would trust him not to neglect the interests of the State in any matter which it may be his duty to attend to; that he would not neglect that duty and attend to so-called practice of a private character, although I do not consider it private; I am not employed to eulogize Dr. Gray, of course, but I have a very high opinion of him.

Q. Have you added every thing to your answer that you desire to?

A. I do not care to add any thing further, if you want to know any thing further.

Q. Do you think that Dr. Gray has the right to absent himself from the institution, and attend his private practice, or as an expert witness in private lawsuits without first obtaining the consent of the board of managers?

A. Will you give me an instance?

Q. I have asked you for your opinion in that respect?

A. Well, in answer to the first part of that double question I still say that I do not think that Dr. Gray has any private practice; in the second place I do not know of his ever leaving the Asylum to attend to a private lawsuit; and if he did on any hypothetical or real cause, I would want to hear the case and then tell whether or not I thought he was justified in going without first consulting his board.

Q. My question is this: Do you think that Dr. Gray has the right to absent himself from the institution and attend his private practice, or as an expert in private lawsuits, without first obtaining the consent of the board of managers?

A. I cannot answer that question on a hypothetical case; if you give me any case I will answer it on the merits of the case; I can imagine a case where he could go without asking anybody.

Q. Either with or without consent, you mean?

A. His judgment would be enough; if it was a matter of life or death; if it was a matter of serving you, Mr. Haskell, for instance, I should think that he ought to do it, perhaps.

Q. Perhaps?

A. It would depend altogether upon the case; if it was a trivial case, I should say no; if it was a matter involving life or death, I should say yes.

Q. Then where there was time to submit the question to the board of managers, you would regard it as Dr. Gray's duty to do so before leaving the institution?

A. That depends upon the rules of the Asylum; I am not one of the board of managers, and I don't know what the rules are; I do not consider myself as a competent judge in that matter; one of the managers would answer that question.

Q. You referred in an answer to my question a few minutes ago, that from your experience with such institutions, etc.— what institutions have you been familiar with or had experience in?

A. I have not had any experience in an institution of this character.

Q. I will ask the stenographer to read your testimony in that respect?

[The testimony was read.]

Witness — I did not refer to institutions of this character.

Q. That is, no institutions for the care of the insane?

A. No, sir; never; not of that kind.

Q. And no other institutions other than those you mentioned at the commencement of your direct examination?

A. No, sir; not that I remember of.

By Mr. GOODWIN:

Q. Your confidence in Dr. Gray is such that you do not believe he would violate any duty imposed upon him by law, or by the rules and regulations of the Asylum?

A. I do not believe he would, after a long acquaintance with him.

DR. WILLIS E. FORD,

Sworn and examined, testified as follows:

By Mr. GOODWIN:

Q. Where do you reside, and what is your business?

A. I reside at Utica, and am a physician.

Q. Where did you graduate as physician?

A. University of the City of New York.

Q. State what positions you held previous to coming to Utica to reside?

A. I was demonstrator of anatomy; I resigned that to take a position in the Charity hospital, where I served until the term of service was up, and came from there to the Asylum at Utica; I came from there to Utica along in the summer of 1873.

Q. How long did you remain there?

A. I think it was in the first of 1879.

Q. You were there from 1873 to 1879?

A. Yes, sir; almost six years.

Q. In what capacity?

A. Assistant physician.

Q. Did you commence being fourth assistant?

A. No, sir; I was third assistant physician.

Q. When you resigned what position did you occupy?

A. I was second assistant physician.

Q. State what were your duties as assistant physician in that Asylum?

A. My duties were to carry out the rules of the institution as laid down by the book of rules, and to execute the directions given me by the superintendent.

Q. How much time was spent on the wards usually?

A. By me?

Q. Yes.

A. At first pretty much all the time from daylight until dark for a number of months, until I knew intimately the names and characteristics of the patients and names of their friends of all the cases on one side of the house where I was; on the men's side.

Q. By whom were you instructed as to the cases and character of cases?

A. I was told about them by the superintendent and the assistant physician who was with him.

Q. State what you did as a physician in reference to your intercourse with patients under your direction?

A. I visited them, all of them, daily; I prescribed for the sick; I looked at their — to see they were properly cared for, their clothing and general appearance; it was my duty to see that the ward was properly cared for and clean; bedding prepared, and pretty much every thing that would pertain to the comfort and welfare of a patient in that building.

Q. Did you examine into complaints made to you by patients?

A. I did, daily.

Q. Complaints in reference to treatment by attendants?

A. Yes, sir, and all sorts of complaints; sometimes they included complaints against attendants, sometimes against each other; sometimes against the physician, sometimes against somebody outside— all sorts of complaints.

Q. Did you converse with the attendants and supervisors in reference to their duties?

A. I did; I instructed new attendants; I gave directions to the supervisors regarding duties of attendants under them; that was part of my duty.

Q. Was it a part of your duty to observe the conduct of attendants toward patients?

A. It was.

Q. And to inquire into the complaints made by patients of attendants?

A. Yes, sir, it was my duty to do so.

Q. What is the usual time that an attendant is upon the ward in that institution — that is, the daily hours?

A. He is on duty for the twenty-four hours of the day, excepting once a month he has a half day out, and two evenings a week, he has the evening from a little after six until ten o'clock, and excepting the time that he is out on Sunday, or when he was excused for some special reason.

Q. Have you heard attendants make any complaint in reference to the length of their hours on duty?

A. I don't now recollect that I have; I presume I have, but don't recollect it.

Q. Do you regard their time of duty too long?

A. No, judging from my experience with the result of that duty upon the men.

Q. Do you think they receive sufficient wages?

A. No, sir, I don't think they do — well, I don't know — I don't think they do, perhaps, from my standpoint of wages it is on a sliding scale — they don't get paid as much as I pay my men that take care of my horses.

Q. You have kept up your knowledge of the Asylum since you left it?

A. I have.

Q. What was the character and capacity of the assistant physicians?

A. Since the time I left there they were men of uniform character and judgment, and would rank among physicians as good physicians.

Q. Was that the character of physicians during your stay there?

A. Yes, sir, I think it was; there were some physicians that were thought to be better than others, of course; but I mean to say I never knew an instance in which there was a physician on the staff who was not a gentleman, a man of character, and a man of good attainments.

Q. State what conferences or reports, if any, they made to the superintendent daily?

A. Our talk with him was constant, fifty times a day sometimes, sometimes not once a day; well, I don't believe there was ever an instance of that, but I will say it was constant, we talked of it as men do in a family about a thing that interests them.

Q. What do the case-books and clinical records of that Asylum contain?

A. They contain pretty much every thing regarding the physical and mental state of patients; regarding their actions and their conditions while in the Asylum; regarding their habits as to neatness, their violence or quietness; where he was each day he was in the house; where he went to when he was removed from one ward to another; what became of him, where he went to, and how he went away when he went out of the Asylum.

Q. They contain a full and complete history of the cases?

A. They do; very full.

Q. State the knowledge of the superintendent as to the cases in the Asylum?

A. I think he had an intimate knowledge of them; more so than any physician ever possesses of patients perhaps in private practice; I should say very intimate knowledge.

Q. Are you acquainted with the records of accidents and injuries kept in the Asylum at Utica?

A. I am.

Q. State the manner in which these books are kept?

A. The book as to what?

Q. As to injuries sustained by the patients?

A. They are charged from time to time; the supervisor keeps the record.

Q. What was the object and purpose of that book?

A. In order that the physicians may be certain that the attendants are aware of what is going on and report to the physicians; it is not part of the record proper that is kept in the office, but is kept to have the physicians know every thing that goes on in the ward; this book is to show that the attendants and supervisors are up to their duty and alive to what is going on among the men, and that they know whenever any thing does happen.

Q. How does this record compare in completeness and fullness with the records of other asylums?

A. I have examined the records of other asylums; this Asylum differs in its character from other asylums, and the records are more voluminous than in other asylums, because of the character of cases.

Q. How does it differ from other asylums?

A. In that it receives acute cases only, or mainly, that it is more of a curative institution than as a receptacle; and that patients who do not get well do not remain there, but are transferred according to the provisions of law regarding that subject, and there are therefore a great number of changes occur in the conditions of patients; there is a larger proportion of mania — violent mania than in asylums, necessarily, where chronic cases are kept; they have to keep a record of the first few months more fully, and it occupies a great deal of space, for it is a medical record mainly.

Q. What restraints were used in the Asylum while you were a physician there?

A. There were two general forms of restraint, you might say three; if an epileptic was liable to strike suddenly he would be allowed his liberty perfectly when the paroxysm was coming on him or was on him; then a belt of leather was put about his waist and his arms were secured by a pair of cuffs fastened so that he could not get far enough away from his body with his fist so as to injure anybody; that was the most common form of restraint; another was used when a man tore his clothing, or denuded his person, or performed acts of indecency upon his person; it was rarely I think during my time; it was entirely discarded, that is, the use of what is called a muff which is an encasement for the finger, so that a man could not reach his person with his fingers; those were rare; I suppose one man in three hundred would be in it during the day or part of the day; that does not include a form of restraint used among women mainly and almost entirely to protect them against indecent exposures of the person and mutilations of the person, which is more common among women than men; that form of restraint consisted of a waist with sleeves that run into each other; that is, the sleeves were attached at the ends; that was not very common but it was necessary sometimes.

Q. Were these instruments of restraint cruel in their construction or use?

A. I never knew a man to suffer in his person or mind particularly from them.

Q. Was there any thing in the construction of any of these instruments which would cause pain to the patient in the application of them?

A. No, sir; if they did cause pain by reason of the condition of the patient, if a man said they were causing pain, they were removed, but I don't think it ever did give pain to any man; I don't remember a case.

Q. Was it a frequent cause of complaint among the patients that the instruments of restraint were painful to them?

A. No, sir, it was not; a man who was in a condition to require such a thing was also in a condition not to mind the mental effect; he was not chagrined by it, and it never gave bodily harm.

Q. Will you be kind enough to give the committee your views in reference to the crib used in that Asylum?

A. In my service it was used for medical purposes entirely; it was used to keep sick people from standing up in the night, or preventing the necessity of being held by an attendant to keep them in a recumbent posture, men and women to whom such a position would be detrimental to their recovery or dangerous to their life; there are certain conditions in which a man or woman will stand up day and night, unless absolutely obliged to lie down, and never would lie down until he or she felt exhausted; and, as a means of securing rest, it is used; that is the only means I ever saw that was free from objection; I think it is free from objection or even criticism.

Q. Are there any other institutions in which the crib is used now?

A. St. Elizabeth's Hospital in our city has one, and many hospitals have them; I don't think we had one in Charity Hospital; I think they have them in most asylums; I have seen them in most.

Q. You are the medical director of St. Luke's Hospital at Utica?

A. Yes, sir.

Q. And have been for some years?

A. Yes, sir.

Q. Have you such a thing in your hospital?

A. No, sir; we cannot afford it; we would like one very well, but we are a pretty poor hospital; I think they are generally in use in insane asylums, and in some they are not.

By Mr. Haskell:

Q. I would like to know what asylums they are in if you can give them?

A. I am not so familiar with asylums now as I used to be some years back; I think they have them at Poughkeepsie and New York, and on Ward's island; I am not certain whether they use them now or not; I do not think they do, now.

Q. In any of the asylums you have mentioned?

A. I think at Poughkeepsie they do; but at the asylum in New York I don't think they do; I know what the sentiment of men who conduct these asylums is on the question, but as to their special practice I cannot say; I know what they say about such a thing; what they teach and believe.

Q. Then you don't wish to say positively that they are used in any other asylum but Utica?

A. Yes, sir; I will say they are used at Poughkeepsie; I am sure that they are used at Ovid, and I think they are used up in the Rome Insane Asylum, the county asylum; I presume I could think of a number of places where I have seen them.

By Mr. Goodwin (resuming):

Q. State what kind of mattress was put in the crib bed while you were in the Asylum?

A. Every bed was made alike, pretty much — a straw tick with a hair mattress over it.

Q. Was that mattress kept on the crib day and night?

A. No, sir; not always, and I don't know as I can say generally; it depends whether it was filthy or not.

Q. And if it was filthy, was the character of the mattress the same in the day as in the night?

A. If there was any in the bed at all it would be; if it was arranged at all the bed was arranged in the morning, as the man slept in it at night.

Q. There would be no change of the mattress at night before the patient was put to bed?

A. No, sir.

Q. I mean in its character and quality?

A. No, sir; we had not mattresses to change in that way.

Q. Did you ever know a straw bed, simply, to be placed in the crib at night when the patient was put into it, and the next morning, after she was taken out, that a different quality of mattress was placed in the crib for the inspection of visitors?

A. No, sir; nothing of that sort was ever done; this straw was changed daily; it was the business of one man to take this mattress out, and put in new straw and bring the ticks in; that was done daily; the beds were left until that was done; when the bed was made up it was made up to stay; those that were not made up at all, simply the bedstead stood there.

Q. You are acquainted with the heating and ventilation, bath-tubs, water-closets, etc., of that Asylum?

A. Yes, sir; I was.

Q. What was their condition when you were there?

A. They were in a state of good hygiene.

Q. Do you know of any ward in that Asylum where a patient suffered from cold?

A. No, sir, there was never a ward in that Asylum inhabited by patients that was not heated to at least seventy degrees; it was my business to see that it was; it was my duty to see what the temperature actually was.

Q. Did you ever find in any of your visitations upon the ward the temperature too low for the comfort and health of its inmates?

A. Not for the health; there are conditions of insanity in which coldness of the extremities is the characteristic physical sign, and in which the sense of coldness about the feet lasts for days; that is specially so among old and feeble men; we had a ward for these men, which is now there with registers directly under the chairs, where they were heated warmer than seventy degrees a good deal; as warm as their health would permit; but the wards were kept

seventy degrees and seventy-two degrees, and were warmer than well men would ever want them.

Q. How in reference to the quality, quantity and distribution of the food of the institution?

A. The quantity was sufficient, I think, on all occasions; the quality, as it was generally served to the inmates, was plain and substantial, and cooked nicely and clean, and of sufficient variety to insure health; in cases of sickness sometimes — always I might say — the diet was prescribed directly by a physician and cooked by a special cook, kept for that purpose, and administered to the patient directly from the kitchen.

Q. Now in regard to the business management of the Asylum; do you know any thing about that?

A. I was more or less familiar with it.

Q. In your judgment should the superintendent be supreme in the management?

A. Of the business affairs?

Q. Of the business and the medical?

A. I think so as a necessity.

Q. And he should have the appointment and dismissal of all attendants?

A. Yes, sir; that is a necessity for good government.

Q. Should there be, in your judgment, a divided responsibility of any kind, and would that be satisfactory?

A. I cannot think of any kind of division that would work harmoniously in a large institution.

Q. Be kind enough to state to the committee why you think there should be an undivided administration of the medical and business departments of the Asylum?

A. Because in the administration of affairs there are necessarily some complaints, and some things to be righted, some things to be obtained, certain things to be changed, and it is necessary that some one person should have the responsibility in order that people generally may know where the responsibility rests, so that there shall be no attempt to shirk responsibility from the shoulders of one person to another, or avoid any certain duties, because it is the duty of another to do it, and because also to secure the ready and rapid administration of affairs, one man should have that authority, which he may delegate if he chooses, but with him must rest the ultimate responsibility.

Q. Was Dr. Gray familiar with the cases in the Asylum while you were an officer?

A. Yes, sir, he was familiar with the cases of the patients.

Q. Did he visit the wards?

A. He did.

Q. How often?

A. I do not know; as often as the physician asked him; I think there was a rule about it; I only had charge of one side at the time; I could only speak of one side, that I had charge of; Dr. Gray used

to come in with me and make a complete round of the building at regular intervals and on his own responsibility see sick people, and sometimes without my knowledge he has gone and I have seen him there; met him on the ward.

Q. With a competent staff, such as you have described as being always at the Asylum, to your knowledge how frequently should the superintendent in your judgment visit the wards?

A. Frequently enough to keep himself familiar with the medical aspects of the cases, and also their general character and form.

Q. How often is it necessary for him to see chronic cases?

A. Unless there is some question comes up as to their discharge, or their fitness for transfer or discharge, I should say it is not necessary for him to see them.

Q. I believe you have answered as to the necessary time that — or the necessity of seeing acute patients whenever, in his judgment, such cases demands his attention?

A. I don't know as I did make that statement, but I will make such a statement, that in cases of critical illness, cases of unusual importance as to the life of an individual, I think it is his duty to see such persons oftener than chronic cases or such as the ordinary run of patients; and I will say that he did so see such people.

Q. Now, doctor, what is your opinion of the general management of Dr. Gray of the Utica Asylum?

A. I think it is characterized by sagacity more than is ordinarily seen; in the management of his affairs as an executive officer, as I compare him with other men, his executive ability is remarkable, and his foresight — his foresight — his ability to see what is going to happen, and provide for emergencies is rather beyond that of men ordinarily.

Q. Is Dr. Gray a worker?

A. He is a very hard worker.

Q. What is his capacity, doctor, for work?

A. Well, he is a very steady worker, he works all the while; when pushed he will accomplish a great amount of work, very great, in a short space of time; his executive qualities — his qualities as an executive officer — he is very prompt, he decides at once; he has his work so systematized as shall make things pass off smoothly without being obliged to attend to every detail every day.

Q. Is he quick or slow in his judgment and comprehension?

A. You mean as a physician?

Q. Yes.

A. As a physician?

Q. Yes.

A. He has very fine powers of diagnosis; I don't know that he is quick; I never saw him pass a snap judgment on a sick person; but he is usually correct.

Q. How is he in his administrative capacity as to judgment?

A. Well, he is a man of good judgment; as I said before his exec-

utive abilities were rather remarkable as I compare him, as I have had opportunity, with other men.

Q. What is your opinion of Dr. Gray as an alienist?

A. Do you mean as to what his reputation among physicians is as an alienist?

Q. I ask your own opinion first.

A. My opinion is that he is an alienist of the first rank.

Q. How is he regarded by the profession?

A. I think he is so regarded by the profession, almost universally.

Q. Now, doctor, are his services valuable to the public in a sense wider than the simple care of an asylum?

A. They have been, and I believe they are now.

Q. Has he been called by prominent men in their extremity at the request of their physicians in obscure cases?

A. Not always prominent men; he has been called.

Q. Has he been called by prominent men?

A. Yes, sir; do you mean by prominent men as physicians in consultation, or to see men in conference?

Q. I mean by physicians to see their patients in obscure cases?

A. Yes, sir, that is true.

Q. What is your opinion in regard to his duty to his profession and the public in reference to seeing such cases under consent of the board of managers?

A. I have always considered it his duty; I so advised him when he was there; I often advised him to go when he thought he ought not to go, or that he would rather not; that was a matter of discussion between us when I was there.

Q. (By Mr. Haskell.) What was a matter of discussion?

A. As to whether Dr. Gray should answer summonses for consultation in cases of great peril.

Q. And in what respect?

A. As to whether it was not a question that he — as to whether he owed it as his duty to the man, or whether he considered it his moral duty to aid men in an extremity.

Q. Now, doctor, in reference to his lecturing under the consent and direction of his board of managers?

A. I thought it a proper thing to do — a proper thing to the public.

Q. What is the effect of a man of his position imparting his knowledge to a class of medical gentlemen?

A. The class of those who are able to teach this branch of medicine is very small; it never has been taught until the last five or six years in any college; necessarily, if that special branch was to be taught, the teachers of it must be drawn from this small, limited class of men who have had experience in the practical management of insane people, there being no others; I believe it was his duty;

that he had not any choice in the matter; that it was a public service.

Q. What did the profession think of his duty in that regard?

A. I never have heard it criticised.

Q. I ask you now in reference to the condition of memory in convalescent patients?

A. The memory of their acts while insane?

Q. Yes, and carrying them from their insane condition into their convalescent and discharged condition, if I may so speak?

A. I think they always carry impressions, disagreeable impressions; if the character of the insanity is of a violent acute type, they very rarely retain very much impression of what goes on during the acute illness; if it is of a slower type they do, and they correct their impressions — as they get well — they correct their erroneous impressions very largely by their judgment, I think, as we all do; but I think disagreeable impressions always cling to men if they have a memory of their illness, especially regarding definite delusions, unless they are absolutely corrected by a good judgment.

Q. Do you mean that a patient who has been suffering with a delusion, and is very quickly and rapidly cured, whether that delusion is apt to leave some impression on his mind after he is fully cured?

A. I think it does if he retains any memory; for certain acute cases it is like a delirium, and the memory is but a dream, at best; not better than the memory of a dream.

Q. But he remembers his delusion?

A. He usually remembers his delusion.

Q. (By Mr. Haskell.) As a reality?

A. There are a certain class of cases of acute delirium where the patient does not remember any thing at all; it is absolutely blank from here to here; these men very seldom have fixed delusions; men with fixed delusions have a slower form of insanity — a subacute, chronic insanity; they remember, and that delusion will cling to them, but they corrected it as they got well by their judgment, by knowing that such a thing could not be possible, but it remains as an impression a long time.

Q. I want to ask you your opinion in reference to delusions of patients in the use of anæsthetics for improper purposes, whether that is an uncommon delusion?

A. No, sir; that is a very common delusion; electricity, spiritualism and anæsthetics are probably the things that more insane people talk about than all other things combined — spiritualism, electricity and anæsthetics — things they cannot see and don't know much about.

Q. Doctor, is it possible to etherize a person while asleep?

A. No, sir; it is not.

Q. How is it in reference to chloroform?

A. It cannot be done.

Q. It cannot be given at all during sleep?

A. No, sir; I wish to say in qualification of that, that it used to be thought possible; I think there are some men who even now think it possible; there has been a good deal of literature within the past six months; when it was tried in the New York Infant Asylum a large number of such experiments were made, and none were fully established; it was established that it could not be done.

By Mr. Haskell:

Q. Are you aware that successful results of administering chloriform to persons when asleep have been performed within the last few months?

A. I am not aware that it has been done; I am aware of the literature on the subject.

Q. Does the literature on the subject state that it has been done?

A. There are certain cases reported.

Q. And you don't believe them?

A. No, sir; it is not a generally believed impression.

Q. Have you ever made any experiments yourself, personally?

A. I have given chloroform and ether very often.

Q. To persons when asleep; have you ever attempted to put a person under the influence of chloroform when they were asleep.

A. No, sir; but I am familiar with the physiological effects of chloroform on persons.

Q. I simply ask the question whether you have or not. You base your belief on your knowledge of the physiological effect of the drug?

A. Yes, sir.

By Mr. Goodwin (resuming):

Q. What weight, in your judgment, should be attached to the evidence of ex-patients in an asylum investigation?

A. If a patient is recovered, those things which they remember they can testify to as well as I can. Those that are not recovered patients, of course, it is a difficult matter to separate their delusions from their facts; they have some facts and a good many delusions.

Q. What degree of confidence should be given to the testimony of ex-patients, in reference to the treatment which they have received while insane — personal treatment?

A. I would make the same answer; that if a person was well recovered, he could testify upon the things that he well remembered; if he was not recovered of course he would give you his delusions, that is all; sometimes it would require an expert to get his delusion out of him or to know whether it was a delusion or not.

Q. What effect, in your judgment, would the publishing of irrelevant, unheeded testimony — (tending to criminate the Asylum) — evidence disregarded by the committee in arriving at their conclusions,

have upon the public mind; would it be likely to excite the public mind and create distrust in the administration of State charities?

A. You mean by your question, irrelevant testimony, what effect would it have?

Q. Unheeded by the committee, irrelevant testimony?

A. Of a nature criminating the Asylum, do you mean?

The CHAIRMAN — I think you ought to limit it in that way. (The question was then amended as above by inserting the words in parentheses.)

A. I think the tendency would be to, of course, it must be, to cause unnecessary anxiety among those persons who have friends there, and to exclude from the benefits of Asylum treatment those whose condition need it.

Q. Do you remember Daniel Buckley? [see page 655 of the minutes.]

A. An attendant in the Asylum at one time — yes, I do.

Q. Was he an attendant when you were there?

A. Yes, sir; he was there during my service.

Q. In what capacity?

A. He was an under attendant; I think he was taking care of the dining-room.

Q. What is the distinction between a dining-room man and another attendant?

A. The first attendant on the ward has charge of the ward and directs the under attendant; the next man to him is selected for his fitness to be next to the head attendant, and the other man has the dining-room to see to.

Q. I read from the testimony of Buckley, page 655, of the printed testimony: "There was three of us and we had from twenty-four to thirty patients to look after, or thereabouts; and those were the very worst class of patients; that is, they could not be got along with on the other halls; they would get worse and be moved from ward to ward, until they went to number thirteen, and that was the dead house; they could not get along any further than that, and they were generally cured when they got there." Have you examined the records at my request as to the number of persons who died on the twelfth ward, from March, 1873, to April, 1874, the time when Buckley was in the Asylum?

A. I have; I made a memorandum of that last evening at your request from the records that I knew to be correct when they were taken.

Q. How many deaths were recorded on that ward during that period?

A. Six from March, 1873, to April, 1874, inclusive.

Q. Be kind enough to give the names?

A. H. S. Benson, he died March, 1873; a man died in May; his name was McCann; one died in June; his name was E. Sullivan; in July, J. G. Geib, and the next was in November, M. W. Heath, and the next in January, 1874, H. McCabe; there was no death in February, March or April.

Q. These were all the deaths?

A. Yes, sir.

Q. What did these six men die of?

A. I can only testify to the time I came there; I was not there in March, April and May, but beginning with September, when I came there and took charge of the men — there was no death in September or October, but in November a man by the name of Heath died.

Q. What did he die of?

A. Uræmia, a form of kidney disease.

Q. Any other deaths?

A. The only other death that came under my personal care was H. McCabe, who died of general paralysis of the insane; he was the only other man who did die on the ward after I took charge of the ward in September.

Q. Have you also examined the records as to how many were transferred from that ward to other wards?

A. Yes, sir; it is part of this table I have read to you from.

Q. Be kind enough to state the number of persons transferred, and when?

A. In March, 1873, there was one man removed from this ward to No. 10, and one man died, which made four transfers on the ward; in April, 1873, there was one man removed to No. 8 and two discharged, which made three removals in that month; and in May there was one man removed to No. 4, one to No. 5, one to 7, one man to 10, and one man died, making five changes in that ward in that month; in June one man was removed to No. 4, and four to No. 10, and two to No. 11, and one was discharged, and one died, making nine; in July there were two removed to No. 10, two to No. 11, one discharged and one died, making six; in August one to No. 3, two to No. 4, two to No. 8, one to No. 9, two to No. 10, making eight; in September there were two removed to No. 10, and one discharged, making three removals; in October one was removed to 4, and two to 8, two to No. 10, one discharged and one died; in December there was one to No. 4, one to No. 7, two to No. 8, three to No. 10, and two to No. 11, making nine; in January, 1874, there were two to No. 10, four discharged and one died, making seven; in February four to No. 10, one discharged, making five; in March there was one removed to No. 10 and one to No. 11, making two removals in that month; in April there was one to No. 8 and two discharged, making three removals during the month; that is the whole of this tabulated statement.

[Statement marked Exhibit No. 22, J. H. M. offered in evidence and admitted. See Appendix.]

Q. I send to you a statement from Mr. Buckley's testimony, at page 656 of the printed record: "I have seen patients choked with a towel sometimes. Q. How was that done? A. I will show you; here is a towel; now I will show you if you will let me, etc.,

etc." [*reading the whole of the page*]. Did you ever hear of any such instance as that?

A. No, sir, I never did.

Q. Could such a thing as that happen in a ward of that kind, where it is said to have occurred, and no physician be aware of it?

A. I should think not; no, sir.

Q. Do you recall an attendant by the name of Reece?

A. Do you want me to qualify that last answer? as to whether it is of my general knowledge of the institution, or because of my knowledge of the insane; I would like to state that the main reason is because that even though an attendant should conceal it, or attempt to conceal such a thing, there are patients all the while on that ward who constantly report such things, and who would report every little thing that goes on; I do not think a ward is ever without a witness among the patients, and if such a suspicion is breathed by a patient, an investigation of the facts of the case is at once instituted.

Q. Did it ever come to your knowledge or hearing while you were in the Asylum of any person being choked with a towel in that way?

A. Yes, sir, it has — that is — it has been — I have had a patient say they were choked — I have had a patient say that.

Q. Did you make any investigations?

A. I did.

Q. What was the result of your investigation?

A. I cannot now recollect that it was ever proven to have occurred.

Q. (By Mr. Haskell.) Or not to have occurred?

A. I cannot recollect any instance in which it was not proven that it did not occur; I would like to say that in some cases I have recommended the discharge of attendants for various things, that I considered offenses, of course; this very man Buckley was discharged for an offense — some breach of discipline.

Q. I read from pages 656–7 of the printed testimony: "I think it would be better if the attendants had permission to do a little fighting, so that when they did it they would not have to hide it, for the bleaching-out process, in my opinion, is worse than a licking for a fellow; he does not suffer so much, I think, from a thumping, as he does in being put into a cold bath to take the black and blue spots out of him." Did you ever hear of any such performance as that, putting persons in a bath-tub as a bleaching-out process?

A. No, sir; I never did; and as a matter of fact it would not bleach.

Q. What effect would a cold bath have to remove black and blue spots?

A. It would not remove them.

Q. So that if a patient was beaten until he was black and blue, putting him in a cold bath would not remove them.

A. No, sir.

Q. (By the CHAIRMAN.) What effect would a hot bath have?

A. I think it would cause a removal of the swelling, because it would cause an absorption of the blood that caused the swelling.

By Mr. HASKELL:

Q. What effect would it have to put a patient into a cold bath prior to the discoloration of the skin?

A. After the injury was received?

Q. Yes, immediately after the injury?

A. I do not think it would have any effect.

Q. Do you mean to say that if a blow was struck a person, on the face, for instance, that it would have no effect in regard to discoloration to bathe the face in cold water immediately?

A. It stops some of the swelling; if a blood vessel is broken, it stops the large blubs of blood which you see in a black eye for instance, where they put pieces of cold meat on to the eye, that is to stop hemorrhage or swelling, but it does not remove the discoloration.

Q. State whether or not, in your judgment, the application of cold water would not tend to prevent swelling and discoloration?

A. Cold water applied to and allowed to be evaporated from the skin does prevent swelling, but it has to be applied continuously and for a long period; but I do not think that a cold bath would have any such effect.

By Mr. GOODWIN (resuming):

Q. Do you remember a patient by the name of Heath?

A. I do.

Q. I call your attention to Mr. Buckley's testimony in reference to him, at page 657: "There was one case in particular, the patient's name was Heath, etc.," and down to the words, on page 658, "with the toe and heel of his shoe." State to the committee what are the facts in that case, and what there was about that Heath case?

A. This man, Reece, that he speaks of was the man who had charge of the ward at that time; Buckley was a man who was taking care of the dining-room; there was another man on the ward with them — a third attendant; I don't know that I could call his name; I probably should if it was mentioned to me; but I remember the circumstances of this man, Reece, very well.

Mr. HASKELL — Reece or Heath?

A. Reece; for it was for that — it was for — it was for his — well, his handling this man, Heath, who was a maniacal patient, in a manner which I thought to be unjustifiable, that I took his keys away from him and discharged him on the ward; I was present on the ward; I sent him to the office.

By Mr. Haskell:

Q. Then you saw him inflict these injuries upon Heath?

A. I saw him handle Mr. Heath roughly, and Heath said he (Reece) hurt him, and I believed Heath told the truth when he said the man hurt him.

Q. What did you see Reece do?

A. I saw him sit him down heavily in a chair.

Q. Any thing more than setting him down heavily in a chair?

A. I can't recollect the facts any further than that.

Q. Did you see Reece kick him?

A. No, sir, I did not.

Q. Or "heel" him with the heel of his boot?

A. No, sir.

Q. Or strike him in the face?

A. No, sir, I did not.

Q. Or choke him with a towel?

A. No, sir; but I thought Reece was to blame; I thought Reece lost his temper, and was not kind to this man.

Q. Where was it that this occurred that you saw?

A. On the twelfth ward.

Q. Whereabouts in the twelfth ward — was it in a bath-room?

A. I cannot say, I was on the ward; I don't know that I can recall now the particulars of it.

Q. Do you recollect whether it was on the ward or in the bath-room that the violence that you did see occurred?

A. I was there for some time; I think I went into the bath-room; my memory is that I went into the bath-room; I stayed with Mr. Heath after that because he was very violent.

Q. At the time you were in the bath-room, what did you see?

A. It was for no one particular act; I thought the man was — he was rough in a general way.

Q. Then previously to this time had you seen him handle Heath roughly?

A. Not previous to that occasion; I never saw him handle any man roughly, except on that occasion.

Q. And you immediately discharged him on the spot?

A. Yes, sir; this man Heath was a large man; he had had a number of very violent paroxysms, and he was a feeble man in certain ways, too — my memory is that he was an epileptic, but I do not know whether he did or not, that is my recollection, and during the seizure, for half an hour or so, he would be very noisy and disturb the ward.

Q. Now start in and state all that occurred about Mr. Heath from the time you went on the ward until —

Mr. Goodwin — If Mr. Haskell will allow me to pursue my line of examination, he can cross-examine the doctor when I am through.

Mr. Haskell (continuing) — Until it wound up with your discharging Reece?

A. I think I have stated to you all the material facts that I now recollect.

Q. As you recollect it, what was the relative position of the patient and the attendant when you went on to the ward?

A. I cannot recollect.

Q. How long had you been on the ward before Mr. Reece's actions were such that you thought you ought to discharge him?

A. That I cannot say; I had been out and in the ward all day.

Q. But on this particular occasion?

A. I think I discharged him at that time.

Q. Immediately upon coming on to the ward?

A. I think very soon; I don't think I was on the ward a very great while at that time.

Q. You cannot state more definitely the location of the place where you saw him handle this man roughly?

A. No, sir; I cannot.

Q. As to whether it was in the main hall or in the bath-room?

A. No, sir, I cannot; it is a hard thing to recollect the faces of all the men at this distance of time.

Q. Do you desire to say any more than that you have a general recollection that there was violent treatment of Mr. Heath by the attendant, and that you discharged the attendant for it?

A. I discharged the attendant because Heath said the attendant hurt him; and because I thought from the appearance of the attendant that it was true; that is, he seemed to be a man who had lost his temper, which we never did allow; and I discharged him there.

Q. Did you make any examination of the patient to see if he was hurt?

A. I did, at once.

Q. Did you find any thing?

A. I think he had a bruise on his arm.

Q. Anywhere else?

A. Not to my recollection.

Q. Will you swear there were no other injuries?

A. Well, I will swear that I do not recollect any others.

Q. How long was this before his death?

A. I don't know; I think it was some time; I can't say; I don't know.

Q. And do you know whether that was the same incident that Buckley relates in his testimony?

A. It must have been, for Mr. Reece was never on the ward after that day.

Q. And you cannot give us the date of Mr. Reece's discharge, except that it was the date of this occurrence of the death of Heath?

A. No, sir; I think the Asylum records would show when Reece was discharged; I cannot give it, I can hardly recall the month; my impression is that it was somewhere along in September, but in that I may be wrong; I know it was that fall sometime; I could not locate it more definitely than that.

Q. Who was the other attendant physician on the male side at that time beside yourself?

A. I think I was in charge on that side, and I think it was Dr. —— well, I cannot recollect.

Mr. HASKELL — I should like to have those dates furnished in the Heath case.

By Mr. GOODWIN (resuming).

Q. I call your attention to page 661 of the printed record, where he says: "There were two other attendants part of the time — two and myself; there was a man there, a patient from Albany, named P. R. * * * * but this R. was from Albany, and he used to keep a hotel; there was a chair in his room; and there was a fellow there by the name of P., he wanted this R. to go into the dining room and get some knives for to kill us." I ask you whether any person from Albany county was in the Asylum at that time whose initials were P. R. or R.?

A. I recall Mr. Squire A. Rogers very well.

Q. What became of him?

A. I think he died a good many years afterward; he was quite an aged man, and he had been insane a long time; I went over these initials and did not find any such initials as he mentions.

Q. I will call your attention to page 659 of the testimony. "Well, Dr. Gray came along that day * * * [*reading*], and Dr. Ford when he came along the next day, I told him I would like to have the case investigated; he said I had a right to go and tell Dr. Gray every thing I knew about it, and he thought that was the best thing I could do; he said he knew there was a rule amongst us that we did not like to tell on one another, but that in this case I had better tell all about it to Dr. Gray." Did you ever have any such conversation as that with Mr. Buckley?

A. No, sir.

Q. Or with any attendant?

A. No, sir.

Q. Did you ever tell Buckley or any other attendant that you knew there was such a rule existing among them?

A. No, sir; I never had any such conversation with Mr. Buckley or any attendant.

Q. As a matter of fact, did you at any time, during your stay at the Asylum, suspect or believe that there was a rule among the attendants by which they kept injuries from the knowledge of the physicians?

A. No, sir; I will say this, I knew as I would know, humanity generally, if a man did wrong he would try to conceal it, but there was no understanding among the attendants, that was never so, I don't believe that could exist.

Q. I continue to read, on page 660 of the testimony: "What became of Reece after that event? A. After a while he was discharged. Q. How long after the death of Heath was Reece discharged? A. Probably a month; I do not know whether he was discharged after his month was up or not." Now you say he was

immediately discharged, and that you took the keys from him and sent him to the office, and that he was discharged before Heath's death; that he was discharged from your own knowledge by taking the keys away from him for the act he committed at the time you were on the ward?

A. Well, mainly from what Mr. Heath told me, I did not see him injure this man in any way; I believed, however, that he had been violent to the man; I think the facts justified the opinion, and I thought it was my duty to recommend his removal, which I did.

Q. I will read from page 661 of the testimony: "How long was he kept in the institution after the violation of that rule? A. I think he was kept until his month was out; whether or not he was kept longer than that I do not know; there was only two of us in the whole ward when Heath was injured, that is me and Reece, and the following day Reece went out in violation of the rules." What was the rule in reference to disturbed wards when short of help?

A. A disturbed ward was never left without its full quantity of attendants; that was one of the rules.

Q. And when one person was discharged from that ward was his place immediately filled from another ward?

A. It was filled from the front ward.

Q. So that there was always the full complement of attendants on the disturbed wards?

A. Yes, sir, that was the rule, and I know it was always enforced while I was there.

Q. Now, I will read from pages 661–662 of the printed testimony: "I broke this little finger, etc., etc." [*reading the whole of pages* 661–662], down to the words "he had to be taken care of," in the middle of page 662. Do you remember that case?

A. No, sir, there was never any such occurrence; I don't remember these men's names, but I know no such cases occurred on the ward; of course I don't know what patients he refers to.

Q. And if it did occur it would certainly have been brought to your knowledge?

A. It could not have escaped me.

Q. I quote from page 663 of the testimony: "I don't know as I can say whether I was discharged or whether I left, etc., * * * so I left." Do you know any thing in reference to his discharge?

A. I know that I recommended his discharge; I was dissatisfied with his services — or rather, I cannot say —— I don't think it is proper to say I "recommended" his discharge; it was my duty to report the facts to the superintendent, and I know he discharged him on the statement of facts that I reported.

Q. That is, you remember Buckley; have you seen him since you left the Asylum?

A. I don't believe I have.

Q. That was some ten years ago; what kind of a looking man was he at that time when he was on the ward?

A. I don't remember; he was a very good-looking fellow — a very clean, decent looking man indeed.

Q. As to his manner?

A. His manner was very good; Buckley was not — he was not a very large man — a spare man, rather, and a very decent looking fellow, as I remember him.

Q. I call your attention to this, now. Was there a person employed in the Asylum by the name of John J. Halpin?

A. Yes, sir; there was.

Q. What ward was Halpin over when you were in charge of the men's department?

A. He was never over a ward; he was an assistant on No. 10; he was a supernumerary; he was never in charge of a ward.

Q. What do you mean by supernumerary?

A. No. 10 is a large ward, a large number of quiet patients upon it; some of these——; there are sometimes over five attendants there, in order that in case an attendant was sick, or another had to be sent away, an attendant could be supplied from this ward to take his place, if it was on a disturbed ward; Halpin was such a man.

Q. What is the character of men on ward No. 10?

A. They were improved men; always quiet men; it is a very quiet ward; the men were quiet, demented patients; there were many quiet, demented men; it is a very large ward — a large number of demented men.

Q. Are they persons who would be likely to report any injuries?

A. Oh, yes, sir; there were forty or fifty men on that ward, a very large number of men, and men who talked well enough.

Q. Have you, at my request, examined the records of the Asylum or from your memory in regard to matters which occurred there?

A. Yes, sir; I looked up that matter.

Q. I refer to page 493, printed record; was there a suicide there?

A. Yes, sir, one; that was David P———.; he cut his throat with a knife in the dormitory; it was discovered in the morning; the knife was reported as having been missed, and the whole ward was searched; it was two days after the knife was missed that the man committed suicide.

By Mr. Haskell:

Q. Are you testifying from your own knowledge?

A. Well, I looked up that fact and I am testifying from my memory as I refreshed it by looking up; I remember the instance, but would not be able to recall it of course at this distance of time; I simply consulted the record; I did not consult the case-book.

By Mr. Goodwin (resuming):

Q. Page 494 of the testimony, was there any inquest on P———.?

A. I don't remember; I suppose so; the coroner was notified when an accident happened; I don't recollect in that particular instance whether he was or not; I know it was the custom; I have no recollection whether the coroner was summoned in that case or not.

Q. Page 494 of the printed record, in reference to the burial of

the patients; what became of the bodies of patients who died in that Asylum?

A. They were taken home by their friends.

Q. And those that were not taken by their friends, what was done in their case?

A. They were sent to their friends.

Q. Were there any buried from the Asylum?

A. I don't know that I ever knew of any instance — yes, — I think there were two one year; well, I don't know that I remember really of any instance of that kind, though I presume there were such cases.

Q. You do not know of your own knowledge that there were not any buried in the Potters Field?

A. I don't know; the undertaker always took charge of the remains.

Q. I call your attention to page 496, testimony, the case of assault on a patient by Redner (*reading testimony to witness*). I will ask you first in regard to what effect it would have upon a person to be thrown down upon the floor and jumped on in that way; whether he would be liable to get up at once and go off the ward?

A. I should think that would be a very serious injury; I should doubt whether a man would be able to walk; ordinarily such an injury does not admit of a man's getting around very soon.

Q. I will ask you whether at any time during your service in the Asylum whether Halpin was a private attendant?

A. Not while I was there, no, sir.

Q. Now, I call your attention to pages 498 and 499, which I will read to you (*reading the same*), who told you about a patient getting badly mauled? An attendant that was there; etc., etc.," down to the words "but I know that he died of it," on page 499, also on page 500 —the whole of the page.

Q. How long was Dr. Smith at the Asylum, as an assistant physician?

A. He was there about two years, 1874 to 1876; I think he went away perhaps two years before I did; I think he was on my side of the house much of the time.

Q. Did any such case as that occur while you were in charge of that side, or down to September 1875?

A. No, sir; nor any thing like it that I know of, or that I am able to find by looking at the records.

Q. Have you examined the records of the institution touching the death of patients on the tenth ward during the period you had charge of the ward, subsequent to the time of Dr. Smith's leaving?

A. Yes, sir; I did make that examination last evening, at your request; I examined from March 3, 1873, to July 4, 1876, the time of Halpin's stay in the Asylum.

Q. Was there any such case as that in the records?

A. No, sir; nothing like that; there were only two or three men

died, and I have their names here on the back of this table (Exhibit 22).

Q. You may give the names?

A. January 15, 1874, Edwin M. Anderson, died of general paralysis of the insane; I knew him well, he came from my section of the State; the western part. C. Mundion died June 19, 1874; I remember him very well; he had heart disease; was sick a very long period and died of heart disease — dropsy. S. A. Rogers, in 1876; I remember him very well, also; I had charge of him.

Q. Was there a suicide in that case?

A. Yes, sir, I have given the suicide. This S. A. Rogers died of Bright's disease; he must have been there from ten to fifteen years. A. Day, February 20, died of exhaustion; he was an old man too, quite an old man. That is every death that occurred on that ward in that period, with the exception of D. Pringle, who committed suicide, and I have already read that; those are the only deaths that occurred in that period.

Q, Was there any death of the kind related in Halpin's testimony, or any instance of that kind while you had charge of the male department from December, 1873, to December, 1875?

A. No, there was nothing like that.

Q. And no rumor of any thing like that?

A. No, it is entirely new to me; I never heard any thing like it before.

Q. Did you examine the records to see what patients from Albany county died in the Asylum during that period?

A. Well, those are the only deaths that occurred on that ward.

Q. I want to get at the deaths that occurred from Albany county during the whole time you were there?

A. I did not look them over; but I do not recollect the case you have read to me now, I do not remember any Hatter from Albany, but that would be included in this list, if it were so, for this list covers the death of the man he referred to; because he says he died in ward ten.

[The further examination of Dr. Ford was then suspended, to be resumed on Thursday evening next, the 27th inst., at Utica.]

The committee then adjourned until to-morrow, Wednesday, at 3:30 P. M.

Room B.,
March 26, 1884, 3:30 P. M.

Present — Messrs. Howe, Haskell, Brown; Messrs. Goodwin and Morgan of counsel.

Proceedings continued as follows:

H. RAY BARNES,

Sworn and examined, testified as follows:

By Mr. Goodwin:

Q. Where do you reside?

A. Utica.

Q. Are you an alderman of the city?

A. Yes, sir.

Q. Were you a member of the jury at the coroner's inquest in the Hughes case?

A. Yes, sir.

Q. Do you remember Mr. John Charles Hughes, a son of the man who was injured?

A. Yes, sir.

Q. Did you have any conversation with him at any time in reference to what he said to Dr. Backus at the time he brought his father to the Asylum?

A. I had no conversation with him, only his evidence; he was a witness before the jury.

Q. Did you hear him say any thing —

(Mr. Haskell — Aside from his evidence?)

Q. Aside from his evidence?

A. No, sir.

Q. Were you present at a conversation held with him and Mr. Sherman?

A. No, sir; it was while he was a witness on the stand; I never spoke to the gentleman or heard him speak a word, except as a witness.

Q. Was that a stenographic report?

A. Yes, sir, it was a report taken by a stenographer; not that part of it that I refer to; the clerk took that.

Q. What clerk?

A. One of the jury that was appointed clerk.

Q. Who was that?

A. Albert G. Spencer, son of the coroner; the stenographer did not commence until the second day.

Q. Was this conversation previous to the stenographer commencing?

A. Yes, sir; this testimony occurred previous to the evidence taken by the stenographer.

Q. (By Mr. HASKELL.) You have heard nothing from Mr. Hughes, except what he detailed under oath before the coroner while on the stand as a witness?

A. No, sir.

Q. Mr. Barnes, I ask you did you hear Mr. Hughes say upon that examination that he had not told Dr. Backus, or the physician who received his father into the Asylum, about his violent condition?

A. Yes, sir.

Q. What did he say on that subject—

Mr. MORGAN — Will the committee allow Mr. Hughes to be contradicted without his attention being called to it himself when on the stand.

Mr. GOODWIN — How could we call his attention to it?

Mr. MORGAN — The Asylum was represented by counsel, and he was cross-examined.

Mr. GOODWIN — I beg your pardon; the Asylum has not been represented except by myself, and I was not present.

Mr. HASKELL — Mr. Swan was there for the Asylum; Mr. Hughes was cross-examined by Mr. Swan.

Mr. GOODWIN — I offer to contradict the testimony of young Mr. Hughes in that respect.

Mr. HASKELL — (in the temporary absence of the chairman) We will allow Mr. Barnes to detail what Mr. Hughes said.

A. Mr. Hughes was stating the violent condition of his father, and after he had finished detailing the condition of his father, the time before he was brought to the Asylum, Mr. Kincaid asked Mr. Hughes if he had described the violent condition of his father to the physicians when he brought him to the Asylum; he said he had not, and then upon that the foreman of the jury said to him: "Then, sir, you did not do your duty."

Q. What did Hughes say?

A. He made no repply to it; we went on then with more evidence upon the matter.

Q. How long was the jury at the Asylum; how long was the investigation?

A. Three or four days.

Q. During that time were you in and about the wards of the Asylum?

A. I was.

Q. In most of them?

A. I don't know the number; I was in several of the wards.

Q. Were you there with Dr. Gray?

A. I was.

Q. Did you make inquiries of Dr. Gray in regard to the patients?

A. Yes, sir.

Q. As to whether he was familiar with the patients and their condition?

A. I called his attention to quite a number of patients, and was surprised to see that he was so very conversant with them.

Q. As to his knowledge of the names and familiarity with the cases of the patients?

A. I was going to say that I was surprised to find him so conversant with them; that he was so familiar with each patient's name, and his particular phase of insanity and condition, etc.

Mr. Goodwin — That is all; you can examine, Mr. Morgan.

By Mr. Morgan:

Q. You joined in the finding of the coroner's jury, did you not?

A. I signed the verdict.

Q. And you signed that, knowing what it contained?

A. Yes, sir.

Q. You have no personal knowledge of the care and attention that Dr. Gray gives to the patients, have you?

A. I have not; no, sir.

Mr. Morgan — That is all I desire to ask.

By Mr. Haskell:

Q. Mr. Barnes, will you please state what young Hughes, who was sworn at the coroners inquest, stated as to his father's previous condition, as you recollect it?

A. His father's condition as regards his violence?

Q. Yes.

A. He stated that on an evening — I don't remember which — Monday, Tuesday, or Wednesday evening — he and his mother (that is the elder Hughes) and his mother returned from shopping (this is as near as I remember) from the adjacent village of Morrisville, when he returned the first notion or evidence they had of his insanity was he came into the house, and they were looking over some goods they had purchased, some remark was made about the number or amount of goods of that character, and he said that while they were nice or large quantities of them, yet he didn't think he would be there very long to enjoy them; they asked him why, and he told them that he was going to die, and that night he was disturbed and violent, and the next day it required four men to hold him, and take care of him, and that while two men were taking care of him in the room, he ran out of the room, and was liable to get away from them, and that it required four men to take care of him; that was about the substance of the evidence about his father's violence, as I remember it.

Q. Do you remember any thing else that Hughes testified to?

A. Oh, there was various other things he testified to.

Q. In regard to his father's condition before he was brought to the Asylum?

A. I regard that about the substance of it.

Q. You cannot specify it any more particularly than that?

A. He said he went to get a doctor, and left the people at home to take care of him; the doctor gave him opiates to give to his father, he said, as the doctor was familiar with the case; he said that his father was quiet from the medicine, and had not made any

demonstration of violence either when taken to the Asylum or for a little after he was there, and he attributed it to the condition of his mind under the influence of opiates, and that is what stimulated the question, as I understood, from Mr. Kincaid.

Q. You say that after he gave this evidence Mr. Kincaid asked him what?

A. He asked him if, when he took his father to the Asylum, if he told the physicians in charge or Dr. Brush; he asked him if he did state it to the physician?

Q. Which physician, as you recollect, did Dr. Kincaid ask him if he had stated it to?

A. I cannot say whether it was Dr. Brush or the physicians in charge; I cannot say as to that.

Q. If he had stated what?

A. The violent condition of his father while at home.

Q. And what was Mr. Hughes' answer?

A. Now, I want the stenographer — should I take it as I heard it, as my recollection of it as I heard—as I understood it—that is the way I want to place myself about it; he said he had not, and Mr. Sherman, the chairman, said to him that he had not done his duty.

Q. Would you swear positively that is what Hughes said?

A. That is as positively as I recollect it and as I understand it.

Q. Your recollection is that he said that he had not given any of the circumstances?

A. That he had not told them of his violent condition — that it required four men to hold him.

Q. Was Mr. Hughes interrogated on that examination as to what did occur between him and the physician at the Asylum when he brought his father there, any more than just this one question?

A. I cannot say, I would not want to swear whether he was or not; I don't recollect.

Q. Your recollection is not very clear as to what occurred?

A. It is usually pretty clear, as clear as any man's I reckon; it brought it more particularly to my memory and impressed itself more vividly by the remark of the chairman.

Q. But you are unable to say what Mr. Hughes did tell the physicians at the Asylum what was gone into there, more than that simple question by the chairman?

A. I don't know, it might have been more.

Q. And might not. You do not know any thing about that?

A. I recollect generally.

Q. What is your general recollection, whether it was gone into or not?

A. His real condition?

Q. No; as to whether the interview between Mr. Hughes and the physician in regard to his father when he took his father to the Asylum, was gone into?

A. I think it was.

Q. As you recollect it, what did Mr. Hughes say he told the physicians when he took his father to the Asylum?

A. That his father — I think in the first place he talked with Dr. Gray himself; I am not sure about that, but I am positive he said he did talk with Dr. Gray about it, because as the man went in Dr. Gray recognized him and shook hands with him, and asked him about his coming back.

Q. What else did Mr. Hughes testify to in regard to his interview with the physicians at the Asylum?

A. I think he testified to the discovery of his father and some of his acts, about his being prone to self-destruction, and the like of that; they were afraid he would take his life, and what he had said about the night before that he did not think he would enjoy the goods they bought at Morrisville, or something of that kind; that he was a "suicidical" patient, enough to satisfy the doctors about that; I know it was upon that basis he was placed in that hall; it was based upon what Mr. Hughes, as I understood, that caused the physicians to place him on the "suicidal" hall.

Q. Did Mr. Hughes testify to that before the coroner's inquest?

A. No, sir.

Q. I am asking you what Mr. Hughes said?

A. I say what Mr. Hughes said was of that purport that would show the physicians he was a "suicidal" patient, as I understand it.

Q. And you say that in Hughes' detailing the condition of his father at the Asylum, that he did not say any thing in regard to his father being violent at all?

A. In his examination.

Q. Yes.

A. Oh yes, sir; his examination showed it required four men to hold him.

Q. But when Hughes was inquired as to his conversation with the physicians at the Asylum, did he not testify before you that he told in that conversation when he told them about his father having threatened his life, and every thing of that character, did not he also say that they had some watchers there?

A. Yes, sir.

Q. And that on one occasion his father had undertaken to run out of the house, something of that kind?

A. I don't recollect of his swearing that he told the physicians that, but he told the jury that; I do not think he swore to that as telling the physicians that.

Q. Are you positive?

A. I don't know; I would not want to be, because I don't recollect whether he swore to that or not.

JAMES C. P. KINCAID,

Sworn and examined, testified as follows:

By Mr. GOODWIN:

Q. Where do you reside?

A. Utica.

Q. What is your business?

A. I am in the hardware business at present.

Q. Were you a member of the coroner's jury on the investigation of the Mr. Hughes matter at the Asylum?

A. Yes, sir.

Q. Did you hear John Charles Hughes testify?

A Yes, sir; I heard the son of Mr. Hughes testify.

Q. State what he said to either you or Mr. Chairman in reference to not having reported his father's injuries to the physician upon bringing his father to the Asylum?

Mr. HASKELL — His father's injuries?

Mr. GOODWIN — His father's violence?

A. I do not know that I exactly understand your question.

Q. During this examination of Mr. Hughes, some one asked him whether he stated any thing in reference to the violence of his father to the physician?

A. He made a statement to the coroner's jury of the condition of his father previous to being brought to the Asylum; I asked him the question whether he had stated the same facts to Dr. Backus or to the physicians of the Asylum, or Dr. Backus, whom he stated received his father into the Asylum, the same that he had stated to the coroner's jury; he said he did not.

Q. Any thing more on that subject that you heard?

A. That was the — he was reproved by the foreman of the jury for not having stated — for not having made a fair statement.

Mr. GOODWIN — You can cross-examine.

By Mr. MORGAN:

Q. Who was the foreman?

A. Joseph A. Sherman.

Q. The evidence of Mr. Hughes was reduced to writing by this clerk, was it not?

A. The evidence was taken by the clerk of the coroner; I suppose so; he was there at the time; we had no stenographer at that time.

Q. Was the evidence read over to Mr. Hughes at the close of this examination?

A. Yes, sir; I think so.

Q. And he signed it, didn't he?

A. That I am not aware of; I think he did.

Q. Were there any corrections in his evidence, suggested by yourself or any other member of the jury?

A. That I cannot answer.

Q. Do you remember of any suggestions being made that they had not got his evidence complete in that record?

A. Not that I am aware of; if you will allow me to state, the evidence taken by the clerk or the son of the coroner was a great deal incomplete; it was for that reason that we secured a stenographer the second day of the inquest.

Q. But his evidence was read over to him, and in the presence of the jury, was it not, and an opportunity given for correcting if it was not right?

A. That is my recollection.

Q. You signed the verdict of the jury, did you not?

A. I signed the verdict.

Q. And when you signed that you knew what it contained; it was read to you, was it not?

A. That implies, Mr. Morgan, that —

Q. It was not a very lengthy verdict or inquisition; you read it or heard it read?

A. I heard it read; yes, sir.

Q. Then you knew what you were signing, didn't you?

A. I am ashamed to say that I did not.

Q. You understood that that was an act that you was performing under your oath?

A. Yes, sir.

Q. And now you say you did not understand?

A. Not the full intent of the verdict.

Mr. Goodwin — The object of the verdict?

A. The object of the verdict — no.

Q. The result?

A. Yes, sir, the result of the verdict.

Q. Why did not you make yourself familiar with the verdict and its results?

A. I wrote the verdict myself.

Q. I was going to ask you that; I understood you wrote the verdict yourself?

A. It was under a misapprehension; you oblige me to say so.

Q. You signed it?

A. Yes, sir.

Q. Do you say that you wrote that verdict yourself and that you signed it and did not understand its effect?

A. I understood that the verdict was written under the advice of the district attorney; there was some discussion with the coroner.

Q. (By Mr. Haskell.) In regard to what?

A. In regard to the effect of the verdict.

Q. Mr. Kincaid, that does not answer my question; do you now say you wrote that verdict and yet that you did not understand the effect of the verdict?

A. No, sir; no, I cannot answer the question that way unless there is an explanation.

Mr. Goodwin — I desire to call the attention of the committee to the testimony of John Charles Hughes at pages 316 and 317 of the printed evidence upon this point as sworn to by the last two witnesses.

Mr. Goodwin — That is all, Mr. Kincaid.

Mr. Haskell — I will ask the witness this question.

By Mr. Haskell:

Q. Was Mr. John Charles Hughes examined in regard to his interview with the physician at the Asylum when he brought his father to the institution?

A. He stated to the jury — well —

Q. Was he examined in regard to that?

A. Yes, sir, he was; that is my recollection of it.

Q. State to the committee what he testified that he told the physician at the time he took his father to the institution and to whom he told it — to what physician he made his statement?

A. He stated to the jury that he brought his father to Dr. Backus. I don't remember whether he stated to the jury what he told Dr. Backus; but it was rather a negative question, after he stated the condition —

Q. We have got that; do you recollect whether he told you what he stated to Dr. Backus yourself, whether he gave his conversation with Dr. Backus?

A. I think he did not.

WM. E. JONES,

Sworn and examined, testified as follows:

By Mr. Goodwin:

Q. Where do you reside?

A. Utica.

Q. How long have you resided there?

A. For twenty years; I have been there since 1857.

Q. Are you married?

A. Yes, sir.

Q. How long have you been married?

A. Seventeen years.

Q. How many children have you?

A. Three.

Q. What is your present business?

A. Carpenter.

Q. Where?

A. At the Asylum.
Q. How long have you been in the Asylum?
A. Eleven years.
Q. You say you are a carpenter?
A. Yes, sir.
Q. What are your duties as carpenter about that house?
A. General repairs; that is, woodwork, or any thing of that kind.
Q. Fixing windows and any thing required about the place?
A. Yes, sir; any thing that is assigned to carpenter's work.
Q. Are you the carpenter to the whole house?
A. Yes, sir.
Q. Both the male and female portions?
A. Yes, sir.
Q. Have you keys to the wards?
A. I have.
Q. How do you go on the wards; upon whose orders?
A. The doctors'.
Q. Do you ever go there upon the orders of the attendants?
A. No, sir.
Q. State to the committee what would be the difficulty if you had no keys?
A. I might as well not be there.
Q. Why?
A. I could not do my work; I could not go upon the wards to do my work, and could not do it.
Q. You do the repairing of the furniture?
A. Yes, sir.
Q. And all that is necessary to be done about the building in the way of repairs?
A. Yes, sir.
Q. Do you know Anna Burns?
A. I do.
Q. How long have you known her?
A. Probably eight or nine years.
Q. In what ward is she?
A. In twelve ward.
Q. What have you to say as to her character?
A. I have always regarded her as a very good, honest, straightforward girl.
Q. What in regard to her capabilities as an attendant?
A. As a very good attendant and very kind.
Q. Have you been on her ward fixing and repairing?
A. I have.
Q. Frequently?
A. Not any more so than in the rest of the wards.
Q. I say frequently, you are on all the wards frequently, are you not?
A. Yes, sir.
Q. Do you know Mrs. Fulford?

A. I do not.

Q. Mrs. Fulford makes this statement?

[I call the attention of the committee to page 620 of the printed testimony:] "It is rather a delicate matter to speak of, but this Ann Burns that I spoke to you of who had charge of No. 12, there was a patient that saw a transaction that was not very proper between her and the — well — I think his name was Jones; he had charge of fixing the windows; he came in and lowered the window so that they would have more air in the hall that leads from the dining-room; * * * * and she hid under the bed because she did not want to go out, and she saw this man Jones come in; * * * * this young lady was hiding under the bed, and she had told of all that occurred that she saw." State whether upon any occasion at any time you were in bed, or in a room with Mrs. Burns, such as is stated there, or any thing about it?

A. I have been in the room with her but never was near a bed more than to just pass between or to pass to the window, cupboard or wardrobe.

Q. You never was on the bed with her?

A. No, sir; never.

Q. I call your attention to the question on page 635: "Did you see any familiarities between this man Jones and Ann Burns? A. They used to be in the bath-room, some time, laughing and joking considerably together, etc.;" also the first question on that page: "Did you see any thing that you regarded as immoral take place between them? A. No, sir; I did not have the opportunity, but there were different times that Mr. Jones came on to the hall before this occurrence; he came and painted the bath-tub, and the patients would be out at the time; they go out in the morning and afternoon." Did you ever paint a bath-tub on that hall or on any other?

A. No, sir; never.

Q. I call your attention to this question — the first one I read: "Did you see any familiarities, etc., etc." Did any thing of that kind ever occur between you and Ann Burns?

A. Never.

Q. I call your attention to page 638 of the testimony: "I understand you to say that you have seen some familiarities, etc., * * * A. I saw things that I would not like to speak about; it was between Mr. Jones and Ann Burns, and also toward a Miss Noon that was there * * * * * * * * * but before they went in I saw him put his arm round her." Did any such thing occur as that?

A. No, sir.

Q. Have you at any time had any familiarity of any kind with Miss Burns?

A. No, sir.

Q. And any other attendant of the Asylum?

A. No, sir.

Q. Are any of the statements which I have read to you true in substance or in fact?

A. Why, they are false.

Q. You say you have been in the Asylum eleven years?

A. Yes, sir.

Q. Does your duty call you constantly upon the wards?

A. It does.

Q. And do you go through one ward to get to another?

A. I very often do, in fact, most always.

Q. If you were going into one ward and had to go through another in order to reach it, the persons in the ward in which you went would not know you were coming in any way?

A. No, sir.

Q. State for the information of the committee what, if any, bad treatment you have ever seen perpetrated by any attendant on a patient while you have been in that Asylum?

A. I never saw any thing that I remember; no bad treatment at all; the only thing I ever saw was on one occasion I was on the seventh hall repairing a door (female side); I was repairing a door and heard a noise at the other end of the hall; I turned round to see what it was, and one of the patients had gone down the hall, and they were in a tussle at the other end; and they put her on the floor and held her until she said she would be quiet; and she went to her room and I saw no more of her; that is all I ever saw of any thing of that character since I have been there.

By Mr. Haskell:

Q. Give the date of the occurrence as near as you can, and the names of the attendants?

A. I cannot tell any thing about it; one of the attendants' names was Miss Bain; that is all I can say; I cannot say any thing about the date.

Q. Whether it was one or twenty years ago?

A. It is in my time there, I should say about two years ago, more or less.

By Mr. Goodwin (resuming):

Q. Do you know a Miss Noon?

A. Yes, sir; there is a Miss Noon; I know her.

Q. Did you ever put your arm around her waist?

A. Never.

Q. Did you ever take any familiarities with her in any way?

A. No, sir.

Mr. Goodwin — You can examine.

By Mr. Morgan:

Q. They have means of communicating from the doctor's office to each ward by whistle have they not?

A. Yes, sir.

Q. And certain sounds from the whistle indicate certain things, do they not?

A. I cannot answer that question; I am not on the hall; I never answer the whistle; I do not know any thing about it; all I suppose there is, they blow from the office as I understand it, and they talk through the tube, the same as through a telephone, or speaking trumpet.

Q. But certain distinct sounds mean certain things?

A. I do not know any thing about that.

Q. You do not know that they have a means of talking as an engineer does with his engine?

A. I never knew any of thing of the kind.

Q. All you know of Anna Burns is simply what you have seen of her on the hall, is it not?

A. That is all.

Q. Her character has never been discussed one way or the other to you or in your presence, has it?

A. No, sir, it never has.

Q. And patients are not in the habit of talking with you to any great extent, are they?

A. No, sir.

Q. And have the patients ever complained to you of any ill-treatment from the attendants?

A. No, sir.

Q. And, if they had a complaint to make, they would not make it to you, would they?

A. No, sir.

Q. Did you ever have any conversation with Mrs. Fulford?

A. No, sir.

Q. Do you know a young lady by the name of Mary A. Pelton?

[The witness who gave her evidence, page 718, is "Pelton" instead of "Felton."]

A. No, sir, I don't know her.

JOHN C. ROBERTS,

Sworn and examined, testified as follows:

By Mr. GOODWIN:

Q. Where do you reside?

A. Utica.

Q. What is your business?

A. Livery business.

Q. How long have you resided in Utica?

A. A little over ten years.

Q. Were you ever an employee in the State Lunatic Asylum?

A. Yes, sir.

Q. From what time to what time?

A. I think it was in 1874, March 11; I was there a little over four years; I went there March 11, 1874.

Q. And remained there how long from that time?

A. About four years — or I should say a little over four years, about a month over four years.

Q. In what capacity were you employed in the Asylum?

A. I was twenty days on the third ward, then I was sent on the fourth ward, and remained there.

Q. You remained on the fourth ward until you left?

A. Yes, sir.

Q. Did you know an attendant there by the name of John J. Halpin?

A. Yes, sir.

Q. How long was he on the ward?

A. I cannot say exactly; he might have been there four weeks, or six weeks.

Q. Was he under you as an attendant?

A. Yes, sir.

Q. Do you remember about what time he was there?

A. I think it was in 1876 or 1877; I would not be sure.

Q. I call the witness' attention to the testimony of Halpin on page 503: "Q. Was there any other case that you remember that a patient was injured by an employee? A. Yes, sir; I knew a patient named C.; this was in the fourth ward; I don't know his first name; he got such a kicking that when I took him out three months afterward, in place of bending his back, he would bend his knees, if he had any thing to pick up; he was injured in the back by being kicked," etc. * * * * * "Q. Who was the attendant? A. I won't be positive; I think his name was Roberts; I think his name was John, etc." [see page 504] Do you remember a patient named C. on that ward at that time? A. Yes, sir; Cartwright, I suppose it was.

Q. Is there any truth in any of the statements made which I have just read to you?

A. Not one word.

Q. Did you at any time kick — what was his name?

A. Cartwright.

Q. While he was on your ward?

A. No, sir, never.

Q. Did you at any time while you were an attendant of that Asylum kick a patient?

A. No, sir.

Q. State to the committee what you ever did in the way of violence to a patient, if any thing?

A. I never did any thing more than to take hold of them and handle them as carefully as I could without injuring or hurting them.

Q. Do you remember of any scuffle or attempt to restrain C. in any way on any occasion when Halpin was present?

A. Yes, sir.

Q. State to the committee what that was?

A. It was in the morning before I got up; Mr Halpin was a helper there; he was not a permanent attendant; he came down from hall ten; he used to sleep up there; he commenced to unlock the doors before I hardly got up: I had been called up once or twice by the night watchman; of course I did not get up quite as early as I should ought to; I heard some noise in the back of the hall right where Mr. C. slept, and I heard Mr. Halpin's voice and Mr. C.'s; I hurried there; I knew what kind of patient he was, and I got there just as quick as I could; I only slipped on my pants, and was in bare feet, pants and a shirt on; when I got in there was Mr. C. and Mr. Halphin at each other; of course the minute I got there I catched hold of C. and took him down on the floor, and I held him just as carefully as I could possibly; Mr. C. tried to hurt me, too; but I never tried to hurt him at all.

Q. Was that the only time you remember of any scuffle taking place on that ward with C. while Halpin was there?

A. The only time I know of; only I have heard him threaten to tackle Mr. Halpin after that.

Q. You heard C. say that?

A. Yes, sir; but I always stood around.

Q. Was C. hurt at that time by anybody?

A. No, sir; I don't think he was; I don't know as he was.

Q. State whether he was lame afterward?

A. No, sir.

Q. Whether his back was affected?

A. No, sir.

Q. Whether he had to stoop by bending his legs rather than his back?

A. No, sir, never was any thing of the kind.

Mr. Goodwin — I call the attention of the committee particularly to pages 503, '4, '5, '6, '7, of Halpin's testimony?

Q. State, if you please, what was the rule and the practice in reference to the reporting of any injuries that took place on your ward, Mr. Roberts, while you were in the Asylum?

A. It was reported to head-quarters.

Q. Reported by you?

A. Yes, sir.

Q. Who did you report to?

A. I think I reported to the supervisor.

Q. Now, during the time you was there, was there any understanding between the attendants that injuries inflicted by attendants upon patients which were not serious in their character, were not to be reported either to the supervisor or to the physicians?

A. No, sir.

Q. Did you ever hear of that?

A. No, sir, I never heard that; nobody ever mentioned it to me.

Q. What kind of ward was this that you were on, ward four, what kind of patients?

A. They were the most violent patients on wards 4, 8 and 12, generally the most "violentest."

Q. Did you ever see Dr. Gray on your ward while you were in the Asylum?

A. Yes, sir.

Q. About how many times did you see him on the ward?

A. I cannot say.

Q. Did you ever see him on two consecutive days?

A. Yes, sir.

Q. State to the committee what there is about ——— give them an idea of the visits of Dr. Gray to that ward while you were the head attendant?

A. I might perhaps see him twice a day.

Q. Not every day?

A. No, sir; I might see him two days in succession, and I might not see him for a week, and might not see him for a month.

Q. What would you say, when he would be at home, would be his average attendance on that ward?

A. I don't know as I can say.

Q. State to the committee what you would do with a violent man a man who was very troublesome, who was giving you a great deal of care on the ward; tell the committee just what you would do with that man?

A. Of course, if I had my own way, I would use the restraints.

Q. You did not have your own way, did you?

A. There was part of the time there, along two or three years, an attendant had the privilege of putting them on when he saw fit, and then reporting it afterward.

Q. When was the change made?

A. It was, I guess, the last year or two I was there; the third year or fourth, I cannot tell which.

Q. Did you ever see a patient injured while being in restraint?

A. No, sir, never.

Q. Either by an attendant or patient?

A. I never did.

Q. Did you ever see a person while in restraint injured by the instrument by which they were restrained, such as the muff or camisole?

A. No, sir, never.

Q. In the covered bed — how was that? Did you ever use a covered bed?

A. Yes, sir, had four there.

Q. What was the condition of the patient, a violent patient, when put in that bed; did they ever hurt themselves?

A. No, sir, never.

Q. In any way?

A. No, sir, it would be impossible to do so.

Q. Why?
A. Because we used to keep them just so, and they could not.
Q. And could they strike their heads against the side or the top of the crib?
A. No, sir.
Q. Why?
A. Because the bed was filled just right, so that they did not have any room to thrash around.

By Mr. Haskell:

Q. Could they turn over?
A. Yes, sir.
Q. Do you say where there was plenty of room to turn over, there was not room to thrash around and bump their heads against the crib?
A. They could not get swing enough, that is, to injure themselves to any extent, I don't think; I never saw one; another thing, the pillows, they were fixed so that their heads were higher than their shoulders really.

By Mr. Goodwin (resuming):

Q. How long was Halpin on your ward?
A. I cannot say; four or six weeks, perhaps longer, perhaps less.
Q. Did you know of any person being brought on your ward as a punishment from another ward?
A. As a punishment?
Q. Yes.
A. No, sir, I never did.
Mr. Goodwin — You can examine.

By Mr. Haskell:

Q. Do you say you do not know of any person being brought on your ward because they had disobeyed any rules of the institution while you was there?
A. No, sir.
Q. Will you say that was not done?
A. Yes, sir; not as I know of.
Q. Will you say it was not done?
A. I cannot say any different, because I do not know any different.
Q. You cannot say whether it was done or not, and if it was done you do not know it?
A. No, sir.
Q. Was there a patient in your ward whose initials was J. A. J.?
A. I cannot tell you the initials; probably if I heard the name I could; there was a great many during that time.
Q. Your name is J. E. Roberts?
A. Yes, sir.
Q. I call your attention to this record on ward four: "December

31, 1877, J. A. J. hurt his forehead last night while in the covered bed; it caused a black eye, reported by attendant J. E. Roberts." Do you recollect that occurrence?

A. No, sir.

Q. Have you entirely forgotten that?

A. I don't remember any thing at all about it, perhaps if I heard the name I could tell.

Q. Do you still say no person, while you were an attendant upon the fourth ward, was injured while in the covered bed?

A. Yes, sir.

Q. And you say that this J. A. J. didn't hurt his forehead in a covered bed on 31st December?

A. Yes, sir; I have no knowledge of any thing of the kind; I don't remember any thing about it.

Q. Do you say he did not do it?

A. I cannot say any thing else, I don't remember it.

Q. And that he was not hurt so severely in the covered bed, that it did not give him a black eye?

A. Yes, sir, I will say so; I don't remember any thing of the kind.

Q. Do you recollect any time when the patient C. was injured in the institution?

A. No, sir.

Q. You say he never was injured there while you were an attendant on that ward?

A. He went off that ward.

Q. While you were an attendant on that ward?

A. He was not on that ward, he was moved off, he was not on the ward with me all the while.

Q. While he was on your ward you say he was not injured?

A. Yes, sir; that is as far as I know.

Q. You say Halpin was not a regular attendant?

A. Yes, sir; he was not on the fourth ward.

Q. He was an extra hand simply?

A. There was an attendant "vacant" on our ward, and he was not there permanently at all.

Q. He was simply there to fill a vacancy?

A. Yes, sir.

Q. Was Mr. Buckley an attendant of the institution while you were there — Daniel Buckley?

A. I don't remember, he might have been, and might not.

Q. Do you know him?

A. No, sir; I was not acquainted with him that I know of.

Q. On what wards were you during the time you were there?

A. Twenty days I was on third ward when I first went on; all the rest of the time I was on the fourth ward.

Q. During that four years how often did Dr. Gray come upon that ward, as near as you can recollect?

A. I cannot tell you how often; sometimes oftener; sometimes not so often.

Q. Was he there as often as once a month?

A. Yes, sir; I think oftener.

Q. You think there was no month during the time you was there that Dr. Gray was not on the ward?

A. There was not, whilst he was at home, I don't think; I don't know as there was three weeks; I would not say that there was.

Q. Can you say how often he did come?

A. I cannot say.

Q. When he would come on the ward what would he do?

A. Come round, examine patients and talk to them.

Q. Every patient?

A. Yes, sir.

Q. Or did he come with special reference to any one patient?

A. Yes, sir, at times he did.

Q. And would see that patient and go away again?

A. Yes, sir.

Q. How often would he come and make a thorough inspection of every patient on the ward and all the rooms, did he ever do that?

A. Yes, sir.

Q. How often would he do that, see every patient on the ward and examine into his condition and examine the condition of each of the rooms and the halls and bath-room and water-closet and things of that nature?

A. I might see him every week regular, or twice a week, or once in three weeks, or once in a month.

Q. Did you ever see him make as thorough an examination as I have spoken of while you was there.

A. In regard to the patients?

Q. Yes; and going into all the rooms consecutively and looking into the bath-rooms and all those places, etc.?

A. Yes, sir.

Q. How often did he do that?

A. I cannot say.

Q. Once every two or three days would he do it?

A. He would for two or three days, then he would not come for two weeks; I cannot say.

Q. Would he do it as often as once every two weeks?

A. Yes, sir.

Q. And usually as often as two or three days?

A. Yes, sir; at times.

By Mr. MORGAN:

Q. When did you say you left the Asylum?

A. It will be six years ago this year, 24th November.

Q. The last year that you were there, did Dr. Gray visit wards as often as he did the first year you were there?

A. I think he did; there was one year he was to Europe; I think he was there during the summer; I don't know what year it was.

Q. You frequently found patients with black eyes and bruises upon them, did you not?

A. Yes, sir.

Q. Cuts on their heads?

A. Yes, sir; once in a great while.

Q. What means do you adopt to find out the manner in which the injury was inflicted?

A. There was one patient there by name of S.; he was violent and ran right up to the grate and got hold of the grate and banged his head against the grate at that time.

Q. Where it occurred when you did not see it, what method did you adopt to ascertain the truth of the manner in which the injury occurred?

A. Occasionally the patients used to —

Q. Without giving any instance, state what was the method you adopted to ascertain the truth of the statement; who would you inquire of; what inquiries would you make?

A. I would probably ask the patient; I would ask the attendant, if an attendant was there.

Q. And whatever the attendant said, you take as being conclusive, I suppose, as to the manner in which it occurred?

A. Yes, sir.

Q. Were you supervisor during any time you were there?

A. I had charge of the fourth ward.

Q. Who was supervisor on the fourth ward while you were there?

A. John Evans.

Q. Why did you leave the Asylum?

A. I kinder got tired of it and thought I would go into other business.

Q. Did you think they required too much work of you for the wages paid?

A. I always thought that.

Q. Did you think they furnished attendants enough to take charge of the patients?

A. Yes, sir; I should say so; there was on my ward, on ward four.

Q. What time did you have to go on in the morning?

A. Half-past five in summer time, and six in the winter.

Q. How long did you remain on active duty?

A. On our hall we had to remain on until after nine or ten.

Q. And liable to be kept up all night?

A. Yes, sir.

Q. And liable to be called up many times during the night?

A. Yes, sir; the head attendant was, and others if it was necessary.

Q. And one attendant on the ward had to be detailed to do dining-room work?

A. Yes, sir.

Rev. W. T. GIBSON
Recalled:

By Mr. GOODWIN:

Q. You have been examined by the committee?

A. Yes, sir.

Q. Do you desire to make a further statement?

A. I don't know that it is necessary to make any supplementary statement except in regard to what appears to be a slight error or misunderstanding. It appears in the testimony, that I said I had never been very "friendly" with the patients. I meant by that, that I had not been too familiar with them. Then in regard to my occupation there: I should like to have stated, in addition to my duties as chaplain, that I do considerable clerical work in the office in the way of revising proofs and contributing articles to the "Journal of Insanity." I also give lectures nearly every week during the winter months when the evenings are long, on literary subjects in general, in the chapel. It was only stated that I went up there on Sundays at the other examination. Then in reference to meeting Dr. Gray on the wards: I stated what was a fact, that I met him very seldom; but I wanted also to state that as I go through the wards alone in the afternoon I would not be likely to meet him or any other of the doctors at the times I go through; but if I am permitted to state, I would like to say, that when I come out of the wards I generally go to the doctor's office, if I can get access to him, to ask him about any new comer or about some patient that I have become interested in, and he never failed to tell me all about any patient that I might ask him, and gave me all the particulars and details of the case, and on consulting the case-books subsequently, I found he was always correct. There was a question asked me in reference to—

Q. Are there any other corrections of your testimony you desire to make?

A. (Looking at the minutes.) There is a question here which I do not recognize: "They did not use such restraints as these a few years ago." I have no remembrance or recollection of any such question; my answer, I think, shows that the question was different: "There seems to be a decrease in that respect." The question I suppose was this: "Do they use such restraints now as they did a year ago;" and my answer was, "No, sir, they do not."

By Mr. MORGAN:

Q. Who attends these evening lectures that you give in the Asylum?

A. The patients of both sexes; about the same as the Sunday congregation; about three hundred in all.

WILLIAM J. WALKER,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Where do you reside?

A. At 482 Madison avenue, Albany.

Q. What is your pusiness?

A. Member of the wholesale drug firm of A. Mc Clure & Co., doing business in Albany; I am a member of that firm.

Q. What is the nature of the business carried on by that firm?

A. We do a wholesale and retail drug business.

Q. How long have you been in that business?

A. I have been in the business within a month of fifteen years; fourteen years as clerk and member of the firm since January.

Q. Are you familiar with the prices of goods in that trade, at wholesale?

A. Yes, sir.

Q. And also at retail?

A. Yes, sir; I am conversant with the prices all the way through.

Q. But more familiar with the prices at wholesale than at retail?

A. Yes, sir.

Q. What is your special branch of the business?

A. I do the buying for the house, and in addition to that I inspect bills of our sales each day before the invoices are mailed.

Q. Does your house do a large business?

A. Yes, very large.

Q. How long has the house been established?

A. Over fifty years?

Q. Is it one of the largest houses in this section of the State?

A. It is the third largest house in the State.

Q What is the great market for this drug trade in the country — purchasing market?

A. New York is the great purchasing market.

Q. And in your business do you make Albany a distributing point?

A. Yes, sir.

Q. And is there any other house that does the same thing in Albany?

A. Yes, sir, D. H. Fonda & Co.

Q. Do you know whether there is any similar house in Utica?

A. Yes, sir.

Q. What house?

A. J. H. Sheehan & Co., and Comstock Brothers.

Q. They are wholesale dealers and jobbers?

A. Yes, sir.

Q. Do the firms of Sheehan & Co. and Comstock Brothers do substantially the same kind of business?

A. The character of the business would be the same; they solicit trade in the same way, although they sell liquors and we do not; and Comstocks sell groceries and we do not; but the drug part of the business is the same; we sell drugs and paints and glass, every thing that goes in the line.

(Exhibit No. 10 shown to witness, being a bill of Butler & Hamilton's, June 1, 1883.)

Q. Have you previously examined this bill now shown you?

A. Yes, sir.

Q. Have you gone over it to ascertain in regard to the items, as to whether the goods named could be obtained at better prices?

A. I told Mr. Brown the other day when he called on behalf of the committee, and would say the same thing now, that the principal criticism of the items is that good judgment was not used, in my opinion, in making the purchases at retail when the amount of purchases would entitle them to wholesale prices; that they have bought of small concerns instead of wholesale houses.

Mr. Brown — Mr. Chairman, ask him if his firm supply any large institutions in this State?

Q. Has your house ever sold goods to any public institutions in this State?

A. Yes, sir.

Q. Can you name any such institutions who have bought from you?

A. We have sold to Sing Sing prison and Dannemora prison; we have also sold to the local public institutions here, Albany almshouse, the Albany hospital and St. Peter's hospital in the city.

Q. Does your firm have any arrangements as to special prices with these institutions?

A. We consider institutions of that kind the same as we would consider any good concern that had capital to do business with, and able to pay; we give them the same prices, the same as we would give to a good merchant; we sell them just as cheap as we would sell to a merchant to sell over again; we consider they are entitled to these prices, and have treated them in that way in the trade we have had.

Q. Have you previously examined Exhibit No. 10?

A. Yes, sir; I have looked over this bill.

Q. Are there any articles in that bill that come within your line of business?

A. Yes, sir.

Q. Please state such articles as you sell of that character?

A. There is an article of "ten pounds sal nitre, fifteen cents per pound, and ten cents would be the price to a merchant; three dozen of shoe blacking at seventy-five cents per dozen, sixty cents would be the market price, we sell that article; one box of sapolio, six dozen, we sell that at $10 per gross; it is charged here $10.50 per gross; it is charged at seven shillings a dozen, and the jobbing price is $10 per gross; the price is eighty-seven and one-half cents per dozen; the price per gross is $10.50, and our price is $10; one

dozen water-closet paper, $1.50; that price is correct; ten pounds sal soda at two and one-half cents; price is correct; a carboy of muriatic acid at two and one-half cents per pound; the price here would be two cents, but at two and a half cents it is a fair price, because it is at the owner's risk of breakage in forwarding; so that price is all straight; one case of salid oil, two dozen pints, $8.50 per dozen; and we sell the best brand of salad oil equals two dozen pints, $8.50 per dozen; and we sell the best brand of salad oil that I know of at $10 per case; this is $17 per case; the difference is between $10 and $17; the brand of oil is a standard brand; I do not know any thing better than that; it is called the "Antonio" brand; there are a variety of brands, but I do not know any thing that commands a higher price than this; there is one gallon of bay rum at $3, that is correct; there are some things here pretty cheap; there is a barrel of sperm oil at $1.28 per gallon; I think the time I looked it up oil was worth about $1.33, at that time, of the best grade.

Q. (By Mr. BROWN.) How did it range from that; how much lower price did you have for sperm oil?

A. We only sold one grade; nothing but the best.

Q. (By Mr. HASKELL.) Are there etc., lower grades of sperm oil?

A. Yes, sir.

Q. And lower grades would be worth less?

A. Yes, sir; they run down to ten cents per gallon; gallon of castor oil at $1.50; jobbing price was $1.36; there is "coach body varnish," but I do not think that is one of the things; there would be a question of the quality of that; we sell a good grade of coach varnish for $1.60 per gallon; it is billed there at $2.75; but we have some that we sell at $2.50, and it runs up to as high as $5.00.

Q. So that you are unable to tell whether it is excessive or not?

A. No, sir; I cannot tell without knowing more about it.

Cross-examined by Mr. GOODWIN:

Q. Do you know any thing about the quality of those goods charged by Butler & Hamilton that you say are excessive, do you know them to be the same goods, for instance, to take "castor oil,"—do you know whether that is the same brand you would sell, that they sold at $1.50?

A. I know they cannot sell any thing better than what we sell at $1.36.

Q. In reference to "salad oil" do you mean to say that there is no oil in the market that is worth $17 that you know any thing about?

A. I do not know any thing any better in the way of salad oil.

Q. Do you know of any salad oil being worth more than $10 in the market?

A. No, sir, I do not.

Q. "Sapolio" at $10.75, what do you say you would sell it at?

A. It is billed at $10.50 per gross and the jobbing price is $10 per gross.

Q. Are there any grades in reference to that?

A. Only one kind of sapolio.

Q. So that the sapolio sold by Butler & Hamilton could not have been any better than you sell?

A. No, sir; it is the same thing; it is a copyright article.

Q. Are all shoeblackings alike?

A. No, sir.

Q. Is that the highest and best quality that you have — the difference between seventy-five cents and sixty cents?

A. I don't know about that.

Q. What I mean to say is, whether there is any shoeblacking worth more than sixty cents?

A. Yes, sir; there is shoeblacking worth $1 per dozen, according to the size.

Q. How do you arrive at the fact that that charge for shoeblacking is excessive?

A. I would like to say to the committee I do not like to swear that these prices are excessive, I am only saying at what price I think they can be furnished; not that it is excessive.

Q. That is what you are doing?

A. I explained and stated in the first part of my examination that these prices I do not consider excessive, considering the source from whence the goods were purchased, at retail.

By the CHAIRMAN:

Q. By that you mean purchased from retail dealers?

A. Yes, sir.

Q. Considering they are purchased at retail, you consider they are reasonable retail prices?

A. Yes, sir; I do not consider that any firm would be able to sell them cheaper at retail.

Q. Do you sell the State institutions which you have referred to similar articles at wholesale rates?

A. Yes, sir, we do; now take Sing Sing prison, they pay a bill of $75 a month, we consider that a jobbing order.

By Mr. GOODWIN (resuming):

Q. You state there are a large number of these articles that were reasonable in price?

A. Yes, sir.

Q. Do you mean by that, reasonable in a wholesale point of view?

A. There are some things charged just the same as we would have to charge for them.

Q. What things are those generally?

A. Like washing soda, it is sold by the case, say one and a half cents per pound.

Q. Never mind the prices; just name the articles in the bill they sold just as cheaply as you would sell them?

A. Sal soda, washing soda, muriatic acid, bottle of vaseline pomade sixteen cents; that is wholesale price.

Q. Have all the prices which you have criticised on that bill been high from a wholesale standpoint entirely?

A. All the prices all the way through?

Q. Yes, that you have criticised.

A. Yes, sir.

Q. And you have given me, in substance, the list of articles which you consider cheap, have you, or the character of the articles?

A. Yes, sir.

Q. (By Mr. BROWN.) State whether or not your firm would not be willing to sell the Utica Asylum at the same prices you name here as the wholesale prices?

A. Yes, sir; should be very glad to furnish such orders at those wholesale prices I give.

By the CHAIRMAN:

Q. Do you think other wholesale houses would do the same?

A. Yes, sir, if they paid promptly; any wholesale house would be able to sell them, all these prices I name.

Q. At wholesale rates?

A. Yes, sir; Mr. Brown of the committee in whose custody the bills have been, says that the bill which is referred to by witness is one produced by Mr. Winston, one of the board of managers and referred to in his testimony.

A bill marked "Exhibit No. 10*a*, J. H. M." shown to the witness.

Q. Please state if the articles named in that bill are within your line of business?

A. Yes, sir.

Q. Do you recognize the name of the seller?

A. Yes, sir.

Q. E. R. Squibbs & Co.?

A. Yes, sir.

Q. That is a well-known name as a manufacturer and wholesale seller?

A. As a manufacturer and seller of his own specialties.

Q. Do you deal in these specialties?

A. Yes, sir.

Q. Do you sell them to State institutions?

A. Yes, sir.

Q. Please state whether any prices there given are higher or lower than you give to similar institutions?

A. In buying Squibbs' goods, in buying certain articles they have used good judgment in ordering direct from him; they purchase them as cheaply as any wholesale druggist could buy them; and they obtain the best discount on the articles there; ten per cent is deducted, and they are bottom prices.

Q. Is there any thing in that bill that is excessive in your judgment?

A. There are several articles that could have been purchased cheaper elsewhere.

Q. But not Squibbs' articles?

A. Well Squibbs does not make the articles that I refer to; he does not make to my knowledge; it is on the outside column of the bill, what he does not make.

Q. But which are bought from Squibbs?

A. Yes, sir.

Q. And they are not as low as they could have been bought, if bought elsewhere?

A. Yes, sir.

Q. Please enumerate such articles?

A. You notice that all the articles Dr. Squibbs makes, of his own, he has put down in the inside column and deducted ten per cent; those he does not make are on the outside column "Bromide of potash," supplied at $1.45 per pound; Powers and Whiteman's brand, which is known just as well as Dr. Squibbs' article, was sold in jobbing quantities at that time at thirty-six cents per pound, it is billed here at forty-five cents; and the item here, four pounds is a jobbing quantity, about the quantity that a druggist would buy; then "one hundred pounds of glycerine, thirty-five cents per pound," the market price for "Sarg's" brand, which is considered as reliable as any brand in the market, was selling at the time at twenty-nine cents for that quantity; no brand is given in this bill.

Q. Is there any brand sold higher than "Sarg's" in the market?

A. Yes, sir; Bowers' brand is sold higher, but it is sold at about forty-five cents per pound, and glycerine is sold in bulk; it is sold in one pound bottles, about eighty cents per pound; this is in bulk.

Q. Was there any glycerine sold at thirty-five cents per pound of any brand that you know at that time?

A. No, sir; "twenty pounds of bromide of potash at forty cents per pound," and Powers & Whiteman at that time sold at thirty-six cents per pound; "five pounds of iodide of potassium at $1.90 per pound;" Powers & Whiteman's brand sold at $1.50.

Cross-examined by Mr. GOODWIN:

Q. This iodide of potash — do you know what brand this is on Squibbs' bill?

A. No, sir; I do not.

Q. How do you say then that it is too much to pay for that potassium?

A. I am giving you the market price of Powers & Whiteman's brand, which is considered the standard.

Q. There is no better in the market?

A. Not that I know of.

Q. And no potassium that commands a higher rate?

A. Not that I know of.

Q. Now the bromide — do you know what bromide was that was sold by Squibbs?

A. No, sir.

Q. Do you know whether or not there is any bromide sold at forty cents?

A. I do not know of any for which there is a market demand.

Q. Do you know of any that is sold?

A. No, sir; I do not.

Q. Now, Mr. Walker, do you think it is a fair criticism to make on the purchases or sale of Mr. Squibbs when you do not know the quality of the goods sold?

A. The examination, if you will allow me to say, takes an altogether different course from what I supposed it would when I talked with Mr. Brown; I told Mr. Brown that all I felt I could testify to, or would testify to, at his request, and was nothing to testify in the matter, was, that good judgment was not used in making the purchases, so far as looking over them, and that I would testify what prices standard goods could be obtained at; now, these articles of Squibbs are charged at fifteen to twenty per cent profit, when a jobbing druggist would be charged ten per cent.

Q. Now in regard to the glycerine; glycerine that is charged by Squibbs amounts to $36.25; what do you say is the proper price for that?

A. I want to say to the committee, it may not be exactly a direct answer, if it is not you will pardon me; the committee, as I understand Mr. Brown, who represented this committee, when he brought these bills down, he said to me, will you look these bills over and see what you would furnish suitable goods for, goods that are of best quality, that can be furnished the same as you are selling to other institutions and to merchants; I looked over the prices and goods, and my answers are based upon what we sell for and without regard to what other people have furnished at.

The CHAIRMAN — And you did not care, therefor, to criticise prices made by dealers except so far as your criticism as to the purchase of these articles at retail instead of at wholesale?

A. Yes, sir, that has been my intention all the way through.

Mr. GOODWIN — You said something about this glycerine being too high.

A. No, sir; I did not come here to criticise these prices; of course Mr. Squibb stands very high in the trade, and I make no criticism upon the prices charged by Mr. Squibb.

By the CHAIRMAN:

Q. You have criticised the payment by the Asylum of thirty-five cents per pound for glycerine?

A. Yes, sir.

Q. Was that criticism based upon the fact that glycerine could have been purchased by the Asylum at wholesale for less?

A. Yes, sir.

By Mr. GOODWIN:

Q. The same kind of glycerine?

A. You tell me what kind they furnished and I will tell you.

Q. Do you know what glycerine was furnished to the Asylum by Mr. Squibbs?

A. No, sir.

By the CHAIRMAN:

Q. Do you mean that glycerine of a standard quality could have been purchased for less money?

A. Yes, sir; Sarg's glycerine could have been purchased at that time, and we would have sold at that time at twenty-nine cents, and were willing to do so, a standard glycerine.

Q. Is that glycerine used by hospitals?

A. Yes, sir.

Q. Is it used by physicians in private practice?

A. Yes, sir.

(Exhibit No. 10*b* shown to witness.)

Q. Does your house deal in the article known as "emulsion of cod-liver oil?"

A. Yes, sir.

Q. Is that a standard article?

A. Yes, sir.

Q. Of uniform price?

A. No, sir; it is an article that is manufactured by druggists.

Q. What was the market value of that article of the best quality in December, 1882?

A. In a jobbing way, by the gallon, $3.

Q. What is charged in this exhibit?

A. Four dollars; as I told Mr. Brown when I looked the bill over, that I did not consider it an extravagant price, considering it was purchased at retail?

Q. How many gallons were purchased from the 2d December or the 2d January as appears by that bill?

A. Seven gallons.

Q. How much from that time until the date of the last item, February 24?

A. Eight gallons, making in all fifteen gallons.

Q. Are these quantities, quantities that are regarded as retail or wholesale purchases?

A. We consider it a wholesale quantity.

Q. Do you consider, therefore, that these articles should have been purchased at wholesale or retail prices?

A. At wholesale.

Q. Do you know whether such article was used about that time by similar institutions?

A. No, sir.

Q. You have no knowledge of that?

A. No, sir.

Q. What did your house charge per gallon for that article about that time?

A. The emulsion of cod-liver oil is something that nearly every retail druggist makes for himself, and something that is very seldom sold by the gallon.

Q. Do you mean that it is not a great deal sold at wholesale?

A. Yes, sir.

Q. Where would the Asylum get it at wholesale if they wanted to make it?

A. They could obtain it from any wholesale druggists; it is something that the retailers all manufacture themselves; they buy the cod-liver oil and make it up.

Q. But any wholesale druggist would fill the order?

A. Yes, sir.

Q. And fill the order for a lower price for such quantities than a retailer?

A. Yes, sir.

Q. And what would have been at all that time the wholesale price for that emulsion?

A. I should consider $3 per gallon a fair price for it.

Cross-examined by Mr. GOODWIN:

Q. Do you mean to say that if the State Lunatic Asylum had ordered from you, on December the 2d, two gallons of "emulsion of cod-liver oil," you would have charged them only $3 per gallon for it?

A. Yes, sir.

Q. Would you have charged any person $3 for it?

A. No, sir; we would charge you more for it.

Q. Why would you charge me more?

A. Because you are a consumer; we don't sell to consumers.

Q. Is not the Lunatic Asylum also a consumer?

A. They would not be considered as consumers, considering the quantity of goods they purchased.

Q. I ask you if the State Lunatic Asylum had sent down from Utica on the 2d of December and ordered two gallons of this cod-liver oil and you would send it, would you have charged only $3 per gallon?

A. I have answered yes, sir, to that question.

Q. Why?

A. Because we consider that their purchase would entitle them to the jobbing prices.

Q. Purchased from you?

A. Yes, sir; if we were selling to the Utica Asylum.

Q. I ask you if they sent you an order down on the 2d day of December, 1882, for two gallons of this oil without any reference to their custom, or any thing else, whether you would have charged them $3 for the oil?

A. Yes, sir, we should.

Q. Or any other wholesale house?

A. I should think so.

Q. Are there any other items on this bill except the cod-liver oil that you think are too high?

A. There is "five gallons, gentian and varaxacum and acid $2.25;" I think that is very low.

Q. Is it lower than you would sell it?

A. Yes, sir.

Q. How much lower than you would sell it?

A. I would have to look that up; I cannot tell you exactly, but it is below the regular price.

Q. What else is there about it — about that bill?

A. There is nothing else on this bill that I know any thing about.

By Mr. Brown:

Q. That is, you cannot tell by any thing in the bill what the real price should be?

A. Yes, sir.

Q. In regard to this item you think is cheap, what is your idea about that; is there any difference in the quality of these acids?

A. It is lower than — it is fair to say it is lower than Wyeth's.

Q. You do not know any thing about the quality from the bill itself, and so you cannot say?

A. No, sir; the bill does not specify the quality.

By Mr. Haskell:

Q. Are there lower grades than Wyeth's?

A. Yes, sir.

Q. And you can make them of any strength?

A. Yes, sir.

Q. And you mean simply to say that price specified there would be low for a first quality of article?

A. Yes, sir.

By the Chairman:

Q. How do you know this is or is not the highest grade known to the trade?

A. I do not know, and I haven't said so; but Mr. Brown stated if there was any thing in the bills I could give them the benefit of, to do so; if any items were cheap, to name them.

(A bill marked Exhibit No. 10*c*. and shown to the witness.)

By the Chairman:

Q. I call your attention to the various items for vaseline; what price is given there for vaseline?

A. For one-pound cans of the white vaseline, $12 per dozen.

Q. Is vaseline a standard article?

A. Yes, sir.

Q. Is it generally uniform in price?

A. Yes, sir, it is; as near as I can remember about the prices, a long price is charged on the bill for vaseline, and the trade get fifteen

per cent off; I cannot swear positively in regard to any item; in regard to this one item, I remember.

Q. What would you have sold the Asylum that vaseline for at that time?

A. Fifteen per cent discount off Colgate's list, which is the standard.

Q. And that is fifteen per cent less than is charged in this bill?

A. Yes, sir; on this one particular item.

By Mr. GOODWIN:

Q. Do I understand you to say, that if the Asylum had sent down on March 23, 1883, to your firm for half a dozen pound cans of "White Vaseline" that you would have charged them fifteen per cent less than in this bill?

A. We should have charged the regular list price, $12 per dozen, less fifteen per cent discount.

Q. Is not that "10--20," there? (*pointing to another item on the bill*).

A. I excluded that item; I said the only item I said any thing about was that one I mentioned.

By the CHAIRMAN:

(Exhibit 10*d* shown to witness).

Q. Please state if these articles are within your line of business?

A. Yes, sir.

Q. And if you see any article there which could be purchased at that time for a lower price, by the Asylum?

A. Four bottles of Fellows' syrup of hypophsphates, billed at $1 a bottle; jobbing at $11 per dozen; one dozen belladonna plasters, billed at "$10.80," Grosvernor & Rogers brand; jobbing at $9 per dozen yards.

Q. Is that a standard brand?

A. Yes, sir, that is the best; "two three quart rubber bags, at $1.75," jobbing price $1.50 each; "two two ounce graduates," billed at thirty-five cents each, jobbing twenty-five cents each; one pound of sal rochelle, billed forty-four cents, jobbing thirty-three cents; one pound chloral hydrate $2.25; Schering's chloral hydrate, jobbing at $1.80.

Q. Why do you name Schering's?

A. That is considered the best in the market.

Q. How did the prices vary for that market?

A. They ran from that down to $1.40 a pound.

Q. What is the usual grade sold to hospitals?

A. The grade sold now at $1.40 per pound, called "Saames."

Q. About what price was paid by such hospitals at date of this bill, February, 1883?

A. I should say $1.50 per pound (a dollar and a half per pound);

and it is charged here it at $2.25; they bought the same of Mr. Squibbs, as you will see by his bill, and paid $1.75, less ten per cent.

Q. Do you mean to say that every item in the "C. H. Williamson's" bill to which you have referred in your examination, if the Asylum had bought of you, would you have given the prices you have named?

A. Yes, sir; for the same quantities.

(Exhibit No. 10*e* shown to the witness.)

By the CHAIRMAN:

Q. Are those goods in your line?

A. Yes, sir.

Q. Are there any items in that bill which, in your judgment, might have been purchased to better advantage by the Asylum?

A. Yes, sir.

Q. Enumerate them?

A. Chloral hydrate charged at $1.75 per pound (the same evidence would hold good to that as given in regard to that item in the previous bill); I testified that $1.50 per pound would have purchased a good, suitable quantity.

Q. And you say the previous bill shows a payment of $2.28 for the same article?

A. Yes, sir; I don't know any better than Squibbs', and he charged only $1.75 per pound, less ten per cent.

Q. Any thing else on the bill?

A. Three packages of nested pill boxes charged twenty cents per package, and they could have been purchased for twelve cents per package; and there are five hundred two-grain asafœtida pills; that is one of these cases; if the asafœtida pills were made in a mortar, made to order, they are reasonable, they are cheap at the price charged; if they were prepared by a pharmacist, a manufacturing pharmacist, then eighty-eight cents for the five hundred would be a reasonable price instead of $1.75; that is all on that bill. I don't desire by my testimony to criticise the sellers of any of these articles, or the prices charged by them, but desire to be distinctly understood as directing my criticism to the purchasing of articles at retail, which can be purchased for less money at wholesale.

Q. You have not referred to all the items in the various exhibits just shown you; why have you omitted some?

A. From the limited knowledge I possess as to the exact articles furnished; I would pass the items as being reasonable in charges as far as my judgment or my knowledge extends, and I have only directed the attention of the committee to such articles as I could determine the value of, from the fact that they were standard articles, and also to such articles as appear to be purchased in quantities sufficient to be known as jobbing lots, and to have entitled them (the Asylum) to have purchased the same at wholesale prices.

By Mr. GOODWIN:

Q. What hospitals have you furnished articles to?
A. Albany hospital, and St. Peter's hospital, and the Homœopathic hospital; that is all in the city.
Q. Any others?
A. That is all.
Q. And you said you furnish the State prisons?
A. Sing Sing and Dannemora.
Q. That is all?
A. Yes, sir.

Mr. GOODWIN — I desire, Mr. Chairman, to ask — I find in the papers—Utica papers, February, 1884—a notice sent by the counsel to the investigating committee, asking for communications from "ex-physicians, and ex-attendants, ex-patients, and all persons who can give or furnish evidence to the management of the New York Lunatic Asylum at Utica." I understand that a large number of communications have been received in reference to this investigation, and I ask the committee that I be allowed the privilege of looking at the letters which have been received by counsel in reference to the matter.

The CHAIRMAN — The matter will be considered at a full meeting of the committee, and they will give an answer at a subsequent session.

Mr. HASKELL — I suggest that if Mr. Goodwin insists upon seeing these letters, that they be handed to him one at a time, and each one be spread upon the minutes.

Mr. MORGAN — I claim no privilege in this matter; it is for the committee to say; the correspondence, such as I have, I shall submit; at the same time, I desire to say it would be an extraordinary proceeding that communications that counsel should be requested, that were sent to counsel under the seal of secrecy, but giving him important information upon which he has acted and the evidence, and has been produced not of the letter, but of the individuals themselves, and they have been subjected to cross-examination on the part of counsel for the Asylum; I have offered no letters in evidence; the letters were for enabling me to find evidence that would be material.

Mr. GOODWIN — I desire to have — I request that the Asylum authorities may at some time in this investigation examine the counsel of the committee.

The CHAIRMAN — The committee will consider the matter; if counsel for the Asylum causes Mr. Morgan to be subpœnaed, he will go on the stand; if the counsel now states that he does desire to examine him (Mr. Morgan), the committee will be happy to hear him at any time, and Mr. Morgan will be present to be examined.

Mr. MORGAN — The suggestion of the counsel for the Asylum is most extraordinary and unheard of; it is most insulting.

The CHAIRMAN — But I understood you to say that, notwithstanding, you are willing to submit to examination.

Mr. MORGAN — If the committee say so; I am counsel for the committee; if they tell me to go on the stand, I shall go without hesitation; I have no privilege of my own, but I have stated what I think of the suggestion.

Mr. GOODWIN — In view of what Mr. Morgan says, the Asylum authorities will not examine Mr. Morgan.

The CHAIRMAN — The Asylum authorities show their good senses in the course taken.

Mr. HASKELL — And also that "discretion is the better part of valor."

Adjourned to meet to-morrow evening, at Utica, at 8 o'clock, P. M.

UTICA, *March* 27, 1884.

Pursuant to adjournment, the committee met this evening at eight o'clock, in room 23, Baggs' Hotel, and continued the investigation.

Present — Messrs. HOWE, HASKELL, RICE and BROWN.

JOSEPH R. SWAN
Recalled:

By Mr. GOODWIN:

Q. You wanted to call attention to an error in your testimony?

Mr. Swan — Yes, it is evidently a misprint; it is on page 238, where it says "fifty" per cent, it should be "five" per cent.

Mr. GOODWIN — And at page 776, in reference to the Ordronaux report, where it says, "I call his attention, etc.," it should be, "I call your attention, etc." by "your," meaning the committee.

Mr. KINCAID
Recalled:

By Mr. GOODWIN:

Q. You were examined on Wednesday afternoon at Albany?

A. Yes, sir.

Q. You then stated, in answer to Mr. Morgan, that you had signed a verdict as member of the coroner's jury, and knew nothing what you signed, or to that effect?

A. Knew nothing of its purport or what could be done with the verdict; that is what I should have said.

Q. Do you now desire to make any correction to that answer?

A. Yes, sir; I think I was put in a false light in reference to it.

Q. Please state what there was in reference to the verdict which caused you to believe it was not such a verdict as you intended to sign?

A. I stated, in answer to Mr. Morgan, that I drafted the verdict myself; on being submitted to the jury, there was a question about it upon which we could not agree, and it was stated to us by a gentleman in the room that by the addition of a word or two which I do not now recollect, he could have drawn the verdict so that it would be in accordance with the statute; and without knowing just what the two words, or three, would lead to, in order to make a verdict that the jury would agree upon, seven of the jurymen, I think, agreed to sign the verdict as it was then written.

Q. That gentleman was the district attorney?
A. Yes, sir.
Q. And he suggested that two or three words added to your draft in order, as he said, to make it —
A. Conform to the statute.
Q. And by accepting that suggestion of the district attorney you rendered such a verdict as you personally did not know any thing about; is that the idea?
A. Yes, sir, that is it; we did not know what could be done with the verdict as it was rendered.

By Mr. MORGAN:

Q. You did not understand the legal effect of the language used?
A. That was it exactly.

By Mr. GOODWIN:

Q. What were those two or three words?
A. I do not recollect; I could — I saw the verdict, but it was — there were two or three words which the district attorney said was necessary to make it a statutory verdict.
Q. Do you understand it was the adding of these two or three words by which these men were arrested?
A. Yes, sir.
Q. You did not mean by your verdict then to censure, or rather to call upon the authorities for the arrest of these men?
A. That was not the intent of seven of the jury as I understand.
Q. And that was the reason why you say you signed a verdict not knowing its intent or purport?
A. I supposed there was a discretionary power with the coroner; we found afterward that there was not.
Q. Discretionary power as to what?
A. As to the men being held or not as he saw fit.
Q. Is there any thing else you desire to say?
A. No, sir, I think not.

By Mr. HASKELL:

Q. But you did understand that the verdict you signed authorized the coroner to have these men arrested if he saw fit?
A. Yes, sir, I may say that; if he thought proper.
Mr. GOODWIN — I have an affidavit here from P. V. Rogers which I desire to read, one of the managers, I desire it to go on the evidence.
The CHAIRMAN — Read it and we will see whether it should go on the minutes or not.
(Affidavit read by Mr. Goodwin.)
(The question of its admission is reserved until the committee shall have had an executive session, and considered the admissibility of said affidavit.)

Dr. FORD

Recalled for continued examination:

By Mr. GOODWIN:

Q. Doctor, it is stated in the testimony by some witness, I think it is Buckley, that when the managers, or any authorities, go to visit the Asylum a whistle is blown, so that attendants and supervisors upon the various wards might get ready; state whether it is true or not?

A. It was not true during my time, and I do not suppose it is now.

Q. During your attendance on the Asylum were patients transferred from one ward to another as punishment?

A. As punishment — no, not as punishment.

Q. As "discipline," Mr. Rice suggests?

A. No, sir, I don't know what you mean by that.

Q. (By Mr. HASKELL) How can you answer that?

A. Well, I asked him to explain his question.

Q. It has been testified before this committee that a number of patients at different times, and in different wards, have been transferred from one ward to another as a matter of punishment; that is the language used by the witness I think.

The CHAIRMAN — I think that is true.

Mr. GOODWIN — I am using precisely that language.

Q. Now, can you state any change made from ward to ward for any other reason than the health of the patient?

A. Every change was upon the direct order of the physician in each individual case, and for only medical purposes.

Q. (By Mr. RICE.) Was it for medical purposes pertaining to the person removed or other persons?

A. Well, both; if a man became so disturbed on a ward as to be a source of annoyance to people who were recovering; or, if a man should have a relapse while on a convalescent ward, he would be removed from that ward; not to punish the man, for he could not help it; as I understand that is what you mean, but simply to put him where he would be best cared for, and the other patients protected from noise or violence.

Q. If a patient on a particular ward should go into other patients' rooms, and take their clothing out of their drawers, out of the bureau, or should annoy them, undoing their dress and exciting them in various ways by telling them stories which did excite them, would such a patient be removed from that ward?

A. He might.

Q. Why?

A. If he retarded the improvement of other men on that ward,

and it became necessary for the welfare of the ward, he would be removed if that was true, in the judgment of the physician who investigated the facts.

Q. So that the removal of the patient would be either for his own good, or for the good of the persons with whom he was associated?

A. Yes, sir, I think that states it.

Q. How frequently do supervisors necessarily have to go through the wards in the discharge of their ordinary duties?

A. I don't know that I can state the exact number of times; they must go through necessarily very frequently in the course of a day; they must go through very frequently.

Q. Why did they have to go frequently; why did their duties require that there should be a frequent attendance through the wards in which they were supervisors?

A. Because of medicines given which are carried to the patients by the supervisors through the wards; sometimes he would have to go through two or three wards in getting to the ward he was going, and in matters of changes of clothing — taking clothing and carrying of letters and papers, and carrying the orders of the physicians to the attendants on the different wards, he must go there in order to carry them or there is communication.

Q. Are their opportunities ample by virtue of their duties in observing the treatment of attendants to patients?

A. I do not understand you.

Q. Are their opportunities ample?

A. Oh, yes, sir; they certainly have ample opportunity for knowing what is going on and observing patients; that is their business.

Q. I call your attention generally to the statement made by Buckley of the great fight which lasted from one until four o'clock in the afternoon; do you remember it?

A. Yes, sir; I remember the testimony you read that time on Saturday, I think, or the other day.

Q. Now I ask you if patients upon such a ward as Buckley was an attendant would be apt or could by virtue of the disorders which they were under, whether they would have the power to concentrate their minds so much so as to be able to say that they desired to see a patient or an attendant conquer in a fight?

A. Patients generally on a ward?

Q. In that ward — Buckley's ward?

A. I suppose there might be individual instances; it would not be so regarding the majority of the patients of a disturbed ward.

Q. Why not?

A. Because men in that condition are occupied with delusions, and fix their attention upon themselves; that very fact renders it possible for a small number of people to take care of a large number of violent insane people, because they are so interested in their own delusions and notions that they do not form combinations; they have nothing in common with each other; I think that statement could be made very broadly, that they never combine; I never knew a combination ever existing among insane people.

Q. And that you regard the safeguard of the place?

A. That is the only theory on which insane people can be taken care of in any asylum.

Q. Are you familiar with the supervision of the correspondence of the Asylum during the time of your service?

A. I am; yes, sir.

Q. Will you state generally what that supervision was?

A. The supervision of letters from patients?

Q. Yes, from patients first?

A. Letters from patients were all examined, excepting among convalescent patients who were known to be convalescent, or where the letter was known to be directed to the proper person; one would become familiar, so familiar that he could say without reading the letter through, that it was from such a patient and was to a friend, and that it was proper to send that through; those letters were not always read, otherwise communications were looked at.

Q. What in regard to supervision of the letters sent by patients to friends?

A. Well, letters addressed to the proper person in the case, the person responsible for the patient in the Asylum, were sent pretty much regardless of any thing in them; the others were put in a case and kept, manifestly insane letters.

Q. What is your opinion of the necessity of supervision of correspondence in the Asylum?

A. I think it is an absolute necessity.

Q. Do you think there are cases where letters from parent to child, or from child to parent, should be supervised!

A. Oh, certainly there are.

Q. Why?

Q. Because an insane person may have an indecent delusion, and they often do have; a large proportion of people who have delusions have indecent delusions; delusions that would, if put on record, would either disturb the persons they went to, or be a source of mortification to people who wrote them, after they got well.

Q. Have you made any examination since your return from Albany in reference to the Heath case?

A. I examined the record this morning.

Q. What did you find in reference to it, which you were unable to, or did not state on your examination at Albany on Tuesday?

A. I think I substantially stated all that I know, or knew, or know now, in regard to it.

Q. You made an autopsy in that case, did you not?

A. I did.

Q. Were there any ribs broken?

A. Not to my knowledge.

By Mr. Haskell:

Q. Do you say there were not?

A. I say that there was not to my knowledge.

Q. That you never knew there was, or do not now know?

A. I do not know now, because I do not remember that there were any; I say no broken ribs to my knowledge.

By Mr. Goodwin:

Q. Did you ever make an autopsy in that Asylum in any case where there were broken ribs?

A. I never did.

By Mr. Haskell:

Q. How thorough an autopsy did you make on Heath?

A. An ordinary autopsy of the brain, and lungs, and heart, and kidneys, and vital organs.

Q. If his ribs had been broken you would have discovered it?

A. I suppose so.

Q. Do not you know?

A. I think so.

Q. Are you able to swear positively that his ribs were not broken?

A. No, sir; I do not think I would be, on any autopsy; to the best of my knowledge and belief they were not.

Q. How definite a recollection have you of it?

A. Of the autopsy in that case? That was eleven years ago, about as much as a man would remember under the circumstances.

Q. How much?

A. I have not a very definite recollection.

Q. Had you forgotten that you did make an autopsy, until it was called to your attention?

A. No, sir, I never forgot that; I think I testified to that the other day when my attention was called to it.

Q. Have you looked to see if you found the record of your autopsy?

A. I have not found any record of the autopsy.

Q. I understood you to state to me that you had forgotten something about it?

A. Well, perhaps — I will make it as definite as I can — that is the best of my judgment and recollection now; I recall the facts from other circumstances which I know were present at that time, which I will relate to you if you like.

By Mr. Morgan:

Q. Is it not true that physicians and surgeons have made autopsies of deceased persons, examining the internal organs without discovering serious fractures of the ribs?

A. I do not know whether it is true or not; I presume it might be so.

Q. Do you remember reading the celebrated Walsh case at Little Falls?

A. No, sir.

Q. Where a thorough (as they claimed) examination was made by

three physicians, and your Dr. Deecke went there and found eight ribs broken of Mrs. Walsh?

A. I don't think I am familiar with the case; when did it occur?

Q. Three years ago.

A. If I did know it I do not recollect any of the facts; I presume I saw it at the time; I should presume it might occur; oh, that was the woman that was murdered in Little Falls; killed by her husband; I remember the case now; I did not know that Dr. Deecke made an autopsy; I remember the circumstances now.

Q. Do you remember all that now?

A. I remember of the case; I do not know that I remember all the details and I did not know until you spoke of it that Dr. Deecke went down there.

Q. Do you remember that Dr. Deecke went to the Falls?

A. No, sir.

Q. And was a witness in the case, and that there were five ribs broken on one side and three on the other?

A. I don't remember.

Q. And that might occur?

A. Yes, sir.

Q. And it might occur with yourself?

A. Yes, sir, I think it might; you asked me whether a serious injury could — do you mean serious enough to cause death?

Q. The kicking of Mrs. Walsh caused death?

A. You ask me the question whether it might not be so; an examination might be made where fractures of the ribs had been serious enough — serious, and yet be undiscovered; I cannot imagine how a man could make an autopsy on such a case, which would have been serious enough to cause death, without discovering it; I don't know how it could.

Q. Is it not true that when the wards are to be visited by visitors, that a whistle is blown to that ward almost invariably?

A. It was not in my time; that I do not know about now; I had charge of one side of the house, and I would have known it, I presume, if it had been the custom.

Q. In your time, if you found a patient bruised, where the bruise was visible, without removing the clothing, what means do you adopt to ascertain the cause of the injury?

A. I asked the patients — asked other patients; I asked the attendant first, unless I had — well, yes — I think that is in every case, I suppose.

Q. Then, doctor, you had in each ward a book called the "injury book," had you not?

A. Yes, sir.

Q. Did you, at any time, upon inquiry of the patient injured, or other patients, learn from them that the injury was received from an attendant?

A. Yes, sir.

Q. And upon examining the injury book, did you find that the

injury was reported there as having been received from a co-patient or inflicted by a patient?

A. Whether the record was corresponding with the facts?

Q. Yes; whether the record corresponded with what the patient said; did you ever find a case where the record did not correspond with what the patient said?

A. I do not know; I presume so.

Q. Did you ever correct the book then or have it corrected?

A. I do not know; I cannot recollect any instance of the kind you mention; I presume it may have occurred; I have not any present recollection of that sort.

Q. You have no recollection of the record, as made by an attendant or supervisor, ever having been corrected in that institution, have you?

A. I do not know; I haven't any recollection of that sort; no.

Q. It was a part of your duty to look through the record as made in the injury book, was it not?

A. Yes, sir.

Q. And do you now call to mind a single case where the record, as made by an attendant or supervisor, has ever been corrected or changed in any way?

A. I do not know; I have not thought of it; I do not think of any now; let me say that the injury, or the facts in the case, went down in the history of the patient by me; they were recorded in the general case book; this was not particularly for scientific purposes that the injury book was kept, but for to act as a check and a record.

Q. It was kept for the purpose of knowing just how the injury occurred?

A. Yes, sir, and from my recollection it was kept correctly. That is as far as I can say.

Q. I again ask you is it not true that very frequently the attendants give one version of the cause of the injury, while the patient would give another?

A. Oh, yes, sir.

Q. What was the object of asking the patient, if you placed no reliance upon what the patient said?

A. Well you would get at the facts; some patients would be able to tell you.

Q. Then it is true that a portion of the patients are capable of knowing, understanding, and giving truthful and accurate statements as to how the injury occurred?

A. At the time—yes, sir.

Q. And if they done it at the time they would do it afterward, would they not?

A. That would depend on their mental state at the time and afterward too.

Q. Suppose their condition remained equally as good as when they first made the statement?

A. I don't think a demented man would ever remember past a day or a week.

Q. Well, take a person not demented?

A. Well he would probably recall part of his—he would recall—he would recall particular things that happened to him, perhaps; sometimes he would, sometimes he would not, it would depend entirely on the character of the patients' sickness.

Q. It is true that there are demented patients in that institution?

A. Yes, sir.

Q. That are not insane but simply idiotic?

A. No, a dememted man is insane and an idiotic man is not an insane man.

Q. That is what I say. There are idiotic people in there, are there not?

A. No, sir; I never knew of any idiots being there.

Q. Can I call your mind to a woman, I won't be certain as to the ward she is on, but I think ten, who has or never had the left eye — the sight of it, and the right seemed dim, and who stands there wherever she is placed and simply in plain terms a fool; do you remember one that has been there for years, and one was on ten, not on ward ten now, because that is thrown up just now, but on ward eleven; I may be mistaken as to the ward?

A. The woman with one eye?

Q. Yes.

A. How old a woman?

Q. That is hard to tell.

A. I remember Harriet B. B., is that the name?

Q. I cannot tell you the name.

A. She has only one eye, I recollect; she has been there a long time.

Q. What is the difficulty with that woman?

A. One eye is gone, but she is a woman of forty-five or fifty years old.

Q. How long has she been there?

A. Well I think she was there during the years of my term of service.

Q. What do you say is the difficulty with that woman?

A. She has chronic mania.

Q. Describe it a little more fully.

A. Well she is not, of course, she is feeble in mind and yet she is talkative enough; she is not in any way a person that you would call a fool; I don't think that is the person.

Q. The one I have referred to you can hardly understand a word she says; do you think that woman is insane?

A. Yes, sir, the one I refer to is.

Q. Why are that class of patients kept in the Asylum; why are they not removed to the poor-house in the counties where they belong?

A. Many of them are.

Q. There are several of that character there now, are there not?
A. I don't know, I have not been there in five or six years.
Q. The last time you were there, there were several there?
A. Yes, sir, several.
Q. That had been there a long time?
A. Yes, sir.
Q. Why is it that that class of patients are retained in the Asylum; in your opinion would it not be a proper management to send those patients to the poor houses in the counties where they belong?
A. Those patients, many of them, could not be sent there for the reason that they are private patients sent there by their friends and maintained by their friends, and over whom the county officers have no jurisdiction, and never had jurisdiction.
Q. Do you think it is, in your judgment, proper management for the authorities of the Asylum to take that class of patients when the institution is overcrowded with insane patients?
A. No, I do not think it is.
Q. Then in your opinion that class of patients should not be retained there when complaint is actually made, and we have it upon the record that the institution is overtaxed with patients?
A. Well, no; they ought not to be there, and the effort was constantly made to get rid of them; but it is a hard thing to get rid of them.
Q. They are not obliged to keep any private patient there to the exclusion of public patients, or to overcrowed the institution as against public patient, are they?
A. No, sir; I do not think that was ever done.
Q. The private patients are taken there?
A. Yes, sir.
Q. And if Dr. Gray says that the institution is overcrowded with patients, you would believe him, would you not?
A. That it was overcrowded?
Q. Yes?
A. Yes, sir.
Q. And in that case, you would say that these private patients, especially those that are demented, should be taken away, would you not?
A. If they could be cared for anywhere else and could be gotten rid of.
Q. If they are able to be cared for in one case, they are in another, I suppose?
A. No, sir; that don't follow, no; that don't follow.
Q. There are private asylums in this State for the care of that very class, are there not?
A. I do not know; I do not think that there is any private aslyum for the care of that class, not that I know of. Do you mean especially for the care of chronic insane.
Q. No; for bemented patients?
A. If there is, I don't know it; I think Dr. Root has, down on

the Hudson river, five or six patients in his family; but that is hardly an asylum.

Q. Is there not a person in Syracuse who takes care of private demented persons?

A. I do not know; I do know that there was a man found somewhere in a private house in Syracuse, who was said to be insane; that is all the knowledge that I have that there is such a place in Syracuse.

Q. If they are a county charge, in your judgment, that class should be sent to the county where they belong, should they not?

A. After there could be no longer any possibility of their recovery under treatment.

Q. There are, or were in the time that you were acquainted with the patients of the Aslyum, there were demented patients that were entirely hopeless, were there not?

A. Yes, sir.

Q. And yet they were retained there?

A. Well, they were there.

Q. When you were at the Asylum, what was the method by which the supplies for Dr. Gray's family were procured from the commissary department?

A. I do not believe I know any thing about that.

Mr. Morgan — That is all I want to inquire about, Mr. Haskell.

By Mr. Haskell:

Q. When you were in the Asylum, were there any insane criminals cared for there?

A. Yes, sir.

Q. What, in your judgment, is the advisability of caring for that class of patients in this Asylum?

A. I thought it was bad policy.

Q. Do you think so now?

A. I do.

Q. In an asylum of this character, which receives every clases of patients, you think the line should be drawn at insane criminals?

A. Yes, sir.

Q. Give us, briefly, your reason for that judgment?

A. These insane criminals are very largely chronic cases, operating under delusions, having been insane a long time, and are dangerous men, and the fact that a man has committed a crime, comes on to a ward, and has sense enough to tell of it, is a disdisturbing element in the ward, and usually there can be very little use in keeping him there, because it is necessary to observe very much greater security for those that were around, and necessary to observe greater precautions.

Q. You think, briefly, then that the good effects on the patient himself is very slight compared with the chances —

A. Some I will say were not insane.

Q. And the general effect of that class of patients upon the others was bad?

A. Yes, sir; I should think so.

Q. Can you state how many cases of chronic insane there are in the Asylum at this time?

A. No, sir; I do not know.

Q. In your judgment, ought a person, as soon as they pass the stage of acute mania or insanity, be transferred from this Asylum to some other?

A. No, sir.

Q. You think then that it is entirely proper to retain chronic patients in this institution?

A. If there is any hope of their getting well by treatment; if they can be benefited by treatment, I think that is the reason.

Q. Are there any patients in that institution that there is no hope of benefiting by treatment?

A. I think so.

Q. Those you think should be transferred from the institution, do you not?

A. Yes, sir, if a suitable place can be provided for them.

Q. Are there any suitable places in the State?

A. Yes, sir, but it is possible such cases could not be provided for.

Q. And some other would be a more proper place for them?

A. My general statement was only with the proviso that they should not be removed unless they could be properly cared for elsewhere.

Q. What do you mean by that?

A. By that I mean to say that if a person belonged in a county where — if for any reason whatever the friends of a patient could not maintain him in a private asylum, or could not secure his admission to a proper asylum elsewhere, and could not take care of him, then he ought to be retained there; I have not in my mind any instances.

Q. Do you know of any such cases?

A. No, sir; I have not any in my mind.

Q. Can you conceive of such cases?

A. Yes, sir.

Q. Please suggest?

A. Well, a chronic insane person who could be removed to — a patient who formerly resided in a county where the accommodations were not fit for the taking care of that class of persons; indeed in some counties they have no such accommodations.

Q. Are there any asylums in this State especially for the care of the chronic insane, incurable cases?

A. Yes, sir.

Q. In your judgment, is not that the proper place, if there is no other place to which they could be sent?

A. There is only one such asylum, that is Willard, and that only covers a limited area of the State; then there might be persons who could not be cared for at home, of course.

Q. In regard to the covered bed, I understood you to testify that

usually there was a straw bed covered by a hair mattress; was the hair mattress, and straw too, used in all cases?

A. That was the rule.

Q. Was that the rule in all cases?

A. I think so; I don't remember particularly.

Q. Were both used in the case of a patient who was in the habit of soiling the mattrass and bed clothes?

A. It was; I presume there were instances when a hair mattress could not be used; I can conceive of such instances.

Q. Do you now recollect that there were such instances?

A. I presume there were; I don't recollect any specially.

Q. But it would be your best judgment that there were such cases?

A. Yes, sir.

Q. So that in all instances the hair mattress was not used?

A. I cannot recollect any instance; I say it is possible a case might occur in which it was not.

Q. Will you say that where a straw mattress was used for a patient at night that a hair mattress was not put into the bed during the day time?

A. Yes, sir.

Q. Will you swear positively that that did not occur?

A. No, sir, of course I could not; I could not remember; no man could swear to that, one way or the other; I have seen beds with hair mattresses on, and with no mattresses on.

Q. Has it been generally in the day time that you have seen them?

A. Sometimes in the day time.

Q. I ask you whether generally in the day time?

A. No, sir; I would not say that.

Q. Then when you have seen the covered beds it has been generally at night?

A. No, sir; I do not say so.

Q. And you will not say that it was generally in the day time?

A. No, sir.

Q. Why will you not?

A. Because I was in the habit of seeing them all the while; there was no rule about it.

Q. When did you make your visits to the wards?

A. At all times.

Q. Regular visits; did you have any regular time?

A. Oh, yes; morning and afternoon.

Q. And there were very few days then that you were not on the wards twice a day?

A. Yes, sir; no days when I was visiting; some days I did not go on to the wards at all, but was engaged in writing up the records, and then some one else went in my place.

Q. Were you on the wards twice every night while you were in the institution?

A. No, sir.

Q. Then you saw the covered beds oftener in the day time than at night?

A. No, sir; I think not; I do not wish to conceal any thing; I would be more apt to see a patient in the covered bed in the evening.

Q. Were you called to see patients in the covered beds?

A. Yes, sir; I presume I would not see a bed as often empty as with some one in it, that is, I would not look at it; I might pass by it, but would not swear that I saw it, you know.

Q. Whom do you understand to be the official and responsible head of this Asylum?

A. Dr. Gray, under the board of managers.

Q. Dr. Gray, or the board of managers, which?

A. Dr. Gray, under the board of managers.

Q. Then you regard the board of managers as the real head and responsible authority of the institution?

A. Yes; that is my understanding.

Q. What objection would suggest itself to you, if any, that the board of managers should appoint a financial officer of the institution, who should be responsible directly to the board of managers for the financial management, and not be responsible to Dr. Gray or the superintendent of the institution in the performances of duties connected with the financial management of the institution?

A. The statement I made the other day would cover that.

Q. Answer it without reference to what you have stated heretofore?

A. Well, the objection is to any divided responsibility in the government of all the affairs of the institution; they should all be under one head, and undivided.

Q. What divided responsibility would there be in the mere financial administration of the institution?

A. If it was administered by one man it would not be divided; if there were two men managing it would be divided, if there were two men — one the superintendent and the other the financial management — there would be two heads and hence a divided responsibility.

Q. But they are two separate spheres, are they not?

A. I think not; I think they would run into each other and necessarily —

Q. In what respect would they run into each other?

A. In regard to the purchase of supplies; the medical officer would have — he would be about the only man who would have the proper practical knowledge as to what was necessary to be bought or to be used.

Q. Could he not make out a list of his requirements and send them into the financial agent?

A. I suppose he could.

Q. Would he be any better able to go into the market and buy them than a man who devoted his time to just that feature of the institution?

A. No, sir, I suppose not.

Q. And there would be no objection there, in that direction, would there?

A. Unless there arose a difference of opinion as to what — as to what was proper to be bought, and what was necessary, or as to quantity, or quality, etc.

Q. Assuming that the superintendent should give his orders to the financial agent to purchase just such goods as he was required to do, could there be any objection then?

A. That is the way it is done now, by the steward, precisely.

Q. The steward is not responsible to the board of managers, however, for the proper financial administration of his office?

A. I suppose every officer is responsible to the board, they are appointed by the board of managers, every officer is — superintendent and assistant physicians.

Q. But upon the nomination of the superintendent?

A. I don't know whether he makes the nomination or not, but I think he does.

Q. And the steward has no judgment of his own in the way he makes the purchases, what he buys, or where he buys it, or what he pays for it?

A. Of his own?

Q. Yes; he is entirely under the direction of the superintendent?

A. Why, the steward has some judgment, that is what he is there for.

Q. That is your understanding of the office?

Q. Would you not think it wise that the financial agent or steward of the institution should have the free exercise of his judgment in matters of business, such as the purchasing of supplies?

A. I think he ought to.

Q. And do you see any well-founded objection to the financial officer of the institution being directly responsible to the board of managers for the proper administration of that branch of the institution?

A. The only objection I made was as to divided responsibility, that there could hardly be such without conflictions or delays and hindrances.

Q. How do you mean, delays and hindrances — explain?

A. Well, if the purchasing of the supplies is in the hands of a financial agent, who is not responsible to the superintendent, and an exigency arises that the superintendent needs things, and the financial agent has not them, and should decline to purchase them, because he had a different idea from what the superintendent had regarding the purchase —

Q. Would not that be a violation of his duty, if he was required to purchase all supplies as he was required to by the superintendent?

A. Yes, sir; but that would virtually place him under the superintendent.

Q. No; because it would leave him free to the exercise of his judgment as to the manner in which he would buy?

A. Well, yes, I think there is no objection to the steward, or the man who purchases having the right to make the selection.

Q. Would it not be better that he should be responsible directly to the board of managers for the manner in which he did his business, than that he should be responsible through the superintendent, and the superintendent be responsible to the board of managers?

A. No, sir; I don't think it would be better, or as well, there is no reason why it should be.

Q. Do you not think that the more directly responsible you can make the head of an institution, the more liable you are to have business done properly?

A. Yes, sir; and therefore I would have every officer in the institution responsible to the superintendent.

Q. Then you really make the superintendent the head of the institution, and not the board of managers, do you not?

A. Oh, no, sir; he is the head of the institution as to its details.

The CHAIRMAN — You mean the executive head?

A. Yes, sir; he is the executive head.

Q. When you were in the institution were you a part of the time on one side of the house, and part of the time on the other?

A. Yes, sir.

Q. During what part of the time were you on the male department?

A. I was on the woman's side of the house the last two years; previous to that time I was on the men's side?

Q. That was about two years?

A. No, longer than that; I was on the woman's side two years, and on the men's side three and a half.

Q. During the time you were on the male department, how often did Dr. Gray make a systematic examination of each patient on the barious wards, and as to the general sanitary condition of the wards?

A. If you will leave out the words "systematic examination of each patient," I can answer; I do not think I could testify as to that, with that in.

Q. Why not?

A. I do not think he made a systematic examination of each patient at any stated intervals, that I could testify to.

Q. Do I understand you to say that Dr. Gray had no stated periodical visitations of the institution?

A. Including the systematic examination of each patient he had not; but I think he had with regard to the visitation of each ward, but that did not include an examination of each individual patient, that is all.

Q. Describe what Dr. Gray did do?

A. Dr. Gray would make a round with one of the assistant physicians, as he went his round in the morning; Dr. Gray would go round with him, perhaps once a week.

Q. I want some time that you are willing to positively testify that he did?

A. I will say frequently.

Q. I want you to make it more definite than that; once in how long; what given period of time are you willing to swear positively Dr. Gray made a systematic round of that institution?

A. With me?

Q. Yes, with you, first?

A. No; I would not be able to give you any number of times; he went whenever I asked him.

Q. Did he ever go unless you asked him?

A. Yes, sir; he was on the wards many times when I did not know it.

Q. When he went with you we are talking about?

A. If I had any special reason for asking him to go, he usually went.

Q. Did he ever go on the wards with you when you did not ask him to go with you?

A. Yes, sir; he has gone on his own motion.

Q. And made a thorough examination of the institution?

A. Yes, sir.

Q. How often would he make such a thorough tour of the institution with you?

A. I do not know.

Q. Would he do so once a month?

A. Yes, sir; oftener than that with me.

Q. How much oftener?

A. I should say a good deal oftener than that.

Q. You are swearing positively now?

A. No, sir.

Q. Well, I want you to fix a number of times that you will swear positively that he did go?

A. I would not be able to do that, because it is eleven years ago, from that until six years ago; I have no means of refreshing my memory.

Q. Would you swear that he made a systematic investigation of each ward and the patients thereon as often as once a month when you were in the institution?

A. No, sir, I cannot swear positively.

Q. As often as once in two months?

A. No, sir; not as often as once in ten, if you put in that testimony, or clause, in the question "systematic investigation of each patient," because I say it was not a part of his business to do that every time he went on the wards.

Q. Did you examine to-day the records of the institution and get for us the date of the death of the patient Heath?

A. Yes.

Q. Will you please give it?

A. I think it was on the 14th; well, it was either October or

November, I don't know which ; I did look it up, and it was either one of those months, October or November, 1873.

Q. What book did you examine ?

A. The discharge book.

Q. What is the difference between the discharge book and the case book ?

A. Well, the discharge book is a book containing the record of the admission and discharges of patients, with the dates, the place where they came from, the manner in which they were discharged and where they went.

Q. Did the discharge book give the full particulars of the final sickness and death of Mr. Heath ?

A. It gave those statistics I mentioned.

Q. Would the particulars also be recorded in the case book ?

A. Well, it is the same, the one is statistics, and the other is a written account of the man.

Q. Did you examine the case book in regard to Mr. Heath ?

A. Yes.

Q. When did you examine it, to-day ?

A. Yes, sir.

Q. What is the record in the case book with regard to Mr. Heath's injury ?

A. There is an account of Mr. Heath extending over from —

Q. I do not ask when it was from ; I ask was there a record in regard to his injury ?

A. There is no record in regard to his injury.

Q. No mention of it ?

A. I think not ; I don't know that there is.

Q. Do you know who made the record ?

A. I think I did.

Q. Do you know why there is no mention of his injuries ?

A. Well, I won't say that ; the last note made of him was on the day of his death or the day previous to that, and it speaks of his violence, and of his allegations that he was hurt by an attendant; that, I think, is the extent of the record.

Q. Can you swear positively that his death was in no way caused or affected or hastened by any injury received by him ?

A. Not to my knowledge.

Q. Can you swear to that as a positive fact ?

A. I say not to my knowledge, as far as my knowledge goes ; that is all you want, what I know of my own knowledge.

Q. Do you know whether it was or not ?

A. I think I do ; yes, sir.

Q. Was it ?

A. I think it was not.

Q. So that it is an entirely mistaken idea on the part of the witnesses, Barrisdaile, Halpin and Mr. Buckley, that this man, Heath, was hurt seriously enough to affect his health in that institution ?

A. It is a fact that he was injured as I said.

Q. He was injured on the arm, you swore?

A. Yes, sir.

Q. Will you swear that he was not injured anywhere else?

A. Yes; I don't know that he was.

Q. You cannot say whether he was or not?

A. Yes, sir; but I cannot swear negatively to things that did not attract my attention at that time, that is all; I mean I will swear that he did not die of his injuries.

Q. And that they had no effect whatever in hastening his death?

A. So far as I know, and I think I know.

Q. And you think there is no foundation whatever for the evidence of Mr. Barrisdaile on that subject?

A. I do not know what that was.

(Mr. Barrisdale's testimony, at page 100 of the printed minutes, handed to the witness.)

Q. Please examine that; do you say that there is no foundation whatever for that evidence of Mr. Barrisdaile?

A. The foundation is that the man was hurt on the ward, and that the attendant was discharged by me, who did it.

Q. And you say the only injury sustained by Mr. Heath was a bruise on the arm?

A. No, sir; I do not say that; I think the man had some bruises on his person more than that, but I recollect the bruise about his arm.

Q. Do you recollect the injury to his person?

A. No, sir; I do not; I presume there were some bruises somewhere else.

Q. Why do you presume that if you have no recollection on the subject; is it because Mr. Barrisdaile swears to it?

A. I have no recollection of any bruise about the person.

Q. Then you presume there were others from what Mr. Barraisdaile swore to?

A. No, sir; I presume there may have been, for I know he was a very violent man for a week or ten days prior to that time, and he may have bruised himself or become bruised in his care; I presume that was true, but I do not recollect any you know; but I presume that was true.

Mr. Goodwin — Mr. Barrisdaile will appear before the committee and will explain that all he knew about the matter was from hearsay.

Q. Have you ever made any other examination of the records of the institution since you were sworn before the committee the other day?

A. No, sir.

Q. Will you swear positively that there was no such patient in the institution as was testified to by Mr. Halpin as the man from Albany?

A. I will testify that I looked over the records.

Q. And did not find it?

A. Yes, sir.

Q. And that is as strong as you desire to make it?

A. And I will testify that I would have found it if it had been there.

Q. Will you swear positively that no such patient was in the institution?

A. As those initials that are given in the testimony?

Q. Yes?

A. Yes, sir; as far as I know.

Q. Will you swear that there was no such patient in the institution about the time, as described by Halpin, who had a difficulty with his kidneys, and that Halpin was detailed to care for him specially?

A. You read me that testimony the other day.

Q. I don't think I read it to you?

A. Well, somebody read it to me.

Mr. GOODWIN — I read it to you when I examined you.

WITNESS — I will say this, that there was no such patient as shown by the records, and I have no knowledge of any such person.

Q. Then you will not say whether there was or not of your own knowledge, aside from the records of the institution?

A. No, sir; that is all I can testify to.

Q. Where is Dr. Smith now?

A. He was at Morris Plains, New Jersey; I suppose he is there; he is a physician there.

Q. Will you say that about the time specified by Mr. Halpin Dr. Smith did not perform an operation on a patient who was then in the institution suffering from kidney or bladder complaint?

A. No, sir, I will not swear to any thing that Dr. Smith did. He did not do it to my knowledge, and if any operation had been performed, I should have known it I suppose.

Q. Might you not have forgotten it?

A. No, sir, I don't think I could have forgotten such an instance; I might have, of course.

Q. Have you since your attention was called to Mr. Halpin's evidence, have you examined carefully the case records of every patient who died in the institution during the period of time that Halpin was there, as it was in the case book?

A. No, sir; oh, no.

Q. Would you say that there is no record in the case book of a patient who died while Halpin was there as an attendant in the institution, that does not show that a patient was there who received some injury, and that subsequently to that he had a bladder or kidney difficulty, that it was difficult or impossible for him to pass his urine without some assistance, that Dr. Smith performed an operation, and that the patient subsequently died?

A. On the tenth ward?

Q. Without reference to any particular ward—in the institution?

A. No, sir, I only examined as to the tenth ward, and records of that ward, as I testified.

Q. You will not say that there is not just such a case as that recorded in the case book?

A. There is none as far as relates to patients on the tenth ward; I have not examined the others, excepting that.

Q. You will not say that there is no such record?

A. I cannot say, from my own knowledge; that is all I examined.

By Mr. Goodwin:

Q. This case as sworn to by Mr. Halpin occurred on the tenth ward as you understand?

A. That is the testimony read to me, as I understand.

By Mr. Haskell:

Q. In regard to your testimony given here about the removal or non-removal of patients for discipline, I wish to call your attention to the fact that Dr. Smith has testified that the removal of patients from a good ward to a more disturbed ward as a matter of discipline was in vogue in this institution; I will ask you—

Mr. Goodwin — I hardly like to correct a member of the committee —Dr. Smith spoke something on that subject, but did not say that, I think.

Q. Have you read Dr. Smith's testimony on that point?

A. No, sir; I don't think I have.

Is there a system in vogue in the Asylum, and was there when you were there, that the behavior of a patient, his observance of the rules of the institution was taken into consideration in passing him from a disturbed ward to a better ward?

A. His ability to control himself was the main consideration.

Q. I will repeat the question. The stenographer will please read it to the witness.

(Question read).

Q. "Is there a system in vogue in the Asylum, and was there when you were there, that the behavior of a patient, his observance of the rules of the institution, was taken into consideration in passing him from a disturbed ward to a better ward?"

A. Yes, sir.

Q. Do you regard his ability to control himself in this matter of the observation of the rules?

A. Yes, sir.

Q. And if he disobeyed the rules in any way, you would ascribe it to the fact that he was unable to control himself; is that so?

A. In a majority of cases, yes, sir.

Q. In all cases?

A. I presume it might not be in all cases; but mainly so.

Q. And when there was a man who did disobey the rules and was put on to a disturbed ward, would you detain him longer on a disturbed ward for that reason?

A. Oh, no.

Q, Do you say that that never was done?

A. It never was done to my knowledge, unless he — to qualify that unless he by his actions disturbed other patients enough to retard their recovery; I do not recollect any such instance; but I would like to put that in.

Q. You presume there might have been such cases?

A. I don't remember any; I presume there might have been.

Q. Suppose the case of a patient required to perform manual labor out of doors; they were required to do that, were they not?

A. No, sir, they were not in my time; whatever work is done outside is purely voluntary, entirely so.

Q. And while you were there did the patients never object to do any such work when they were required to do it?

A. They were never required to do it.

Q. And there is no service required to be done by patients?

A. It was understood that a man made his bed, if they were well and able to; a good many did not do it; I don't know that that is required of them; some did not know how to and did not want to.

Q. And if they did not want to, you say they would not be required to do even that?

A. No; there is no way that you can require them to; there was no rule on the subject and no way of coercing a man to do any thing that he did not want to do.

Q. So that when a patient did not want to do any thing of that kind you simply had some one else do it for him, and let it go at that?

A. Yes, sir; that was all there was of it.

Q. Then as I understand you there are no rules or regulations in regard to the conduct of the patients, that is, how a patient shall conduct and demean himself?

A. Well, I was only speaking of the matter of work.

Q. And there are rules and regulations, are there not. as to the conduct and demeanor of the patients themselves?

A. There were none that I remember; of course you could not enforce a rule against an insane man, and could not make a rule that would apply in such a case.

Q. And of course if there were no rules to break, a patient could not have been sent from one ward to another for breaking them?

A. No, sir; there was no system of rewards and punishments; there was no such system, and it could not be made to work in such a place.

Mr. Haskell — That is all.

HORATIO N. DRYER,

Recalled.

By Mr. GOODWIN:

Q. You have testified before the committee that all the accounts and books relating to the business part of the institution are under your charge?

A. Yes, sir.

Q. With a book-keeper?

A. Yes, sir; except the treasurer's book; I don't know any thing about them; the books of the institution are kept at my office.

Q. Have you at my request examined the bills of Butler & Hamilton of the last six months and compared them with the original purchase bills of Butler & Hamilton?

A. Yes, sir; I have.

Q. With what result?

A. I found them to agree with the arrangement that was made with Butler & Hamilton to sell to us at their purchase-price, adding five per cent; I found no variation in the six months.

Q. Did you in the fall of 1882 make up a statement to the board of managers from the books and accounts of the Asylum at the request of the auditing committee of the board?

A. I did; I caused it to be made and assisted in making it.

Q. Does that statement exhibit the number of cattle purchased during the year 1882?

A. I don't know that it exhibits the number of cattle; it gives their weight and price per pound.

Q. And of whom purchased?

A. Yes, sir.

Q. And the aggregate?

A. Yes, sir.

Q. Does it give the total weight?

A. Yes, sir.

Q. And the average price of each year?

A. Yes, sir.

Q. How was this request made to you, Mr. Dryer?

A. It came to me through Dr. Gray, as made to him by the auditing committee.

Q. Was it in writing?

A. No, sir; I do not think it was given to me in writing.

Q. Did that statement also embrace the number of sheep and lambs?

A. Yes, sir; it gave the weight of the sheep, and the number of the lambs; and the lambs were bought as they stood.

Q. Did it also give in regard to sugars?

A. Yes, sir.

Q. And from whom purchased?

A. Yes, sir.

Q. Price and weight?
A. Yes, sir.
Q. And did it give the aggregate weight?
A. It did.
Q. And the price for two years?
A. Yes, sir.
Q. Did it also embrace the price of butter?
A. Yes, sir.
Q. In the same detail as to weight and price?
A. Yes, sir; and the average.
Q. Have you that statement?
A. I have an abstract of it with me; the statement I have not here.
Q. Did it embrace also the purchase of flour?
A. Yes, sir.
Q. The number of barrels?
A. Yes; and the average price per barrel.
Q. And the total number of barrels?
A. Yes, sir; we could not get at the average without having the total number of barrels.
Q. For the year 1881 and 1882?
A. Yes, sir.
Q. Will you produce that statement?
(Produced and marked "Exhibit No. 25, J. H. M." See Appendix.)
Q. When was this statement presented to the auditing committee?
A. I think it was in the latter part of December.
Mr. Rice — Find out if this is a copy of that statement or an abstract.
Mr. Goodwin — It is a copy of the aggregate.
Q. What is this paper? Mr. Rice wants to know.
A. It is an abstract of the full statement that was made.
Q. Have you the detailed statement?
A. It is in my office; the abstract was made by our book-keeper, Mr. Sanders.

By Mr. Haskell:

Q. When it was made, was it compared by you?
A. Yes, sir; it was compared by me.
Q. So that you know it is correct?
A. I believe it to be correct; from a comparison of it with the detailed statement, I believe it is correct.
Mr. Goodwin — Now, I offer it in evidence.
(Admitted. See Appendix for said paper.)

By Mr. Goodwin:

Q. Now I ask you when that statement was presented to the auditing committee?

A. It was late in December, 1882.

Q. Now, I will ask you, has your attention ever been called by the auditing committee, through the superintendent, at any time during the past few years, to the cost of mill feed for the cows?

A. Yes, sir; it has.

Q. And where it has varied in price?

A. Yes, sir.

Q. Is there a variety of such feed?

A. Yes, sir.

Q. Have you made purchases with reference to its varieties?

A. I have.

Q. Have you talked with Mr. D. D. Winston in regard to feed?

A. I am not certain that I have with regard to feed, but I have with regard to other supplies.

Q. Has he ever spoken to you on the subject of feed?

A. No, sir, not that I remember; if I have, it has been in a general way when I purchased feed of him or his firm.

Q. Has he ever talked with you on the question of the purchase of supplies?

A. Yes, sir; well, flour, more particularly.

Q. When was that?

A. Frequently.

Q. Can you give any time?

A. I cannot name the time, except I think that the most important conversation I ever had on the subject, I think, was in June last; he had said to me from time to time, previously to that, that he kept flour for sale; I purchased and found it did not answer our purpose as well as another variety.

Q. Then you cannot fix the time any more than it was the last of June on one occasion?

A. Yes, sir.

Q. And you have talked with him on several occasions in regard to it?

A. Yes, sir, in a general way.

By Mr. Haskell:

Q. Both before and after he became a manager of the institution?

A. Yes, sir.

Q. Have you been in the habit of purchasing of the firm of which he is a member?

A. I have somewhat.

By Mr. Goodwin:

Q. Have you purchased flour of him before he became a member of the board of managers?

A. I think so, yes, sir.

Q. Has he offered flour to you?

A. Before he was a manager?

Q. Yes, sir.
A. Yes, sir.
Q. Since he has been a manager have you purchased flour of him?
A. I have.
Q. And purchased oat meal of him?
A. Yes, sir.
Q. Have you talked with him in reference to the purchase of flour out of the city?
A. No, sir.
Q. I mean as to the advisability of purchasing out of the city?
A. No, sir, he gave no advice and offered none.
Q. Have you talked with him about the Minnesota flour?
A. I have.
Q. When was that?
A. He said to me that they were selling the Pillsbury flour, manufactured at Minneapolis; I inquired the price; he told me, and I told him that we were getting the Minnesota flour considerably less.
Q. What price did he give you?
A. Eight dollars.
Q. And you told you were buying flour at considerably less; what followed?
A. Yes, sir, that we were buying flour at Minnesota that cost us less than $6, a little less than that, $5.90, I think.
Mr. Brown — Mr. Goodwin, have him designate the brand of flour.
Q. Mr. Brown wants you to designate the kind of flour?
A. I did not tell him, but I can tell you, it was that manufactured at St. Peter, Minn., by Sackett & Co., "Diamond Bluff," "River Side," "Oshawa."

By Mr. Brown:

Q. Do you buy the best brand?
A. Bought them all?
Q. Did you buy the best brand that they had for $6?
A. No, I do not say that; but it was such a flour as we wanted for our use.

By Mr. Goodwin:

Q. Any thing else in that conversation with Mr. Winston that you remember?
A. He was very persistent in declaring that I could not get Minnesota flour for any thing like what I stated; I said then I would join issue with him, and convince him; and we left it at that; there was nothing more said; I did not buy his flour at that time.
Q. Will you be kind enough to state if you have purchased oatmeal in the city here, and if so, from what dealers?
A. I purchased largely from J. G. Egert.

Q. Who else?
A. Head & Winston.
Q. Who else?
A. I don't recollect any others now.
Q. Have you got those bills with you?
A. Yes, sir.
Q. Will you produce them?
(Bills produced by witness.)
Q. Were these purchases made of Messrs. Head & Winston since he became a manager of the institution?
A. Yes, sir, I think so; in June, 1883.
Q. What bill have you there?
A. Head & Winston's bill commencing with June, 1883.
Q. How much oat-meal did you buy of him?
A. Two barrels.
Q. What did you pay him for it?
A. Eight dollars a barrel.
Q. Did you buy the same oat-meal from Egert?
A. I did; well, I cannot say that it was all made by the same parties.
Q. What did you give for Egert's oat-meal?
A. Seven dollars and seventy-five cents.
Q. Can you state what brand of oat-meal it was you purchased of Head & Winston?
A. No, sir.
Q. Can you state what brand you purchased from Egert?
A. No, sir, not now.
Q. Did you purchase it, supposing it to be the same oat-meal?
A. The same quality of meal I suppose.
Mr. Rice — What he "supposes" is unfair; does he know?
Mr. Goodwin — Did you purchase it believing —
Mr. Rice — No; was it the same.
Q. Well, was it the same oat-meal?
A. The same quality; I know no difference in the use of it, nothing whatever; it was no better in the use we put it to, which was the same as the other, and it was no better than the other.
Q. (By Mr. Rice.) Which did you purchase first?
A. I purchased it at Egert's before and after.
Q. When was the purchase made from Egerts; the first one?
A. I don't know now.
Q. I mean from that bill that you have there?
A. This bill is March, 1883.
Q. What is the amount of oat-meal that you purchased of Head & Winston?
A. Two barrels at different times.
Q. And how much of Egert?
A. Here on these bills, we had five.
Q What are the aggregate purchases of Head & Winston, since Mr. Winston has been a manager?
A. Of any thing?

Q. Yes; the aggregate?

A. Two barrels of oat-meal; I can tell from the bill; there was flour, we had a barrel at a time, pastry flour, sometimes three barrels of Pillsbury flour; from the month of June to August, 1883, we had $169.15.

Q. Is that a fair average for the year?

A. We have had more and less; I don't know whether that would be a fair average or not for the quarter; I think it is larger than the average.

Q. What would you say the average was?

A. I could not say; I have the means of ascertaining exactly and accurately, but I cannot say here.

Q. Why did you buy at Head & Winston's at a greater price than you could purchase elsewhere?

A. I don't know that I have any special reason that I can give; I was in the habit of buying there sometimes, and was in there and bought it; and after the conversation with Mr. Winston as to the price of flour, I bought another one for the purpose of ascertaining whether he would sell to us, as other dealers did in his own neighborhood; that is the reason why I bought the second barrel.

Q. State what you paid for the flour you bought of Mr. Winston?

A. For pastry flour I paid $6.25, $6.50 and $6.40.

Q. In regard to the number of loaves of bread, did you make any experiments?

A. That was with the Pillsbury flour; I took the purchase of Pillsbury flour, three barrels, and three barrels of flour we were using; purchased of another party altogether, Mr. Owen; we paid for the Pillsbury flour $8 a barrel, and for the other $6.25 and took them, this was after the conversation with Mr. Winston to that effect; I told him I wanted to try them; he had said so much about the product of bread from the Pillsbury flour, and I said I wanted to make an experiment.

Q. What was the experiment? Did you make it?

A. We made it, made up the three barrels of each, and we had the bread weighed; the bread from the Neosha, made from the same kind of wheat — Minnesota spring wheat — the bread from that was six hundred and seventy pounds, the bread from the three barrels of Pillsbury's flour was six hundred and two pounds; sixty-eight pounds difference.

Q. Has Mr. Winston spoken to you on the subject of the purchase of supplies for the Asylum since April, 1883, as a member of the auditing committee of the board of managers?

A. No, sir.

By Mr. Brown:

Q. I would like to ask here, if there was any difference in the quality of bread made from these two kinds of flour?

A. There might be a little, but not enough to make up for the difference in quantity to give to our people.

Q. Are you aware that the Pillsbury flour, or any of those high patent flours has to be kneaded in a different way from the common flour, to get the best results attainable?

A. Yes, sir, we are perfectly aware of it; our baker understood it, I believe.

Q. They have to have experience, do they not?

A. He has had experience.

Q. It has got to be worked and kneaded differently from common flour, or you do not get good results?

A. Yes, sir.

By Mr. GOODWIN (resuming):

Q. Is it a fact that productions of the Asylum farm paid for by State labor is sold again to the State?

A. No, sir, not under any conceivable condition.

Q. Is the milk of cows owned by the State, and purchased and fed on the Asylum farm, sold to the State?

A. I answer very positively with regard to that, that it is not, unless feeding it out to the patients who pay the Asylum for their maintenance may be called selling it to the State; all the product of the farm, almost without exception, is consumed in the house by the people there; the milk is all used in the house, none of it goes to any other purpose that I know of; I presume that impression is taken from the statement that appears in our annual report; it is simply an exhibit of what the farm produces, and the prices affixed to the articles, whatever they are, is the same as the prices that the articles are commanding in the market; it is a statement that I make annually to present to the managers.

Q. Is there a combination of merchants in the city of Utica who have a corner in supplying necessaries to sustain life to the patients in the State Lunatic Asylum?

A. Not to my knowledge; I am not aware of any such organization or corner.

By Mr. BROWN:

Q. Will you please tell this committee what course you pursue in order to make yourself conversant with the wholesale prices of the products you buy for the Utica Asylum?

A. I examine the market reports; I converse with men purchasing the same kind of articles to get their views.

Q. Do you consider that the goods you buy at Butler & Hamilton's are at wholesale prices?

A. Yes, sir.

Q. I see by this bill that you are charged $3.25 for a sack of Ashton salt; do you consider that the wholesale price of that article?

A. I know it is a good deal less than we have paid for it.

Q. Have you seen any quotations that will warrant you in saying that $3.25 is the wholesale price for Ashton salt?

A. Perhaps not of late; I have noticed of late, it is high perhaps, if the Ashton salt is at all of one weight, I am not certain that it is.

Q. When you come to Utica, what is your manner in doing; have you a slip made up when you start from the Asylum?

A. Memorandum, yes, sir.

Q. Do you examine goods in different stores in Utica and inquire as to the price?

A. I do sometimes, not always.

Q. Do you ever find any variation in the prices?

A. No, sir, not to any extent.

Q. In the bills of Butler & Hamilton's there are several items of "Snow Flake Crackers," fifteen cents a pound; are you willing to swear that that is the wholesale price for snow flake crackers?

A. I don't know, the item is so small that I did not think much of it.

Q. Have you ever examined or inquired to find out if that was the wholesale price or not?

A. I have not in any place but that.

Q. Take this item of "timothy seed" of Butler & Hamilton's $2.60 and $2.70, do you know that the price charged by them is the wholesale price?

A. No, sir, I don't know what it was; it was the price that others were selling at, whether wholesale or retail.

Q. Have you any means of informing this committee the amount of supplies that goes to Dr. Gray for his own use?

A. No, sir, I have not.

Q. Who would know that?

A. Let me understand the question.

Q. It is this: have you any means of telling the amount of articles that are bought exclusively for Dr. Gray's family, for instance, articles that he uses that are not used in the Asylum?

A. No, sir, I have not.

Q. Are there any articles purchased for Dr. Gray and his family that are not bought for the Asylum?

A. I do not purchase any; if there are any he purchases them himself.

By Mr. MORGAN:

Q. Through what source is the bill paid?

A. The same as the others are paid.

Q. Whoever made the purchase, the bill would be presented and paid in the same way as the others?

A. Yes, sir; they go through my hands; all the bills do.

By Mr. RICE:

Q. Then are you not able to answer the question as to whether

any such articles are furnished to the family of Dr. Gray that are not furnished generally for the inmates of the Asylum?

A. Oh, I know there are articles furnished to him that are not furnished for the inmates, but not that are not furnished for the officers' department.

By Mr. Brown:

Q. State whether or not the officers of the institution are furnished with several extras that the inmates do not have, that the State pay for; what we consider extras, for instance, Florida oranges?

A. Most of those are for patients, and paid for by the patients; very few others.

Q. What do you say to the item in the bill of McQuade's, of a high priced wine at $27.00?

A. I don't know any thing about that.

Q. You do not know what that was for?

A. It was said to have been purchased for medicine, and I have included it in that, in the bills of medicines.

Q. In this bill of Thomas & Co., 365 pounds cod?

A. That goes to the house.

Q. At twelve cents per pound; are you willing to swear that that was the wholesale price of cod?

A. I think that is an exceptional bill; sometimes it is difficult to procure it at all; more frequently it is less than price; his bills usually are eight cents.

By Mr. Haskell:

Q. When he charged twelve cents, did you make any effort to procure it elsewhere at a lower figure?

A. No, sir.

Q. Did you at that time buy fish of any other firm?

A. Yes, sir; we bought fish out of town.

Q. Is Mr. Thomas a dealer in Utica?

A. Yes, sir.

By Mr. Brown:

Q. Did you ever send for prices and samples to any wholesale firms for goods outside of Utica?

A. For some kinds of goods; and we have a great many sent to us.

Q. What kind?

A. For dry goods and clothing.

Q. Has there been any dry goods or clothing or groceries bought outside of Utica for the last year?

A. Yes, sir.

Q. To what amount, please state?

A. Not very large.

Q. Can't you state the amount?

A. One hundred and fifty dollars.

Q. Have the prices quoted to you by firms outside of Utica been such that you have found it to be to your advantage to purchase in Utica; have you felt warranted in purchasing at Utica because of any advantage in the price?

A. For groceries we do not go out of town.

Q. And do not make inquiries as to what you could buy for out of town?

A. No, sir; as I have stated before, and it is apparent to anybody who knows any thing about it, it is an arrangement made thirty years ago, to have our heavy groceries furnished by contract; I never have changed it; the prices — the percentage on them has been varied once or twice, once certainly, since I have been there, and an attempt made to do it at another time.

By Mr. Haskell:

Q. Who made the attempt?

A. Where was it made?

Q. Who made it?

A. The Asylum.

Q. What was done about it?

A. We called for bids.

Q. Of whom?

A. Crouse Bros was the first one; D. Crouse & Sons, when they were in business where Head & Winston are; and Comstock Brothers; and Butler & Hamilton.

Q. When was it; what year?

A. I cannot give you the date, it was twelve or fourteen years ago; and there has been one time since then.

Q. When was that?

A. I should say it was as late as 1876; 1875 or 1876; the dealers were called on to present bids.

Q. How was notice given?

A. It was done by the managers; I can't say; they can answer for themselves; I don't know how, but I know Mr. Crouse put in his bid, and no one else did at that time that I remember, except Butler & Hamilton.

Q. And Butler & Hamilton's was the lowest?

A. Yes, sir; by the freight from New York on all goods they were to furnish, which was almost as much as the percentage they got, it was said.

Q. What goods did the bids cover?

A. Covered the same as Butler & Hamilton's; such as sugar, molasses, rice, tea and coffee.

By Mr. Brown:

Q. Did it include two grades of tea?

A. No, sir.

Q. What grades did it include?

A. Black tea.

Q. In Butler & Hamilton's bill you are charged sixty cents per pound for Japan tea; are you willing to swear that that was the wholesale price of that tea?

A. I don't know what they call it.

Q. What did you call it?

A. I called it a very good purchase; it was an excellent quality of tea.

Q. Where did you get your knowledge to base an opinion that paying sixty cents per pound for Japan tea was a good purchase?

A. From all my experience in the past.

Q. Don't you know that the highest price tea — the best tea imported — was at that time being sold by H. K. Thurber & Co., of New York, at fifty cents per pound; the best Japan tea that could be procured in the market?

A. I can not say what H. K. Thurber & Co. did; I know what the dealers here do; I can go out and buy a tea for fifteen cents a pound.

Q. I will repeat my question; don't you know it to be a fact, that wholesale firms in Albany and New York sold the best imported Japan tea at fifty cents a pound?

A. No, sir; I don't know that.

By Mr. HASKELL:

Q. Did you buy the best Japan tea of Butler & Hamilton?

A. I don't know; I think not; I think they had a tea that was higher priced than that; but we have not bought it since the change in prices in tea.

Q. You think you buy a second grade?

A. No, sir, I think we buy the first now.

Q. The very best grade?

A. Yes, sir.

By Mr. BROWN:

Q. Here is a bill of McQuaid Brothers, eighteen gallons of brandy at $6 per gallon. Do you think it is for the interest of the State Lunatic Asylum and the interest of the State to buy high-priced brandy?

A. I have no responsibility in that matter.

Q. I ask you what is your opinion in that respect?

A. Well, my opinion — I want to state facts; I do not buy it, I don't know the use of it, or the value of the different prices of liquors at all; I never have been required to make purchases except under special directions.

Q. (By Mr. MORGAN.) Who does make the purchase of the liquors?

A. Dr. Gray selects them.

By Mr. HASKELL:

Q. Personal?

A. Yes, sir.

Q. What is you judgment whether you can buy the line of groceries that you buy of Butler & Hamilton, of wholesale firms at a less rate than you buy of Butler & Hamilton; what is your personal judgment?

A. My personal judgment is that those articles under contract, I could not buy to any better advantage anywhere.

Q. In the State of New York?

A. No, sir.

Q. And how as to the other articles not included in the contract?

A. I don't know that I can, them.

Q. What is your judgment?

A. I don't think I can.

Q. You think then that you are buying at the best possible rates you can obtain for the institution?

A. I think so.

Q. What means have you taken to inform yourself of that fact, if you have taken any?

A. From what I see of the dealers in the same articles.

Q. What dealers?

A. All our dealers, where I have occasion to know any thing about them.

Q. Name them?

A. The best dealers.

Q. What steps have you taken, or what efforts have you made to ascertain?

A. Not any special effort, because these articles were all arranged for; and I have not felt disposed to interfere with it, as I did not make it, and I have had no instructions to change it.

Q. And you do not consider yourself at all responsible for the arangement?

A. No, sir; not for the arrangement.

Q. If it should be brought to your knowledge that you could buy these goods cheaper elsewhere, you would not feel justified in buying elsewhere?

A. Any thing that is not under the contract?

Q. Those that are under the contract?

A. No, sir; I should not.

Q. You would not consider it your duty to take any steps in the matter?

A. Yes; I should think it my duty to take steps; I would talk with the parties in interest, who have a right to direct, and would recommend a change.

Q. You have taken no pains to find out whether these goods could be obtained for a less price during the past few years?

A. No, sir; I have not.

By Mr. BROWN:

Q. Does Butler & Hamilton deliver to you the original bills of these goods upon which they add a percentage of five per cent?

A. Yes, sir.

Q. From whom do they purchase?

A. I don't know; they purchase from whom they please.

Q. Do they purchase in New York city?

A. Yes; and they purchase for cash.

Q. Is the freight added?

A. No, sir; not on our original bills; that was the difference between Butler & Hamilton's and Crouse Bro.'s; it was the same percentage, but they added the freight, and the board of managers, or the auditing committee, decided not to change it; we went so far as to get samples and prices and compare them, that is, of Crouse Brothers and Butler & Hamiltons.

Q. Can you deliver to this committee the bills that Butler & Hamilton give you to correspond with the bills we now have of Butler & Hamilton?

A. I can with their consent; I do not have their bills except to compare and examine, and I am not at liberty to give them to anybody else, except with their consent.

Q. As long as you pay them five per cent on the purchase, and take the goods, the bills virtually belong to you?

A. I do not understand it so, for we do not take the whole of their purchases at any one time; they may buy fifty barrels of sugar, and we may get ten of them.

Q. For instance, they buy a bill of molasses of different grades; what knowledge have you that they deliver to you the same that they claim to have bought for you?

A. We know something about the brand of molasses, whether it is New Orleans, or any other kind of molasses.

Q. There are different grades of New Orleans molasses?

A. I don't know but there may be; I presume there are.

Q. Don't you know there are?

A. I don't from my personal knowledge; I know there is a variety of grades of molasses, but I do not know what causes it or why it is so.

Q. How do you distinguish as to the tea, that you have what you call for in quality and quantity?

A. I don't know how a person knows any thing unless he trusts honorable men in dealing; I think we can rely on their statement "this is the tea we bought at that price, we sell it to you at that price," and we take their weight.

Q. Don't you know every chest of tea is marked with the weight gross and tare, upon it?

A. Yes, sir.

Q. Do you compare that with the bill?

A. Yes, sir; and we weigh the chests of tea.

Q. Is it not necessary that a man should be well posted in regard to prices and qualities to know about such matters?

A. Yes, sir; I suppose it is.

By Mr. Morgan:

Q. Who makes out the bills against pay patients?

A. They are made in my office, under my direction, by the book-keeper.

Q. Have you ever had any disagreement with pay patients or their friends as to the amount they were to pay?

A. I do not fix the price they are to pay.

Q. When you have made the bill, have they ever complained to you that more was charged than they cared to pay?

A. It is generally inserted in the bond what they are to pay per week.

Q. Do you remember the case of Giles Comstock of New Hartford, whose wife was there?

A. No, sir.

Q. Do you remember of his making the claim that an arrangement was made for his wife there at four dollars per week, and that you were charging him six?

A. No, sir; I do not think that there was any such arrangement made; six dollars is the minimum price for private patients and four dollars for public patients; if there is any arrangement for a private patient at four dollars, it was not according to the rules of the institution.

Q. Do you remember the case of Mr. Comstock's wife?

A. No, sir; I do not settle with them any more than to settle with the treasurer at the price named in the bond, or named to him by the doctor, who regulates that under or by the board of managers.

Q. When Dr. Gray buys liquor that is charged to the institution, what is done with that liquor when it is delivered to the Asylum?

A. It is usually put into a place we have on purpose for such things, a cellar, or is taken directly to the apothecaries.

Q. When any portion of it is drawn, what is the proceeding in order to entitle a person to draw from that liquor?

A. As I say, it is in the hands of the apothecary, for medical purposes, as I understand it; that is all I know about it; I know it goes to him.

Q. Suppose Dr. Gray wants liquor, does he have to make an order for it, or give a receipt?

A. I do not know any thing about it; he does not call on me about it.

Q. Who would be the person to know that?

A. He would be the one to know, Dr. Gray, and the person to whom he would give directions to draw it; I don't know who that would be.

Q. And whatever he wanted, he would either draw, or cause it to be drawn?

A. It is a matter that has never come under my observation.

Q. No question has been made of that to you?

A. No, sir.

Q. But the purchase of it is reported to you, and you put it on the books as a claim against the Asylum?

A. Yes, sir.

Q. And it is paid for out of the Asylum funds?

A. Yes, sir.

Q. Is that the case with all such matters that are furnished to Dr. Gray's family?

A. So far as I know it is.

Q. In your department there is no separate account kept for Dr. Gray's family?

A. No, sir.

By Mr. HASKELL:

Q. Has there been a meeting of the board of managers recently at the Asylum?

A. Yes, sir.

Q. Were you present?

A. No, sir; I do not remember that I was in the room at all; oh, yes, perhaps I was; I think I did step in and handed in a paper that was asked for; I was not present at their deliberations.

Q. Do you know whether the question of the finances of the Asylum was under consideration?

A. I do not.

By Mr. MORGAN:

Q. Do you know what subjects were under consideration by the board of managers?

A. I do not.

Q. At the recent meeting they had?

A. No, sir; I do not.

Q. Were all the managers present — all the board?

A. I can't say; no, sir; Mr. Lawrence is in Florida, and General McQuade was not there; I do not know who was there.

Q. Was there any investigation made by the board of managers, at meeting, of your books of accounts?

A. By individual members of the board, I think.

Q. Were any errors found in your books of accounts?

A. I did not hear of any.

Q. None reported to ou?

A. No, sir.

Q. And you were not called to explain any?

A. No, sir.

Q. What paper was it they called upon you for that you delivered to them?

A. I think it was small ones that has been introduced or spoken of here to-night.

Q. Of the bills?

A. No, sir; it was that matter of flour, the two kinds of flour.

By Mr. GOODWIN:

Q. When a purchase is made by the Asylum, of liquor, if it is not brought home in Dr. Gray's pockets, or by him, how is it brought?

A. It is sometimes sent by the person selling it, and sometimes carried up by our teams.

Q. Where is it delivered at the Asylum?

A. I believe now, uniformly at the apothecary's room.

Q. Does the apothecary take a receipt for it?

A. I do not know we have all brought in that same way.

Mr. BROWN — Ask him where the cigars are delivered that are bought for the institution.

Q. Mr. Brown wants me to ask you where the cigars are delivered that are bought for the institution?

A. I don't know whether they are bought for it.

By Mr. BROWN:

Q. Don't you know that there are some purchases of cigars, and that you have the bill for them in your office?

A. I don't remember it; if so I presume it was bought for visitors, but I can't say; oh, yes, I wi l tel. you; I bought those ciga s for a patient and they were charged to his account and paid for by him; if you had looked the matter up, you would have found them charged to the patient who smoked them.

Q. Do you charge a profit on any articles purchased for the patients?

A. Very little, not generally.

Q. Do you charge a profit on the oranges?

A. No, sir; we charge them the same as we pay.

Q. Upon what articles purchased to patients do you charge a profit upon?

A. Where we pay a bill of clothing, we sometimes get as high as two, sometimes four and sometimes ten cents a garment; it depends on the cost of it; it is more for convenience that any thing else; we do not make much profit out of the pa ients in that way.

By Mr. GOODWIN:

Q. What other articles, if any, do you make a profit on in that institution?

A. I do not think of any thing else.

Mr. SWAN — Ask him where the profit goes.

Q. Where does it go?

A. It goes into the fund of the institution; it is paid for when the patient's bill is paid.

THEODORE POMEROY, recalled.

By Mr. GOODWIN:

Q. Were you at the meeting of the board of managers held in April last?

A. I will look at this book (the records of the board meetings) and see.

By Mr. HASKELL:

Q. Do you not know without referring to your book whether you were present or not?

A. No, sir, I can't carry that in my head (refers to the book); yes, sir, I was there, 24th April.

Q. Was Mr. Winston at that meeting appointed a member of the auditing committee?

A. There is no record of such appointment here.

Mr. SWAN — I think it was an earlier date than that?

WITNESS — It was at the meeting of April 10th; I was present at that meeting.

Q. Do you remember any conversation at that meeting in reference to the importance of placing a new man on the auditing committee?

A. Yes, sir, I do.

Q. State what was said in substance?

A. Mr. Winston was placed there, as I understand it and remember it, because he was familiar with the supplies purchased so largely by the Asylum; and being a member of the board who was familiar with such things, he was put on that committee.

Q. In whose place was he put on that committee?

A. In place of Judge Coxe; I believe he resigned; Judge Coxe had been a member of the committee on audits; I don't know how long, but not long; I find on referring to my records that Mr. Lowery was appointed in place of Judge Coxe.

Q. And when was Mr. Winston appointed on the auditing committee, if at all?

A. It was at the meeting of March 23, 1883; Mr. Winston was substituted in place of Mr. Lowery; that was a special meeting.

Q. You will have to refer to your records again — that must be an error — you said it was April just now?

A. On referring to the records, I find it was May, and not March; I wrote May with a pencil, and when I came to write it with ink, I wrote it March; that was an error; May is the month; it should be May 23.

Q. Was there any criticism made by any of the managers there at

either the April or May meeting in relation to the methods then followed in regard to the purchasing of supplies for the Asylum?

A. I don't remember of any.

Q. Were you at the meeting of the board in December, 1883?

A. Yes, sir; that was the annual meeting.

Q. Was the matter of supplies brought before the board at that meeting by any member of the board?

A. General McQuade brought the matter before the board, when he made his report as chairman of the auditing committee.

Q. Was any thing else said in regard to it?

A. There was some considerable conversation in regard to the supplies on the part of General McQuade and other members of the board?

Q. Did Mr. Winston speak?

A. He did.

Q. Did he make any suggestions?

A. He did; there were one or two objections or questions asked in regard to prices on certain bills; one in regard to shavings, and meal; General McQuade spoke of the bill of shavings, that seemed to him large; a satisfactory explanation was given, and Mr. Winston then spoke in regard to some other matter, some other bill; I believe it was meal; he asked Dr. Gray some question in regard to that, and there was a general conversation in regard to it.

Q. Did he speak in any way of the general management of the purchasing of supplies?

A. Not otherwise than the other members of the board, so far as I remember.

Q. Did Dr. Gray, at that meeting state in substance that he should be pleased to adopt any manner of purchasing supplies?

A. Yes, he did, as he always does whenever the subject is up.

Q. Was there a motion or resolution passed to refer the matter to the auditing committee to report upon the subject?

A. I think there was; (referring to book of records of board meetings) yes, sir, this is it; "on motion of Mr. Lowery, resolved, that the matter of the purchasing supplies, etc., for the use of the Asylum be referred to the auditing committee to report to the board such action as they recommend for adoption."

Adjourned until to-morrow morning at nine o'clock.

Friday, *March* 28, 1884.

The committee re-assembled at 9:30, A. M., in room No. 23, Baggs Hotel.

Present — Messrs. HOWE, HASKELL, RICE and BROWN.

THEODORE POMEROY.

Examination resumed.

By Mr. GOODWIN:

Q. When we adjourned last evening, you had just completed the reading of an entry from your record; that resolution was at the annual meeting on December 11, was it not, Mr. Pomeroy?

Mr. J. R. SWANN — I would ask him to state what took place at the meeting.

Q. There was no particular attention drawn by any manager to the general management of the purchase of supplies?

A. No, sir; there was no criticism upon it, but a desire to improve it; if the auditing committee would recommend some mode of improvement; Dr. Gray said, in regard to the shavings they were used instead of straw, because they were cheaper than straw in bedding horses; in regard to the meal, Mr. Winston asked about that and the doctor said that that meal they bought contained a large proportion of buckwheat and made it more valuable as a milk producing article for cows and in that sense he consider it cheaper than buying a lower grade that had less of that quality in it.

Q. What did he say about adopting any plan the board of managers might suggest in the way of purchasing supplies in the way of economy or saving money for the Asylum?

A. I don't know that he said much about; it Dr. Gray is always ready to adopt any plan and is obliged to, that the managers suggest, and no one was inclined to adopt a plan suggested by the committee more than Dr. Gray.

Q. Did Mr. Winston produce the bills of Butler & Hamilton at that meeting?

A. I don't think he had any bills of anybody; I do not remember of having seen or heard of any bills produced by Mr. Winston at that meeting.

Q. Have you heard his testimony read?

A. Yes, sir; probably the greater part of it, I have heard.

Q. Did he refer, to your knowledge, at any meeting of the board to the prices of any items contained in any bills of Butler & Hamilton?

A. I don't remember that he referred to their bills at all, either in general or particular at any meeting.

Mr. Goodwin — I refer to page 261 of the testimony which I will read: "Do you think the pay of the attendant is sufficient, considering the nature of their duties and their hours of labor? A. I do not think it any too much, although I have expressed myself frequently in the board that I thought, particularly in the women's department, they were not paid high enough." Did you ever hear Mr. Winston so express himself frequently?

A. I know the subject was talked of, and he may have joined in the conversation; very likely he did; I don't know whether he did or not; it was an impression that he had; that it would secure better service if there was an increase of pay on the part of the attendants, particularly the women.

Q. At page 264 Mr. Winston says: "As I have said very frequently that the articles could be sold to the Asylum to better advantage than they were getting, and when I came to audit the bills I saw that a great part of those goods could be obtained at a good deal less money;" has he said any such thing to you?

A. Individually, outside of the board?

Q. Yes, sir; before this investigation at any time?

A. I have had some conversation with him since he was at Albany.

Q. Previous to that?

A. I don't remember having had any conversation with him on the subject previous to that.

Q. And you have heard no such expression from him on the subject, except as you have stated?

A. I remember no other.

Q. On page 264; has he stated, to your knowledge, to the board or the superintendent that the Asylum could buy to better advantage buying such articles as sugar, molasses and goods in the grocery line at wholesale?

A. To the board or to the superintendent?

Q. As he stated it to the board or superintendent; either, take the board first?

A. I don't remember of any specific statement on that question any further than that might be inferred from the general discussion of that question — that general subject at the board.

Q. Have you ever heard him state it to the superintendent in your presence?

A. No, sir, I have not.

Q. I call your attention now, to pages 267 and 268, and will read it: "Is there any thing else on the bill?;" the next thing is "powdered sugar, one barrel," there is no percentage added to that; that is put down on the bill at net; when we presented our report the auditing committee, I inquired why it was that they made a difference in sugars — why one was charged a certain percentage and another was not — the only reply they could give was that it had been a custom

from time immemorial; I said I could not see any reason for that myself.

Q. At what price is that item charged?

A. Nine and a half cents; that would be about the right price at that time, I should think.

Q. To whom did you speak about the matter; did you call the attention of the steward to it?

A. No, sir; Dr. Gray; it was an open m eting of the board.

Q. Was the steward present at the meeting?

A. No, sir; he was not there; Dr. Gray was there.

Q. And did Dr. Gray say that it had been the custom from time immemorial?

A. Yes, sir; that it was so when he came into the establishment.

Q. I ask you in the first place whether Mr. Winston said any thing about that in the board?

A. There was talk about — perhaps about various articles; I don't remember about sugar.

Q. The question is when the committee had presented its report at the December meeting, did Mr. Winston inquire why it was they made a difference in each case, why one was charged a certain percentage and another was not?

A. I don't remember any such conversation or any such question.

Q. Do you remember whether or not Dr. Gray said the reason was it had been the custom from time immemorial, and that it was so when he came into the establishment?

A. I don't remember that Dr. Gray ever used any such term or conversation.

Q. Would you have remembered it if he had said it?

A. I should have remembered it, for it would have been an extraordinary thing to say; if he said it I should have remembered it.

Q. According to your recollection no such conversation took place?

A. Dr. Gray said nothing of the kind that I heard.

Q. Now turn to page 270; "Q. You say that the board recommended that you should make further inquiries; have you made further inquiry? A. We have talked it over; the auditing board particularly, Mr. McQuaid, once or twice since that, and the effect of it has not been obvious upon the superintendent." Has Mr. Winston remonstrated with you or the board in reference to the purchasing of things, and has there been any change in the purchasing of the things?

A. What Mr. Winston said to the auditing committee I don't know; I am not a member of the committee.

Q. I call your attention to page 271. "Q. Do you suppose that any kind of delicacy of feeling toward Dr. Gray has prevented the bringing up of the subject?

A. It may be so.

Q. Do you think it likely that it has been so?

A. I should think very likely that the members of the board might perhaps feel rather diffident bringing up such a matter before Dr. Gray."

Q. Then at page 270. "There has been no change in the purchasing of the things, they go along just as they have been going; it seems as though they got into a groove and did not know how to get out." Now, Mr. Pomeroy, has the board — are you as a member of the board — do you feel diffident about bringing up matters in the presence of Dr. Gray?

A. Not the slightest; perfect freedom to do it.

Q. Have you ever known any matter to be omitted by the board out of consideration for Dr. Gray or on account of his feelings?

A. I have not known of any matter of that kind.

Q. What do you think it would be your duty as a manager of the Asylum?

A. It would be my duty to recommend any improvement and I should not hesitate to do it, and there was no reason why I should hesitate.

Q. In your opinion is the board of managers of the State Lunatic Asylum "in a groove and do not know how to get out of it"?

A. I never knew we were; I have been there twelve years and I haven't been conscious of any such thing.

Q. I call your attention to page 273: "Q. Do you or do you not think it would be wise to separate the purchasing department from the executive part or government of the institution now in the hands of the superintendent? A. I have always said that when I have talked on the subject, I have always expressed myself very freely, that I thought they should be separated, that the duties of the superintendent should be to take charge of the medical department, and of the humanitarian and sanitarian department and that the business part — the farm, the garden, the purchasing of supplies, etc.— should be in the hands of another person who should not be responsible to him, the superintendent; I have always expressed myself freely in that way; I may not have said it to Dr. Gray, for he is very tender on that point, and I have avoided any thing that might precipitate a controversy with him on that subject.

Q. Has Mr. Winston always expressed himself to you or the board that the business or medical management should be separated?

A. I don't know that he ever has.

Q. And you never heard it at the board from him?

A. No, sir.

Q. Or in conversation?

A. No, sir.

Q. Please state to the committee what are your views in reference to a dual management in that Asylum?

A. I have got views about that; I think it would be disastrous to the well conducted and efficient management and the good results of the institution to separate the medical from the diet department;

I think that the food is an element of cure, and ought to be in the hands of the medical department of the institution, and if separated great injury will be done; every physician expects to regulate the diet of his patients; these are sick people and require careful feeding; it would undo a great deal of the good effect that medical treatment could give to have the food and diet administered at random or without that supervision of the medical department.

Q. How in reference to the business department, as to there being a separate independent head of that?

A. I do not believe in two heads to manage the same thing; you get conflict and general bad results.

By Mr. BROWN:

Q. Has there any change been made in the twelve years you have been a manager, in the method of purchasing supplies?

A. There has not been any radical change that I know of.

Q. Are you perfectly satisfied as one of the managers with the manner in which supplies are bought at the present time?

A. I certainly am, or I should not — any recommendations that the auditing committee should propose, I should consider, and if they struck me as favorable, I should want to act on them, if it was important.

By Mr. GOODWIN:

Q. What is the reason there has been no change?

A. Because I believe that the majority of the supplies are bought as low as they can be afforded by anybody.

TRUMAN K. BUTLER, sworn and examined, testified as follows:

By Mr. GOODWIN:

Q. Where do you reside?
A. Utica.
Q. How long have you resided there?
A. Over fifty years.
Q. How long have you been in business here?
A. I have been in business here all that time.
Q. What business?
A. Merchandizing.
Q. How long have you been in the grocery business?
A. As long as I first commenced the business.
Q. When did you go into business with Comstock?
A. About 1840 or 1842 or 1843, somewheres along there.

Q. Are you connected with the savings bank of Utica?
A. Yes, sir.
Q. What is your position in relation to that bank?
A. First vice-president.
Q. Are you a member of the executive committee?
A. Yes, sir.
Q. Are you connected with the Utica Steam Cotton Mills?
A. Yes.
Q. What is your position in that company?
A. Vice-president.
Q. Are you connected with the Mohawk Valley Company?
A. Yes.
Q. What is your position in that company?
A. President.
Q. Are you a director in any bank in this city?
A. No, sir; I have been; I was director in the Ontario bank.
Q. And you were treasurer of the Utica Cemetery Association for a good many years?
A. Yes, sir.
Q. Well, that is enough; I could question you all day on that subject; I only want to show that people have a regard for you in this vicinity; how long have you been selling goods to the Utica Insane Asylum?
A. A good many years; it must have been thirty or forty years, I think; Mr. Comstock was with me about the commencement of furnishing goods.
Q. Did you commence to furnish them on a contract?
A. No contract; it was an understanding; they came to us to know at what we would do it, and the leading articles that they used were suggested, some half a dozen articles, such as sugars, coffees, teas, rice and molasses.
Q. Have you been furnishing the Asylum ever since under that contract?
A. Well, on that basis; I wish to make myself understood there was no contract; they came to us and wanted to know what we would do, and the proposition was first at six per cent that should be the amount of the commission, but there never was any written contract; it went on so for a year or more — three or four or five years — and then it was stated to me that somebody had offered it at five per cent; well, my impression was that it was close enough at six, but I told them: "Well, I shall do the same; I have got accustomed to it, and it is a kind of business I like to be engaged in; it is sure pay;" and so we arranged to do it at five; I preferred such business, with sure pay, to a greater amount of profits and some risk; and so the arrangement was made to continue it, although there never was any writing about it, and we have continued the practice on the same basis; fish was included in the first talk; they used to buy their fish there, and in after years, I don't know how much longer, they found a fish in Gloucester that they thought they

preferred for some reason, I don't know what, whether it was the putting of it up, or something; there was a gentleman here who furnished that fish to families who had been — A Mr. Crawshaw, a music man.

Q. A dealer in music and mackerel?

A. Yes, sir; he introduced it there and they thought they preferred it; I said, "all right, just as well;" and they do not have any such thing of us now.

Q. I would ask you the manner in which you bill these goods to the Asylum, as I understand it, and if I am wrong, please correct me; you purchase goods in New York?

A. Yes, sir.

Q. You charge the Asylum five per cent over and above the cost of such goods in the city of New York?

A. Yes, sir.

Q. You do not buy specially for them — the Asylum?

A. No, sir.

Q. For instance, if you bought fifty barrels of sugar in New York city, and the Asylum wanted twenty, you would charge them what you paid for that sugar in the city of New York, with five per cent added?

A. Yes, sir.

Q. You paying the freight?

A. Yes, sir.

Q. How do you buy your goods?

A. For cash, exclusively; and have for a good many years.

Q. From whom do you purchase your sugars and molasses?

A. From the manufacturers of sugar.

Q. Can you give their names?

A. Yes, sir; Havermeyer's Refining Co., Dick & Myers, the Brooklyn Sugar Refinery Co.; first hand alway.

Q. Do you know of any dealers purchasing goods of those houses at a less price than you obtain yourself?

A. I do not; further than that, I do not think that they can be purchased any better; I don't know what is better than cash, in getting goods of houses that are able to furnish for cash.

Q. How is it in reference to molasses?

A. We buy those from the importers, and of a few brokers.

Q. And how do you buy you teas?

A. The same; of the largest importers and tea dealers.

Q. What special articles do you furnish to the Asylum?

A. It was understood that we should furnish them, at first, at six per cent, then it went down to five.

Q. Senator Campbell wants to know whether this understanding covered all the materials bought from you or not?

A. No, sir; it was only leading articles; there was no contract; they could buy elsewhere if they found they could get as well, or better than ours; there was no understanding, they could buy what

they pleased; that arrangement has continued, and there has been no other understanding or arrangement.

Q. What proportion of your bills to the Asylum are under this understanding?

A. I don't know, but I should say those five or six articles were three-fourths of their purchases at least, and I don't know but more.

Q. Now, in reference to the balance of goods not under the arrangement, how do you sell them?

A. We sell them as we would to the best of customers, sell them at such rates that we believe they cannot do any better, so as to keep them; that is about the basis of it.

Q. You do not sell them at wholesale prices?.

A. Why, yes, just the very best wholesale prices: we have to pay cash, and get the very best prices for that.

Q. You misunderstand my question — I am not talking of articles nnder the agreement, but the other articles you furnish to the Asylum; do you sell them at wholesale prices?

A. I do, because they pay for them promptly, and the pay is sure.

By. Mr. Brown:

Q. I find in one of your bills here, that on black tea, you add five per cent, but on green tea you charge a given price, and do not add any per cent — explain how that is, and why it is done?

A. There was nothing said about green tea when they made the arrangement, and black tea had been purchased for a long time; but at times they wanted a single chest of green tea; they never went to it much.

Q. Do you think you sell to the Utica Asylum all the articles enumerated on the bill at wholesales prices?

A. No, sir; I mean all outside of those things; that we sell them as we would to a wholesale buyer, mixed in with the other goods, at the prices we would charge a wholesale buyer.

Q. When you sell to a wholesale buyer, you sell every article at the wholesale price?

A. Yes, sir.

Q. Are you not safe in saying that you sell the Utica Asylum every article at wholesale price?

A. Yes, sir; I mean that all other goods that they buy that we give them at the wholesale prices, because they buy a great deal.

Q. Referring to this item on your bill: "two chests of green tea 133 pounds," charged at fifty-five cents per pound; is that the wholesale price for that tea?

A. Yes, sir; that is a better order of tea than they generally have.

Q. What brand of snow flake crackers do you sell the Utica Asylum — whose make are they?

A. I do not have to do very much with the good, I have not for some ten or fifteen years, and I should not be able to tell you what brand of crackers it is; I only speak of the basis of doing it.

Q. Your firm charges fifteen cents per pound for snow-flake crackers; is that the wholesale price for such crackers?

A. I am not able to say, because there may be other kinds; I think we have had other brands; but I have not meddled with that department, buying and selling, for some ten years or more.

Q. Take this item "ten pounds whole pepper, twenty cents per pound," was that the wholesale price of pepper at that time?

A. I would not be able to say because I don't give attention enough to have it in my mind.

Q. Where do you buy your Ashton salt — New York?

A. Yes, sir.

Q. Of the importers?

A. Yes, sir.

Q. It is charged per sack $3.25; do you consider that the wholesale price of Ashton salt?

A. Is that the price of a bag?

Q. The sacks put up are always the same, they are either fifty-six pounds or 224 pounds; now are you willing to swear that $3.25 was the wholesale price of Ashton salt at the date of this bill?

A. I ain't posted enough to know.

Q. You have sworn that all those prices were wholesale?

A. I say we aim to give them to the Asylum on that basis; just as we would sell to a person to sell again.

Q. Would you swear that $2.75 would not be a good wholesale price for Ashton salt any time the last season?

A. I would not be able to because I am not familiar with the prices.

Q. I find here on your bill "a barrel of cut loaf sugar, $9.09 and seven-eighths;" why is that sold to the Asylum at a stated price, and the rest of the sugars at five per cent taken off?

A. Because the original understanding was for soft sugars, not hard sugars.

Q. Is the profit on cut sugar then, greater than the five per cent as on the other sugars?

A. I don't know that it would be, they are all sold very close.

Q. You have a number of bags of timothy seed charged in these bills $2.60 and $2.70 per bushel; do you consider that the wholesale price for timothy seed last April?

A. I presume that was if they bought it from us; we sell them wholesale.

By Mr. Goodwin:

Q, You have no objection to letting the committe see the original bills now in the possession of the Asylum authorities if they desire to examine then?

A. No sir, not at all.

By the Chairman:

Q. Do you believe that in the course of their dealings with you through these years, the Asylum authorities have bought to as good

advantage generally as if they had from time to time called for bids, or for competition on special lots from other dealers?

A. I do, most confidentily.

By Mr. GOODWIN:

Q. Why?

A. Because I have considered it to our interests to do so at all times, and buying goods in the way we do, we are able to do so; and they buy them better than they would to go to different people getting particular things; and they have found it so, because they have tried other people sometimes, and the result has been, I have been told, that the quality or price, did not suit, and they have continued with us; because there have been no efforts made that I know of, to continue it; I always looked upon it, so far as the heavy articles, main articles, were concerned, that it is very close; five per cent on the cost of the goods, and we pay the freight is very close; but it is in the way of our business, and I thought if we did not make any thing, it was a good business, and good pay, and a busines I liked to do.

By Mr. BROWN:

Q. Do you retail goods, as a rule in your establishment; have you a retail counter?

A. Yes, sir; we do now, we did not use to so much, but we now do more of it.

By the CHAIRMAN:

Q. Senator Campbell desires me to ask you whether it was also part of the understanding with the Asylum, that those goods should be furnished in such quantities as they desired, at those rates; that is, whether the Asylum could call for such quantities as they desired to use in the Asylum from time to time?

A. I don't know, we were probably aware of about the quantities they used of those things.

By Mr. CAMPBELL:

Q. The theory is this: of not having a large quantity on hand, whether it was not a special matter of economy not to keep too much of any article on hand; that is, you did not object whether the quantity called for was small or great?

A. Not at all.

Mr. CAMPBELL — The committee will remember the idea I had in my testimony, that it was a matter of economy and proper management to get their supplies in small quantities, as they desired to use them.

By Mr. Goodwin :

Q. What have you to say in regard to the management of the Asylum in the purchasing of these articles in smaller quantities than they would if they bought them in bulk ?

A. I have always thought that was a great advantage by buying what they wanted in this way to buy more at a time, as has been mentioned here, would not be very desirable to do any more than they wanted for a certain season.

Q. Why ?

A. Because they would be liable — they would be in the way and sometimes get abused and missing.

Q. How in reference to shrinkage or deterioration in quality ?

A. If there were any articles of that kind, it would be that ; I have always thought like this : Here, I can buy these goods when I buy for the store generally in the quantities that are consumed at very little expense ; for them or us to go and buy these quantities of supplies from the parties would be an expense that is not considered ; those expenses would be just the same if they bought larger quantities.

By Mr. Campbell :

Q. The question is a matter of economy in my mind ; you would not think it well to have a large bulk of goods on hand there where they would be liable to decay ?

A. At the Asylum ?

Q. Yes.

A. There are goods that would waste a little.

By Mr. Brown :

Q. What goods in your line would waste ?

A. By being on hand ?

Q. Yes.

A. Well, molasses will leak and sugar will dry away some.

Q. If kept in a proper place would it ?

A. Yes, sir.

JOSEPH R. SWAN,

Recalled.

By Mr. GOODWIN:

Q. Were you present at the meeting of the board of managers in April, 1883?

A. Yes, sir.

Q. What, if any thing, did Mr. Winston have to say in regard to the purchase of supplies?

A. I do not think he had any thing to say.

Q. He did not bring the matter of the purchase of supplies to the attention of the board?

A. No, sir.

Q. Were you at the annual meeting?

A. No, sir.

Q. Were you at any meeting in April?

A. In April I was at the quarterly meeting; the annual meeting in December I was not at.

Q. Were you at any meeting in April at which the question of supplies was discussed?

A. The only thing discussed there was this: Mr. Lowery had been put on to the auditing committee, and he suggested that Mr. Winston should be put on to that committee as being a man who would look into the supplies of the Asylum, and at his suggestion Mr. Winston was put in his place; that is, not at the annual meeting, but at a later meeting at which I was present; I at the same time urged that Mr. Lowery should remain on and leave me out, and he refused to do so.

Q. Have you read the testimony of Dwight D. Winston, as printed?

A. I have.

Q. Do you remember that portion of his testimony in which he refers to the purchase of supplies from the firm of Butler & Hamilton?

A. Yes, sir.

Q. Do you remember whether he at any time spoke to the board of managers about those bills?

A. I don't think he ever mentioned them.

Q. Has Mr. Winston ever spoken to you —

A. I mean previous to the testimony that he delivered before this committee; I am speaking of what took place before he testified before this committee.

Q. Yes; I am speaking about the time before he testified; I call your attention to page 261 of the testimony, where Mr. Winston testifies about the pay of attendants, he says: "I do not think it any too much, although I have expressed myself frequently in the

board that I thought, particularly in the women's department, that they were not paid high enough;" have you ever heard Mr. Winston express himself frequently in the board, that he thought particularly in the women's department that the attendants were not paid high enough?

A. The only action I remember when that subject was brought up was, that there was a petition sent down by the men attendants to the board of managers, asking for an increase of pay; that was in April, I think, and Mr. Lowery then said that he did not think the pay of the men attendants should be increased until the pay of the female attendants was increased, that it was more necessary to increase their pay — the women's — than the pay of the men attendants, and Mr. Winston may have possibly agreed; but that is about all that took place.

Q. I call your attention to page 264 of his evidence, please read what he says in reference to his knowledge of the articles there; commencing with the question in the middle of the page "Q. Do I understand you to say, etc., etc.;" read that question and answer; has Mr. Winston ever made such a statement to the board of managers while you have been present at any meeting?

A. He has never made that statement to the board of managers, that I know of, or to me, personally, before he gave his testimony.

Q. Now turn to page 264; I call your attention to this question; "Q. Have you suggested to the superintendent that such purchases should be made elsewhere?" Also his answer to that question. Has he ever so stated to your knowledge?

A. Never stated it to my knowledge previous to this testimony being given.

Q. I call your attention to pages 267 to 268. "Q. To whom did you speak about the matter, etc.?" And over on the next page. "Q. And did Dr. Gray say that it had been the custom from time immemorial? A. Yes, sir, etc." When the committee presented its report at the annual meeting did Mr. Winston inquire why it was they made a difference in sugars, etc.? A. I don't know what occurred at the annual meeting, I was not present; he says, "when we presented our report, etc., etc.;" in reference to those bills of Butler's & Hamilton's, they were before the auditing committee; we met at the treasurer's office, and Gen. McQuade, Mr. Winston and myself we went over the separate bills, examining each of them, and when we came to Butler & Hamilton's bill it was referred to Mr. Winston, and he was requested to examine it particularly; he looked it over carefully and handed it back, and he said it was a fair bill; that was the first bill that was presented; that it was a fair bill, some things in it might be a little high, but that taking it altogether it was a fair bill; we then came to several other bills that were criticised; and as I understand, were afterward brought before the board of managers; we then came to the second bill of Butler & Hamilton's, and that was also referred to him; he was requested to look over it, and he looked over that carefully, and he said that he

thought that bill was all right, but that there were some things in it that he thought were a little high; General McQuade, or he himself (Mr. Winston) suggested that he should take the bill and look it over carefully, at his leisure, and if there was any thing wrong in it to bring it before the board of managers; and on that suggestion Mr. Winston took that bill; General McQuade made a memorandum that the bill had been taken by Mr. Winston; then I suggested that if he was going to take the second bill he had better take the first and examine that also at his leisure, and if there was any thing wrong in it to bring it before the board of managers; from that time up to the time that he delivered himself before this committee, he never referred, directly or indirectly, in any way, shape or manner, to Butler & Hamilton's bill to me.

Q. Have you ever heard any manager of the Asylum suggest the passing by of any topic, or the investigation of any matter, on account of delicacy of feeling toward Dr. Gray?

A. Not at all; we have had differences with Dr. Gray — that is, I would not call them differences exactly, but he has had one idea on subjects, and we have had another.

Q. When there was a difference of opinion between the board and the superintendent, whose opinion prevailed?

A. The board's prevailed — that is, of course, on some occasions, on most occasions I can say, where a question has arisen, Dr. Gray has explained it to the board, and the board have acceded to his opinion; and there have been occasions where, on the other hand, the board have had their idea, and the doctor conceded them to be right, and the board have taken their own course.

By Mr. Haskell:

Q. Please specify an example or two?

A. Well, this has gone on so for a good many years, and I am not prepared to go back and recall all the instances or incidents that have happened in our board; when such a thing has taken place it goes out of one's mind; I can remember on one occasion; it was the year that I wrote the annual report for the board — a good many years ago — and I remember that Dr. Gray wanted something incorporated in that report; that the board declined to put into it, and if yon ask me what it was, I don't remember; I remember another occasion that he wanted an assistant steward, and the board declined to give it to him; I remember Mr. Campbell was quite strenuous, and expressed himself very strongly in that respect; I remember another instance, or another time; it was in reference to the management of the Journal of Insanity — the business management of it; Dr. Gray had one idea about it and the board had another; I can't think of any thing else now, on the spur of the moment, but I have no doubt there are a great many cases.

By Mr. GOODWIN (resuming):

Q. What do you regard as the law in relation to the auditing of the bills of that Asylum?

A. I have the law here, down stairs; I will go and get it.

Mr. GOODWIN — No, I will get it for you.

The CHAIRMAN — While Mr. Goodwin is getting the book, I will ask a few questions.

By the CHAIRMAN:

Q. Were you present at a recent meeting of the board within a fortnight or so?

A. Yes, sir.

Q. Was Mr. Winston present?

A. Yes, sir.

Q. Was there any thing said to him concerning his testimony before this committee?

A. Yes, sir; it was read to him.

Q. What was said to him concerning it?

A. I said substantially what I have said to this committee.

Q. What did Mr. Winston say?

A. He did not have very much to say when I stated to him that he had not referred to any item in Butler & Hamilton's bill before the auditing committee; my recollection is that in the first place he rather admitted it, and then he asserted he did what I call shilly-shallying about it; I did not think it was fair to Mr. Winston that we managers should give our testimony before this committee in reference to his testimony until he had fair notice of what we intended to say.

Q. Do I understand you to say that you gave him notice you would appear and rebut his testimony in this respect?

A. I do not think so; nothing was said about that, that we would appear and rebut, but we told him what we recollected about it.

Q. What if any thing was said by any other member of the board to Mr. Winston on that occasion?

A. I do not recollect what was said by others, but I think they generally said that Butler & Hamilton's bill had not been brought up before the board.

Q. Did they not criticise Mr. Winston for making his statement before the committee?

A. They simply stated facts.

Q. Did they not criticise him?

A. No, sir.

Q. Or find fault with him in any way for making the statement to the committee?

A. No, sir; they simply stated facts.

Q. Did Mr. Winston reiterate any statements made before the committee in his testimony?

A. Not one.

Q. Did he withdraw any such statements?

A. He did not admit or deny; he would assert, and then he would admit, that there was not any definite thing that he did say.

Mr. RICE — The witness had better state what was said, that characterize it.

The WITNESS — I do not recollect what was said.

Q. You had rather a warm meeting, hadn't you?

A. No, sir.

Q. Did nybody else speak to Mr. Winston concerning this matter except yourself?

A. R. Campbell did, and Dr. Gray did.

Q. What did Dr. Gray say to him?

A. Dr. Gray said that the only bills that were brought up before the December meeting were the bills of Reeder & Co., a shaving bill, and a question about a livery bill.

Q. What did Mr. Winston say in reply to the doctor?

A. I don't think he replied any thing.

Q. What did Senator Campbell say to Mr. Winston?

A. Senator Campbell said he did not think it was very respectful to the board of managers to speak of their being "in a groove."

Q. Did he say any thing else?

Q. Yes, sir; there were a good many things said there, I cannot recollect the conversation.

Q. A good many things said in criticism of Mr. Winston's course?

A. Not many.

Q. There were some?

A. Yes, sir.

Q. What did Mr. Winston say in reply to Senator Campbell?

A. I don't recollect that he said any thing; he may have said that he did not intend to be disrespectful, or any thing of the kind.

Mr. GOODWIN — Now, Mr. Swand, in reference to this law, you can state from the laws of 1874 —

Mr. RICE — Before you leave this subject, Mr. Chairman, I want to ask him a few questions.

By Mr. RICE:

Q. Was this recent meeting a regular meeting?

A. No, sir; it was a special meeting.

Q. Who called the meeting?

A. It was called at the suggestion of our counsel Mr. Goodwin, by Mr. Rogers and myself, there was not any written call.

Q. For what purpose was it called?

A. The purpose of the meeting was to give instructions to the counsel for the Asylum; it was not stated in the call, but that was stated after we got there, that that was the object of the meeting.

Q. Had the object of reading over Mr. Winston's testimony, that he had given, any thing to do with the calling of the meeting?

A. Yes, sir; I think it had.

Q. Was it the idea, to a certain extent to "discipline" the gentleman to a certain extent for what he had testified to?

A. No, sir; not at all; the idea was to give — I suggested to Mr. Winston there that we thought he had made a mistake in his testimony and that he ought to correct it.

Q. And that was one of the purposes of calling together a meeting of the managers?

A. That may have been; that was in my mind, certainly.

Q. That was one of the objects in getting together?

A. It was one of the objects in my mind, but with no idea of disciplining Mr. Winston.

Mr. Goodwin — I should like to make the statement that when I read the testimony of Mr. Winston, I thought it proper that the board should have a meeting about the matter.

By the Chairman:

Q. As a result of that meeting did Mr. Winston offer to make any correction of his testimony?

A. He took a copy of the testimony away with him, and as I understood, I cannot swear what was said, but as I understood, it was with the idea of making an examination, and if he saw fit to correct it.

Q. Have you heard from him since, whether he expects to appear and make any explanation of his testimony?

A. I don't think I have spoken to him since.

Q. Have you met him since?

A. No, sir.

Q. Do you know whether he expects to appear here?

A. I saw him on the street yesterday without speaking to him; it was at a distance.

Q. Do you know whether he wishes to appear and make any explanation?

A. No, sir; I do not know.

By Mr. Rice:

Q. Was there any excited language at this meeting?

A. No, sir.

Q. Was there any excitement prevailing there?

A. No, sir.

Q. Every thing was orderly and peaceful?

A. Yes, sir; we behaved like gentlemen; I don't think there was an ungentlemanly word said to Mr. Winston, or by him to any one else.

By Mr. Goodwin:

Q. Now, Mr. Swan, you were about to give the duties of the auditing committee under the law?

A. Yes; (referring to a book) I refer to the laws of 1874, re-enacting the law with reference to the State Lunatic Asylum, and there have been no amendments of it since, I think; on pages 575-6, section 2, provides:

§ 2. Said board shall have the general direction and control of all the property and concerns of the institution, not otherwise provided for by law, and shall take charge of its general interests, and see that its great design be carried into effect, and everything done faithfully according to the requirements of the Legislature, and the by-laws, rules and regulations of the Asylum.

§ 18. The steward, under the direction of the superintendent, shall make all purchases for the Asylum, and preserve the original bills and receipts thereof, and keep full and accurate accounts of the same, and copies of all orders drawn by himself upon the treasurer; he shall also, under like direction, make contracts in the superintendent's name with the attendants and assistants, and keep and settle their accounts; he shall also keep the accounts for the support of patients and expenses incurred in their behalf, and furnish the treasurer every month with copies of such as fall due; he shall make quarterly abstract of all accounts to the last day of every February, May, August and November, for the treasurer and managers; he shall also be accountable for the careful keeping and economical use of all furniture, stores and other articles provided for the Asylum.

Now in my view of the duty of the managers in reference to auditing the bills — it is this: we have no power under the act to audit bills, in the ordinary acceptation of the term "auditing;" that is, the board of managers has no power to say whether a bill shall be paid or shall not be paid; they have the power, as I understand it after examining the statute very thoroughly, they have the power simply of appointing the steward, and the steward, by the act, is given the power of purchasing, and if he makes a contract, the Asylum is bound to pay that bill; and even if the bill is extravagant we have no power to prevent its being paid; we have the power, however, if we discover that the steward is making extravagant purchases, or is dishonest in any respect, we have the power of discharging him, and can discharge him at any time; and it is for that reason, I think, that originally the custom was adopted in this institution of auditing the bills, or examining them after the bills were paid, simply because the board of managers could not stop the payment of the bills; therefore the object of this examination of the bills by the board of managers is for the purpose of ascertaining whether the steward has been extravagant, or dishonest, or whether the treasurer has been dishonest in the performance of their duties; and if the board of managers discover that either the steward, or the treasurer is dishonest, then they have the power of discharging them immediately and putting some one else in their place.

By Mr. RICE:

Q. What do you say as to the wisdom of such a law as that?

A. As far as the wisdom of it is concerned, Mr. Rice, I do not think it makes any difference; I do not see what good could be obtained by examining the bills before they were paid.

Q. You would be able then to discover dishonesty, if any existed, prior to paying out the money, would you not?

A. If we did, then we should look to the steward, who gives a bond, and to the treasurer, who also gives a bond; should have recourse to the bond.

Q. Do you think that is a proper way to get along with it — rather than to make a correction in the bills themselves — would it not be better in your opinion to remedy the matter in that way, than to have recourse by an action at law against the steward?

A. As to the propriety of it, you mean?

Q. I am asking you what you think of the wisdom of such a law, and if you think a revision of the law is desirable so that these bills may be examined and audited before their payment?

A. I do not think it would make any difference.

By the CHAIRMAN:

Q. I call your attention to section 9 of the act of 1874; section 9 of chapter 446 of title third, page 576 — "The managers are hereby directed"—

§ 9. The managers are hereby directed and empowered to establish such by-laws as they may deem necessary and expedient for regulating the appointment and duties of officers, attendants and assistants, for fixing the condition of admission, support and discharge of patients, and for conducting in a proper manner the business of the institution; also to ordain and enforce a suitable system of rules and regulations for the internal government, discipline and management of the asylum.

Do you not consider that that section gives full power to the board for supervising all business matters relating to the institution?

A. No, sir; not with that other section giving power to the steward to purchase and make contracts.

Q. Do you not consider that under this section the board has the power to make a by-law whereby they could require their auditing committee to examine these bills before payment?

A. Certainly they could, there is no doubt about that.

Q. Then does not the power exist to examine and audit before payment?

A. Yes, but not to prevent their payment; they have not the power, as I understand it, to audit a bill in the ordinary acceptation of the term "audit."

Q. Please define your understanding of the ordinary acceptation of the term "audit"?

A. As I understand it, it is to hear and decide whether a bill shall be paid or not.

Q. Could not the board make a by-law under section nine of that law, requiring the steward to make only provisional contracts for purchasing subject to the approval of the board?

A. The contracting power is in the steward and it may be a question of law that I have not thought about; it might be that the board of managers could make such a rule.

Q. So as to limit the steward's contracting power?

A. It might be; I would not like to decide that question; it might be a very nice legal question whether they could or not.

Q. Do you consider, as it stands, without such a by-law that the steward is authorized to make unlimited contracts to bind the institution under this law?

A. I think he has the power to make contracts which are not in themselves fraudulent.

Q. But as to amount and character, if honestly made, he is unlimited?

A. It looks to me as if he was.

By Mr. MORGAN:

Q. You said you would resort to the bond of the steward — have you ever resorted to it?

A. We never have had occasion to.

Q. Have you ever resorted to the bond; you said that instead of rejecting the contract or refusing to pay the bills the board of managers would resort to the bond of the steward?

A. In case he was dishonest, yes.

Q. My question is now one that you can answer yes or no; have you ever resorted to the bond of the steward?

A. Never had occasion to.

Q. Have you ever resorted to the bond of the steward?

A. We have never had occasion to.

Q. Have you ever resorted to the bond of the steward; that is a fair question; you will please answer it yes or not?

A. I said we had never had occasion to; that is an answer, and I appeal to the Chairman if it is not.

The CHAIRMAN — You can say whether you have ever done that or not.

The WITNESS — I don't understand what he means.

Q. You said you would resort to the bond?

A. I said in case of dishonesty we had our remedy by resorting to the bond of the steward.

Q. Now I ask you if you have ever resorted to it?

A. I say we have never had occasion to.

Mr. MORGAN — Mr. Chairman, I insist that is a proper and a civil question, and I submit he should answer it.

The CHAIRMAN — I think your answer is not strictly responsive;

you can say yes or no; whether you have ever resorted to the bond or not?

A. Not to my knowledge.

By Mr. Rice:

Q. You said in answer to the last question I asked you that it would make no difference if the board had the power to audit before payment of these bills; I ask you why you think it would make no difference?

A. I think the result would be the same; the object of auditing, as I understand it, is the first place to discover dishonesty, and in the next place —

Q. And to discover imprudent bargains to?

A. Yes, sir; I was going to say, in the second place, to discover extravagance or improvident bargains; and they can be discovered just as well after as before, and the only object would be, in case there was no remedy, then it would be better to audit before; but we have that remedy.

Q. Do you think if you discovered a bargain that had been made by collusion and fraud between the seller and the steward, that it could be enforced at law?

A. No, sir.

Q. Then do you think such things as that might be prevented by the board of audit having power to examine these bills before payment?

A. You see, these bills are audited —

Q. I am trying to get at this — whether or not, in your judgment, a change of law would not be proper, providing for auditing bills before their payment?

A. I do not think so; I am speaking, you know, practically; theoretically, it might be better; but when you think of it — in the first place, these bills are sworn to by the seller; in the next place, they are audited by the steward, they are audited by the superintendent, and then comes in another auditing by the committee of the board of managers — so that your suggestion, as it seems to me, is utterly unnecessary, as I may suggest further, when these bills are audited by the board of managers they might go to any official, like the Comptroller, and he might audit; that might be well; then the might be further audited by the State Board of Charities, and then they might be audited by the State Commissioner in Lunacy; theoretically, it would be well, but practically there is no necessity of it; the Comptroller already has a copy of each bill.

Q. When does he get it?

A. Quarterly.

Q. Before or after payment?

A. After payment.

Q. Suppose of a case of collusion between a person who sells to the Asylum and a steward, an attempted fraud upon the Asylum or

upon the State, what power is there now to prevent payment of such bills, suppose it should be actually discovered before the payment of such bills, what power is there to prevent it?

A. Before payment?

Q. Yes.

A. The treasurer could refuse to pay.

Q. What examination does the treasurer make of these bills; what are the chances that he would discover any such thing?

A. I do not think he could discover any such thing.

Q. Then there is no check whatever to the payment of a fraudulent collusive bill, is there?

A. Yes, sir.

Q. What is it?

A. The superintendent audits the bill; in order to perpetrate a fraud there would have to be collusion between the vendor, the steward, the superintendent and the employees of the Asylum.

Q. Do you think it is proper to intrust this whole matter to the superintendent entirely, rather than to the board of management — the examination and auditing of these bills?

A. I think, as I have before stated, that it is well to put as many guards as possible around, theoretically; practically, I think, there are sufficient guards as it is now.

Q. Don't you think there is too much power concentrated in the superintendent?

A. No, sir.

By the CHAIRMAN:

Q. Has there been any inquiry by the board of managers recently to determine whether the finances of the institution are in a sound condition or not?

A. Why, we examine the treasurer's reports quarterly.

Q. When was the last examination made?

A. In last December.

Q. What was the result of that examination?

A. I think it was about $10,000 in the bank; it may have been more; I know I asked him what his average balances were, and it amounted to about $10,000.

Q. And his accounts were found entirely correct?

A. Yes, sir.

Q. And so far as you know they are entirely correct now?

A. Yes.

Q. And there is no question whatever about the correctness of the accounts of the Asylum at the present time?

A. I have not any doubt about it; I do not mean to swear to the whole account of the Asylum, but so far as I know there is no question among the managers of the accounts being in perfectly correct condition, and I wish you gentlemen would examine the accounts, look at the books and see how the thing is done.

By Mr. MORGAN:

Q. Does the Asylum get any credit from the bank for interest on balances?

A. No, sir.

By the CHAIRMAN:

Q. Do they keep an account in more than one bank?

A. No, sir.

Q. Which bank is that?

A. The Oneida National Bank.

By Mr. RICE:

Q. Do you know of any abuses, irregularities or errors in the manner and method of conducting business at this Asylum at present?

A. I do not know of any unless you refer to something specifically?

Q. Are you able now to make any suggestion or recommendation as to the method of conducting business at this Asylum, any change?

A. I think the business, as far as I can ascertain, is well conducted and economically conducted; this concern is like a very large family that there can be improvements made in, I have no doubt.

Q. I ask you what improvements you refer to?

A. I don't know of any improvements that I can suggest now in the business management.

Q. I desire to find out whether or not you make any criticism on the method of conducting the business or the affairs generally of the Asylum?

A. There are some things that I could suggest about the internal management of the Asylum that I have already suggested.

Q. Nothing more than you have spoken about?

A. No, sir; I do not think of any thing.

Q. Do you think the attendants are worked too many hours in the twenty-four?

A. I think the matter of attendants is a matter of demand and supply, if they can get attendants to work that number of hours for the pay, it is proper they should do it.

Q. Do you think any man or woman can render efficient service from day to day, working from fourteen to sixteen hours?

A. If they were at hard labor, either mental or physical, I do not think it could be done, but if you will observe the attendants up there, for at least eight hours out of these fourteen or sixteen, for at least eight they have nothing special to do.

Q. Their attention is all the time on these crazy people, is it not?

A. Yes, sir; but that is not labor.

Q. I ask you the question, do you believe that a man or a women

can render faithful services as attendants from the hour of five in the morning until eight or nine in the evening?

A. It depends upon the character of the service and the circumstances.

Q. Do you think that under any circumstance they can do it?

A. It depends upon the nature of their service, I say.

Q. Do you think they could perform that service faithfully and efficiently?

A. I think they can if — that is — if out of the fourteen hours, or sixteen hours they are at leisure eight.

Q. What do you mean by "leisure?"

A. Sitting down and doing nothing.

Q. Do you call it "leisure" when the attention of a man or woman is all the time directed to the actions of a number of crazy people — can you conceive any possible leisure in that?

A. It depends upon the people.

Q. What people?

A. The crazy people.

Q. Take the fourth ward for example — do you think there is any such thing as leisure to a person in charge as an attendant upon that ward?

A. Yes, sir, I do; I was in there the other day and the attendants were sitting round doing nothing, except one man in the dining-room.

Q. Performing no physical labor, you mean?

A. No, sir; doing nothing.

Q. But their attention was directed all the time to the conduct of these insane people?

A. It was not necessary; the insane people were all quiet.

Q. That is enough on that subject; I will not pursue that any further; do you think the attendants are sufficiently well paid?

A. It is a question of demand and supply; if they can get the proper kind of attendants for the pay, they ought to get them.

Q. Do you think they do get the proper kind, and as good as they could if they made the pay greater?

A. That I could not say.

Q. Do you believe these attendants should be required to sleep on to the wards with these insane people?

A. Yes, sir; I do.

Q. In addition to their fourteen hours or sixteen hours of daily labor or daily attendance?

A. Yes, sir, I do; I think they ought to be right there with the patients.

Q. Do yon approve of the recent purchase by this Asylum of some blooded stock, a bull and two cows at an expense of $1,300; as one of the managers of this institution, do you agree with that purchase?

A. Well, I am not — I am not capable of judging.

Q. You decline to answer on account of your inability to judge?

A. I am unable to decide whether it is better to have that stock or not; I don't know.

By Mr. BROWN:

Q. What personal attention did you ever give to the manner of buying supplies, so that you could inform yourself whether they were properly bought or not?

A. I never saw an article bought for the Asylum in my life.

Q. How long have you been one of the managers?

A. Since 1878.

Q. Has there been any change in the manner of buying supplies since you have been there?

A. I don't know of any.

Q. Then, as one of the managers, how can you censure Mr. Winston for saying that in regard to purchasing they are "in a groove" when there has been no change made since you have been a manager?

A. I have not censured him for saying we were in a groove.

Q. He was censured, was he not?

A. Not that I know of.

Q. I thought Senator Campbell said something to him?

A. Oh, I thought you meant at this examination; Mr. Campbell said he did not think it was very respectful, or something of that kind.

Q. When it is proven here by the managers that no change has been made in twelve years, wherein does Mr. Winston do wrong by saying you were in a groove, in that matter?

A. I have not said he was wrong.

By the CHAIRMAN:

Q. I call your attention to the testimony of George W. Jones at page 714; Mr. Jones testified that he was trustee of the Willard Asylum, and described their system of making purchases, that they send for samples, etc.; (handing the printed record to the witness) you can read what he says there — * * * having read that, what do you say about that plan; do you consider that a more likely method of securing the best goods at the best prices for the institution, than the course now pursued by the institution?

A. Than the one of paying five per cent, you mean.

Q. Than the general system now pursued by the Asylum?

A. Well, that is a matter of practical experiment; I don't know.

Q. What is your opinion about that system of purchasing?

A. I should think it was a good way.

Q. It involves more personal attention on the part of some of the board, does it not?

A. To steep tea, etc., and taste it, yes, sir.

Q. Don't you think it would be well for the board once in a

while to call for quotations and compare them with the prices you are paying other people?

A. I think it would be well, yes, sir, I should see no objection to it.

Q. But your board has never done that, I understand?

A. We have ascertained how much we are paying, and examined the prices; this exhibit that Mr. Dryer referred to last night would give you gentlemen more information as to the cost of supplies in this Asylum in ten minutes, than an examination of me and all the board of managers in a week would.

Q. Do you consider that frequent competitive quotations from dealers with whom you might deal would be better than the uniform purchase from any house with competition?

A. I understand it that it is done with us to a certain extent.

Q. Please state to how great an extent?

A. Dr. Dryer explained it to you last night, that is as far as I know; I can only refer to that examination, that is about all I know about it.

Q. All you know about any competition is what you have heard from Mr. Dryer in his testimony before this committee?

A. Well, I have heard the same thing before.

Q. Did you hear it from him?

A. Yes, from him and Dr. Gray.

Q. But to your own knowledge, no such competition has been had before the board?

A. Not that I remember of.

SAMUEL CAMPBELL.

Recalled:

Mr. GOODWIN — I ask that Mr. Swan may examine Mr. Campbell.

The CHAIRMAN — Yes, certainly.

By Mr. SWAN:

Q. Mr. Campbell, you are president of the board?

A. Yes, sir.

Q. And were present at the last annual meeting?

A. Yes, sir.

Q. What if any thing was said at the last annual meeting or any meeting at which you have been present, by Mr. Winston in reference to the bills of Butler and Hamilton?

A. I don't remember any thing being said at the annual meeting or any meeting before he gave his testimony; at the recent meeting something was said.

Q. And before that?

A. Not any thing that I remember of.

Q. Has he ever in any way called your attention to the mode of conducting business by the New York State Lunatic Asylum?

A. No, sir.

Q. At that annual meeting did we refer to any prices in Butler and Hamilton's bills?

A. No, sir.

Q. Or to any of the items in any of their bills?

A. Not that I know of.

Q. Have you heard Mr. Winston express himself frequently in the board of management that he thought particularly in the women's department that the attendants were not paid high enough?

A. I have not.

Q. Has Mr. Winston said at any time either at meeting of the board or to you personally, that the articles, sugar, tea, coffee, molasses, and goods in the grocery line, should be sold to the Asylum to better advantage than they were getting them?

A. He has not said so to me.

Q. Has he stated to you, or to the board, or to the superintendent to your knowledge that the Asylum could buy to better advantage, these same articles at wholesale?

A. He has not to me or in my presence.

Q. Or to your knowledge at all?

A. No, sir.

Q. Do you remember at the December meeting when the auditing committee presented their report, did Mr. Winston inquire why it was they made a difference in sugars, why one was charged a certain percentage, and another was not, and did Dr. Gray say that the reason has been the custom from time immemorial and had been so when he came into the establishment?

A. No, sir; not to my recollection, I do not remember any such remark.

Q. No conversation of that character took place did there?

A. Not that I remember of

Q. Has Mr. Winston remonstrated with you or the board, in reference to the purchasing of things, and has there never been any change notwithstanding his remonstrance?

A. He has not.

Q. He has never remonstrated with you?

A. No, sir, not with me.

Q. And has never referred to the subject, has he?

A. No, sir; that is, not specially, to me individually.

Q. Has he to your knowledge?

A. I would not wish to say that there has been nothing said to me at all; I am answering your questions directly.

Q. Has there ever been any diffidence on your part, or to your knowledge, on the part of different members of the board, about bringing up business questions and matters before the board in the presence of Dr. Gray?

A. No, sir, none whatever.

Q. And have the board acted, as far as that is concerned, in an independent way?

A. Yes, sir, independently.

Q. Has Mr. Winston ever expressed himself to you or to the board that the business and medical management should be separated?

A. He has not; now allow me to give Mr. Winston his entire due; there was at a recent meeting comparatively this thing; I think I was the one that appointed him (because of his ability in that department to know) on the auditing committee; at a recent meeting, with some embarrassment, he tried to signify something to us that I could not comprehend what he was driving at; it was in relation to these supplies; the amount of it was entirely insignificant, but it produced this result; he having some knowledge of this business, he was requested, by a resolution, to look into this matter, and report and see whether he could do any better or not.

Q. Have you ever heard from him since?

A. No, sir.

By the CHAIRMAN:

Q. How long ago was that meeting?

A. Our last regular meeting, I think it was in April.

By Mr. SWAN:

Q. December?

A. Well, I won't be certain it was one of our regular meetings; I think he is in some embarrassment in the matter, because he deals in the business, and it would be a little difficult for him to express himself in a manner, but when he was requested to do so, in the interest of the institution, I think it is his duty to do it; he has a right to have an opportunity of saying any thing or doing any thing in that line he thinks proper, and will be listened to with respect; I thought he had assumed to say and understand a good deal, that we were running in the old ruts, which was a very injudicious remark, and to say the least, is not a respectful one.

By Mr. GOODWIN:

Q. You have heard the testimony of Mr. Swan in reference to Mr. Winston at the meeting?

A. Yes, sir.

Q. Is that substantially as you recollect it?

A. Yes, sir.

Q. I call your attention to the annual report of the Willard Asylum, for the year 1883; in reference to the method of the treasurer's report, will you be kind enough to read as to the receipts of the institution?

A. I have not examined this on purpose; my purpose was to help Mr. Swan, as to the results of other institutions; that is why I handed him these reports.

Q. What does appear from the treasurer's report as to amount

of cash received from treasurers of counties and cities for current expenses in the Willard report?

A. "Cash received from treasurers of counties and cities for current expenses, $268,643.38."

Q. Now, in reference to the payment of bills paid — payments?

A. "By bills paid from county account as audited by auditing committee for current expenses, $260,166.94;" last year, I will say, we came out $10,000 below.

Q. Why are you $10,000 below this year?

A. It is by extra expenses, undoubtedly.

Q. In this treasurer's report of Willard —

A. I have no knowledge of that; they are itemized.

Q. How is it in regard to the report of the treasurer of the State Lunatic Asylum at Utica?

A. It is itemized and extended; Willard is in gross.

Q. Now I ask you in regard to your opinion of the dual management — whether in your judgment the business department should be separated from the medical department?

A. It should not.

Q. Why?

A. Because it would make disturbance at once; you cannot make two heads go together and work satisfactorily; it would be against the interests of the Asylum, in my judgment.

Q. Is there any thing else you desire to say?

A. I do not know; speaking of this auditing of accounts, speaking of it the other day when I was on the stand before, I would speak of the difficulty (if you have no objection to my doing it) of doing it in the way you suggested it could be done; if we were purchasing by the month in a city, where we could get them all, then it might be accomplished by monthly payments; but this cannot be done in many places, and it cannot be done here; there is a large number of payments; we buy the beef for instance of farmers; our butter and eggs from farmers; they come in and it is cash always; they do not want to stand over thirty days, and then come and have their accounts audited; and we cannot be on hand to audit accounts every day, as an every day business, it would be impossible; how to better the thing in our locality, I cannot see; if it was joining a large city, we could buy our beef from a dealer, and our butter, etc., from the same dealer, fish, eggs and butter; get them at first hand of a dealer.

By the CHAIRMAN:

Q. Does it not apply to such goods as grocery bills?

A. No, sir; I should say not, because they could be easier got at; but these cash payments are necessary for the things I mentioned.

Q. Do you not think that in regard to all cash purchases, and as to persons with whom you have a running account, that it would be better to have the bills examined by an auditing committee of the board before payment?

A. Well, if I had any suspicion of dishonesty it would be.

Q. Do you think it would tend to greater exactness and accuracy in preparing and sending in those bills?

A. I think not; judging from the men I know that are engaged in it.

Q. Suppose that in course of time the men that you know and to whom you refer are taken away, or leave, or resign, and others come in whom you don't know, would you still think that the bills should be paid before auditing?

A. I should think very differently, for I should not then know them.

Q. Then your judgment as to the present practice, is based substantially on your knowledge of the individuals with whom you are dealing?

A. Yes, sir; to a great extent it is.

Q. But this is a State institution, is it not?

A. Yes, sir.

Q. Having a continuous existence?

A. Yes, sir.

Q. Should not rules then be framed for the continuous regulation of the institution with reference to the presence of different individuals from time to time?

A. Well, there is existing rules.

Q. I ask you now, would it be wise to revise the rules in that respect for the general government of the institution?

A. It is under general law from the beginning and we have rules that cover pretty much all the Asylum; our Asylum has been the parent institution and from which has been copied the by-laws.

Q. I speak of the revision of the rule concerning the auditing of bills, and ask you would it not be wise, for the general future management of the institution, without reference to the individuals now engaged there to revise that rule as to auditing of bills so as to require an examination of all bills of houses with whom you have a current account by some members of the board before payment?

A. I think it would be, sir; I agree to that, wherein it is practicable, and it might be practicable in a good many cases; this matter is one of the difficulties we have, growing out of the nature of our location; there would have to be some method by which two or more should see to it, because you would not expect us to bring the whole board together for that.

The CHAIRMAN — Oh, no, not at all.

A. Then some provision of that kind might be made, and I can see where it might be done without any great deal of trouble, by having a similar committee to what we have, and make it really an auditing; now it is more a committee on accounts; I have no doubt that we are not deceived in any thing; I have no doubt that these gentlemen are perfectly honest, strictly honest, here is a man who has furnished more material.

Q. Do you think it would really take more time for members of the board to audit such bills before payment then have the vouchers, the checks, such bills briefly audited altogether after payment, than it would to have a separate audit of each voucher after payment from month to month?

A. I think it should be oftener than that, if it is done at all, I think it is practicable to do it to a considerable extent and more frequently than it is.

Q. Do you think it would take very much more time for members of the board to audit bills before payment?

A. Yes, sir, I think so; in the first place they are audited, in a certain sense, before they receive them and it would be duplicating; when they see the accounts that have really been audited, they have confidence in their character.

Q. And if the bills were audited by the committee before payment, would it be necessary to spend as much time in auditing the bills and vouchers afterward by the same committee?

A. No, sir; I should not think it would be necessary to do it a second time.

Q. Then a comparison of the checks for money paid, with the vouchers for which it is paid, might perhaps be done only annually after the bills had previously been audited at the time of payment?

A. I think that wonld be a pretty long time.

Q. You said there should not be such frequent auditing if they were already audited once.

A. More frequently than annually, I meant to convey.

Q. But not so frequently as monthly, perhaps?

A. Well, monthly or quarterly; it is easier done then; I do my business monthly.

EMMA BARKER,

Recalled.

By Mr. GOODWIN:

Q. Have you ever heard any thing about medicines being given to patients as a punishment?

A. No, sir.

Q. Have you ever heard a patient say any thing about that?

A. I recollect Miss Lathrop's case; she thought she had a dose given to her for punishment; I do not recollect any others.

Q. Have you ever heard of patients being changed from one ward to another as a matter of punishment?

A. No, sir.

Q. Is there any thing of that kind to your knowledge in the Asylum?

A. No, sir.

Q. Why are patients changed, far as your information goes?

A. Sometimes for their own good, sometimes for the good of other patients.

Q. What do you mean by the good of other patients?

A. Sometimes the patient that is removed annoys the other patients by talking to them; telling them unpleasant stories.

Q. And what effect does that have on the patients?

A. Makes them nervous and wakeful.

Q. In that case, the patient who commits the annoyance is removed for the benefit of the others?

A. Yes, sir.

Q. But not in any sense as a punishment to her for her conduct?

A. No, sir.

Q. Do you remember of any case of a lawyer's wife who was obliged to go to the ironing-room against her will to work?

A. No, sir.

Q. Would you be likely to hear of it?

A. I should think so.

Q. Why?

A. Because such cases are generally reported to me by the patient, in grievances of that kind.

Q. Are there any patients on the female side of the house compelled to work?

A. No, sir.

Q. Is it a voluntary matter with them?

A. Yes, sir; they are sometimes advised to work for their own good, but are not compelled to.

Q. And if a person under advice to work should refuse, what would be the consequence, if any thing?

A. I do not know that any thing would.

Q. Nothing would be none?

A. No, sir; and never has been.

Q. Would she be compelled to work if she refused?

A. No, sir.

Q. Now I ask you if there are any particular number of articles specified to be done by each patient in the ironing-room?

A. No, sir.

Q. No task allotted?

A. No, sir; no task allotted.

Q. What they do is entirely voluntary?

A. Yes, sir.

Q. Did you ever hear Dr. Blumer at any time threaten to send a patient off a ward who did not perform the work?

A. I never did.

Q. Did you ever hear any physician?

A. No, sir.

Q. Did you ever hear any supervisor?

A. No, sir.

Q. Or any attendant?

A. No, sir.

Q. Has such a thing ever come to your knowledge?

A. No, sir.

Q. Miss Lathrop says in her testimony that she saw the matron two or three times, etc., and that she only had three conversations with her (page 531 of the testimony); it that true or not?

A. That is not true.

Q. Did you see Miss Lathrop often?

A. Yes, sir.

Q. Did you converse with her often?

A. Yes, sir; very frequently.

Q. Did you know Mrs. Talford?

A. Yes, sir.

Q. Did you see her frequently?

A. Yes, sir.

Q. She states she was kept on a ward a number of weeks without being allowed to go out; do you know any thing about that circumstance?

A. Yes, sir.

Q. State to the committee what it was?

A. She was kept on the ward for a time on account of reporting to convalescent patients very unplesant circumstances that annoyed them very much, and it was thought best to keep her in for a time on that account, and she did not feel willing to go out in the back yard, she could have gone into that yard if she had chosen.

Q. She was repeating stories to patients which excited them and annoyed them?

A. Yes, sir.

Q. And for that reason was not allowed to go out into the yard?

A. Yes, sir; into the front yard with the convalescent patients.

Q. Was she prohibited from going out into the back yard?

A. No, sir.

Q. Have you ever heard any thing about twisting of wrists by attendants on patients, and what can you tell the committee about that?

A. I have seen attendants take hold of patient's wrists but should judge the patients twisted their own wrists instead of the attendant, it is an easy matter to do if you take a persons wrist, it is easy to do it in trying to get away; I never saw an attendant twist a patient's wrist.

Q. Won't you please show us how it is done?

[Illustrated by Miss Stirling taking the witnesses wrist and witness trying to get away, and twisting her own arm.]

Q. And this twisting is by the attempt of the patient to get away?

A. Yes, sir.

Q. Have you ever heard or known of any attendant in your asylum deliberately twist the wrists of any patient?

A. No, sir.

Q. Has that complaint ever been made to you?

A. Only in a general way.

Q. By patients?

A. Yes, sir.

Q. Have you investigated such cases when brought to your knowledge?

A. I have several times spoken to attendants about it.

Q. And what has been the result of your investigations in that regard?

A. They have always told me just as I have stated to you that they never twisted their wrists, but sometimes patients in trying to get away would twist their own wrists.

Q. Now right there, a patient complains to you in reference to ill-treatment by an attendent, what do you do in reference to it as matron of that institution?

A. I go to the attendant; I think I should first go to the attendant of whom she complains.

Q. What would you do?

A. I go to the attendant of whom she complains and ask her the circumstances, then I go to other attendants, there are always two or three others on the ward, and ask them if they know any thing about it, and hear their story and hear the patient's story, and decide the matter as best I can from what I learn.

Q. Do you place any more confidence in statements of attendants than you do in those of the patients?

A. It depends somewhat upon the condition of the patient.

Q. That is her mental condition?

A. Yes, sir.

Q. Now I ask you are attendants ever permitted to feed patients by the stomach tube?

A. No, sir.

Q. Did you ever see it done?

A. No, sir, not by attendants.

Q. I call your attention to page 723 of the testimony, about crib beds, the question asked by the committee of Mary A. Pelton: "What do you know, if any thing, in reference to a change in the bed when it came night; in the crib beds? A. In the day-time there would be mattresses in the crib for the inspection of visitors; when it came night there would be a lot of straw tick put in its place, the mattresses would be carried out into a kind of closet; it would look very nice in the day-time." State what the rule and regulation and custom is in reference to mattresses on crib beds?

A. They are always left on the beds if the patient is in a condition to sleep on them, if the patient is uncleanly in her habits they are sometimes removed.

Q. Is it not a regulation or custom in the Asylum to remove the mattress from the crib bed at nights?

A. No, sir.

Q. And when it is done it is account of filthy patients?

A. Yes. sir.

Q. And then the mattress is removed?

A. It is.

Q. Is there an attendant in the house at present named Lucy Morris?

A. No, sir.

Q. Do you know where she is?

A. No, sir.

Q. Is Miss Roberts at the house?

A. No, sir.

Q. Is Mabel Allen?

A. No, sir.

Q. Miss Pelton says at page 722: "Did any thing occur on eighth ward while you were there? Yes, sir; Miss Morris after I would go from the dining-room to the ward she would stand at the door and take the keys and punch me in the back with them, she punched me three or four times, but the last time and the third time I said if she dared to do it again I would report it to Dr. Curtis, and she said he would think it was a delusion, but I did not think delusions were so striking as that." Did you ever hear of Miss Morris whils't an attendant upon the eighth ward, striking patients with keys?

A. No, sir.

Q. Have you ever heard it of any attendant, and if so, when?

A. I think I have heard it in relation to Mrs. Tulford's testimony.

Q. I mean outside of that?

A. No, sir; I have not.

Q. Have you ever heard any complaint made by a patient that an attendant had struck her any where about the body either by a blow, or a punch with a bunch of keys?

A. No, sir; I don't recollect any.

Q. You do not recollect any complaint having been made to you in reference to that?

A. No, sir; I do not.

Q. What, if any, interest does the superintendent of the Asylum take in the attendants?

A. I think he takes a great deal of interest in them.

Q. In what way?

A. In the care of them; he has an interest and care for their health and special qualifications, I think, in the various duties.

Q. I call your attention to page 413 of the testimony of Miss Lucy Peck, in which she says: "What were the results? A. In one case I saw a patient terribly bruised so that she did not look like a human being on one side of her face; her name was W. K.; it was in this way; she did not want to go out in the back yard; they said that she must; so she saw the doctor and got his permission

to stay; Dr. Kempster told her that; but we had another doctor there and he made a change in the orders; so the attendants said she must go out, but she relied on the promise of the other doctor and thought she was doing right in refusing to go out into the barn yard; she was willing to obey orders, but thought she had permission to stay in; but when she refused to go they disciplined her." Did you ever hear of a patient by name of W. K., whether it was Lasker, or Kelly, or Parker, or any thing of that kind?

A. I do not recollect any such instance.

Q. Would such an occurrence be reported to you?

A. I think so.

Q. Do you know who W. K. is, or do you know Miss L.?

A. No, sir.

Q. Was there a patient named Miss L.?

A. I don't recollect any.

Q. Have you looked to see?

A. Yes, sir; and I find no such person.

Q. At the time Miss Peck speaks of did the patients go into the back yard?

A. I think not; my impression is that the back yard was at that that time very small and only intended for one ward, the ward opening into the yard; the patients from seven into nine never went there.

Q. On page 419. Miss Peck speaks of the cold on ward number ten, "Have you any other matters to speak of? A. Yes, sir, I have; there was one great and universal cause of suffering on ward ten; I was on ward ten once. Q. What was the subject of complaint? A. There was a great deal of suffering there; they suffered a great deal with cold; there was a Miss S., I remember, one New Year's day when the fire was not out in the ironing-room that she went to it and she kept saying 'This is grand!' 'This is grand!' I have heard her say it as much as ten times. Q. Was it always cold in that ward? A. In cold weather it was." Have you ever known in your service at the asylum that ward or any other being cold, so as to be uncomfortable for the health or comfort of the patient?

A. No, sir; with one perhaps slight exception — or exceptions, I should say; sometimes we have a very strong wind and an intensely cold day; one part of the ward, the east or the west, may be cold, but there is generally some place on the ward that is comfortable that the patients can go to.

By Mr. Haskell:

Q. On ward ten?

A. On any ward, I mean.

Q. Has there been any change in heating ten?

A. Well, part of it is taken down and moved, it hardly exists now.

Q. I ask whether there has been any change in the manner of heating ward ten at any time?

A. No, sir; not to my knowledge.

By Mr. Goodwin (resuming):

Q. At page 420 of the printed testimony, Miss Peck speaks of a person who had taken cold and dying very soon after, do you remember any such case?

A. No, sir.

Q. I call your attention to this: "Q. So that the evil was finally remedied? A. Considerably; I saw the other day in the papers that the ward was being rebuilt or reconstructed; you asked me about the attendants complaining of cold, and I was going to say in answer to that question that several came there appparently strong healthy girls and of course while they were working they would not feel the cold, but when they got through with their work they would feel it more than the patients who had not been doing any thing; a good many of them died, and I believe their colds were caused by that cold ward; I think their death was hastened by the cold of that ward. Q. How do you know they have died since? A. Rhoda Parks left the house and died in St. Luke's Hospital; Mary Comstock died, I visited her friends; Cecelia Deese, she has died since, I saw some one going to her funeral, and Nelly Campion and Annie Roscoe they both died in the Asylum about a year ago;" do you know any thing about these people I have mentioned in the testimony?

A. Yes, sir.

Q. What was their difficulty?

A. Rhoda Parks was cousumptive before she came to the building; Mary Comstock left work for a vacation and was taken sick while she was away and died; it was several years after she left us that she died; she went from us to Willard, and was afterward married and left one child.

Q. On page 421 she speaks of patients not being allowed to communicate with their friends, what have you to say in reference to that?

A. I think that is a mistake; I think they are allowed to communicate very freely with their friends.

Q. That is to say in your own experience where a proper letter was written by a patient, it has always been sent?

A. Yes, sir.

Q. And there has been no attempt to suppress proper correspondence?

A. No, sir.

Q. She speaks at page 422, of the patients being put in solitary confinement; what have you to say in reference to that?

A. I do not know any thing of the kind.

Q. Did you ever hear of it?

A. No, sir.

Q. Have patients been put in rooms separately by themselves?

A. For confinement?

Q. Have they ever been put into rooms by themselves?

A. No, sir, I do not recollect any instance.

Q. Do not you place patients sometimes in a room?

A. In a room with the door on the jar; I think you may have to shut them into a room sometimes.

Q. Has any patient, to your knowledge, ever been placed in a room or confined there in regard to punishment?

A. No, sir.

Q. She says at page 426, that patients are in covered beds for thirteen hours, what do you say in reference to that?

A. That it is not so, or I never knew a case of the kind.

Q. Could it be so without your knowlege?

A. I think not.

Q. Why not?

A. Because I am on the ward so frequently I think that patients would complain to me if they were kept in bed as long as that.

Q. I suppose patients have been kept in bed for thirteen hours?

A. Yes, sir, when they were sick.

Q. And during that time what would be done with them?

A. They would be regularly taken up and beds made, and the patients attended to, hair combed, washed and redressed.

Q. But there never has to your knowledge, been a case of a person confined in the crib for thirteen hours without attention from the attendants?

A. No, sir.

Q. I call your attention to page 426; what is the habit in regard to patients being allowed to work on embroidery or any thing of that kind if their condition allows?

A. They are always allowed to do so if their condition permits it.

Q. I call your attention to page 426 of the testimony: "Q. Is there any other abuses or complaints of patients, or causes of complaint than you have now specified, please state them, or have you stated all now? A. If you were there at the hour they put patients to bed, you would see that they are left in those cribs, or covered beds, thirteen hours; if you could be there you would find that out; then, if you visit the wards, I would like you to please notice and see how many of the women patients are engaged on any kind of work, needlework I mean; you cannot realize how a little work of that kind enlivens the time and shortens it; patients who have been confined there, who are there now, will tell you that it shortens the time wonderfully. Q. I am asking you if there was any thing you saw that you think should be complained of? A. I am stating a ground of complaint; patients were not allowed to keep their embroidery work; when they came they would bring some such work to keep them out of idleness, and it would be taken away from them; some of the attendants would allow that to be done — would allow them to do such work, and even in some cases

furnish the work, or furnish the things — but the head attendant, Miss Sayles would not do so, as she was opposed to it ; " state what there is to that ?

A. There is not any thing to it.

Q. Have you known any patient in proper condition to be refused or prohibited from doing embroidery or any other work that they desired ?

A. No, sir.

Q. The patient speaks — Miss Peck speaks about lousey patients on number 12, did you ever hear of that ?

A. We have them brought to us in that condition, occasionally, brought from the outside, and it takes several days, sometimes a week, to get rid of them.

Q. Is there any thing about the wards over which you have supervision in which a person would become liable to become lousey ?

A. Unless it was by such a circumstance.

Q. What is your rule in reference to that ?

A. If a patient's condition is such as to allow her to be bathed.

Q. Would she be bathed when brought there ?

A. Yes, sir.

Q. And she is bathed as soon as her condition will allow ?

A. Yes, sir.

Q. And is attention paid particularly to her cleanliness ?

A. Yes, sir; washed and her hair very thoroughly combed.

Q. Is it the duty of attendants to comb patients hair ?

A. Yes, sir; it is their duty and it is done.

Q. Mrs. Fulford, on page 622 of the printed testimony, says, patients are not allowed papers ?

A. I have never known an instance where they were refused.

Q. When in proper condition ?

A. Yes, sir; in proper condition, or almost any condition if the papers are sent to them; they are sent on to the wards to the patients.

Q. Is it a practice there to allow patients to read ?

A. Yes, sir.

Q. Not only papers, but books ?

A. We have a library there, and they are allowed to go to the library and select works, every patient who cares enough to do so, and we have exchanges and papers and they are distributed through the wards.

Q. Have you ever heard of a patient being put into a dark room ?

A. No, sir.

Q. Did you ever know of a patient who was secluded in a dark room, and not allowed to come out on the wards and get warm ?

A. No, sir.

Q. And did not even have a chair to sit down on ?

A. No, sir; I do not know of any thing of that kind.

Q. Is it possible for such an occurrence as that to have occurred in the Asylum without your knowledge ?

A. I do not think so.

Q. Why do you not think so?

A. Because, as I said before, the patients make complaints to me of almost every thing that can happen, and if any patient had been subjected to any such thing she would have been very likely to have told me; I may say further, that there is but one room that might be called a dark room, and that is on the convalescent ward, where a patient would not be likely to be secluded.

Q. Have the attendants any thing to say in reference to the time when patients shall go to bed?

A. No, sir; there are rules, I believe.

Q. Who establishes those rules?

A. The physicians.

Q. And the hours at which patients must go to bed is according to the rules laid down by the physicians?

A. Yes, sir.

Q. It is not a matter of discretion at all with the attendants?

A. No, sir.

Q. Would you know if it was a practice in that Asylum of attendants making patients go to bed before or even after the regulation time?

A. I have known an instance where they have been allowed to stay up later than the regular time; that is, allowed by the attendants.

Q. Have you ever known a case where they have been made to go to bed as a punishment?

A. No, sir; I do not recall any thing of that kind.

Q. It has been stated that patients are not allowed to go to bed in the day time by attendants; will you please state to the committee what there is about that?

A. They are allowed to do so; if they should go to an attendant and say they were particularly tired or sick and would like to lie down they would be allowed to do so.

Q. You remember Miss Peck?

A Yes, sir.

Q. How long was she at the Asylum?

A. I cannot recollect just now.

Q. About how long?

A. I should think she was there about eight months the first time and the last time I think she was there two years or a little more.

Q. Did you converse with her?

A. Yes, sir.

Q. What were her delusions?

A. One delusion was that she was Dr. Andrew's wife.

Q. Did she ever tell you how she thought she was married?

A She said she was married the day she saw him in the office, one Sunday she referred to, that she went out of the door with one of the attendants, the door was open and she ran across the hall into the doctor's sat down on Dr. Andrew's lap and kissed him, that was I believe her marriage ceremony.

Q. Have the night watchmen got pass keys that will admit them from ward to ward?

A. I do not think they have.

Q. Have the night watchmen any keys on the women's wards.

A. Not to my knowledge.

Q. Please tell the committee what you know about the use of wet sheets in that Asylum if any thing?

A. Nothing more than what I heard at one time.

Q. When was that; how long ago?

A. That must have been fifteen years ago.

Q. Upon how many occasions did you hear it was then used?

A. I did not hear any number of the times.

Q. Do you know the attendant who used them?

A. Mrs. Peterson.

Q. How long was she in the service of the Asylum?

A. That I cannot remember.

Q. Was it a long or a short time?

A. A long time; I think you might call it, perhaps, a couple of years.

A. Can yon state from your recollection how long she remained there after these rumors in reference to wet sheets?

A. Not very long.

Q. Was she discharged?

A. Yes, sir; it came to our knowledge while she was on a visit to Canada, and after she came back she was told that her services would not be required any longer.

Mr. Goodwin — You can cross-examine Mr. Barker.

By Mr. Rice:

Q. You said no correspondence fit to be sent was ever retained at the Asylum?

A. Not to my knowledge.

Q. Were you accustomed to see the letters which were retained?

A. No, sir; well, sometimes I have seen a few.

Q. It was seldom you saw them?

A. Yes, sir.

Q. Then you are not able to say whether proper letters to go were ever retained?

A. No, sir.

Q. And in stating, then, that no letters of a proper character to be sent out were retained, you are speaking of that which you really know nothing of, are you not?

A. Well, my sending them would be all I could know about it.

Q. I am speaking about contents of letters; you say you did not know the contents of these letters which were retained?

A. No, sir.

Q. Do you know whether or not it is very often advised by the physicians of the Asylum that friends of the patients should not see the patients?

A. I do not know that they are; occasionally I know of an instance I think, I wanted to speak in regard to the letters, and the statemant I made, I have heard the physicians say to patients that they would send any letter that was proper to go, that was all I know.

Q. The physicians constituted themselves the judges whether the letters were proper or not?

A. Yes, sir.

MISS AMY STERLING,

Sworn and examined testified as follows:

By Mr. GOODWIN:

Q. How long have you been employed at the Utica Asylum?

A. Fourteen years.

Q. What is your present position?

A. Supervisor on No's 2, 5, 8 and 12.

Q. How long have you been supervisor?

A. Ten years.

Q. And the balance of the time as attendant?

A. Yes, sir; I was on the seventh when I first went to the house for three weeks only, then on the fourth ward as dining-room attendant, then on the first ward dining-room attendant, and after that for two years first assistant on the first ward.

Q. Have you ever heard of persons being obliged to take medicine as a punishment?

A. Never.

Q. Have you heard any complaints made by patients themselves in reference to being obliged to take medicine for punishment?

A. I have no recollection of hearing such complaints.

Q. But you never knew of a person being given any medicine as a punishment?

A. No, sir; I never heard of it.

Q. Who gives the medicines on your department?

A. I carry them around and other attendants assist me in giving them.

Q. You give them as a rule then?

A. Yes, sir.

Q. And you have never given to any person any medicine as a punishment?

A. No, sir; I never have.

Q. And you have never known an attendant to do it?

A. No, sir.

Q. Or a physician?

A. No, sir.

Q. Have you ever known a patient being moved from one ward to another as a matter of punishment?

A. No, sir; I never looked upon it in that light.

Q. How did you look upon it?

A. I thought it was necessary not only for the interest of the other patients but for the condition of the patient who was moved or transferred.

Q. Now just state to the committee what are usually the reasons for the transfer of patients from one ward to another?

A. There are various reasons; sometimes patients become excited after conversing for a short time, and under such circumstances they were removed to more disturbed wards, and again I have known patients to be removed from quiet wards where there was a great deal of company passing through, for taking off their clothing and being untidy in their habits.

Q. Have you known them to be removed for annoying other patients?

A. Yes, sir; when their annoyances of them would irritate and excite other patients.

Q. In that case where would the patient be moved to?

A. That was determined by the physician.

Q. No person was removed from one ward to another without the order of the physician?

A. Never to my knowledge.

Q. Did you known of any patient being obliged to go into the ironing room when she was sick and being obliged to work there?

A. No, sir; I never did.

Q. Have you ever known where a patient was compelled to work?

A. No, sir; there is no compulsion about their work.

Q. In case of refusal of a patient to work what would follow?

A. Nothing; they have been advised; we have persuaded them, or endeavored to persuade them, when they say they do not want to.

Q. Is it usually the case that a patient of pretty good physical condition desires to work?

A. Not always; there are exceptions.

Q. And in those cases what is done if any thing?

A. Not any thing.

Q. I call your attention to Miss Lathrop's testimony on page 526 of the printed testimony: "Q. Was you at any time sent off the ward because you refused to work? A. I was not, because the attendants did not require it of me; I never thought of such a thing as doing any work, but after that I did do a little or nothing on the ward, because I did not want to be taken off the ward." Have you known any patient to be threatened by removal from the ward on account of refusing to do any work?

A. I have no remembrance of ever hearing any such thing.

Q. Have you ever made such a threat?

A. No, sir.

Q. Or ever heard an attendant doing it?

A. No, sir, I have no recollection of it.

Q. Did you hear Dr. Blumer threaten to send any person from the ward for not doing their work?

A. No, sir.

Q. Do the patients as a rule wait for the physicians to come around before making any complaints of their wrongs?

A. No, sir, it is very frequently they complain to the attendant.

Q. Now, what is the habit of supervisors and attendants; what is your habit where a patient complains of some minor difficulty, like stomach ache or ear ache, or any thing of the kind, what would the supervisor do in such a case?

A. It would depend somewhat upon how severe it was; if a patient complained of it being very severe, an acute pain, I should go to the Doctor.

Q. And get medicine?

A. I would not always wait for the medicine, he would send it; but many times I would wait for the medicine in the office and carry it to the patient.

Q. Have you known of any person under your supervision who had to wait any considerable length of time for medicines as not to obtain relief from their sufferings?

A. No, sir.

Q. Have you ever heard of it?

A. I have no recollection of hearing it.

Q. I call your attention to page 528 of Miss Lathrop's testimony. "The first occasion was after I had been in the Asylum six months; I awoke one night with a feeling of suffocation and saw that the door of my room was partially open, and that some one was standing at the door." Without reading to you this testimony given by Miss Lathrop, have I called your attention to it before?

A. Yes, sir.

Q. State to the committee if on any occasion Miss Lathrop ever made any complaint to you in any way in reference to this matter?

A. No, sir; she never did; I never knew of any such thing being spoken of.

Q. When did you first hear of it?

A. About a year ago, before the last committee.

Q. And up to that time you never heard?

A. No, sir; never heard that she thought of any such thing.

Q. Who usually sees the articles that are taken to the wash?

A. I see some of them, not all; the first attendant on the ward with me always sorts the clothing; I sometimes assist, but not always.

Q. I call your attention to page 539 of the printed testimony: "When was the first time that Mrs. T. was sick, as you have described? A. The first time Mrs. T. was sick was during the first year I was in the Asylum; while I was on the second ward. Q. What attendants took care of her during her sickness? A. Mrs. Sterling, I think, and a Miss Davis"—do you know who Mrs. T. is?

A. Yes, sir.

Q. State to the committee what her trouble was?

A. She had inflamatory rheumatism, and her limbs and arms were done up with aconite and bandaged ; she was helpless.

Q. Did she have any trouble or sicknesses narrated by Miss Lathrop to the committee?

A. Nothing that you could infer that it was any thing but an ordinary sickness ; nothing at all that would create any suspicion.

Q. And she had nothing like what is described in this testimony?

A. No, sir ; she had not.

Q. On page 626 of the printed testitimony, I call your attention to this — what occurred in 1882 when you were there? A. I told you about Dr. Brush coming on and sending me back to ward twelve ; that occurred when I was there on that occasion ; I was given a single room on number twelve ; something occurred during the time I was there that I thought I would speak of, and my husband wished me to speak of it ; it was this : I went to the chapel one afternoon — I was quite poorly when I went to the Asylum for I had been broken of my rest ; there was a German lady from down near Albany ; she wanted I should read to her in the recess, and several patients came while I was reading to them, and after a while she came up to me and said "I want you to sing to me," and brought me a singing-book, and there was a Mrs. S. of Otsego county ; she said "Mrs. Fulford, don't try to sing, you look so tired ;" that excited this German lady, so she took this singing-book and gave me a hard blow on the side of the face and my head begin to ache very hard, etc., etc. ;" now do you remember any such occurrence as that?

A. Yes, sir ; there was no Mrs. S. of Oswego there at that time ; but she (Mrs. Fulford) went to chapel and was sitting, as she states, in the recess, and I do not recall any German woman ; I do remember some patient slapping her, and went to ask if she hurt her ; she said no she didn't ; a little later than that she said her head ached a little and went to her room just about dark ; I don't remember the patient who came to me and said Mrs. Fulford was sick ; I went down to the dormitory, it was not her own room where she then was ; she had her feet in water ; I don't remember telling her to take them out and dry them, but we took them out and dried them and Miss Davis and myself and two patients carried her instead of dragging her to her room, which was two doors lower down the hall than the room she was then in.

Q. Did you drag her?

A. No, sir, we carried her ; we did not take her up then with our arms, but lifted her from the floor ; Miss Davis and I had her shoulders ; we then undressed her and put her to bed, and I informed Dr. Brush in regard to her condition and he came up and saw her ; and I think she said he brought her a pill or pills, which he did not.

Q. I call your attention to page 723 of the printed testimony of

Mary A .Pelton: "Q. Any other ill-treatment on ward eight? A. Well, some of the patients had to sleep on the wards in a straw bed in the day rooms on the floor, and they would be strapped by the wrists to a chair. Q. The bed would be put where? A. Right up close to the stationary chair; and the patients strapped to the chair so that they could not stir in the night; it was a straw tick they were put on." Now, I ask you what there is in reference to that at the Asylum?

A. There are patients who are too maniacal to sleep in the dormitories, they are sometimes restrained by having a wristlet put upon their wrists, the belt put through that, and the belt fastened around the chair, the chair being stationary.

Q. What is the object of that?

A. To protect them and to protect other patients who may be sleeping in the hall.

Q. Protect them in what way?

A. From injuring themselves.

Q. And from getting up and going about in the night?

A. Yes, sir, sometimes restrained to prevent them being on their feet all night; some patients would be on their feet all night if not put down in that way.

Q. What kind of beds are they put in when put in that way?

A. If it is a neat patient, she has sheets and mattress, and if not clean, she has a straw bed.

Q. I call your attention to page 724 of the printed testimony, to Miss Felton's testimony; she refers to a memorandum and then says, "I was on the dormitory one night, on No. 5 ward, and saw Emma Stirling drag a patient from her bed; she refused to take her medicine; she left the door open, I looked through, she dragged her on the ward; Emma Stirling had her hands resting on her lungs; this Miss K., who always carried the medicine tray for Miss Stirling, was holding the patient's nose; she poured it down her throat very harshly." Do you know who Miss K. is?

A. There is no Miss K. that I remember of ever carrying the tray for me.

Q. Did ever such occurrence take place as I have just read?

A. No, sir; I have no recollection of any such case, and I know it did not occur, for I never dragged a patient from her bed.

Q. Have you ever placed a patient on the floor and put your knees on her breast in any way to give her medicine?

A. No, sir; I never put my knees on a patient's body in any way.

Q. Did you ever drag a person on the floor for any purpose?

A. No, sir.

Q. Did you ever know of any fruit of Miss Pelton's being kept away from her?

A. No, sir.

Q. Did you ever know of any fruit sent to patients by their

friends, being kept from them if they were in a condition to receive it?

A. No, sir; and never without trying the patient to see if they would eat it.

Q. Do you remember any fruit being sent to Miss Pelton?

A. I don't now recollect of any, I presume she may have had.

Q. If she did have, would you know whether she received it or not?

A. I would.

Q. Why?

A. Because the fruit would be sent to me on the ward, and I should be told of it, I never knew any to come that I was not told of.

Q. Would you deliver the fruit as a general thing to the patient?

A. Yes, sir.

Q. Have you ever kept any fruit sent to patients from their friends?

A. No, sir; I have not; other attendants do carry the fruit sometimes.

Q. You have been in that Asylum a long time, tell the committee what opportunities you had of seeing the treatment of patients by attendants, how you manage every day and what you do in going from ward to ward?

A. I go through with the medicine, and I make regular trips through the different wards on my department; I go directly after breakfast with the medicine, and after dinner and after supper, and at eight o'clock in the evening; I go at those times every day, and many times I go at irregular times and I would be very apt to see any ill-treatment that might occur.

Q. Do you give any warning to your attendant when you come into your wards?

A. Yes, sir.

Q. I mean do you tell them you are coming; any thing of that kind?

A. No, sir; oh no, sir.

Q. Now, when a patient complains of ill-treatment by an attendant, what do you do about it?

A. I listen to the patient's story, and go to the attendant whom she makes charges against, then I go to the other attendants on the ward with her.

Q. Do you always believe the story of the attendant?

A. Not always.

Q. When you do not believe the story of the attendant, what do you do?

A. Report it to the doctor.

Q. Have you seen a patient scratched or bruised while in covered beds?

A. I have seen them bruised where they did it themselves, and have helped to pad the covered beds in order to prevent them bruising themselves.

Q. Miss Pelton states she was sent off the ward because she took off her shoes and stockings — for taking off her shoes and went in her stocking feet; was she ever sent off the ward for any such thing as that?

A. No, sir; not for taking off her shoes; she might have been sent for something else; I don't know what she was sent for, except for annoying patients and going to their bureau or drawers.

Q. Would they be sent from the ward for having shoes and stockings off?

A. No, sir; you might find them up there to-day, their shoes and stockings both off and they would still be on that ward.

Q. Would that be any offense at all, walking about in their stocking feet?

A. We do not like to have it, still it is done.

Q. It would not be any cause for disciplining in any way?

A. No, sir.

Q. Do you know what Miss Pelton did do to patients?

A. I know some things she did; she used to go around and put her hands in their faces and unbutton their dresses and feel their heart.

Q. Why did she do that?

A. She never would give any reason for doing it.

Q. Was Miss. Pelton a troublesome patient?

A. Yes, sir; she was very sly and very mischievous.

Q. Was she a filthy patient?

A. Yes, sir; in her habits, very.

Q. Did she require the camisole or muff?

A. I don't recollect; I thing she wore the camisole.

Q. Why?

A. Because of her habits.

Q. Personal habits?

A. Yes, sir.

Q. Did you ever hear or know of her sticking pins into patients?

A. Yes, sir; I heard of it; I had no knowledge of it myself, only what the patients said and attendants on other wards told me.

Q. What class of patients are usually strapped in the chair for any length of time?

A. The maniacal and those who are inclined to stand all day or walk, and whose limbs or feet are swollen by so doing.

Q. Take a patient who is not maniacal in being violent if she was not put into a chair what would she do; what would be her habit?

A. She might hurt herself.

Q. Now in regard to standing, I want the committee to know about this; would she probably stand — how long would she stand in one place?

A. I have known patients to stand for hours.

Q. What is the result of that standing?

A. Their feet and limbs are swollen.

Q. Would they be liable to lie down right on the floor?

A. I don't call to mind any now that would.

Q. And they usually stood more or less, and the fact is it makes the feet swell?

A. Yes, sir.

Q. And these persons are put into chairs, are they?

A. Yes, sir; occasionally.

Q. I call your attention to page 723 of the printed testimony, in which Miss Pelton says: "Q. What was their conduct when not kept in the chair? A. One was an old lady; she seemed mischievous; she would go for the patients, and they would have to strap her down in the chair again." Did you ever strap a patient down in the chair simply on account of mischief?

A. Not unless their mischief was of such kind that it excited other patients.

Q. But never as a punishment?

A. No, sir.

Q. Do you know Miss Burns?

A. I do.

Q. How long have you known her?

A. I have known her quite familiarly for ten years.

Q. Is she one of your attendants?

A. Yes, sir.

Q. On what ward?

A. Twelfth ward, she is in charge.

Q. How long has she been under your supervision?

A. The ten years I have been supervisor.

Q. State to the committee your opinion of her as an attendant?

A. I think Miss Burns is a very excellent attendant; very kind to the sick and neat especially.

Q. Is she petulent?

A. No, sir, I never thought her to be so.

Q. Do you regard her as a first-class attendant?

A. Yes, sir.

Q. Do you regard her as kind to the patients?

A. Yes, sir, very kind.

Q. As considerate to them in their wants?

A. Yes, sir.

Q. Do you regard her as good an attendant as is under your supervision?

A. Yes, sir.

Mr. Goodwin — Mr. Chairman you can examine.

Mr. Haskell — I have no questions to ask.

By Mr. Morgan:

Q. In what respect was Miss Pelton untidy in her habits?

Mr. Goodwin — The case of Miss Pelton will be put in evidence.

Mr. Morgan — If this is satisfactory to the committee, it is to me; that is all.

Recess until 3 P. M.

By Mr. Goodwin:

Q. Miss Lathrop speaks, in her testimony, about medicines being kept in jars or bottles, which supervisors had access to and used; do you know any thing about that?

A. There is medicine sent up, such as cough medicine and simple remedies, that the attendants have directions to give.

Q. Are they accessible to patients at all?

A. No, sir, they are kept in the medicine cupboard in the supervisor's room.

Q. Miss Fulford spoke of an attack made on a patient by you, when she asked to go to the communion that Dr. Gibson was to administer to a patient?

A. Yes, sir.

Q. Do you remember that circumstance?

A. Yes, sir.

Q. State it?

A. Miss R. was the sick attendant to whom Dr. Gibson was coming to give communion; he came to the ward where Mrs. Fulford was and spoke to two patients about it, in some way Mrs. Fulford heard of it, and she went round talking with the other patients about going to communion; this Miss S. she speaks of, I never knew she had been confirmed; the condition of Miss R. was such that it was not thought wise to have more than two go; I told Miss S. she could not go, that the doctor had so instructed; but she went to her room and went to dressing then some visitors came and she came out, supposing it was the doctors; I told her it was not the doctors, to go back to her room; she said she would not, then she got her hands in my hair and screamed, and some other attendants came, and some patients, and we got her into the room as soon as we could; whether she yelled "murder" or not, I could not say; I know she screamed.

Q. You made no attack upon her?

A. No, sir.

Q. And did not take her to her room and punish her?

A. No, sir; we only took her into her own room, from which she had come out partly dressed, while company were on the ward.

Mrs. BARKER,

Recalled:

Mr. Goodwin — I desire to call attention to some corrections in Mrs. Barker's testimony.

Q. I call your attention to your testimony given before this committee on Saturday morning, March 16, at the bottom of page 671: "Q. What do you mean by civil service?" Your answer is they pass a sort of examination, etc., etc.; what have you to say in regard to that?

A. I meant to say, and supposed that I did, that they pass a "short" examination in my room, to see if they can read and write: that is, as I understand, is required by the civil service rules.

Q. What is the next place?

A. Page 676, in regard to the night watchers.

Q. What is it you wish to say?

A. By "they" used in the answer, I mean the supervisors and attendants.

Q. Now in regard to a question on page 677, the question was, "Q. Do you regard it as improbable that the attendants, etc., etc.?"

A. What I would like to say is this, that I don't know that it is impossible, but I think it is very improbable.

Q. On page 678, the question was asked you, "Do you know of any special cases coming under your notice, etc.?"

A. What I wish to say is, unless patients from water cures might be considered such, we have had one or two of those.

Q. What else?

A. At the bottom of page 679, where it says "plain cooking," at the end of the answer, it should be "plain cake;" there is some thing on page 677, but that has been corrected; that is all that is serious.

Miss JENNIE MORRIS,

Sworn and examined, testified as follows:

By Mr. Goodwin:

Q. Have you had read to you by me the testimony given by Miss Lathrop at page 536 of the printed testimony?

A. Yes, sir.

Q. In regard to a Miss ——, you have read that testimony?

A. Yes, sir.

Q. State to the committee if there is any truth in that statement made at that page by Miss Lathrop?

A. I should say it was a falsehood.

Q. You knew that lady spoken of?

A. Yes, sir.

Q. And she is now in the Asylum?

A. Yes, sir.

Q. And she is in one of the wards in which you are supervisor?

A. Yes, sir.

Q. And nothing of that kind has ever occurred?

A. No, sir.

Q. Would you know if it had?

A. Yes, sir.

Q. How long have you been in the Asylum?

A. Eleven years.

Q. What is your position there?
A. Supervisor of the first department.
Q. How long have you been supervisor?
A. Eight years.
Q. What were you before being supervisor?
A. First attendant on third department, third ward.
Q. What wards have you under your charge as supervisor?
A. First hall, fourth hall, ninth and eleventh.
Q. I call the chairman's attention to the testimony of Miss Lathrop on page 536 of the printed testimony, and ask him whether the evidence of the witness is sufficient on that point so far as the rebuttal of the evidence is concerned, or whether it be better to go more into detail?

The CHAIRMAN — My impression is that it is sufficient.

By Mr. GOODWIN (resuming):

Q. Have you known punishments to be inflicted on any patients at the Asylum?
A. No, sir.
Q. Do you know whether patients have been removed from one ward to another for any thing of the kind?
A. No, sir.
Q. In case of complaints made to you by patients, in reference to treatment by attendants, what has been your course?
A. It depends on the patient.
Q. In what way does it depend on the patient?
A. If she was very insane I should not pay very much attention to it.
Q. Suppose she was not very insane but reasonably sane?
A. I should see as well as I could — ask the attendants on the ward — see if there was any truth in it; if there was I should report to the doctors.
Q. Suppose there was a difference between the attendant's statement and that of the patients?
A. If I was not satisfied that it was not true, I should go to the doctor and let him decide; if I was not satisfied myself that there was no truth in it I should report to the doctor.
Q. State about how many times in the course of twenty-four hours you are through your different wards?
A. Some days more times than others.
Q. Well, on an average every day?
A. Seven or eight times, sometimes ten or twelve and more than that.
Q. When patients are sick with some small ailment, such as stomach or ear ache, what do you do?
A. If I think it is necessary, I wait for the doctor to come, but if it was severe and would not do to wait, I would go to the doctor.
Q. Do you know of any patient suffering in that way without the doctor being notified about her condition?
A. No, sir, I don't.

Q. This Mrs. T., on page 539 of the printed testimony, do you remember her?

A. I do.

Q. What was her difficulty or trouble; the account is: "Q. When was the first time that Mrs. T. was taken sick as you have described? A. The first time that Mrs. T. was sick was during the first year I was in the Asylum, while I was on the second ward? Q. What attendants took care of her during her sickness? A. Mrs. Sterling, I think, and a Miss Davis;" you took care of her particularly, this Mrs. T.?

A. Yes, sir; she was sick on the first hall with erysipelas in her hand for several weeks.

Q. She had none of the symptoms described by Miss Lathrop?

A. No, sir.

Q. Have you known of medicines being given as a punishment to patients?

A. No, sir.

Q. Have you known any attendants to make use of the stomach tube or feed patients with the stomach tube?

A. No, sir; I never have seen it done by an attendant; the physician always did that.

Q. I will ask you about the number of times you have seen Dr. Gray on the ward; what is your recollection upon this subject?

A. I have seen him on the ward very often.

Q. About how many times in the course of a week that he has been in the institution?

A. Two or three times, and twice in one day sometimes?

Q. Is he familiar with the names of the patients in your wards?

A. I should think he was; he goes up to them and shakes hands and calls them by name always.

Q. Is he familiar with their particular ailments when you ask them about it?

A. Yes; he often asks me about different patients and their ailments.

By Mr. MORGAN:

Q. For the last year how often do you say Dr. Gray has visited your ward?

A. I don't know.

Q. How often do you say he has visited the wards under your supervision?

A. I cannot say at all.

Q. For the last year?

A. I cannot say how often.

Q. Has he done it as often as once a month?

A. I cannot tell.

Mr. MORGAN—That is as far as I have heard her testimony.

Mr. CHAIRMAN—I do not think there are any more questions the committee want to ask.

ANNIE BURNS,

Sworn and examined, testified as follows:

By Mr. GOODWIN:

Q. Where do you reside?
A. My home is Williamsport, Pa.; my father lives there.
Q. What is your age?
A. My age I really cannot tell; it is either 29 or 30 next birthday; there is a doubt about it.
Q. How long have you been an attendant in the Asylum at Utica?
A. Thirteen years.
Q. On what ward were you first an attendant?
A. On number twelve.
Q. Have you been there ever since on that ward?
A. Yes, sir.
Q. Are you now the head attendant on that ward?
A. Yes, sir.
Q. How long have you been?
A. Nearly ten years.
Q. Who is the supervisor on your ward?
A. Miss Sterling.
Q. Who are your assistant attendants?
A. At present, Miss Thomas of Utica and Miss Jones of Madison county.
Q. I call your attention to page 719 of the printed testimony; the testimony of Miss Pelton; she says: "Q. While on ward 12, did you see any unkind treatment by the supervisor or attendants of the patients on that ward? A. I think I did see a great deal; Anna Burns would fasten me in the stationary chair, and did so several times; after I was restrained she took my wrist and twisted it as far as she could until I begged her to stop; then she says, "there," just as if she had conquered me; she twisted it as far as she could, clear over; another time she strapped me so tight in the chair it took the flesh off my left side; it was drawn so tight it took the skin off; I could hardly breathe; I was there about two hours in that way." Is there any truth in that statement?
A. No, sir; there is not.
Q. Do you know Miss Pelton?
A. I do.
Q. Was she in your ward?
A. She was; yes, sir.
Q. What kind of a patient was she?
A. A very annoying patient; she would torture the patients, stick pins in them, bite them, kick them, and scratch them, and would spit in her hands and rub it in their faces.
Q. Was she restrained while on your ward?

A. I think I used the waist band by order of the physician.

Q. What for?

A. We could watch her during work hours to keep her from hurting the other patients.

Q. How in reference to herself?

A. She was a very untidy patient, very obscene in her habits.

Q. And was a filthy patient?

A. I cannot remember whether she was filthy or not, the record will tell that.

Q. Did you ever twist Miss Pelton's arms in any way?

A. No, sir; I have taken hold of her arms and in trying to get away from me, she would twist her own arms and wrist.

Q. Why did you take hold of her arms?

A. It was necessary; she would scratch and kick and we have to defend ourselves some way, we cannot stand every thing.

Q. In her efforts to get away when you took hold of her she would do what is called this twist of the arms, as was explained here this morning?

A. Yes, sir.

Q. Did you ever strap her in the chair?

A. I think I did.

Q. So that it took off the flesh off her left side?

A. No, sir.

Q. Would it be possible?

A. I don't hardly think it would.

Q. Is it possible to strap a person in such a way that it will take the skin off the left side or any side?

A. No, sir; it is not possible to do that.

Q. Did you ever strap a person so tight that you could not insert your hand between her person and the belt?

A. No, sir; usually when I got a patient restrained, I put my hand between the patient and the belt, very often it is so loose they get out of it, if it is a slender person.

Q. I call your attention to page 720 of the testimony; she says it was a common thing for you to twist wrists; did you ever knowingly, or willfully, twist any patient's wrists?

A. No, sir.

Q. Was it a method of punishment for you in any way to twist people's wrists?

A. No, sir.

Q. Do you remember Mrs. Fulford?

A. Yes, sir.

Q. Did you ever tear any clothing belonging to the patients?

A. Well, I might in taking hold of their sleeves and they would pull away from me, if the dress was old it would tear out.

Q. Have you ever torn any clothing in your attempts to quieten patients?

A. Yes, sir.

Q. Did you ever tear any person's dress to pieces?

A. Not to my knowledge.

Q. I call your attention to page 625 of the printed testimony: "Q. How do you know that? A. She tore it; they took them in this way (indicating) by the neck of the dress and dragged them; and I saw new dresses all torn to pieces; and I saw more than this the last time I was there." State whether you have ever dragged a patient across the ward at any time?

A. No, sir; we sometimes carry a patient across the ward, sometimes she will fall, we lift her up and she will fall again.

Q. Have you ever got a patient by the neck of the dress and dragged her so that the dress was torn?

A. No, sir.

Q. I call your attention to page 630 of the printed testimony — Miss Fulford's testimony, her answer is, "There was a patient there by the name of Mrs. G. she was a young lady and I was quite interested in her; she did not do very much, but I got her so that she did considerable; that was on ward twelve; well, she had not been to chapel since I had been there, and one day the jubilee singers came there; they came there to sing; they came up to me and said I could go up to the chapel, if I wished; I asked Miss Burns if Mrs. G.; could go with me, she said 'it was so much trouble to dress her;' I said that I would dress her and get her ready to go, and see that she was returned in safety, and finally she consented to let me take Mrs.; G.; I got her ready for the concert, and she wore a very nice dress, it was new; this was on Saturday, so she kept the dress out and put it on Sunday morning; and afterward they let her go to chapel with me; she went to hear these jubilee singers with me, and she seemed to enjoy the singing very much. Just as she was going to her room to go to bed Ann Burns saw her, she stood right near by, she kind of struck at Mrs. G.; and Mrs. G.; at first did not notice it, so she did so again; that is, Ann Burns did so again, and then Mrs. G. struck back at Burns; then Miss Burns called for more attendants and they came; they threw her down on the hall floor; she was rather a small woman, but they sent for two attendants on number eight, and they came down and I went to my room, for I could not bear to see it; but I saw they were hurting her very much; there was a crib-room, the second room from mine, on that hall, and they dragged her through, and I saw that that new dress was all torn to pieces; I saw her as they dragged her past my room, and into the room beyond; I heard them take her in there and put her in the crib, and she remained there all night; I never saw that dress afterward." Is there any truth in that statement?

A. No, sir.

Q. Do you know who Mrs. G. is?

A. I think it was Mrs. G——r; I think she was transferred to another asylum.

Q. Did you on any occasion drag Mrs. G. as described in this answer which I have read?

A. No, sir.

Q. Did you at any time exercise any violence upon that patient?

A. No, sir.

Q. What kind of a patient was she?

A. Melancholy; she had periods of distractiveness and periods of violence; she attempted suicide twice whilst she was here.

Q. Do you remember whether there was any thing in this statement in reference to her going to the chapel or in reference to hearing the jubilee singers?

A. Yes, sir; Mrs. G. I think she went to hear the jubilee singers and became frightened because they were colored, and she came down screaming, and that day she tore her own dress, which was a black dress, not new.

Q. Did you take her on that occasion — did you take her into a crib?

A. No, sir.

Q. What did you do with her when she came down from hearing the jubilee singers?

A. She tore her dress so that I had to change it, and after a while she became quiet.

By Mr. HASKELL:

Q. Do you say she was not put into the crib on that occasion?

A. No, sir, she was not.

Q. Did you strike her in the face on that occasion?

A. No, sir.

Q. Did you strike her at all?

A. No, sir.

Q. Have you told us all about this matter you can?

A. All that I remember.

Q. I call your attention to page 630 of the printed testimony: "Q. Is there any thing else that occurred during the time that you were there? A. Yes, sir; there was a Mrs. A. there; she was from Auburn; she was a very quiet patient; but one day when we were eating dinner in the dining-room something was said to her that excited her very much; she was a very large woman; she became excited, and this Miss Burns got in five attendants, but before they did any thing Ann Burns came to me; she knew that I had a perfect horror of seeing such things; she came to me and said: 'We are going to drag Mrs. A. through and put her into the crib-room, and if you do not want to see it done you had better go into your own room;' so I did so; just before I went into my room I saw two attendants jump on to her stomach; I think they were afraid she was getting the mastery of them." Did you know a Mrs. A. on your ward?

A. There was a Mrs. A——s.

Q. Did any such occurrence as this take place?

A. Not that I remember.

Q. Do you know whether you did say to Mrs. Fulford at any time that "we are going to drag Mrs. A. through and put her into the crib-room"?

A. No, sir; even if I was going to do it, I should not tell Mrs. Fulford.

Q. Did you ever drag her or any other patient through the hall into the crib-room?

A. No, sir; I never dragged a patient.

By Mr. HASKELL:

Q. Have you ever seen a patient dragged?

A. Sometimes when we take hold of them.

Q. You have seen it done, but never have done it yourself?

A. No, sir; I have never done it.

By Mr. GOODWIN:

Q. What did you when a patient was very violent and maniacal; tell me what is the first thing you do when you see a woman in this maniacal condition and needing restraint; give us the operation; the *modus operandi?*

A. In case of emergency, I take that patient into a room and put a waist-belt on her.

Q. Suppose you cannot do it alone, what is done then?

A. I never try to do it alone.

Q. How many attendants do you have to assist you?

A. Three.

Q. No; I am speaking generally in reference to such a patient as I have described?

A. It is owing to the condition of the patient.

Q. I am speaking of very maniacal patients like Mrs. D.?

A. I always call assistance from another ward.

Q. How many have you ever had to call?

A. I have called two from another ward.

Q. How many then would there be?

A. Five of us.

Q. At this one person?

A. Yes, sir.

Q. Describe what you would do with this person?

A. We would do the best we could.

Q. State how you take her and where?

A. We cannot always choose our hold; we have to take hold where we can, and how we can, owing to the condition of the patient; if a patient is very violent and comes at you you cannot wait to choose what part you will take hold of her; you take hold just where you can.

Q. Do you lift her up and carry her?

A. Sometimes we do.

Q. Don't you do it every time?

A. Yes, sir.

Q. What do you say "sometimes" for?

A. Well sometimes there is a chair close by and we put her in there.

Q. I am speaking of taking a violent patient from the hall to take to the crib, for instance, if you had to take to the crib?

A. Yes, sir; to the crib-room; there is only one stationary chair in the ward, that is in the crib-room.

Q. Suppose she is at the other end of the ward?

A. We carry her.

Q. You never drag her?

A. No, sir.

Q. You have never known a case of that kind which you have been speaking of, anybody being dragged in the Asylum?

A. Not that I remember.

Q. Have you ever yourself jumped on a patient's stomach?

A. No, sir.

Q. Have you ever seen an attendant do it?

A. No, sir; never.

Q. Have I read you the testimony of Mrs. Fulford in reference to the carpenter, Jones, coming on the ward?

A. Yes, sir.

Q. Has Mr. Jones at any time taken any liberties with you?

A. No, sir.

Q. Or ever offered to do it?

A. No, sir.

Q. Have you ever seen him take any liberties with any attendants in that Asylum?

A. No, sir; I have not.

Q. Were you ever in the bath-room with Mr. Jones with the door closed?

A. Never with the door closed; I may have been in the bath-room or any other room, but not with the door closed.

Q. If you were, what was the occasion of it?

A. I would go in and show him where the repairs were to be done.

Q. That was your duty and business?

A. Yes, sir.

Q. Have you ever heard any lewd or lascivious talk among attendants before patients?

A. No, sir.

Q. Have you ever heard any at any time in the Asylum by any patients?

A. No, sir.

Q. Did you hear these stories that Mrs. Fulford circulated about you before this investigation?

A. Yes, sir; I heard it while she was in the Asylum.

Q. Did you pay any attention to them at all?

A. I spoke to Mrs. Barker about it.

Q. And that was all?

A. I spoke to Miss Sterling about it.

Q. Did you treat Mrs. Fulford any differently from what you did any other patient?

A. No, sir; I did not; I tried to do my duty by Mrs. Fulford.

Q. Did you treat Mrs. Pelton in any way different from any other patient?

A. No, sir; I did not.

Q. Have you at any time used more violence to a patient than was necessary to protect yourself or other patients?

A. No, sir.

Q. Have you at any time struck a patient?

A. Not to my knowledge.

Q. Have you been struck?

A. Yes, sir; frequently.

Q. Have you wounds on your person?

A. Yes, sir; little finger broken (little finger on left hand), and one hand put out of joint (the right hand), and my hair, there, was pulled out by the roots so that it never grew again.

Mr. MORGAN — That is all, Mr. Chairman.

The CHAIRMAN — In regard to this report of Dr. Anderson, made to the State Board of Charities, and offered in evidence by counsel for the Asylum, the committee are of opinion for the reasons stated on pages 726 and 727; and for the further reason that Dr. Anderson has since been examined and has stated his knowledge of the institution, that in their judgment, there is no propriety in putting the report itself on record; also with regard to the letter from Dr. Anderson to Dr. Gray, that is excluded for the same reasons.

In regard to the affidavit of Mr. Rogers offered by counsel for the Asylum the affidavit is admitted; but the committee desire to have it appear in regard to the first alleged misstatement where the witness is reported as saying, "I think it must be several thousand barrels a year," but now says in his affidavit that he said at that time "over a thousand barrels a year." The committee are clear in their recollection that the witness actually said "several thousand barrels a year," as reported by the stenographer in the printed testimony on page 400.

The committee are also clear in their recollection that the witness said, "yes, sir," in answer to the question as to whether gas was sold lower to public buildings than the Asylum.

With the above qualification the affidavit is admitted, and is as follows:

EXHIBIT No. 24.

STATE OF NEW YORK, }
City and county of New York. } *ss.:*

PUBLIUS V. ROGERS,

Being duly sworn, says:

That he is one of the managers of the New York State Lunatic Asylum; that on or about the 29th day of February, 1884, he was sworn and testified as a witness upon the examination and investigation into the affairs of the New York State Lunatic Asylum, by the committee of the Assemhly of the Legislature of the State of New York; that owing to his own ill health and that of his wife, he has been counseled by his medical adviser to go away from home, and deponent will probably be unable to again attend before the committee during the investigation, and therefore begs leave to submit to the committee this affidavit.

That deponent has read what purports to be his own evidence as printed by the committee, and desires to correct the same in following particulars, viz.:

On page 400: In answer to question, how much flour is used there monthly or annually? I am reported as saying, I think it must be *several* thousand barrels a year; whereas I said or intended to say *over a thousand barrels* a year.

Again on page 407. In answer to question, do you know, as a fact, that the price of gas was lower to public buildings and hotels, etc., than the Asylum? I am reported as saying, yes, sir; whereas I said no, sir; and now say, no, sir.

Again, I answered incorrectly in saying that Manager Winston brought the matter of purchase of supplies to the notice of the board in April, 1883.

I now recall the fact that at the April meeting, in assigning the new members of the board to places on committees, it was freely expressed by members of the board, that having a new member, especially conversant with the values of commodities entering largely into necessary use at the Asylum, that the vacancy in the committee of audit should be filled by appointing such new member, and thereupon Mr. Winston was appointed to a place on that committee, according to my best recollection, at the April meeting, 1883. No criticism upon the methods then followed in purchasing supplies for the Asylum was made by any one.

And deponent further says he has heard read a portion of what purports to be the printed testimony of Dwight D. Winston, which refers to the purchase by the Asylum authorities of supplies from Butler & Hamilton of Utica.

That this deponent was present at a regular meeting of the board

of managers of the New York State Lunatic Asylum held on the first Tuesday of December, 1883, and participated in its proceedings. That a short time prior to said meeting, said Winston on one occasion called upon deponent and called his attention to the subject of the purchase of groceries for the Asylum, whereupon deponent advised said Winston to bring the matter before the board at its meeting then near at hand; that at said meeting in December this deponent understood said Winston to speak in a general way that he thought there might be improvement in the ways of purchasing goods in the line of groceries; that Dr. Gray being called upon for an opinion stated in substance that he should be pleased to adopt any manner the board saw fit to advise in the way of purchasing supplies looking toward economy and saving of money for the Asylum.

A motion was then made and a resolution was then passed to refer the matter to the auditing committee to report upon the subject, Mr. Winston being a member of that committee.

That according to deponent's best recollection Mr. Winston did not produce at this meeting, nor at any other meeting of the board of managers, the bills of Butler & Hamilton referred to in his testimony, nor any other bills of Butler & Hamilton, nor did he refer to any items contained in any bills of Butler & Hamilton, nor did he refer to the prices of any items contained in any bills of Butler & Hamilton. That since the reference of the subject to said committee no report has been made so far as deponent's knowledge goes; and that from the time of such reference to the time said Winston gave his testimony, deponent has heard nothing from said Winston or any one else upon the subject.

P. V. ROGERS.

Subscribed and sworn to before me, this 25th day of March, 1884.

WM. M. THOMAS (12),
Notary Public, New York Co.

ERVIN SLASSON,

Sworn and examined, testified as follows:

By Mr. HASKELL:

Q. Where do you live and what is your business?

A. Whitestown, I am a brickmaker; I work by the month for Williams & Co.

Q. What is your age?

A. Forty-two.

Q. Is this brick-yard located at Whitestown?

A. Yes, sir; it is a mile from the village, close to the Mohawk river.

Q. Do you recollect the occurrence of a man coming into the brick-yard naked?

A. Yes, sir.

Q. You may state what there was to that occurrence, what he said and what there was of it?

A. What the naked man said?

Q. Yes.

A. He came there naked; he wanted to know if I had an old shirt and a pair of pants for him; we told him yes, and we went in and got them and fetched them out, and he put them on; when he got them on, two young fellows —

Q. Wait a minute, who was with you, if any one?

A. My brother William.

Q. Go on?

A. And he got them on, and these two fellows came and peeked through the shed and see him, and they came on a dead run; then one fellow grabbed him and tried to throw him; he worked quite a while before he could get him down; this man never offered to wrestle with him, or hit him, or any thing; and after a while he throwed him, and when he throwed him he jumped right in his stomach with both his knees, just as hard as he could jump; then this fellow could not get up; he told him to get up, and he said he could not, and he was as white as a sheet, so they got hold under each arm and raised him up and his legs were bent right up, and he was as white as a sheet; bent up in this way (indicating), they were doubled right up, and that is the way they took him off.

Q. Did you or your brother say any thing to these two men about the way they were treating this man?

A. Yes, my brother told them not to hurt him, but they did not make no answer.

Q. Did this man who came there naked, tell you he was from the Asylum or any thing of that kind?

A. He did not until after he got the shirt, and then he said he

had been at the Asylum, and that they had abused him terribly

Q. Never mind that — he said he was from the Asylum?

A. Yes.

By Mr. Rice:

Q. Who were these men that took him away, do you know?

A. No, sir.

Q. Have you seen them since?

A. No, sir.

Q. Did you learn about that time from any other source that this man was an escaped lunatic?

A. After that, I did.

Q. How soon after that?

A. It was about ten or fifteen minutes.

Q. Who told you that?

A. There was a man came up on a horse, a gentleman, I don't know his name; I don't know who he was.

Cross-examination by Mr. Goodwin:

Q. When was this affair?

A. It was last summer.

Q. What time in the summer?

A. I could not tell, about the middle.

Q. Was it in June, July or August?

A. I could not tell for certain.

Q. You can't tell which of those months?

A. No, sir.

Q. Was it in the newspapers?

A. Yes, sir; it was in the papers after that.

Q. What papers was it published in?

A. The *Daily Press*, I believe.

Q. Any other papers?

A. Not that I know of.

Q. Do you know Dr. Brush?

A. No, sir.

Q. This gentleman here (indicating Dr. Brush)?

A. I never saw him, that is, not as I know of.

Q. Have you not seen him at the Asylum?

A. No, sir.

By Dr. Brush:

Q. Haven't you drawn brick to the Asylum?

A. No, sir.

Q. Didn't you see me at the brick-yard when I went to look over some brick with Mr. Graham, the engineer?

A. I believe I did too.

Q. You knew I was from the Asylum.

A. Yes, sir.

Q. Did you say any thing to Mr. Graham, or to me, about this matter?

A. Not as I recollect.

Q. It was after this matter occurred that you saw me at the brick-yard?

A. Yes, sir.

Q. And you say there was a man came there on horse-back?

A. Yes, sir.

Q. Did you say any thing to him in regard to the matter?

A. No, sir, I spoke to him; I told him they had catched him, and he started up then; he wanted to know what man catched him, and I told him a couple of young gentlemen that worked at the Asylum.

DR. E. N. BRUSH,

Recalled.

By Mr. Goodwin:

Q. Have you heard the testimony of this last witness?

A. Yes, sir.

Q. Do you know any thing about the case referred to by him?

A. I never knew any thing about it until the newspaper statement was published in the press since this investigation commenced.

Q. Did you make any investigation in reference to it?

A. I did.

Q. What was the result?

A. I examined the only remaining attendant who is in the Asylum he denied any such assertion; I also examined James Mahar who went up on horse back; he said that at the time he saw two or three men gathered around in a group, talking rather excitingly, and another man spoke to him and said, "they have caught the patient, or got the patient, I may be mistaken about that, the other man said to him, those two men are saying this patient was abused," but, "I saw the whole proceeding, and there was no abuse."

Q. Do you know the name of that man?

A. No, sir, I asked him to make inquiry into the matter and find out who it was.

Q. What was the name of the patient?

A. I am not sure of his first name, his last name is C., I think it is B. C., it was a case of chronic insanity, a criminal sent from Seneca Co., — I cannot recollect what he was doing at the time he escaped, but just before that he was employed in the kitchen; the name of the attendant remaining there now is David Linn.

Q. Did you become satisfied that there was no blame to be attached to the attendants in that matter?

A. As far as my inquiry could then go.

By. Mr. HASKELL:

Q. Did you go to see these men at the brick yard upon whose authority this piece was published in the paper?

A. No, sir, I did not.

Q. Did you consider that you were making a fair examination without doing that?

A. I inferred — I thought the facts would be proven; that the men would be called as witnesses, and that the matter would be investigated anyway; the article said that the committee ought to call these two men, and I suppose the committee would call them; we made some investigation at the Asylum.

Q. And the only reason that you did not go to see these men in the brick yard was that you thought the committee would call them?

A. Yes, sir.

Q. And you would have examined them if it had not been for that?

A. Yes, sir; I don't know that I should have driven up immediately, but having business transactions with the firm for which these men worked, I should have asked them at the first opportunity.

Q. But you do say that you made up your mind there was nothing in it without going to examine them?

A. I made up my mind that their story was exagerated at least; the statement made to me was that the man went to the shed and had some brick-bats in his hand.

Q. Who was that made by?

A. Either Linn or Mahar; I don't recollect which it was.

By Mr. RICE:

Q. Is that patient now in the Asylum?

A. Yes, sir, and he says there was nothing in it; I am glad you called my attention to that.

Q. What is his name?

A. C. I asked him; he says he was not abused.

Q. What class of patients does he belong to, disturbed or otherwise?

A. He spoke to you; he is on the tenth ward; he spoke to you or Mr. Haskell, he asked about being shaved.

Q. Is he a man who talks rationally upon any subjects?

A. Not very; he is a pretty insane man, very fully controlled by delusions.

By Mr. HASKELL:

Q. Would he know whether he was hurt at that time or not?

A. I think so.

Q. So as to have a recollection about it now?

A. I think so; I asked him about going into the canal, he recollected that; he stripped off his clothes, and the brick yard is beyond the canal.

By Mr. Goodwin:

Q. He did not escape from the Asylum naked?

A. No, sir; he threw off his clothes and swam the canal, and he did not take them over with him it appears.

Q. Do you know Miss Burns?

A. Yes, sir.

Q. How long have you known her?

A. Ever since I became connected with the Asylum; more intimately during the past three years; I have been there six years.

Q. What do you say of her as an attendent?

A. I regard her as an excellent attendant?

Q. What kind of ward is she over?

A. She has a ward of very trying patients, most of them with fixed delusions; many of them are patients who scold, either at each other, the attendants, or at immaginary persons about them; they are controlled by hallucinations of hearing and sight; some few patients are subject to paroxysms and frenzy.

Q. Do you regard her as a patient, kind and humane woman?

A. As far as my observation has gone (and I have watched her with considerable care), I do.

Q. Has she the reputation there among attendants or patients of being severe or cruel?

A. Patients on her ward, as on many wards make complaints of all sorts; I have never had to investigate any but what I found — or in which I found that she had been in the wrong.

Q. Have there been more complaints made of her than of other, or all of the other attendants in the Asylum, or than most of them?

A. No, sir.

Q. Now, doctor, in regard to medicines sent to the wards, please explain about that, to the committee?

A. We have an apothecary who puts up all the medicines.

Q. Upon the prescriptions of the physician?

A. Yes, sir; these medicines are sent to the wards, with very exceptional instances, in single doses; a patient, for instance, who takes medicine three times a day, has her cup, or his cup, with the name plainly marked on it so that it cannot be washed off, and that cup is sent up to the ward three or four times a day, depending on the number of times the patient takes the medicine; the cups for each department are collected together and placed on what is termed a medicine tray; these trays are at stated intervals sent to the departments with the single doses of medicine in each cup for the various patients taking medicine; the supervisors takes charge of the tray and carries it through her department, and gives the medicine

to the various patients; sometimes in cases of acute attacks of diarrhœa, or a case of pneumonia or a case of cold, where medicine has to be administered every two or three hours, a small bottle of medicine is sent up with the name of the patient marked plainly on it, and the dose, and that is given to the supervisors or head attendant of the ward; that is only done in exceptional cases.

Q. Is a large bottle of medicine ever given to an attendant or supervisor to give out?

A. No, sir; I do not think any bottle larger than would hold six or eight ounces would ever be sent on to the ward.

Q. Now, in reference to cough medicine, or any thing like that?

A. Perhaps a bottle containing about two dozen doses would be sent.

Q. How are the patients fed who will not eat?

A. They are fed by the physicians in case they resist taking food at all; sometimes patients will eat if the food is placed to their mouth — will feed themselves; in those cases an attendant on the ward is directed and shown how to do it; all patients who resist taking the food are fed with the stomach tube, as a rule; sometimes we get along without using the stomach tube.

Q. Now, doctor, are attendants ever allowed to use the stomach tube?

A. Never.

Q. And have you ever known where they have used it?

A. No, sir.

Q. Have you examined at my request the testimony of Giles Penny?

A. I have examined it.

Q. Please look at his case —

Mr. Rice — One moment, please, I want to ask the doctor a question or two.

By Mr. Rice:

Q. What quantities of chloral are annually used in the institution?

A. I could not say; I very rarely see the drug bill.

Q. Can you approximate it?

A. I would not care to even approximate it.

Q. For what purposes do you use it?

A. It is used as a hypnotic or sleep-producing remedy.

Q. Explain to what extent it is used as a sleep-producing remedy?

A. I think that perhaps to-day or to-night, perhaps one-fifth of our patients will take a dose of chloral, varying from ten grains to twenty grains.

Q. Then there are one hundred and twenty people in the institution who will to-night take chloral?

A. Somewhere in that neighborhood.

Q. What is the effect of chloral upon the system?

A. It produces sleep with as little disturbance of the system as any drug known.

Q. What is the general effect upon the system where it is administered regularly every night?

A. I do not think it has any deleterious effect; sometimes it produces headache, and occasionally it is said by some authors to produce a peculiar condition of the nails — upon the matrix of the nails.

Q. Does it affect the nerves any?

A. Not that I know of.

Q. Are there patients in the institution to whom it is administered every night?

A. Yes, sir; for a time, but not continuously.

Q. For how long a period?

A. It would depend upon how long they were sleepless — six weeks, two months, or three months.

Q. Do you think that the general health or the system of the patient does not suffer from that administration of chloral?

A. I have watched it very carefully and I never saw any deleterious effects.

Q. What is chloral?

A. It is a product produced by the distillation of alcohol with chlorine; I cannot give the scientific process.

Q. Then it is alcohol and chlorine, is it?

A. That would be stating it pretty broadly; its exact chemical composition I did know for I have seen it made, but I do not now recall.

Q. What is chlorine?

A. It is a gas; one of the elements.

Q. Eliminated from what?

A. It is eilminated from the chlorates — the chlorate of potassium, chlorate of lime; it is found natural in certain mineral waters and gas wells.

By Mr. Goodwin (resuming):

Q. Have you examined the testimony of Giles A. Penney?

A. Yes.

Q. Now, I wish you would state to the committee in regard to that?

A. I have examined it and made several notes, which I have with me, and I can refer to them as I go along; the first note is in reference to his testimony, on page 181, where he says he was on the seventh ward two or three weeks; he entered the seventh ward on the 21st February, and was transferred to the sixth ward on the 26th, so that he was only five days. On page 181 he was asked: "Q. How long did you remain on the sixth ward? A. I was there two or three weeks." The fact is that he was transferred from the sixth ward, March 11, to the third ward; on March 25 he was transferred to the second ward; on the 5th of April he was transferred to No. 8. On page 182 he details his transfer from ward two to No. 8, and

says that he was carried and pushed along by attendants who would not allow him to walk, and who took him along side passages. Mr. Penny was apparently convalescing favorably when, on the 3d of April, he was visited by his wife (on the second ward), who complained to patients of how badly things were going on in his absence.

Mr. HASKELL — Are you testifying from recollection, or from your minutes?

A. From the records of the case.

Mr. HASKELL — And not from recollection?

A. No, sir; and to whom the patient said he had appeared as well as possible, and had eaten every thing he could, although every thing tasted like a chip, in order to fool the doctors. On the following day he was emotional, asking to be sent home, crying, moaning and groaning and wringing his hands, much disturbed by his wife's injudicious conversation. On the night of the 5th he became disturbed; was up and about and noisy; not in his room asleep as he says; he was transferred by the direction of the physicians to the eighth ward; there are no side passages and no roundabout way to the eighth ward, that being in the story above the second ward, but over the third ward, which joins the second. The night nurses made report the following morning that Mr. Penny was noisy nearly the entire night. On page 184 he says he states that he had seen patients strapped in the chair until they were "all dark," and could hardly breathe. The statement that a patient can be strapped in a chair until he is black or "all dark," and could hardly breathe, is utterly without foundation. The strap passes around the abdomen, and no amount of pressure in that locality with a strap would make a patient turn black in the face or would materially interfere with his breathing. The statement on the same page in regard to the camisole being so constructed that the hands were so drawn that they pressed hard against the stomach, has been contradicted by several witnesses, as well as the statement on the same page in reference to the buckle making the back sore as I answered in my previous testimony.

By Mr. GOODWIN:

Q. Please state it again?

A. That is not so; there is a space six or eight inches between the place where the camisole is fastened in front and the hands.

By Mr. HASKELL:

Q. In regard to this strap, does it cross behind when it is put round a person's body, and then is it put through and fastened?

A. No, sir; it is placed right round and the chair and the body is included in the same circle.

Q. And it does not cross entirely behind?

A. No, sir.

Q. Never?

A. I have never seen it so.

Q. Do you recollect the circumstance of our last visit to the institution?

A. Yes, sir.

Q. Do you recollect the case of a woman on a very disturbed ward, who was strapped with a strap crossing behind her body, completely encircling it, and then passed through the chair and fastened?

A. Yes, sir; I remember that case; I saw you looking at it at the time.

Q. Then you have seen it in the institution?

A. No, sir; you asked me if I had seen it passed that way.

Q. Are you answering all my questions in the same technical spirit that you answered my last question?

A. I am answering the questions as I understand them; if you will let me explain I will set myself clear and you too.

Q. You may give any other explanation you desire?

A. I would like the question read.

(Question read by the stenographer).

A. I answered the question as I understood it.

Q. Is that all you wish to state?

A. No, sir; the case to which you refer I saw, and I observed you looking at that patient; I noticed it myself, and I asked the attendant if she had strapped the patient in that way, she said "no, you saw that same thing happen yesterday," and I did see it happen; the patient got on the arm of the chair and twisted herself round, and if you had examined it you would have found it was done in that way.

Q. Would not the patient have to turn a complete somersault?

A. Yes, sir; the day before it took Dr. Quinn and myself half an hour to get the strap into place again after the patient had twisted it in that way, and it was done in our presence.

The CHAIRMAN — You don't mean she turned a somersault?

A. No, sir; she turned right over like that (illustrating) by putting her feet over the back of the chair.

Q. She would have to bring the center of her back up to the strap?

A. Of course she would have to make more of a somersault than I did just now.

Q. Did the attendant tell you how long before we came in that occurrence had happened?

A. I did not ask her, no, sir.

Q. Do you recollect that you found the strap so tight around the body of the patient that it was with difficulty you could get your finger between the body of the patient and the strap?

A. I do not recollect that I examined.

Q. Do you not recollect that you called the attendant there and made the attendant loosen the strap as much as six inches?

A. I recollect loosening the strap; and not only loosening it but putting it round in the proper manner again.

Q. Do you swear that you put it in the proper manner?

A. Yes, or that the attendant did.

Q. Did you yourself take the buckle and unbuckle it?

A. No, sir; I don't recollect that I did.

Q. Do you recollect that you did not?

A. I know I did not undo the buckle, for I did not have a key to the lock.

Q. Did you call the attendant to do that, and take the key from her?

A. No, sir.

Q. And did you not leave the strap crossed behind the patient?

A. No, sir, I don't recollect it.

Q. Will you swear you did not?

A. I won't swear one way or the other, because I don't recollect.

By Mr. Goodwin (resuming):

Q. Now go on with the Penny case, doctor?

A. I was speaking about his statements as to the restraint; on page 185 he says that a patient with a camisole on could not turn over in the covered bed; this is also without foundation in fact. The statement on page 185 in regard to his remaining on the eighth ward two or three weeks is sufficiently indicative of the incorrectness of his memory; he was on the eighth ward from April 6 to June 5, two months lacking a day. Page 186, he states that the faucets were all taken off the water-pipes; this is another indication of the patient's misapprehension and mental disturbance; patients have water at their meals and as often during the day as they desire; that statement is not true.

Mr. Haskell — And was not true at that time?

A. It has not been true at any time since I have been in the institution. On page 187, the statement that he only saw the physician once while he was on the eighth ward is entirely contrary to fact. He was seen at least twice a day by Dr. Brush or Dr. Josselyn, or both, and sometimes oftener. The same is true of the statement on page 187 that he did not see Dr. Gray while on the ward. His statement, indeed, is contradicted by his own testimony on the same page, where he says that he saw the doctor on the eighth ward, the second Sunday after he was put there. The patient was not on the eighth ward the second Sunday after his admission, nor for several Sundays after admission. Further on he contradicts his statement in regard to not having seen a physician while on the eighth ward, except once when he saw Dr. Josselyn, for he says on the same page, "I saw Dr. Brush once a week; perhaps oftener than that." The statement on page 187, that he was not allowed to take the camisole off, is directly contrary to fact. The camisole was taken off whenever Mr. Penny's condition was such as to allow it, and is further proven untrue by the records, which show that but for a short time was he continuously in a camisole. The statement that he went to

the fourth ward in June and remained until August is not true. He was on the fourth ward from the 5th of June until the 6th of July. On page 188 the statement that he was kept in restraint all the time is answered, as well as other allegations of lon-gcontinued restraint, by the following from the records. The statement at the bottom of page 188 that no one is allowed to speak on No. 4 can be contradicted by the evidence of the committee's own senses. The statement on page 189 that patient's lower jaw and teeth were injured by the boots of attendants is easily contradicted; Mr. Penny's injuries to his jaw and face were self-inflicted, and nearly all done in the presence of Dr. Brush. The patient states on page 189 that he was pounded senseless, and when he came to himself Drs. Brush and Josselyn were standing over him; they put a bandage on his head and flax seed poultice, etc. The injury was inflicted on the 9th of June; the bandage was not applied until the 20th, when, for the first time, the patient's condition was such as to allow an examination of the interior of the mouth, which revealed a fracture of the coronoid process of right side of lower jaw on the 9th of July, one month after the injury, while on the seventh ward, the roots of several teeth were removed; the crowns of some of these teeth were broken off at the time the injury was inflicted by Mr. Penny upon himself, and some of them were old roots. On page 189, patient says that from ward four, he was removed to ward eight; on the 8th of July he was removed from the fourth ward to the seventh ward; he was not removed again to the eighth ward during his entire residence in the institution; he states that he did not remain on the ward to which he was removed from four over night; "I was taken to No. 5;" he says he was taken to No. 5 on the 15th day of July, nine days after his removal from the fourth ward; he further states, page 190, that he remained on the fifth ward nearly until he went home, remaining there several months; that he went from ward No. 5 to ward No. 3, and thence to No. 1, from which ward he went home; the facts are that he remained on ward five from July 15, to October 20, when he was transferred to No. 6, where he remained until December 2, when he was again transferred to No. 7, where, after remaining nine days, he went back to No. 5, and not until the 3d of February, 1881, did he go from ward five to number three; on the ninth of March he was transferred from No. 3 to No. 1, and on the 30th of April, 1881, he was discharged; the patient states, on page 191, that he did not see his friends in eleven months after the injudicious conversation of his wife on the 3d of April, 1880 (before which date he was visited several times) which resulted in the patient's active disturbance; he was seen on May 1st, and in August, and not again till on September 29, after which he was visited at frequent intervals until he went home; his friends were only prevented from seeing him on account of his condition, and the effect upon him of the injudicious visit of his wife.

By Mr. Rice :

Q. How did you find out what his wife had stated to him about the bad way that business was going at home, etc. ?

A. From Mr. Penny himself; and she stated to me the remarks he made about eating and about it tasting like chips, etc. ?

Q. What do you know of the statement of his wife to him, apart from what he told you himself ?

A. That is all I know it from ; I was not present at the interview.

By Mr. Goodwin :

Q. Is that all about Giles Penney that you wish to state ?

A. I will call attention as to the restraint that he was placed under during his stay in the Asylum. He was removed to the eighth ward on the night of April 5th, 1880, previous to which time he wore no restraint. During a portion of April 6th, he was restrained by a waist belt, by order of Dr. Brush ; also a portion of April 7th. On April 9th, he was restrained by a camisole by order of Dr. Brush (not Dr. Josselyn, as he states). On April 10th, restrained by a waist belt, order of Dr. Josselyn. On April 14th, by a camisole, order of Dr. Josselyn. April 21st, by a waist belt; also for a short time by a camisole, order of Dr. Josselyn. He was not again restrained till June 4th, when for a portion of the day he wore a camisole. June 5th, he wore a camisole, order of Dr. Brush. June 6th, by belt and wristlets, order of Dr. Brush ; also 7th and 8th. On June 9th, waist belt and by camisole at night ; 10th and 11th, camisole day and night ; 13th, 14th, 15th, 16th, 17th, same; 18th, by wristlets day and night; 19th, wristlets part of day. No subsequent restraint.

Mr. Goodwin — I now offer in evidence a transcript from the case book and records of the Asylum of the case of Giles A. Penney.

(Transcript admitted in evidence and marked "Exhibit No. 28, J. H." See Appendix.)

Q. Now, doctor, please turn to the testimony of Mr. Weir ?

A. I have examined Mr. Weir's testimony carefully.

Q. Look at page 342 of the printed record ; do you consider an attendant good authority as to when restraint is necessary, and when it should be removed ?

A. No, sir ; I do not.

Q. Why not ?

A. Because sometimes a lazy attendant would place a patient in restraint in order to give themselves rest from having the supervision of that patient ; all authorities in the conducting of asylums agree that restraint should only be applied the same as medicine ; it is a portion of the treatment of the patient, and its prescription should be by physicians ; whenever an emergency arises, so that restraint becomes necessary, it should be reported at once ; many authorities deny the fact that the restraint is ever necessary and write strongly against it.

Q. Are vacancies long permitted on the fourth ward?

A. No, sir; whenever a vacancy occurs from resignation or any other cause, it is filled at once — the attendants to supply temporary vacancies being drawn from quieter wards, where they could be more properly spared.

Q. Are patients kept locked up in the winter months?

A. No, sir; whenever the weather permits and the condition of the yard is such that they can be, they are out of doors; the less disturbed patients and all quiet patients can go out walking in parties.

Q. How is that matter affected by the weather?

A. If it was excessively cold, or if there was a great deal of snow on the ground and it had not been cleaned up, they would not be sent out in the yard.

Q. How is it in reference to walking?

A. Walking parties would be sent out, even in cold weather; that is, except the patients on the disturbed wards who would attempt to denude themselves, throw off their clothing, of course in cold weather, they could not be sent out.

Q. Now take the case of G. W. B. on pages 347–8–9, are you familiar with that case?

A. I am.

Q. Please state what there is of that case?

A. The case of G. W. B. apparently G. W. B——r, of Fulton county, was carefully inquired into; he was a patient who was suicidal and his statements were incoherent and contradictory and arose from delusions; he stated for instance, that he had at this time three feet and two bodies and that the body which he inhabited was not the body of G. W. Bowler but somebody else; he threw himself down against the chairs and frequently had to be placed in restraint to prevent self-injury; a careful examination of the facts failed to reveal any evidence of the truth of his statements; the attendant, Mr. Quine, who, according to Mr. Weir, gave him the statement, was discharged for neglect and untruthfulness subsequently and his statements in regard to the matter of G. W. B. were contradictory; for instance he stated that he saw the affray occurring on a portion of the ward while he was standing in the door of the bath-room in another portion of the ward where he could not by any possibility have seen such an occurrence; Mr. Sage was carefully examined both by Dr. Gray and by one of the managers, as were also his associate attendants and completely exonerated himself.

Q. Do you know what manager, if any, inquired into that case?

A. My recollection is that it was General McQuade; and Dr Bloomer also examined very carefully into the matter.

Q. General McQuade is now on the high seas, as you understand

A. He is, as I understand it.

Q. He is not in Utica, or in the State?

A. No, sir.

By Mr. RICE:

Q. Did you see this patient, G. W. B., yourself?

A. Yes, sir.

Q. Did you see the bruises on his person, from his hips up, when you examined him?

A. I did not examine him at that time as to bruises, etc.; I mean that I had seen him and knew him, and knew about his case; that is what I mean.

Q. And you did not make any examination of his body?

A. No, sir; Dr. Blumer and Dr. Josselyn.

Q. Did you not say you made an examination of the case?

A. Yes, I examined into it.

Q. Did you say that there was an investigation into the matter?

A. Yes, sir.

Q. And the patient was acquitted?

A. Yes, sir.

Q. Do you know what investigation was made?

A. I saw it during its progress; Dr. Gray examined Mr. Sage and examined other attendants on the ward, and Dr. Blumer went on to the ward and examined into it.

Q. So that the determination of the case was upon the testimony of attendants?

A. I don't think all of it was; I think some patients were examined; there were patients on the ward competent to give evidence.

Q. Do you know of any case where an investigation into the injury of a patient resulted in the discharge of an attendant?

A. Yes, sir; I have; I detailed some in my first examination.

By Mr. GOODWIN:

Q. You say you detailed some in your last examination?

A. Yes; I detailed several at Albany in my examination.

Q. Can you mention any more than those you gave in your last examination?

A. I recollect one or two instances, but cannot now mention them specifically.

Q. On page 351, Mr. Weir states that he expected to be discharged for making reports. what have you to say about that?

A. I can only say that Mr. Weir did make reports, and not only made reports but went before the committee in April, 1883, and detailed some matters there, and he remained in the employ of the institution until a year thereafter; Mr. Weir has been told by myself, as well as other attendants have been told, that persons who saw injuries inflicted on patients and did not report them, but tried to conceal such matters, that they would be held equally guilty with the person actually committing the offense; I very distinctly remember an expression that I have made in that connection; I have told them that I should look upon them in the light of receivers of stolen goods if they did not report.

By Mr. HASKELL:

Q. What do you say right there in regard to what action was taken by the authorities in regard to the report of Mr. Weir that he states to have been made?

Mr. GOODWIN — I will ask him about that.

By Mr. GOODWIN:

Q. Take the case of T. S., on page 351, Mr. Weir names that as a case where the physician seemed to doubt the report he made?

A. If I remember right that refers to a patient named T —— e S —— r; he was an epileptic.

Q. Do you know whether he was badly injured or not?

A. I know that all these cases were looked into; Mr. Weir made this general report at this time; Mr. S——r's case I have not so clear a recollection of, except that I know it was examined into.

Q. By whom was it examined into?

A. By the same parties that examined into the others.

Q. And you cannot say, of your own knowledge, any thing in reference to that any further than you have said?

A. No, sir.

Q. Take the case mentioned by Mr. Weir in his testimony of C. O. G., page 352; what is there to that?

A. In that case I heard part of his examination; he was examined himself — it was in my presence — by Dr. Bloomer; other persons were also examined in regard to the same matter; Mr. G. said that he was not injured; he said that he attacked Mr. Sage and that no more violence was used than was necessary to restrain him.

Q. Is that injury which Mr. Weir refers to recorded?

A. I am not positive about that.

Q. Look at page 360, Mr. Weir's testimony, at the case —

The WITNESS — You have missed one on page 358.

Q. Oh, yes; the case of H. C.; what about that case?

A. That refers to a patient who was one of the most violent men in the institution for a long time; the injury which Mr. Weir refers to is recorded and has been transcribed in these records in this investigation in the injury books; it is under date of November 2, 1882.

By Mr. HASKELL:

Q. Is that all you know about the case, by the record of the injury?

A. The record shows that there was an investigation and who was examined; the man had been quite disturbed during the night and was transferred; the only reason I know is that Weir says he was transferred from his ward to the twelfth ward, and that the next day he was found with a black eye, and was transferred from the fourth ward to the twelfth ward on the first of November, and on the second this occurred; that is shown in the record.

Q. So that Mr. Weir is correct?

A. Yes, sir; as to the transfer and as to the injury.

By Mr. Goodwin (resuming):

Q. Doctor, at page 360, "Q. You say you reported to Dr. Josselyn as to injuries received by a patient, and that he, Dr. Josselyn' appeared displeased at your reports? A. I should take it that way by his actions." What was Dr. Josselyn's character as to strictness in demanding reports?

A. He was very strict indeed; sometimes, I thought, perhaps unnecessarily severe at times in his strictness.

By Mr. Haskell:

Q. Strict with whom?

A. To the attendants.

Q. Describe a little more fully what you mean by "severe"?

A. Well, it is difficult to describe it more clearly except to say that he was very positive, sometimes stern, and even on trivial matters.

Q. As to finding a good deal of fault with the attendants do you mean?

A. I don't know as to finding fault, but being very strict as to the observance of the last letter of the law.

By Mr. Goodwin (resuming):

Q. At page 361, the case of Mr. M. referred to by Weir, do you know any thing about that case?

A. I do not unless it refers to a patient named McA.

Q. If it does refer to him, then what?

A. When McA. went away, I questioned him about the matter; he was well; he was a patient who tried to escape three times from the institution, and he succeeded once in getting as far as Whitestown and was overtaken by some attendants; that was in the night; I talked with him about the matters of his escape, and subsequently about the charge he made of injury; he said he had no unkind feelings against any one; that he was very violent at times and made attacks upon attendants, and he presumed that if he was hurt (and he knew he was hurt) that it was done in struggling; he had no recollection of any attacks made by any one upon him; there was some investigation made at the time, and when he went away and I was having this conversation with him about his escaping, I recollected about his injury and I asked him about that; I think Dr. Josselyn investigated it at the time; I only knew from what he told me.

Q. Was anybody discharged in connection with that case?

A. No, sir.

Q. What did Dr. Josselyn tell you?

A. He told me that he found no evidence of any undue violence

on the part of Mr. Sage or any other attendants on the ward; McA. was a man who stood six feet four in his stockings, one of the tallest men we had in the institution.

Q. On page 362, Mr. Weir speaks about a patient without giving any name, he would not give the name, but spoke of him as a patient — do you know to whom he refers?

A. From an examination of the records, I am of the opinion that it refers to a patient named P., because he was the only patient on the ward during the months of November and December or January (and this was in January), who was in bed on account of an injury to his leg; Mr. P. was a patient and the history of his case shows, and the history of this incident shows, that he was a patient with hallucinations of hearing; he was sitting quietly in the recess of the ward with some other patients and one or two attendants; he suddenly made a violent onslaught on one of the patients; in the struggle an attendant and Mr. P. went to the floor — an attendant who came to the relief of the patient, I mean; on the second day following, Mr. P. complained of pain in his ankle and he was ordered to bed; there was a slight sprain, but he was in bed a week instead of several weeks; he gave his own account of the affair which corroborated the account given by the attendants; he further stated to me that the reason of the onslaught of the patient was that they were all calling him names, and that this man was one of them.

Q. When was Sage discharged from the institution?

A. Thirty first of December, if I recollect right.

By Mr. Haskell:

Q. Do you think it was unwise to keep him so long in the institution as he was kept, after these charges were made against him?

A. The charges were as carefully investigated as they could be; they were not proven, and there was no reason to discharge the man; there was some evidence of some feeling between him and Weir.

Q. Do you know as to whether there was a general belief on the part of attendants on Weir's ward that Mr. Sage had inflicted these injuries?

A. I think they had the same belief that Mr. Weir had.

Q. And do you not think that keeping an attendant in the institution for months after he had been charged with injuring patients — which charges were believed by his brother attendants — would have a bad effect upon the attendants — a demoralizing effect upon the other attendants of the institution?

A. That would depend very largely upon how large a number of attendants believed the matter; Mr. Sage was within a short time of this given charge of a quiet ward; in charge of patients who went out to work about the grounds, and about the dairies.

Q. Please try to answer my question?

A. I am getting at it, I shall get at it in time.

Q. Do you not think that keeping an attendant in the institution for months after he had been charged with injuring patients, which charges were believed by his brother attendants—would have a bad effect upon the attendants — a demoralizing effect — upon the other attendants of the institution?

A. Under those circumstances, in view of the fact that the matter was thoroughly investigated, and nearly all the attendants in the house knew it was investigated, I do not think it would have a demoralizing influence.

Q. Was the transfer of Sage to a quieter ward a kind of promotion?

A. It was less hard work to do; no promotion in wages.

Q. Was it considered a more desirable place?

A. Yes, sir.

Q. Why did he leave the institution?

A. He was discharged for being off his ward without permission.

Q So that after he was charged with these offenses, he was rather rewarded than punished?

A. No, sir; I cannot say that he was; he was placed there because there was a vacancy, and some one had to be appointed to fill it; he was considered the best man, but he was not put there as a matter of reward, at all.

By Mr. Goodwin (resuming):

Q. I now call your attention to Miss Lathrop's testimony at page 520. "During the six weeks you were on the second ward, which of the physicians had charge of the female department? A. Dr. Brush and Dr. Blumer; they visited the ward almost every day." What were your habits in that regard, doctor.?

A. One or both of us visited the wards twice a day, as a rule, and frequently oftener.

Q. She speaks on page 521, of the sick being neglected; how is it in that respect, were they neglected?

A. The sick were not neglected; they received all the care and attention they could possibly need; and, speaking from experience, more care and attention than the sick receive in most general hospitals.

Q. How is it in reference to messages brought by the supervisors in reference to small, minor ailments of patients?

A. The supervisors are in the office, when we are not on the wards, several times during the day, referring to us the complaints of patients — such as toothache, earache, stomach ache, bowel complaint, and various things of that kind, and far into the night.

Q. At page 522, Miss Lathrop speaks of the use of impure virus in vaccinating patients, what is there to that?

A. The virus which was used was procured from a vaccine farm near Boston, I vaccinated my own wife with it, and most all of the officers in the institution, nearly, including the matron, and all the attendants — there were some sore arms, that is, some arms that were

excessively sore, but in no greater proportion than I have seen in private practice, and I have done a good deal of vaccinating.

Q. Did any patient have an arm disabled as a result?

A. No, sir: I think that in justice to Miss Lathrop, I ought to explain that the case that she probably had in mind, and to whom she refers, is a patient who had an attack of erysipelas and her hand and arm were sore for some time after from that, but she entirely recovered the use of it before she left the institution.

By Mr. HASKELL:

Q. Was that following vaccination?

A. No, sir; but I presume Miss Lathrop got it mixed; the erysipelas did not supervene from the vaccination.

Q. But they followed one another in point of time?

A. Yes, sir.

Q. And followed one another closely, did they not?

A. Well, somewhat closely, but not to have one the cause or the result of the other.

By Mr. GOODWIN (resuming):

Q. Can erysipelas be the result?

A. Well, any sore can produce an erysipelitous inflammation; a pin scratch may do it.

Q. On page 523, she speaks of patients being removed from one ward to another as a punishment; is that done?

A. No, sir; patients are removed from ward to ward as their condition demands; a patient on number one ward where Miss Lathrop was, who in most respects would be quiet and self content, but who, from the fact that she retailed to the least extent her delusions, so that she disturbed the other patients on the ward, would be removed from the ward, not as a punishment of the patient, but for the good of the majority of the patients; or a patient whose habits were disgusting at the table — some semi-recovered lady, she might take her removal as a punishment, when in fact it was for her benefit and that of the patients on the ward.

Q. Page 523 of Miss Lathrop's testimony, who was the patient who was moved from number one to number seven?

A. There was a patient removed from number one to number seven, because of periodic mania and after one of her paroxysms — after putting up with her for two or three days on the first ward, she was removed; she did appear somewhat hysterical, I admit; she became violent and was removed to the seventh ward and remained there some weeks; she was not a patient who had hysteria though; she had paroxysmal mania.

Q. I call your attention to page 524 of Miss Lathrop's testimony, as to what she says about medicines given as a punishment; are they ever given as a punishment?

A. No, sir; if you will allow me to say here, that I notice in

reading over this testimony and that of other patients, I find that they state that immediately after talking with the doctor, when they became a little excited, that medicine was sent as a punishment to them; the doctor would see them and if they required medicine he would send it, sometimes; that was the purpose of his seeing them; but they thought the interview with the doctor and their talking with him brought upon them the punishment of taking medicine.

Q. Look at page 527 of her testimony, about the medicine; do the patients go and find their names on the medicines and take them?

A. No, sir; the medicine is handed out to them by the supervisor; it would not be safe to let them go and help themselves to the medicine cups.

Q. And they take it from the supervisor?

A. Yes, sir; either from the supervisor's hands or from the hands of the attendant whom she details to do it for her.

Q. See what she says at page 527 about attendants measuring out the medicine, how is it as to that?

A. That would be answered by what I have stated before; there is a bottle of medicine sent up, the doses are put on the bottle, and the name is marked on it, for instance for some inter-current troubles, like diarrhœa or cold, or something of that kind.

Q. She says about some English physician taking your place — what English physician took your place?

A. It is true that a physician did take my place while I was gone to England, but he was an American; Dr. Spencer, of the New York Hospital, a grandson of Joshua A. Spencer.

Q. Have you read the symptoms described and detailed by Miss Lathrop, that she felt after she had been ravished?

A. Yes, sir.

Q. Do they correspond with any symptoms detailed by her, experienced before coming to the Asylum?

A. They do.

Q In what respect?

A. The symptoms of suffocation, trembling of the limbs, pain running through the hips, etc., etc.; they are detailed here in the transcript of her case (see Exhibit No. 29 in Appendix); she said that she had trembling of the limbs, a feeling of suffocation, desire for air, etc., etc.; this is a copy of a letter; she was admitted on the nineteenth October, and this is a copy of a letter written by her on the twenty-fifth October, detailing her symptoms while at home, which made her suspicious that she had been poisoned.

Q. Now look at page 533; she speaks about the beds, fastened to the floors on some ward, etc.; are there any beds in the Asylum fastened to the floors, on what are called the "back wards"?

A. There are one or two beds on the disturbed wards which are fastened to the floor.

Q. For what purpose?

A. We usually use those rooms for patients in the habit of barricading their doors if the beds were not fastened to the floor.

Q. Did Miss Lathrop receive a letter from her brother and refuse to believe it was from him?

A. Yes, sir; we subsequently wrote to the brother; she gave her grounds for refusal to admit it was written by him — that it was not written on paper that had his business heading on; that he used expressions which were not peculiar to him, foreign to his style, etc.; we wrote to the brother, asking him to write to her again, stating that he had written that letter, and try to satisfy her in that regard; he wrote to her and to us.

By Mr. RICE:

Q. And in his letter to you he admitted the peculiarities of his own letter, written to her before that?

A. Yes, sir.

Q. And that she had reason for criticising the letter as she did?

A. Yes, sir; you have seen that letter, I think.

Q. Now, in reference to abortions — do you know this Miss —— that Miss Lathrop mentions?

A. I know who the patient is that she refers to.

Q. This Miss —— of New York?

A. Yes, sir; I know who it is.

Q. What is there to that?

A. There is no ground whatever for her statement that she had an abortion, beyond the fact that her menstural periods were quite irregular — once in two or three months — and at those times she has considerable pain, and has been treated by myself and other physicians for those troubles; her condition is well understood.

The CHAIRMAN — Have the doctor state in regard to that feature, as to whether or not it is well understood that there are delusions growing out of that condition?

Q. How is that?

A. It is not an uncommon fact in any insane asylum; cases are recorded in the books, and among some authorities it is a classification of insanity which they call ovarian insanity; others call it uterine insanity, and the delusions that are narrated and come under this head are delusions of this very character, that they are pregnant or that they have been ravished; that they have given birth to a coming Savior of the world, and delusions of that character; I have in mind now a patient who came to me very quietly, and perfectly lady-like, and said: "Doctor, I should like to engage your services; I think in about three months from now I shall be confined;" she is in the Asylum now; there were no symptoms of it whatever, and no reason for her suspicion; she is a patient.

Q. Have there been any births in the Asylum?

A. Yes, sir; you will find them recorded in our reports; we had a birth last June, a patient who came there the 22d of May; the child was born on the 10th of June.

Q. Was it a full-grown child?

A. Yes, sir; they kept her at home and had an idea that they could take care of her until after her confinement; but she became so violent that she was brought to the Asylum; I think we have had two or three a year, and at other times a year would pass without any.

Q. Have you had any births in the Asylum from patients who have remained there for a longer time than the time required for gestation?

A. No, sir, never; that is, you mean, previous to their confinement?

Q. Yes?

A. No, sir.

Q. Now, I will ask you your opinion as to whether a person can be etherized during sleep?

A. The administration of ether during sleep is utterly impossible; it would wake a person up; the first sensations are choking and suffocation to such an extent that a person asleep would be immediately aroused.

By the CHAIRMAN:

Q. Does that same answer apply to any other anæsthetic?

A. No, sir; not to chloroform; children can sometimes be anæsthised by chloroform while asleep, and occasionally grown people, but very rarely; a series of experiments have been tried lately; some years ago, Dr. Rogers of New York read a paper before a medical meeting, in which he came to the conclusion that it was impossible; I looked that up in connection with a paper I was writing myself at Buffalo; and some experiments were tried by a namesake of mine in the Columbus, Ohio, penitentiary, and he succeeded in chloroforming three out of eight adults while asleep.

By Mr. GOODWIN:

Q. But with reference to ether, you say it is impossible?

A. Yes, sir.

Q. Have there been some articles on the subject in the current medical literature within the past six months?

A. I have seen an article on chloroform narcosis during sleep.

Q. In that article does it state that chloroform can be administered during sleep?

A. Yes, sir, in rare instances; there is a great diversity of opinion on the subject, and it is not a settled question.

Q. Do you know the case of Miss T., described by Miss Lathrop at page 539?

A. Yes, sir, she is the patient that had the erysipelitous arm; there were never any symptoms which could possibly point to any abortion in her case, or any suspicion of pregnancy, except the fact that she grew remarkably stout before she left the institution; when

Miss Lathrop first knew her, she was very thin, in a very attenuated condition, and her life for a time was despaired of, but before she got well and left the institution she became quite stout.

Q. Did you accompany Miss Lathrop to Poughkeepsie?

A. I did.

Q. Will you detail the examination that was held there at that time?

A. The writ was made returnable on the 8th or 9th of December, and I went down with her in company with Mrs. Barker, the matron; the writ was returnable before the Hon. Joseph F. Barnard, of Poughkeepsie; he made a brief examination on that day, and remanded both Miss Lathrop and Mr. Mackey to the Poughkeepsie Asylum until the 20th and 21st; I went down on the 20th for a hearing in Miss Lathrop's case; she was brought down from the Asylum and Judge Barnard stated there that he proposed to be his own expert; the Asylum was not represented by counsel; he asked me to go on the stand; I said in view of the fact that he proposed to be his own expert, I did not care to go on to the stand and contradict him, as I presume I might have to; he then placed Miss Lathrop on the stand and examined her for a few moments and announced himself as satisfied that she was not insane.

Q. How long did he examine her?

A. It did not exceed fifteen minutes; I asked the privilege, in view of the fact that the Asylum was not represented by counsel, of asking her a few questions; I was given permission to do so, and I drew out from her, her statement in regard to poisoning; drew out the admission that she had written to this gentleman in Brooklyn that his divorced wife had repeatedly attempted to poison her, that through her machinations, she — Miss Lathrop — was then in the Asylum; I drew out the statement that she had, under the influence of this delusion, sent hot tea and some medicine to a chemist to be analyzed; Judge Barnard said that that did not alter his opinion, that weak and hysterical women often had curious notions, and he discharged her; I then requested to be placed on record in the matter as stating my belief that she was an improper patient to be discharged; he stated that I might be so placed on the record; when I returned I dictated my experiences at Poughkeepsie, to make a record of it.

Q. In your judgment was Miss Lathrop insane at the time she was discharged?

A. Yes, sir.

By Mr. Rice:

Q. Do you consider she was a proper person to be confined in a lunatic asylum?

A. I think she was, because I think if she had remained longer that she would have improved; I doubt if she would have ever fully recovered; I regard a lunatic asylum as an hospital.

Q. You do not regard her as irrational, except upon one subject, do you?

A. I think that one subject governs her entire life, and tinges all subjects.

Q. It does not interfere with her capacity to labor, and make a living, does it?

A. No, sir, I don't think it would.

Q. And the only reason why you say she was a proper subject for confinement in an Asylum is, that she might be improved?

A. Yes, sir, I don't think, as far as any evidence that I have in her case, I should not regard her as a dangerous person to be at large, unless she should conceive the idea of putting this woman out of the way; persons with slighter delusions than she is laboring under do those things.

By Mr. HASKELL:

Q. Do you know whether, as a fact, that she did send that hot tea to be analyzed?

A. Only as her sister said that she did.

Q. You have no reason to suppose that she did not, have you?

A. No, sir, unless her family intercepted it.

Q. You do not know whether it was ever analyzed or not?

A. No, sir, I do not.

By Mr. GOODWIN:

Q. Have you a transcript of Miss Lathrop's case from the case book?

A. Yes, sir, here it is (producing the same).

Mr. GOODWIN — I offer it in evidence.

By Mr. RICE:

Q. Does that include all the correspondence?

A. It does not include all the correspondence, some of it was not copied, but includes all correspondence throwing light upon her direct history.

(The transcript of Miss Lathrop's case was then marked "Exhibit 29, J. H. M. See Appendix therefor.)

Mr. GOODWIN — I will ask the doctor to read to the committee the report he made to Dr. Gray, after his return from Poughkeepsie, perhaps, strictly speaking, it is not quite competent, but I would like to have it taken and be in evidence.

(After consultation the committee decided that although the statement is not relevant or competent, yet in compliance with the request of Mr. Goodwin they will admit the statement.)

Mr. GOODWIN — You can read that report doctor.

A. This is the report I made to Dr. Gray after my return in Miss

Lathrop's case: "I have to report the following facts concerning the occurrences at Poughkeepsie on the 20th of Debember, when I appeared before Judge Barnard at an adjourned hearing in the case of the writ of *habeas corpus* issued for Miss Clarissa C. Lathrop, of Rochester, Monroe county. I reached Judge Barnard's chambers a little before ten o'cock, and there found Judge Barnard, three or four lawyers, a reporter for the Poughkeepsie *Eagle* and was accompanied by a reporter of the Utica *Herald*. I was asked where Miss Lathrop was and why I had not brought her with me. I replied that the order remanding her to the Poughkeepsie Asylum stated "pending the examination as to her sanity," she was discharged from the custody of the Utica Asylum, and consequently I thought I had no more authority over her and had not therefore brought her. Mr. Silkman, the attorney for Miss Lathrop, entered the court-room shortly afterward and after some parley was directed by Judge Barnard to proceed to the Hudson River Hospital for the Insane with a carriage and bring Miss Lathrop from the Asylum. In the interval between Mr. Silkman's departure and his return with his client, Judge Barnard entered into some conversation on the case of Mr. Mackey. He criticised the Asylum authorities for holding a man in the institution as insane about whom the only evidence that they gave was that there was a departure from his former condition of mind, which they only knew from hearsay evidence, and which it was not shown that they had taken any pains to investigate, and who they swore had delusions which were not, by any proof, shown to be delusions. I remarked to the judge that I considered Mr. Mackey an insane man and had so sworn; that if the evidence of the physicians at the Asylum, and their judgment in regard to the condition of their patients, was not to be taken, I did not know who was to judge for them; that we had taken pains to investigate the insanity as thoroughly as we were empowered to do; that we had questioned his family, his clergyman and others who knew of his condition; that we believed that his violence and homicidal threats were the result of delusions; that we had sworn on the stand as to the character of those delusions, and had only been contradicted by Mr. Mackey himself, who had acted under the direction of Mr. Silkman, as the latter admitted; in that Mackey had refused to admit ever telling me the delusions which I had enumerated. To this Judge Barnard replied: "Do you know that I believe Mr. Mackey?" I said: "I do not understand you. Do you mean to say that when I swore that Mr. Mackey told me that his wife had attempted to poison him, that she had threatened to get him out of the way, and that his family had sent all of the food out of the house, at various times, so that he could not get any, I swore to what was not true?" He simply reiterated: "I believe what Mr. Mackey says." I said: "Then you say I have perjured myself? I do not see what right you have to make any such assertion. My character has not been impeached in your court." He replied: "You are an interested party. You are

interested in keeping Mr. Mackey in the Asylum." I replied that neither I nor any other physician had any power to keep Mr. Mackey in the Asylum; that the discharge of patients rested with the managers of the Asylum, who discharged patients upon the physician's certificate of recovery, or that they were harmless and not likely to be improved by further treatment; that neither of these conditions could be certified to in Mr. Mackey's case; that he had not recovered, and was, moreover, a dangerous man. After some further conversation upon Mr. Mackey's case, the judge handed me a letter of some sixteen pages which, at its close, was marked "confidential," from Mr. Daniel Ketchum, an attorney from Albany, making charges of neglect against the physicians of the Asylum; assertions that sane people were detained in the institution, and various remarks concerning the character of Dr. Gray and the medical staff of the Asylum generally, and remarked that such serious charges as these demanded an answer from some source. I replied that I was not empowered to answer any charges against the Asylum, neither did I propose to answer any charges, were I so empowered, coming from a man whose insanity was well recognized, and who had been recognized for years as an insane man. At about half-past eleven Miss Lathrop arrived and was put upon the stand. The report contained in the Utica *Morning Herald*, of December 21, presents a fair account of the proceedings, which lasted less than an hour, except that at its close, not having been myself called to the stand, I remarked to Judge Barnard that I thought it due to myself and the Asylum that I should be placed upon record, and that I wished admitted as testimony my assertion, in a full belief that Miss Lathrop was now insane and controlled by delusions which she had enumerated on the stand, and that I considered her an improper person for discharge." That was addressed to Dr. Gray, and signed by me.

Q. Now, doctor, do you know Miss Peck?

A. I have seen her; I know her by sight.

Q. Have you ever seen any letters written by her?

A. Yes, sir, I have.

Q. To whom?

A. Dr. J. B. Andrews, now superintendent of the insane asylum at Buffalo, written to him while assistant physician at Utica, when she was out of the Asylum.

Q. What was the purport of these letters?

A. She addressed him as "my dear husband," and signed herself "your loving wife;" the general purport being to say that she believed she was his wife.

Q. How long ago were such letters written?

A. I saw them not infrequently up to the time Dr. Andrews left the Asylum for Buffalo, and he has told me since being in Buffalo that he has received letters there from her; in fact I saw one.

Q. How long has he been in Buffalo?

A. He went in October, 1880.

Q. When did you see this letter?

A. Within a year or two of that time, 1880 — a year perhaps.

Q. Have you read her testimony over?

A. Only cursorily; I know nothing about her history in the Asylum; she was there before I went to the Asylum.

Q. Have you a transcript of the history of her case here?

A. I have (producing the same).

Mr. Goodwin — I offer this in evidence.

(Transcript of case admitted, and marked "Exhibit No. 30, J. H. M.")

Q. Do you know Mrs. Fulford?

A. Yes, sir.

Q. Have you examined the records in regard to her?

A. I have.

Q. How was she first admitted to the Asylum?

A. She was first admitted sometime in 1848, as a case of puerperal mania, mania following child-birth; the second time it was a case of chronic mania and she was discharged unimproved.

Q. How was it on the third occasion?

A. She was received as a case of chronic mania.

Q. How was she discharged?

A. She was discharged improved, the last time.

Q. When was she discharged?

A. The 20th December, 1882.

Q. Did you see her at the time of her discharge?

A. No, sir; at the time of her discharge I was away at Poughkeepsie; I saw her before that almost constantly, from the time of her admission, on the 10th of August, to the last of July; then I was absent until October; I saw her in October, November and December, down to a day or two before her discharge.

Q. She was under your care?

A. Yes, sir.

Q. Had she recovered when you last saw her?

A. No, sir.

Q. Did you still regard her as an insane woman?

A. She was discharged as "improved" not as "recovered."

Q. During Mrs. Fulford's stay there at the Asylum, was she ever threatened by you with removal from one ward to another for any purpose?

A. No, sir; not in the way of a threat; I have said to her that I hoped she would exercise more control, or I should have to move her off the ward.

By Mr. Rice:

Q. What was the object of that statement to her?

A. To induce her to control herself, to exercise greater self-control.

Q. Was not that with an idea of coercion or discipline?

A. No, sir.

Q. Not of disciplining her?
A. No, sir.

By Mr. Goodwin (resuming):

Q. Do you remember an occasion when Dr. Gibson was about to administer communion to a patient?

A. Yes, sir; I recollect the occasion; I was consulted in reference to the matter, the previous day; Miss Sterling said that Mrs. Fulford and other patients wanted to go to communion service; I said I did not think it proper for two reasons, first on account of the condition of Miss R.; it was only desired on the part of the rector to have one or two communicants present, enough to comply with the rule of the church; moreover Mrs. Fulford was not a communicant of the Episcopal Church, and I did not think it was wise or proper for her to be there on that occasion; in regard to Miss S., the patient who attacked Miss Sterling, she was a case somewhat similar to Mrs. Fulford, and that was my reason for excluding her, she was excluded for similar reasons to the exclusion of Mrs. Fulford, and I did not think her mental condition was such that she would fully appreciate the nature of the act; I came on to the ward in the midst of the attack upon Miss Sterling, I went to the room and saw Miss S., in the midst of her paroxysm, they were just disengaging her hands from Miss Sterling's hair when I came into the room.

Q. What, if any thing, did you order in reference to Mrs. Fulford at the time?

A. I do not recollect that I ordered any thing at the time; my recollection is that Mrs. Fulford was removed from the ward a couple of days thereafter.

Q. What for?

A. She was getting more disturbed and interfering with and exciting other patients in the same manner that she had excited Miss S.

Q. Had her removal any thing to do with the attack by Miss S. upon Miss Sterling?

A. No, sir; the attack on Miss Sterling was before her removal; do you mean did her removal grow out of that?

Q. Yes?

A. Yes, sir, partially; I took that into consideration with other matters, that she was a disturbing element on the ward.

Q. Was she removed for punishment or discipline?

A. No, sir, but because she was a disturbing element among those patients.

Q. Take the case of Miss S. of Auburn, page 631; do you know of that case?

A. Yes, sir, it refers to a Mrs. S——r.

Q. What is there to that?

A. The time that Mrs. Fulford put vaseline on her back on

account of a sore was that a blister had been applied to the spine; she had a tender spine, hurt it in a struggle with Miss Finerty on the ward; it was an abrasion of the skin, and a blister was applied at my direction.

Q. I direct your attention to the case of Miss S. of Watertown, on page 632; what do you know about that case?

A. I only know of that from an examination of the record; she died during my absence in Europe; I know at one time she received a prolonged warm bath, as part of her treatment; she did not die as a result of the bath, nor for some days after; she had an attack of acute meningitis and the bath was administered as a remedial measure.

Q. Who is Miss Vandenburg, or Vanderhoof?

A. She is in charge of the ninth ward; one of the disturbed wards; she is in the Asylum now; she is not a large girl, and has no accent, although Mrs. Fulford says she was a Dutch girl; she comes from Holland Patent, Oneida county.

Q. What kind of an attendant is she?

A. An excellent attendant.

Q. Is she kind and humane?

A. Yes, sir; so much so that I propose to have her promoted on the first of April.

Q. On account of her efficiency, good conduct, experience, etc.?

A. Yes, sir.

By Mr. Haskell:

Q. Promoted how?

A. Promoted to a more responsible position—the charge of the suicidal ward, and where most of our sick patients are; the attendant there is breaking down under the anxiety, somewhat.

Mr. Goodwin — I offer in evidence a transcript from the case book of the case of Mrs. Fulford.

(Admitted, and marked "Exhibit No. 31, J. H. M." See Appendix.)

Q. I understand that all these copies of cases from the books are true and complete records of the cases?

A. All of them made by myself are correct, and those made by the stenographer; he has signed his name to them; the stenographer was directed to make a full and complete copy of the case.

By the Chairman:

Q. You stated that you were about to relieve an attendant on the suicidal ward because she was breaking down from anxiety?

A. She became a little anxious over it.

Q. Is that the effect of her constant watchfulness of suicidal patients?

A. I do not know; she is naturally a nervous disposition — a

nervous woman ; her temperament would be classified as the nervous temperament.

Q. Is that the tendency with such attendants ?

A. I should think it would be with cases like hers ; persons who feel responsibilities very much when they meet with fifteen or twenty persons constantly about them, persistently suicidal, it would have a tendency to wear on her, and we propose to relieve her.

Q. Is she on duty all the time ?

A. Yes, sir ; sometimes with others ; she has others to assist her, other attendants with her.

Q. She is really confined to that ward then day and night ?

A. Yes, sir.

Q. How long has she now been on that ward ?

A. Eight months, perhaps — I beg your pardon, she has been on that ward nearly two years ; she has been in charge eight months.

Q. What intermissions or vacations has she had ?

A. A vacation in each summer for two or three weeks.

Q. What days, or parts of days, does she have off at other times ?

A. She has two evenings every week and every third Sunday, day and evening.

Q. And sleeps there every night ?

A. Yes, sir.

Q. On her return from her evenings off she takes up her duty on the ward again ?

A. Until nine o'clock she is on duty until the night watch for that ward comes on — Miss Vanderhoof, a sister of the Miss Vanderhoof I have referred to.

Q. This lady, who returns to duty at that time, is liable to be called up during the night ?

A. Yes, sir ; in case of an emergency.

Q. What hours does she have off on those evenings she is off duty ?

A. Until ten o'clock ; the stenographer calls my attention to a matter I want to correct ; you asked me if, when she returned from her evenings off, she took up her duties again, and I answered "yes, until nine o'clock;" that should be corrected, I should have said ten o'clock ; I mean this, that she goes on duty, if there is any necessity after she returns, the same as she would be if she were not out.

By Mr. Goodwin :

Q. Mrs. Fulford says in her testimony that her son did not know any thing about her coming to the Asylum ; how is that ?

A. Her son came with her.

Q. Did she come with her son ?

A. He brought her to the Asylum.

Q. What did he say ?

A. He rather wanted her to be deceived in regard to the matter.

By the CHAIRMAN:

Q. How did he express it?

A. He wanted me to examine her, and say I thought she had better stay in the Asylum; that I thought it was considered wise and necessary for her to stay, but I said that we could only admit a patient on the legal papers, and we would tell her it was a proper place for her, but he would not enter any attempt to deceive her.

By Mr. RICE:

Q. Were you there when she was brought there the first time?

A. No, sir; I was not anywhere; it was in 1848, before my time; only the second and third times.

Recess until eight o'clock, P. M.

EIGHT O'CLOCK, P. M.

Examination of Dr. BRUSH resumed:

By Mr. GOODWIN:

Q. Do the physicians in the Asylum disregard the stories told to them by patients?

A. No, sir.

Q. What do you say in reference to that?

A. It depends entirely on the nature of the story; if the story of itself on its face is a delusion it is entered as part of the patient's history.

Q. If it is not a delusion?

A. If it is not on its face a delusion it is investigated.

Q. I ask you whether, during your service in the Asylum, you have ever known of any conspiracy or understanding among the attendants to secrete from the physicians or any of their superiors any abuse of patients?

A. No, sir.

Q. Do you know whether it has ever been the practice of that Asylum to notify the various attendants of the arrival of visitors by means of a whistle from the office?

A. It has never been the practice since I have been there.

Q. Have you ever known it to have been done?

A. I have never known it to be done; on the contrary, I

have met visitors at the door and taken them into the ward without even going into the office.

Q. Has it been done when the board of managers or board of supervisors are going through?

A. No, sir; I never knew it to be done on any occasion whatever.

Q. Do the male employees have keys to the female wards?

A. No one except the carpenter and engineer, who are only allowed upon the wards by a written order to make certain repairs, and the painter in the same way.

The CHAIRMAN — Ask him whether they do not have the keys in their possession.

Q. Do they have the keys in their possession?

A. They have during the day-time, but they leave them at the Asylum office.

By the CHAIRMAN:

Q. What check is there upon their leaving them or not leaving them?

A. The night fireman at the engine-room has charge of them, and he reports if they are not left; he has reported to me once or twice.

By Mr. HASKELL:

Q. That they were not left?

A. Yes, sir.

Q. What action have you taken?

A. Reprimanded the mechanic for not doing it; it was a matter of forgetfulness on the two occasions.

Q. Is it an usual or common complaint among a certain class of female patients in asylums that improper liberties are being taken with them?

A. It is with a certain class of female patients; I referred to that in my testimony this afternoon.

Q. What class is that?

A. It is a pretty difficult matter to define the class exactly, it is sometimes a class of patients who are passing the change of life; more frequently though with unmarried females of thirty-five to thirty-eight; I had an experience of that very kind only the night before last; I went on to one of the wards to give medicine to a patient who would not take her medicine; I was in the room with an attendant and administered medicine; when I came out of the room, she reported to one of the physicians the following morning that I came in alone and fondled her person, especially about her bosom, as she expressed it; I knew the character of her ideas and took special pains not to be in the room without an attendant with me.

Q. Have you heard any expressions from recovered persons in reference to treatment of them by Miss Burns?

Mr. RICE — While you are on this subject, what physical ailment,

if any, has this patient you have just spoken of, who made this charge against you?

A. Her insanity is the result, as my recollection of the history is, of an attack of meningitis some years ago; she has no uterine trouble that is discoverable; I have made no physical examination on account of the peculiarity of her ideas; her menstruation is painless and regular.

Q. Do you know whether she has ever been troubled with uterine difficulty?

A. I don't know whether she has or not.

Q. Is it not the fact that where they have the delusion spoken of that there is usually some uterine trouble?

A. Yes, sir.

Q. And patients having delusions of that nature are usually troubled with uterine difficulties?

A. Yes, sir; I think they usually are troubled with uterine difficulties, or ovarian; it is practically the same thing.

Q. What is the difficulty with Miss S. of S., the young lady who was presented to the committee when last at the Asylum?

A. Whether she has been in the habit of practicing the habit outside of the institution or not, I don't know, but since she has been there she has practiced self-abuse to a certain extent; her case is one of acute mania.

By Mr. HASKELL:

Q. Has she any menstruation?

A. No, sir; I think not.

Q. Do you think she has never menstruated?

A. Yes, sir.

Q. But there is a cessation?

A. Yes, there is a stoppage.

Q. This patient that you told us about the incident that occurred to you the other night, does she frequently have these delusions that improper liberties are taken with her?

A. This was the first time that she has ever charged any improper liberties; she has intimated that the doctors have glanced at her in a peculiar manner, etc.

Q. That seems to be a continuing thought running in her mind?

A. Yes, sir.

Q. How many female patients are there in the institution now suffering from delusions in regard to immoral acts or improper liberties being taken with them?

A. I can recall five or six now; I do not know any more.

Q. What is the general character of their delusions?

A. Well, that they have been cohabited with, or that improper proposals are made to them; things of that character.

Q. By whom?

A. Sometimes by persons who have no real existence; one patient

says the angels come to her room every night for that purpose; another patient says that her husband visits her occasionally; another patient, before she came to the Asylum, had the delusion that a wagon load of men from Utica used to drive to her place, and that as many as sixteen or eighteen gained access to her room at night, etc., while she was narcotized or "drugged," as she expressed it; she has the same delusion now, but she will not talk to me about it; she has had the delusion since she has been in the Asylum; she has now the delusion — probably in addition to this one — that she is to be killed, and she is afraid of me and will not converse with me.

Q. What is the general mental condition of these patients?

A. Usually one of exaltation and self-satisfaction.

Q. What wards are those patients on?

A. This last one that I refer to is on the third; the first one I referred to is on the sixth ward, and one is now on the eighth ward.

Q. Have you any patients subject to those delusions on the first ward?

A. I do not remember any now.

Q. You have had occasionally?

A. Yes, sir; I have known patients on that ward to have those delusions; there was a patient on that ward who told me, the day she was admitted, that she had had sexual intercourse with the devil; that she knew nothing about him, but that he was a fine person; she had that delusion all the time she was there.

Q. Even up to the time of her leaving?

A. Yes, sir.

Q. Was she discharged as cured?

A. No, sir.

By the CHAIRMAN:

Q. Are such patients sometimes cured, doctor?

A. Yes, sir; some patients who have these delusions get well.

Q. After they get well, what is the effect of those delusions upon their memory? do they still believe they are facts?

A. Well, I have naturally some hesitancy in talking to them about sexual matters after their recovery.

Q. And if a patient continues to talk about such matters, do you consider that such patients are still suffering under the same delusions?

A. Yes, sir; you asked me about whether they remembered the delusion afterward — I have in mind a case.

By Mr. GOODWIN:

Q. In convalescing patients, what is the effect in regard to their memory of matters which have taken place while they were insane?

A. Their memory in some matters, at times, is pretty good, at other times it is confused.

Q. Are they apt to carry their impressions which they obtain in an insane condition into their recovered condition?

A. They do sometimes, yes, sir; I recollect a clergyman who was apparently entirely well; he said to me, accidentally one day, that he thought it was a curious thing that we should have the word "hell" in big black letters on the ceilings of one of the rooms in the fourth ward.

Q. What credit in your judgment should be given in your judgment to the testimony of persons in regard to what transpired while they were insane and confined in an asylum?

A. It would depend very much upon the form of the insanity which they had; a patient with very few delusions, or a patient with perhaps many delusions not such as would affect their general recollection and perception of events would have a pretty fair idea of things; whereas in a case of acute mania, where the mind was in one turmoil of delirium, they would be very much more apt to have an incorrect idea of things; so also in a case of melancholia, although very quiet, very much depressed, yet the mind is working rapidly, a multitude of thoughts passing through their minds, and they are apt to misinterpret the acts of their friends, in the sending of delicacies to them for instance, or the sending of medicine — they look upon it as attempts to take their lives; when they are convalescing they will look back upon such things with a vague, shadowy apprehension that every thing was not all right.

Q. Do you know Mary Pelton?

A. Yes, sir, I did know her; I know her now by sight.

Q. Was she in the Asylum during your service?

A. Yes, sir; I had no service then on that side of the house, I saw her casually; I have her case here — taken from the case-book.

Q. What was her insanity?

A. As I recollect it, it was a form of sub-acute mania, with some very unpleasant features about it.

Q. What were the unpleasant features?

A. She was decidedly untidy, sometimes very obscene in her talk and actions.

Q. Is that all in her case?

A. Yes, sir; there is a full transcript of it in her case, here.

Mr. Goodwin —I offer in evidence that transcript in her case.

(Said transcript of the case of Mary Pelton is marked "Exhibit No. 32, J. H. M." See Appendix.)

Q. Have you any other case, doctor?

A. Yes; here is the case of Henry Hindman, an ex-patient examined at Albany, see page 480 of the printed record.

Mr. Goodwin — I offer this also. (Admitted and marked "Exhibit No. 33." See Appendix.)

By Mr. Haskell:

Q. Do you know any thing about the system of promotion of attendants to be supervisors of that institution?

A. Yes, sir.

Q. What is the system?

A. They are promoted from lower grades to higher as their capabilities and intelligence would indicate, and persons reaching a grade beyond which they cannot pass, it is considered wise not to promote them, and others are promoted over their head.

Q. Are you acquainted with the circumstances which led to this promotion of Smith to be supervisor?

A. No, sir; I was not at the institution at the time; the supervisor of the first department resigned; I was not at the institution.

Q. So that you do not know how he came to be appointed?

A. No, sir.

Q. Your attention was never called to the subject?

A. No, sir.

Q. Since you were connected with the institution:

A. Yes, sir.

Q. Where were you at the time?

A. I cannot recollect, I think it was when I was away on vacation.

Q. The rule is to appoint the eldest suitable attendant in the institution?

A. Yes, sir; we have attendants who have been there longer than Smith who would not be suitable for supervisor.

Q. Take Mr. Orendorf?

A. I hardly think he would be a very good supervisor, although good where he is.

Q. What qualifications has Smith that Orendorf does not possess?

A. He is quick and understands directions, and carries them out perfectly as I should imagine; I have had very little to do with him; he is on the men's side, and I on the women's.

Q. Is he not a very young person for the situation?

A. He is rather a young man for the situation.

Q. Do you know any thing about his habits?

A. I do not, I never heard them called in question.

Q. How many patients is this institution adapted to properly care for?

A. Six hundred in round numbers.

Q. How many are there in now?

A. I have not looked at the census this week, 615 I should think.

Q. What has been your average since the first of January?

A. From 628 to 640, and we have been as high as 642 or 3.

Q. This institution is an institution for the reception of acute cases of insanity?

A. Yes, sir; so intended, I don't understand there is any direct provision of law in regard to it, but it is so regarded since the establishment of the Willard Asylum more especially.

Q. How many cases of chronic insane are there in the Asylum past the period at which you ordinarily discharge or transfer them;

that is, how many have you who have passe the period at which you generally transfer them?

A. I should think 120, about one-fifth.

Q. Why are they retained in the institution?

A. For the reason that some of them are in process of being discharged, the superintendents of the poor have been notified; others are retained to see if their condition of quietness and apparent safety will not permit them to go to their homes instead of State or county institutions.

Q. I refer particularly to that class of patiems that you do not expect to transfer or discharge but are simply minding as chronic cases?

A. I have given you the number.

Q. That you do not expect to discharge, that you expect to retain as chronic cases?

A. No, sir; we discharge one every day and over one patient a day, we are constantly discharging.

Q. How many chronic cases have you there that you don't expect to discharge?

A. There are a few that we do not expect to discharge and some private patients.

Q. How many private patients-chronic cases of insanity?

A. Talking of the private cases there are between 25 and 40 perhaps.

Q. Why are they retained?

A. Because their friends have not made provision for them to be carried over elsewhere, they are not proper to be carried over to home, and the State institutions for chronic cases do not receive private cases.

Q. Does not the keeping of these tend to crowd out and interfere with the care of legal acute cases?

A. No, sir; we receive all the acute cases that come, we very rarely decline acute cases for the sake of private cases; we sometimes decline chronic cases; the overcrowding is on the woman's side and is due to the fact that some wards are in process of reconstruction.

Q. Can you give me the date of discharge of Buckley?

A. No, sir; it was before I came to the institution.

Q. In regard to the question of removal of patients from one ward to another, as a matter of discipline do you remember the case of Mr. Silkman?

A. I recollect it, yes; sir.

Q. Was he transferred from one ward to another on account of his rafrectory behavior in refusing to do some work?

A. Mr Silkman entered on the second ward and was transferred to the first wards those are the only wards he was ever on.

Q. Then there was nothing of that kind?

A. No, sir; he made a charge of that kind; he was given at one

time some work; he went out to clean out the gutters, and sweep off the leaves off the walk.

Q. And that was one of the streets of Utica?

A. Yes, sir, but not in the sense that he meant it; he told me before Judge Barnard that he made that statement to have it accepted in its broadest sense, to have its effect upon the public; no coercion is used to get patients to work, although they are encouraged to work.

Q. They are expected to do certain work, are they not?

A. They are expected to do it on their own account.

Q. But they are expected to do it?

A. Yes, sir.

Q. And they feel rather compelled to do it?

A. I never knew a patient to say he felt compelled.

Q. Is there not moral coercion used?

A. There may be.

Q. And where a patient refuses to do the work, and is refractory about it, would you not remove him to some other ward?

A. If a patient were having a bad influence on the other patients, in preventing them from doing so, I should regard it as necessary to remove them; occupation by the patients I regard as one of the best remedial agents we have.

Q. Where you transfer a patient for that reason, you would not transfer them to a better ward?

A. I should transfer them to be with patients idle and indolent like themselves.

Q. Would the transfer be to a better ward?

A. It might not be, and would not be.

Q. And to a certain extent it would be a punishment?

A. I should not transfer a patient with that idea in my mind.

Q. It would have that effect?

A. I can't tell what effect it would have; I cannot say that.

Q. Would you not intend it to have that effect?

A. I said I should not transfer them with that idea in my mind.

Q. Do you know as a fact that patients regard their removal from one ward to another as punishment?

A. Yes; I have so testified.

Q. And it does operate as a punishment?

A. Of course they would consider any thing a punishment, and if a patient regards it as a punishment, it is to that person a punishment.

Q. And it is, as a matter of fact, punishment?

A. It is to that person who considers it so.

Q. You have removed patients from one ward to another as a matter of good government and discipline, as testified to by Dr. Smith?

A. It is not done in the way of punishment: but authorities of longer experience than Dr. Smith claim punishment is a very good thing.

Mr. GOODWIN — With regard to the case of J. G. B. (page 776) I again call attention to page 500 of the lunacy investigation of the Woodin committee; that report and the testimony accompanying the same upon that matter of Mr. Brown is the answer of the Asylum authorities in that matter, and I desire to make that report and testimony a part of this case.

The CHAIRMAN — It will be so considered.

Recess until 10 A. M., Saturday, March 29th.

SATURDAY, *March* 29, 10 A. M.

The committee met at the office of the treasurer of the Asylum, and continued the proceedings, as under.

Present — The whole committee, Mr. GOODWIN of counsel, and Mr. SWAN of the board of managers.

THOMAS W. SEWARD,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. Please state your name and age?

A. Thomas W. Seward, seventy years old.

Q. What is your occupation?

A. This is my occupation now, solely — treasurer of the State Lunatic Asylum.

Q. Are you on a salary?

A. Yes; $1500 a year.

Q. How long have you held this position?

A. Eleven years; I was appointed in 1873.

Q. What is the nature of your duties?

A. My duties are to collect the bills of the asylum, pay out money on the warrant of the steward and superintendent; the joint warrant.

Q. How are the moneys of the State collected and paid to the Asylum from the Comptroller?

A. That is special appropriations?

Q. Yes?

A. The Comptroller authorizes me to draw on the Treasurer, through him, whenever I say I need some money; the Comptroller collects the draft and sends it on to me.

Q. When a special appropriation is made, do you collect it all in one sum?

A. No, sir.

Q. You collect as the money is needed?

A. Yes, sir.

Q. How are collections made from the counties who have patients in the institution?

A. I send the bills to the county treasurer and he pays them.

Q. How often are the bills sent to the county treasurers?

A. Every six months.

Q. What would you say would be the average cash balances carried in your bank?

A. Now there are $10,000 monthly balance, on the average.

Q. What would you say the average has been during the past five or ten years; how has it run; say for five years?

A. For two years past it has been about $10,000 a month; the average balance at one time, several years ago, when we were receiving a great deal of money from the State, to make improvements, I think the balances were as high as $25,000.

Q. Can you state, without looking at your books, about what your gross deposits are annually, or otherwise, the gross receipts of the institution?

A. The annual report is made by me to the managers and through them to the Legislature.

Q. What is your present recollection of the amount of your gross annual deposits?

A. In the neighborhood of two hundred thousand dollars.

Q. And it will not vary ten thousand dollars from that?

A. I cannot undertake to say, but I can tell you by referring; I don't keep it in my memory.

Q. What supervision over your accounts is exercised by the management of the Asylum?

A. The supervision is exercised by the auditing committee mainly.

Q. And how do they make that supervision?

A. They examine every year certain, and oftener for that matter; they examine my books and compare my charges with my vouchers.

Q. You say every year or oftener?

A. Yes, sir.

Q. Has there been, during the last two or three years, more than one thorough inspection a year of your accounts?

A. Yes, sir; to illustrate — they examine my books up to the first of October — the 1st of October, 1883, was the last examination.

Q. What was the examination prior to that?

A. Six months previous.

Q. And then six months previous to that?

A. I cannot say.

Q. Your impression is they examined twice a year?

A. Yes, sir.

Q. How do they make that examination; do they foot up your columns?

A. They take my vouchers and examine them by this book; it is a record of vouchers.

Q. What do you call that book?

A. A record of vouchers; it is kept in this way, (explaining) it is an exact copy of the bills and corresponds with the entries on my day book.

Q. This record of vouchers I see contains a detailed statement of purchases for all purposes in the Asylum?

A. Yes, sir.

Q. And the aggregate of each purchase is footed up and appears

at the right hand page, and that forms a column which is footed up and carried over to the next page?

A. Yes, sir.

Q. Now I ask you in the examination of this book is it the custom of the auditing committee themselves to make the footing?

A. They make the footing.

Q. I call your attention to initials in pencil at the foot of each column, whose initials are these?

A. General McQuade; that is, those are his initials.

Q. What does it mean?

A. I suppose it means that he has examined the page, or which ever member of the committee it is that examines it.

Q. Do the auditing committee follow these entries all through the books to test their accuracy through the other books?

A. No, sir.

Q. Do they examine your journals in connection with the ledgers?

A. They never have.

Q. Have they ever tested the accuracy of your ledger entries?

A. No, sir.

Q. Do you know whether in the examination of the vouchers themselves, the auditing committee make a practice of footing up items of such vouchers?

A. I do not know.

Q. Have they ever done it in your presence?

A. No, sir.

Q. Have you any reason to believe that they do or do not specially examine the vouchers to determine the correctness of their footing?

A. I don't know that; I have no reason to believe that they do one way or the other.

Q. Do you yourself add up the bills to see if they are correct?

A. No, sir; I do not; I take it for granted; that is the duty of the office of steward.

Q. And you accept the signature of the steward and superintendent as your authority for the correctness of the bill?

A. Yes, sir.

Q. Your duties then in regard to the bills are to make payment and see that there is no over payment of any bill which is presented to you?

A. Yes, sir.

Q. And has the accuracy of your account ever been questioned by the auditing committee?

A. No, sir.

Q. They have always found them to be accurate and correct?

A. Yes, sir.

Q. And are the accounts of the institution correct at the present time?

A. They are.

Q. And the balance now standing to your credit in the bank is correctly represented on the books, is it?

A. Yes, sir; do you mean a comparison between the two? oh, you mean does the balance that I represent to be in the bank, if it is the correct balance?

Q. Yes.

A. Oh, yes, sir.

Q. So that there is no irregularity whatever, to your knowledge, in the accounts and finances of the institution?

A. No, sir.

Q. About how many vouchers are annually presented to you for payment?

A. About a thousand.

Q. Please describe your system of accounts briefly; the first entries on this book are made in the day-book, and such entries are these of payments of vouchers?

A. Yes, sir.

Q. Vouchers so paid are entered in the name of the payee?

A. Yes, sir.

Q. Together with a brief statement of the subject-matter of the bill?

A. Yes, sir.

Q. That constitutes your day-book entry?

A. Yes, sir.

Q. In the same book and on the opposite page you journalize these entries?

A. Yes, sir; to illustrate under date of December 21, 1883, the day-book entry is as follows: "paid McQuaid Bro's, liquors $822;" that is journalized as follows: "medicines, $822;" that is posted to the ledger as follows: (referring to ledger) posted in the ledger pages 184-5, under the heading, "medicines and medical supplies," and appears under that head as "McQuaid Bro's, $822;" the same date December 31, 1883, you will find an entry payment of this voucher under its proper head of medicines in the record of vouchers.

Q. What is your system of keeping accounts with the various counties?

A. When the county bills are sent down to me from the steward's office for collection, I collect them in my day book, according to the same principle as that item I referred to, that is to say the item is entered in the day book under the head of "county." To illustrate: I call the attention of the committee to an item among the entries for November, 1883, it refers to a bill against Broome county, dated August 1st, 1883, as follows: "Board, $125.14; clothing, $20.57; miscellaneous exs., 33 cents; total, $146.04." This is journalized on the opposite page, as follows: "Broome county, $146.04." On page 23 of the ledger, under the heading "Broome county," you will find this item entered on the debit side: "August 1st, board from February 1st, $146.04." Credited "November 17th, by cash, $146.04."

Q. How are such payments made, in cash or by check?

A. Very generally by check; he makes a draft on New York, generally.

Q. To whose order?

A. To my order.

Q. What do you do with these drafts?

A. I deposit them at the Oneida National Bank.

Q. And when collected they are placed to the credit of the general fund of the Asylum?

A. Oh, yes, sir; certainly.

Q. Do you have more than one fund in the bank?

A. No, sir.

Q. There is just one general fund account?

A. There is an account called the steward's petty expenses which averages about $400 or $500 per year.

Q. Do you keep any account with the steward of the institution?

A. No personal account.

Q. Do you keep any account with the steward?

A. The account to which I allude, namely, the steward's petty expenses account.

Q. Please turn to that account?

(Witness turns to account in the books.)

A. On turning to steward's petty expenses account it does appear that "payments to the order of Horatio N. Dryer have been made during the year 1883, by five several payments, aggregating $500;" during the year 1882, there are four several payments of $100, aggregating $400; during 1881, three such payments of $100, aggregating $300; during 1880, there were two such payments, aggregating $200. In the fiscal year commencing October 1, 1883, the following payments have been made, October 26th, $100; January 29th, $100.

Q. Are these all the payments that have been made during the current year, or is that all you have posted?

A. That is all I have posted.

Q. Are any payments made that you have not got posted.

A. Yes, sir; on the 24th of March I paid $100; that is the last payment I have made; this shows the nature of the business, the steward's petty account. (Producing vouchers for steward's petty disbursements.)

Q. Do you also keep a special account with each patient in that institution?

A. No, sir, I don't.

Q. Where is that kept?

A. At the steward's office.

Q. Do you not keep a special account with each private patient?

A. Do you mean by that, have I an account where every item they get is charged to them?

Q. No; do you keep an account of the amount received from each private patient for his board?

A. Yes, sir.

Q. Please state how that account is kept?

A. It is kept in the same way as the other accounts; to illustrate it; I refer to an entry in the month of September, 1883; of the account of W. L. P., a patient; date of bill "August 1, board from February 1, 25 6-7 weeks, $155.14; clothing, $7.62; miscellaneous, $11.12; total, $173.88;" on the opposite page this is journalized "W. L. P., $173.88;" all the items on that page of the journal are footed and their amount is placed on the credit side, showing the sum totals on that page.

Q. Now, following the account of W. L. P. to the ledger, on page 447, under his name the item is found under date "August 1, board from February 1, $173.88; credit, September 15, by cash, $173.88," and in that way the accounts of paying patients are kept?

A. That is all private patients.

Q. How much as you now recollect does the credit of board paid by private patients amount to annually?

A. The report for the year 1882 shows from sundry private patients $47,848.71.

Q. From this report it appears that the total amount of the receipts, including a balance in the treasury of $31,809.59, April 1, 1881, was $217,690.74 for the year 1882?

A. Yes, sir.

Q. Did all that pass through the Oneida National Bank?

A. Yes, sir.

Q. Did you ever receive interest on your balances in that bank?

A. Never have.

Q. Do you not consider that with such large annual receipts you could in some way arrange to obtain some interest on your balances?

A. It never has been tried any time that I know either before I came in or afterward.

Q. Have you ever overdrawn your account at the bank?

A. Yes, sir.

Q. Have you done it frequently?

A. No, sir.

Q. How often have you done it during the last year?

A. On the first of August I was overdrawn about $4,000.

Q. Have you ever had other accommodation at any time from the bank?

A. No, sir.

By Mr. SWAN:

Q. In the course of your business are you not compelled, from time to time, to overdraw this account?

A. Certainly.

By the CHAIRMAN:

Q. What other overdrafts do you find?

A. February 1st, $7,500.

Q. How long a time elapsed before you made that overdraft good?

A. It was made good before the month was out.

Q. How many day's accommodation did you have on that overdraft?

A. About thirty days; the account was good before the month was out; the first of March there was a balance on hand of over $700.

Q. Did the bank charge you interest for that overdraft?

A. No, sir.

Q. Has the bank ever charged you interest?

A. No, sir.

Q. Does the bank charge you for collection of treasurer's drafts on New York?

A. No, sir.

Q. The exchange is in your favor?

A. Yes, sir; the bank does not charge me for collecting any thing.

Q. The bank makes a profit on all your New York drafts because the exchange is in favor of New York; so that, in addition to the profits on the deposits, there is a regular profit on these treasurer's drafts by the bank?

A. There must be.

Q. Do you sometimes have checks upon banks in these places where the exchange is not so favorable?

A. Certainly.

Q. To what extent?

A. The proportion is small.

Q. You have testified that the bulk of drafts are on New York from county drawers?

A. Yes, sir; private patients as well.

Q. Do you ever have occasion to buy drafts?

A. Very seldom.

Q. Where do you buy them?

A. There at that bank.

Q. At what rate do they charge?

A. They do not charge any thing; but it is a small thing sometimes; I have to make a payment out at St. Peter for flour and we have to send a draft on New York for it.

Q. What was the reason of your overdrawing your account on that occasion?

A. The bills of the Asylum must be paid according to law on presentation; it would not do to tell a man, "here! we have not any money."

Q. How was it you had not cash on hand from collections at these times?

A. Well, it was a dull time of year, February the first; the semi-annual bills are sent out; they do not get in until about ten days afterward; I get in the private patients' bills first, then the county bills come in the first of March, and then the pond fills up.

Q. How often are patients' bills paid?

A. Every six months, and the county bills also.

Q. If the bills of patients and counties were paid quarterly, would there not be less risk of your deposits running down?

A. Certainly.

Q. And less risk of overdrafts being needed?

A. Certainly.

Q. What would be the objection to having quarterly payments in such cases?

A. I know of none.

Q. You have simply pursued the old system?

A. Yes, sir.

Q. How long has this system been pursued?

A. Since the beginning, forty years ago.

Q. In your judgment as a business man, should not an institution depositing two hundred thousand dollars annually with current balances of ten thousand dollars, and upwards, be able to make arrangement for some interest payment on such current balances?

A. Yes, sir; that is my opinion.

Q. By current balances I understand you to mean the average balances?

A. Yes, sir.

By Mr. RICE:

Q. Have the funds of this institution ever been used to your knowledge for purposes other than public?

A. No, sir.

Q. No improper use has been made of them in any way for private speculation or in any other way?

A. No, sir.

Q. And they never have been drawn from the bank for any other purpose than for paying the obligations of the Asylum?

A. That is all.

ANNIE BURNS

Recalled:

By Mr. GOODWIN:

Q. There is a question I neglected to ask you on examination yesterday, and I will ask it now; do you recollect the testimony given by Mrs. Fulford in reference to some money; I read from the testimony on page 627 as follows: "What occurred on ward 12? A. I did not meet with any personal abuse until I had been there

some weeks; my brother that was here this afternoon with me came there; I met him in the reception room on number four; he came in the afternoon; the bell rang for tea and Miss Burns came over for me to go to my supper, and my brother gave me some money as he always did during the time I was there before, so that if I wanted any thing I could have it; he says, "keep that, and if you want to get any thing you can get it"; Ann Burns saw him give it to me and as we were going back she said, "you had better give me that money"; I said, "oh, no, I can take charge of it, and my brother told me to keep it, and if I wanted any thing, I could send to the matron and have her get it for me"; she said, "well, if you lose it you must not think that any one is to blame"; I said, "no, if I lose any thing that is in my care, I do not blame any one; I had a purse with me and I put it in my pocket; in about two weeks after that my husband came to see me and he said he intended to leave me some money, but he did not think of it until after he was gone; Miss Burns knew that my husband had been there and I think she thought he had left me some money." Do you remember any occasion that Mrs. Fulford's brother gave her any money while she was in the Asylum?

A. Yes, sir.

Q. State what was done with that money, if any thing?

A. I had occasion to remove her clothing from her room to the clothes-room, and in her pockets saw the money as she had stated; the money was brought down to the matron, and I gave it to her care.

Q. Did you know before finding this money that she had any money?

A. Yes, sir, I did, and I tried to have her give it to me for fear she would lose it, because her room is open, and patients had free access to her room, and there are no locks on the doors.

Q. What is the rule in regard to money?

A. The rule is if patients have money or jewelry, or articles of value, to take it to the matron's room and it is recorded to their account.

Q. Do you remember going to her room on the occasion you found this money, and if so, what was she doing?

A. I think she was in the room; my reasons for taking her out of the room was I wanted her to give up her soiled clothing and she refused to do so; her room was in bad condition and a bad odor in it.

Q. And you immediately took it down to the matron?

A. I did soon after, half an hour or so; it might be longer; I don't remember exactly; it was the same day, that very afternoon; Mrs. Fulford while on ward twelve received fruit twice out of that money, and but yet she refused to believe I had given it up to the matron.

Q. Did she accuse you at any time there that you had taken this money?

A. Yes, sir, frequently; when I would oppose her in any thing I thought was wrong she would twit me of taking this money; I thought it was a dollar; in speaking with Mr. Morgan he informed me it was twelve shillings; Mrs. Fulford said she had slept in a dormitory with eight beds and only one window; there is no such room on the ward or in the house; the highest number of beds on a ward was seven beds and two windows and a window opposite, and Mrs. Fulford had never slept in a dormitory; she had a single room each time she was on the ward.

By Mr. Haskell:

Q. Do you swear positively she never slept in a dormitory?

A Not to my knowledge; not on ward twelve; I don't know about the other wards.

By Mr. Goodwin:

Q. How long had she had the money spoken about before you took it away?

A. I don't know I cannot remember.

Q. Was it a week?

A. I cannot remember; it was some time; she refused to give up the money.

Q. Did you report that to the doctors?

A. I don't remember; that.

Q. You say it was a violation of the rule?

A. Well in several cases like that a patient like Mrs. Fulford, if she won't give up money and is capable of taking care of it, we don't have a fuss to take it away. I would not have taken it away then only I had to remove her clothing, and found it in her pocket.

Q. Was it in a pocket book?

A. I cannot remember; there was so much to attend to that I never thought to be brought to account for it, and I have not thought of it, I reported to Dr. Blumer and I think he told her it was there, but she refused to believe it.

Q. Have you met Mrs. Pelton at any time since her discharge from the Asylum?

A. Yes, sir; I met her one afternoon last summer as I was walking up Genesee street; I did not recognize her, she had changed; when I remembered her she was quite thin, last time she was fleshier and dresst differently, and two ladies were together, and one of them called to ask if I did not know her; I said, "really you have the advantage of me;" she said don't you remember Mary Pelton;?" then I did remember her, she shook hands with and greeted me very friendly; I was not surprised by Mrs. Fulford's charges, because she had made them before they were investigated; but I was surprised at Miss Pelton's.

Mr. Goodwin — There are a number of witnesses which the Asylum authorities desire to call for examination before the committee. The nature of the testimony is cumulative, and in view of the statement of the committee, that time is very important to them, and they are desirous of making a speedy report to the Legislature, I have not called the witnesses.

The Chairman — The committee would ask Mr. Goodwin if he is prepared to give the names of these witnesses, and what he expects to prove by them.

Mr. Goodwin — I have a list of the witnesses among my papers which I have not present before the committee, which I can get. They are witnesses who have been attendants at the Asylum, and their testimony would be in reference to the treatment of patients and the visits of physicians during their service at the Asylum.

The Chairman — The committee would say in reply to the suggestion of counsel that immediately upon commencing their labors, they made efforts to ascertain the names of all persons who could testify in regard to the affairs of the Asylum, and particularly upon the several lines followed by the committee, and it soon became apparent to the committee, that the number of such persons was so great, that discrimination must be had in selecting such witnesses as seemed to the committee most credible and whose statements were most directly in point upon the subjects involved. That in consequence the committee themselves have a list of many witnesses, whose testimony would be cumulative upon all the points heretofore covered, and that the committee feel constrained, by reason of the short time now remaining before the close of the session, to limit themselves to the witnesses already examined, the same reasons in their judgment should apply to witnesses called on behalf of the Asylum, that the authorities should elect such, as in their judgment are the most trustworthy, and who can throw the most light upon the points which the Asylum wish to explain or to cover. The committee have endeavored to give the Asylum as large a share of the time as was possible, and are the opinion of that when the examination of Dr. Gray has been completed, it will be found that the proportion of testimony taken by the Asylum authorities will confirm this opinion.

ALBERT SPENCER.

Recalled:

By the CHAIRMAN:

Q. You are the coroner who has heretofore been sworn?

A. Yes, sir.

Q. Where are your minutes of the testimony taken before the jury in the Hughes case?

A. The minutes were taken in shorthand at the Asylum by the stenographer there.

Q. Has any copy been made out from them?

A. I understand there has; Mr. Matteson requested Mr. McGarr, the stenographer, to transcribe a copy of the minutes for his use.

Q. Has any copy been filed in the county clerk's office?

A. No, sir.

Q. Why not?

A. Because I have not had them myself; they have not been in my possession.

Q. Do you know what the requirement of the law is as to the filing of testimony?

A. I don't know the length of time.

Q. You know you are required to file them in the county clerk's office?

A. Yes, sir; but I do not know how long a time is allowed

Q. Do you intend to file them there?

A. Yes, sir.

Q. When?

A. Soon as I can get them.

Q. The committee has asked you to produce a copy of the testimony for them?

A. Yes, sir.

Q. Have you such copy for them?

A. I have not yet; I believe I stated to you that Mr. Matteson has them in his possession and does not like to give them up until after this trial.

Q. What reason did Mr. Matteson assign?

A. That he wanted the minutes for his own special purpose during the trial and he had them before the grand jury, when these men were indicted.

Q. Did he say that he was afraid Mr. Morgan, counsel for the committee, might use those minutes?

A. Yes, sir; he spoke of that.

Q. Mr. Morgan is counsel for one of the defendants?

A. Yes, sir.

Q. In your judgment is that a sufficient excuse for non-production of these minutes?

A. Well, they are under lock and key and I cannot get them, unless he gives them to me.

Q. And the district attorney refuses to give them?

A. Yes, sir.

Adjourned to meet at room B, New Capitol, Albany on Tuesday next, April 1, at 3:30 P. M.

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ROOM "B," NEW CAPITOL,
April 1, 1884, 3:30 P. M.

Present — Messrs. HOWE, HASKELL, OLIN and BROWN.

Proceedings continued as follows:

THOMAS E. BENEDICT,

Sworn and examined, testified as follows:

By the CHAIRMAN:

Q. What is your age?

A. Forty-five.

Q. What is your position?

A. Deputy Comptroller.

Q. In the course of your observation as Deputy Comptroller, can you inform this committee what is the custom as to receiving interest upon deposits of State money?

A. The State receives interest on daily balances in the various banks of the State, it having one deposit bank, and transfers being made to several other banks in New York and Albany, as the funds require, and the rate of interest received by the State is two and one-half per cent.

Q. Do you know of any of the State charitable institutions which receive interest on their deposits?

A. As a member of the Legislature in past years, and examining the reports of the insane asylums, I found that the Middletown Homœopathic Asylum credited the fund with interest on deposits.

Q. You state this from the examination of the reports of the institution made to the Legislature?

A. Yes, sir; it appears as a credit item.

Q. Do you know of any other State institutions which receive interest on deposits?

A. I have not discovered any.

Q. You were a member of the investigating committee of last year to investigate the Utica Asylum?

A. Yes, sir.

Q. And you there became familiar with the affairs of the Utica Asylum?

A. Well, somewhat.

Q. Did you there make any inquiry as to the amount of their annual receipts?

A. That is a matter of record.

Q. What is your present recollection?

A. My impression is that it is about two hundred thousand dollars?

Q. Do you know what their daily balances were?

A. No, sir; I do not remember; the treasurer of the Asylum was before the committee and came at my request, and we examined into his accounts and the question of paying interest was then referred to.

The CHAIRMAN — The chair will state to the witness that it appears in the evidence taken by this committee, by the testimony of the treasurer of the Asylum, that the annual receipts were not far from $200,000, and that their daily balances run from ten to twenty-five thousand dollars, but that there are times when there is a debit balance of from five to ten thousand dollars, and that the treasurer of the Asylum testified that allowing for those debit balances, he would say that the average daily balances of the institution would be not far from ten thousand dollars; assuming such to be the fact, I now ask you whether in your judgment it would not be expedient and feasible to obtain interest on such balances?

A. Undoubtedly.

Q. In your judgment, at the present market rate of money how much do you think should be obtained?

A. Well, inland country banks would undoubtedly pay three per cent to have such a deposit, and we would give the best security; if the asylums of this State were in the same position that other departments of the State government are, in reference to their finances; that is, of receiving their money through the Treasurer upon the warrants of the Comptroller, the Comptroller would not feel justified in any business transaction of the State, in advancing to any department a sum of money allowing even five thousand dollars daily balances; he would keep them in a limit sufficient to enable them to carry on their necessary expenses; and it would be incumbent upon him, under the statute, to keep that money in the treasury, drawing interest as other funds of the State do; by that means the State would be benefited hundreds, and perhaps thousands of dollars, that are now lost to the State, and will continue to be lost to the State, if this system prevails, as I believe it now does, in connection with the asylums of the State, but which I am not aware is to be found in any other department of the State. No moneys are paid from the treasury in any other department of the State, except upon a requisition or draft stating specifically what the money is to be used for, and that it is necessary to be expended for that purpose; that would be done if the asylums received their funds as other State institutions do.

Q. The only funds paid by the State to the Asylum, at present, is the amount for salaries, etc., the Asylum receiving remittances from county and city treasuries and friends of private patients; in your judgment would it be convenient or desirable that the county treasurers should make their payment to the State Treasurer for the support of their insane patients, and let the State manage this fund, and pay it over to the Asylum as needed from time to time?

A. I see no difficulties attending such a plan; the same system or principle is practiced in connection with numerous State departments, not only in raising funds generally for the State, but in raising funds in one locality to be distributed after it is in that locality and for its protection.

Q. It also appears in evidence that the payments by county treasurers to the Asylum are made semi-annually, and that in consequence of such semi-annual payments occurs the occasional debit balances whereby the Asylum is obliged to tide over deficiencies by borrowing from the bank; from your knowledge of county management, would it be possible or expedient for collections to be made from the county treasurers by the Asylum authorities, or by the State on their behalf, more frequently than semi-annually?

A. Undoubtedly; estimates are made by the boards of supervisors for the coming year and taxes are collected in advance, and the money should be in the county treasuries, awaiting even, if necessary, a monthly requisition. The questions you ask rather lead to the solution of a proposition which would meet the suggestion made by Comptroller Olcott, which appears in this report before me on the Apgar investigation; I refer to the report of the Comptroller of the State of New York, made April 9, 1879, Senate document 67; the suggestion here made was to require all the receipts of such institutions to be paid into the State treasury; for the Legislature to appropriate sufficient sums, annually, to cover the expenses of the asylums; the appropriations to be advanced by the Comptroller on monthly estimates, made by some authority connected with the institution to be decided upon, for the purpose of arriving at the necessary appropriation on the part of the Legislature; it was proposed that the State Board of Charities should receive estimates from the different asylums which they should consider, and they were to make up a budget and report to the Legislature as to the approximate sum needed; Mr. Olcott further recommended that the State Board of Charities should be required to receive from the asylums an annual report classified as to the items of expenses and receipts covering such details as the State Board of Charities deemed wise; also statements of the quality, quantity and price of the various articles used; this recommendation has been but recently called to my attention; the first part of it, it seems to me, could be made practicable in every respect through the appropriations and administrations of the fund through the office of the Comptroller; as regards the action of the State Board of Charities, that is a matter in which I have no particular opinion; it is a plain business proposition for which perhaps the State Board of Charities was not originally formed to deal with; but it is entirely in harmony with the workings of the State departments through the Comptroller's office to administer, in connection with the State asylums, the funds that would be required to be advanced in this way; with respect to the specific matter of the details of auditing their accounts, that would bring in nothing new, because every

department of the State, including the asylums, are required to send, to the Comptroller's office, a duplicate copy of every bill they incur, and it is liable to be returned for correction; and I am of the opinion that the Comptroller's office could fix and enforce a system that might be termed uniform in all the asylums of the State, if the matter was deemed desirable.

Q. Are the bills which you have just referred to, which are sent to the Comptroller's office — the duplicates — are they sent before payment is made, or as vouchers for the payments made?

A. As vouchers for payments made.

Q. Then what possible action can be taken on the bills by the Comptroller's office?

A. The office has undoubtedly the power — full power — as to the propriety of the expense, and as to its being a good business transaction.

Q. As a matter of fact, does the Comptroller often make any special examination of such bills as they come in?

A. I cannot speak for the past; I can say that I believe it will be so for the present and the future.

Q. How can the Comptroller's office make any effective recommendations concerning bills which have already been paid?

A. Well, I believe it would be a moral effect, perhaps, only.

Q. Would the system you now suggest enable the Comptroller's office to have a more direct control over the purchase of goods?

A. I have not suggested any system myself.

Q. Suggested in the report of Comptroller Olcott, I mean?

A. Yes, sir; I wish to arrive now at the statement of the feasibility of the plan he suggests in his report; I say I think it is feasible.

Q. Would the carrying out of that suggestion give the Comptroller's office a more direct and responsible supervision over the purchases of the asylums?

A. It would result undoubtedly in some form of legislative action tending to place the asylums in that respect under a similar arrangement to that which now exists in connection with the prisons of the State.

Q. Please describe briefly and plainly the system in vogue in relation to the system of purchasing for the prisons of the State?

A. Before the warden of any State prison can incur any expense he is required to make an estimate in minute detail of all the necessary expenses for the support and maintenance of the prison under his charge; such estimate is to be for the following month; that estimate must then be presented to the Comptroller, who must be satisfied that the expenditures sought to be made are necessary and proper; and upon the authorization of the Comptroller, the warden or agent is permitted to make his draft on the Treasurer for the same estimate, or any part thereof that the Comproller deems is proper; such amounts are then to be paid by the Treasurer, on the warrants of the Comptroller, and the money is to be expended by

the agent on behalf of the State for such articles as are included in the estimate and have been approved by the Comptroller. (See Laws of 1855, chapter 532, §§ 11 and 12.) If the agent of a prison renders bills for articles not included in the estimate they are disallowed and thrown out.

By Mr. HASKELL:

Q. Is there any provision of law in regard to the purchase of supplies for the prisons, whether on bids, on competition, or in the open market?

A. The estimates are made of a character that it is within the knowledge of the Comptroller as to the justice of the price, and the safety of the system of purchase; if not he can require it to be approximate to his own ideas.

By the CHAIRMAN:

Q. In other words, there is an independent supervision by the Comptroller who has not made the purchase, over the superintendent, who has?

A. Yes, sir.

By Mr. HASKELL:

Q. Or who is about to make them?

A. The bills are rendered against these several items; then further than that the Comptroller classifies all the articles that might be used in State prisons under different heads; here for instance, is one estimate that includes salaries, another estimate includes provisions, another estimate dried fruits; another estimate food and grain for the horses and cows at the prison — etc.; making in all ten or twelve, or fifteen different schedules; for instance, 250 bushels of this, a ton of that; 500 barrels of flour, so much cod-fish, etc.; then the bills will be examined as to the reasonableness of the estimate made, as to quantities and prices; if it is a mattress for the warden's house (and the State furnishes his house) it has got to be made in the estimate, or else it cannot be purchased; suppose in desiring to buy that mattress he should estimate it at $40 — in the Comptroller's office, is a clerk whose special duty it is to examine these estimates and vouchers monthly; he is at present a man who has been engaged for years, and he is familiar with the market prices of things; he understands generally the prices of goods, and he would not allow an estimate to pass, if it contained an article set down at an exorbitant sum; an article like a mattress, for instance, as I suggested just now, if he knows that a good one can be purchased for $25 he would be very apt to reduce the estimate to that sum; so that there is not only a safeguard over the estimate, but when the vouchers are returned to the Comptroller's office, they go to another desk where two men sit who take the current price lists of the day and cut them out and put them in a

scrap book where they can be referred to, and compared with the prices paid; in the several institutions the prices approximate very near, considering the condition of affairs in the different parts of the State; that applies to all the institutions of the State except asylums, and it may apply to them by finding fault with their price; at the end of the year when they are required to report upon its but I believe the present system should be made to bring the supervision of the Asylum purchases into the Comptroller's department; to that extent it can be now applied.

Q. Has it ever been so applied?

A. I could not say; as for that I do not know any thing about last year; I would say further in regard to the prison system, the Superintendent of State Prisons, Mr. Baker, receives all estimates from the wardens before they come to us, and he examines them; they are signed by the wardens, and approved by the Superintendent, and then the wardens draw directly on the Comptroller at the beginning of every month.

By the CHAIRMAN:

Q. And then they pay those bills as they come along, and the bills are sent to the Comptroller's office as vouchers?

A. Yes, sir; and the second draft is not honored unless the vouchers for the first draft showing the balance on hand is received.

By Mr. HASKELL:

Q. But there is no provision of law that you know of which requires wardens to buy upon the open market under competition?

A. I think the Superintendent of State Prisons has authority in that respect, and I am sure that the Comptroller could exercise authority, not as to the method of buying, perhaps, but as to the justice of the purchase and the price paid.

Q. So that if they can satisfy the Comptroller that they are doing properly, it does not matter of whom, or where, or how they buy?

A. Certainly not; and I do not see why this present prison system could not be applied to the Asylum system. When I speak of this matter, I speak with a knowledge of the business transactions connected with the asylums acquired from a careful inquiry into the subject, as a student of the reports of such institutions, and also from knowledge gained in looking over the vouchers, from which I find there is such a variance in the system of management connected with the asylums of our State, that no man with an ordinary capacity for business can remain ignorant of it. While in business matters there must be certain rules that are almost invariable in good business management, yet in the asylum management of this State, in their business details, there is such a variance that it calls for some effort to apply something like the similarity that characterizes business transactions.

The committee then took a recess until to-morrow (Wednesday) afternoon at 3:30.

April 2, 1884.

The committee met at Room 76, Kenmore House, Albany, at 3:30 P. M.

Present—The whole Committee and Mr. GOODWIN of counsel.

Dr. JOHN P. GRAY

Recalled:

Mr. GOODWIN—Mr. Chairman, the doctor desires to make some corrections to be made in his testimony which I will give, and the stenographer will be kind enough to take.

Dr. GRAY—I will say to the committee that it was some little time before I got off the stand when I gave my testimony; I did not hear very distinctly from my condition, and I was suffering from so much pain and in some matters I do not think I was heard correctly.

Mr. GOODWIN—The corrections are as follows:

Page 9, fifth line from bottom, the words "tuddle it through" should be "struggle through it."

Same page, third line from bottom in place of dash, the word "necrosis."

Page 12, in middle of page, the words "and he is a ticket agent," etc., should be strioken out, as it was agreed not to designate persons.

At the bottom of page 13 put in as exhibit what is said under the head of "Fatal Casualty" on pages 45 and 46 in fortieth annual report, and what is said on same on page 11 by the managers. (See Exhibit 44 in Appendix.)

Page 14, on last line of answer to fourth question, for "subpœna" say "writ," etc.; at same place say, "no defense was made," and put in as exhibit fortieth report, pages 44 and 45 on case of *habeas corpus* and from page 11 in regard to Silkman and *habeas corpus*. (See Exhibit No. 44 in Appendix.)

On page 16 in line 9 of third answer, for "pauper unable to support himself" put "not a pauper and he is unable to support himself."

Last answer on page 16, the words in third and fourth lines "in other cases they are retained here until they do recover," should be stricken out.

On fifth line the word "explained" should be "communicated."

Page 17, in first paragraph where it reads: "In that case he also then examines me, then he requests the district attorney, that

is the justice or the State Commissioner in Lunacy orders the district attorney" should read, "In that case he also then examines me. Then he requests the State Commissioner in Lunacy to make an examination."

In the answer to the next question, on page 17, instead of "Yes, sir; then the law states, or the order usually states, the same thing, and then," it should read: "No, sir; the law states that 'in case of recovery,' and the order usually states the same thing, that within sixty days," etc.

Page 17, last line, the words "for I have been to the house," should read, "I have been in the wards."

Page 18, answer to fifth question, the words "Yes, sir; I was going to say," should read "No, sir; I was going to say."

Page 19, fifth answer, third line, should read "doctor there," instead of "doctor here." (This testimony was given by Dr. Gray in the Asylum, right opposite the doctor's office; hence, the use of the word "here.")

On fourth line the word "office" should be "house."

On fifth line after "or" should be inserted the words "the office."

On sixth line the second "it" should be "this."

In the next question, first line, the words "doing that" should be "doing such service;" and on the next line, after "institution" should come the words "if he left."

Page 20, line next to last, of sixth answer, the word "got" should be "also."

Page 21. The answer to the question asked by Mr. Morgan, "In those cases are you ever called" should read, "Yes, sir; I have been called; I am not called without there is some one quite sick or something unusual; well, for instance, suppose a person should barricade his door and then try to break out; all these and other things are looked after; or suppose a person should barricade his door and should be making a disturbance, etc."

Page 25, top line, "reported the fact that while they were out this occurred," should read, "the fact has been reported that while out working it has occurred."

Page 26, twelfth answer, second line, "generally" should be "now."

Page 27. To the question, "You are aware that the people outside of the Asylum have an idea that you have made a large amount of money out of the expert business?" I answer, "I am not."

Page 27. In answer to question by chairman, second line, between the words "refused" and "on" insert "recently."

In the next answer, "In some cases — take one case, the Heggie case," should read, "In some cases I have received reasonable compensation, but in other cases little or nothing; take one case — the Heggie case," etc.

Page 28. The last answer is very much mixed, and the names and circumstances of persons are given which I did not suppose

were taken down by the stenographer. I should ask that these words be stricken out: "I got a very pressing letter from a physician in Michigan, who somehow or other learned I was there in Boston. I was visiting an uncle of Mrs. Gray; she had gone down on an anniversary, or something of that kind, to the Rev. Dr. Lothrop's, on the occasion of his birthday."

The CHAIRMAN — There is no objection to that part being stricken out.

Mr. GOODWIN (continuing):

Those words refer to two persons and two occasions; my recollection of that is this: after the words "usually refused to go and unusually gone," this question was asked me: "have you done any private professional work when away?" to which I answered: "I went once to visit a person while I was away when I went to Boston on a visit; I went to see a person there and he had asked me to go before," etc. The interjected sentence which I have asked to have stricken out was not with reference to a friend from Michigan, but had reference to my going from Boston to Albany to see the wife of Professor Samuel B. Ward, who was very ill, and who died last November.

Page 31. In the eighth answer, third line, "case," should read "court."

Page 32. In the fourth answer where I say: "I should say it was about fifteen days that I was away from the institution," the fifteen days I intended to use as embracing all the time I was away in private professional employment, and not with reference to any particular case; I never was away fifteen days in any private case. I have spent much more time than that in nights on a case, counting two nights a day.

On the same page, "Q. What compensation did you receive in that case?" and the answer, the next question and the next answer, I shall ask to be stricken out; that brings up the whole point to the committee. I ask, Mr. Chairman, that with reference to the private affairs — amounts received for professional work should be stricken out; if it is not, the facts and names of the parties should appear in connection with the case. As I understand it, the object of this inquiry is simply, if it has any relevancy at all, as to the doctor's being away from the Asylum, and his being away, if any neglect of duty follows; I take it that the amount received by him is not a question which the committee cares to investigate; I do not see how it is at all relevant; I am more inclined to that opinion from a remark made by Mr. Rice upon one occasion during the investigation that it was not a matter of amount that the committee desired to investigate upon.

The CHAIRMAN — Do you desire to be heard any further on the question, Mr. Goodwin?

Mr. GOODWIN — I do not; Doctor Gray, if the testimony is to stand, desires to add something in connection with it.

Mr. GOODWIN—On page 32, "Q. What compensation, etc.," that question and the answer to it, and the next question and answer I move to strike out on the ground that it has reference to the private affairs of Doctor Gray; that the amounts so received for professional work are not relevant to this investigation; if I had been present when the questions were asked, I should have advised Doctor Gray to decline answering them on the ground that they were irrelevant, and related solely to his private matters.

(The committee then went into executive session and considered the question.)

The CHAIRMAN — The committee have considered the motion of Mr. Goodwin in a private conference and are of the opinion that the questions and answers should not be stricken out for the following reasons: That the committee are investigating charges of inefficiency in the management of the Asylum; that as a part of such charges it was publicly stated that Dr. Gray had been in the receipt of a considerable professional income from expert work which took him away from the Asylum, and that thereby he neglected his duties; the committee are of the opinion that those questions are in the line of that inquiry, and are material and necessary.

Mr. GOODWIN — Then the doctor has something more to say.

Dr. GRAY — This case referred to on page was that of a Mr. B., concerning whom I had been consulted sometime before; I had a consultation with Dr. W. and subsequently some correspondence in regard to the case; the person referred to then was in Europe; Dr. W., while in Europe, examined the case and on his return I had further consultation in connection with the case and in relation to a report that was to be made by him; subsequently I received a telegram asking if I should be in New York at a certain time; I was not there until about a week afterward, then I saw the attorneys in the case and they requested me to examine this gentleman carefully and thoroughly, and examine into the case; I proceeded to do so, and I made a thorough and full investigation and made a written report to the attorneys; I do not think now, in view of the whole matter, that the charge was a large amount for that kind of responsibility; it is an exceptional thing — the exceptional fees of a life-time; always when called by Governors and State officers, county and district attorneys, they have generally allowed a sum in proportion to the time and responsibility; I have never made out a bill of that kind in the thirty years that I have been at Utica.

The CHAIRMAN — It is not suggested that there was any overcharge made by Dr. Gray in this case, nor in any case; the only object of the inquiry is as to the nature and extent of his outside professional business.

Page 33, second line of second answer, the word "two" should read "all."

In the third answer "yes, sir," should be "no, sir."

The ninth answer, "I should think it was ten or twelve days and probably twice as many nights," is not right; I did not occupy any

time from my duties in the day time in that case; I have informed myself and now state that I was on the stand on four occasions and all these occasions were days on which I was lecturing at Bellevue.

The twelfth question and answer I should ask to be stricken out.

On 34th page, by "expert testimony" I did not intend to cover medical testimony, either for the part of prosecution or defense; I desire to make this further answer: I have long believed that "expert" testimony, so called, that is, testimony upon hypotheses, especially where life is concerned, is misleading and wrong; that there is danger of injustice to the individual and to the public; that in all such cases the medical witness should be in full possession of the facts of the case, and should not go on the witness stand until all the evidence of both prosecution and defense is in, and that in no such case should a medical man be put on the stand unless he had personally examined the alleged criminal; such "expertness" is, in no proper or scientific sense, testimony or evidence, but simply opinions on probabilities and possibilities; I have been in cases where the hypothetical questions were contradictory and where I had been obliged to give an affirmative opinion on both sides, making the so-called "expert" testimony nugatory; it was in regard to this class of cases, and they were the most numerous, that I determined not to go to unless I was compelled.

To the third answer I desire to add the words: "At this time;" same page, I desire to make a fuller answer to questions four and five, in regard to the case of Smith in Cattaraugus county and the Buckhout case; I was in both requested first by the district attorneys, then I was subpœnaed and as I understood I was to be examined as a so-called "expert" on a hypothetical case, and not on the real case, I did not go until the sheriff took me on an attachment; in the case of Smith I asked the court to permit me to examine him; this was granted; I found him a very insane man and so informed the court and district attorney; the trial was put over; in the mean time his insanity became so pronounced to the officials themselves that he was sent to the asylum without trial.

In the case of Buckhout I was not permitted to examine him but heard all the evidence on the trial.

The last answer on page thirty-four, "Yes, sir, and because I preferred not to go" is incorrect and should be: "No, sir, but because I preferred not to go."

Page thirty-five, the second answer "anyway," should be "many."

Page thirty-six, answer three; I should ask that the word "V——n," be represented by "V," and "Mr. W——s," by "W."

To answer seven, at page thirty-six, I would like to make as a further answer: "Perhaps if all cases that I see within and without the institution, for pay or not for pay, were considered, they would amount to more than once a week."

I would ask that the exhibit in regard to the Lunacy Commission report be inserted after the question "And you consider it a fair

digest or analysis of that report," or at least that the tabulated statement of injuries at the asylum and the exhibit from the Lunacy Commissioner's report shall come together. (See Appendix for the first named, and for the "Tabulated Statement," see Dr. Gray's testimony, *supra.*)

I would make as further answer to the first question on page forty-two, the following: "There used to be a rule at one time" "or, perhaps, more correctly speaking, a custom."

Page forty-two; in answer to Mr. Haskell, "42 and 43" in both places should be "52 and 53;" I only came to the Asylum in 1851.

In reference to Mr. Morgan's questions touching the managers, I ought not to have been asked to express an opinion.

Page forty-four, the first line, the word "should" ought to be stricken out.

In the fourth answer "oh" should be "no."

On page 45, to the question "As a special report to the State Board of Charities?" I desire to make the further answer. "A copy of such a report I herewith present. This report was made to the State Board of Charities the very year that they entered the complaint, and is contained in their annual report to the Legislature for that year." (See Exhibit No. 34, J. H. M., in Appendix.)

In the next answer, 9th line, "get his books" should read "get such facts."

Q. Now I call your attention to page 26 of the Governor's message to the Legislature, transmitted January 1, 1884, in which he says: "A report made to the Comptroller by the agent appointed in 1878 to examine their financial affairs and business administration, contains much valuable and startling information. By this report it appears that our State institutions compare very unfavorably in the cost of their maintenance with those of other States and countries. Confined to our own State, the result of the inquiry in this respect is no less striking." Have you read that statement made by the Governor?

A. Yes, sir, I have.

Q. Have you also examined the report made by the State agent in 1878, Mr. Apgar?

A. I have, very carefully.

Q. At my request?

A. Yes, sir.

Q. Did you make an analysis of that report?

A. I did.

Q. Have you got that analysis with you?

A. I have.

Q. Is this it? (Producing the same.)

A. That is the document — that is the analysis.

Mr. Goodwin — I desire to offer in evidence this analysis by Dr. Gray of the report of Mr. Apgar, in evidence, and I call the attention of the committee to its careful consideration.

The CHAIRMAN -- It is admitted.

(The document referred to is marked "Exhibit No. 35, J. H. M." See Appendix.)

Q. Doctor, I call your attention to pages 268 and 270 of the printed record — the testimony of Mr. Winston — and I ask you, have you been in the habit of bringing business matters of the institution, and any recommendations or changes that occur, to the attention of the board of managers?

A. I have, always.

Q. Have you observed any delicacy on the part of any of the managers in presenting their views in your presence?

A. Never.

Q. Please state your recollection of what occurred at the meeting of the board of managers, if any thing, in reference to Mr. Winston bringing the Butler & Hamiton bills before them?

A. My recollection is that toward the close of the session of the board, and after the committee's report had been presented, one of the managers, General McQuade, the chairman of the auditing committee, said that Mr. Winston wanted to call the attention of Dr. Gray to a bill in regard to feed that Mr. Winston thought was purchased at too high a price. Mr. Winston then turned to me, and said that the bill was in reference to feed for cows — Mr. Reeder's bill; I replied that that matter had been under consideration before, that I had inquired of the steward about the price of that feed, how it was that it should be higher than some other, and that he had stated that it was buckwheat feed, and was a higher price anywhere in the market, and that the difference in price was more than compensated for by the value of the feed in the production of milk.

No other bill was alluded to, and no other items in any other bill were alluded to during the meeting of the board; either Mr. Winston himself, or General McQuade said that Mr. Winston thought that some improvement could be made in reference to the supplies; this was directed to me; I said that whatever improvements or suggestions could be made, I certainly should favor, or any thing that would in any wise tend to economy, and proper care of things, and that I should be happy to have any suggestions in regard to it; then Mr. Lowery moved that the whole subject of supplies be referred back to the auditing committee to report at the next meeting of the board; I do not think there was any other word said on the subject.

Q. Is General McQuade connected with the McQuade Brother's liquor establishment?

A. No, sir.

Q. As you understand it he has no pecuniary interest in that firm?

A. No, sir; I understand he never has had any such interest in it.

Q. Is he one of the brothers of the members of that firm?

A. He is the brother of Thomas R. McQuade of that firm?

Q. You stated in your former examination that Dr. Vanderpoel

and Dr. Dayton were retired from the management by Governor Cleveland?

A. I said so in reply to a question.

Q. Now state what, in your judgment, is the necessity of having a medical man on the board?

A. I think I stated before in my testimony that I thought there ought to be at least one medical man on every board.

Q. Are his visits frequent — the medical man — when he is on the board — frequent to the Asylum?

A. When we have had a medical man on the board — we always had generally two — the medical man was the more frequent visitor, and was a man with whom the superintendent could consult about the cases and other such matters much more than he could with a non-professional man.

Q. Have you at my request made some notes of your views of the system of medical administration under the statute?

A. I have; I have them here.

Mr. Goodwin — I should like to have that read, and have the stenographer take it down; it is part of the doctor's testimony; it may cover a good deal of ground that the committee might want to ask about.

Dr. Gray — These are my views upon medical administration:

As I understand the law, and the rules and regulations of the Asylum, defining the duties of the officers and employees, and all matters connected with the medical administration of the institution, the responsibility rests on me.

To secure the immediate and personal care of patients I am given a staff of five medical assistants, four of them for the daily and constant visitation of the patients, and one for scientific duty in microscopic and chemical work to aid and facilitate diagnosis and treatment.

I am also given a steward and matron with certain duties prescribed, pertaining to the order and visitation of the wards, and the physical wants of patients. Also supervisors and attendants to be in constant association, living with the patients, to carry out the system of general and medical care under the immediate direction of the physicians.

The superintendent is the consulting medical director and not the attending physician. It would be impossible for him to be both, in my judgment — and I have long acted upon this — the superintendent should constantly ascertain the condition of the patients through the attending physicians and by personal visitation of those requiring visitation, and by general visitation at such times and hours as he may deem best, in order to keep himself informed of the patients and the general condition of the wards, and to observe how the attendants are performing their duties.

His instructions and directions for attendants in regard to patients should be mainly through the attending physician in immediate charge, in order that in every particular the attending physician on

the one hand should know about them, and on the other hand, that the attendants should understand that the attending physician did so know that he carried the authority of the superintendent. This secures certainty and unity of action between the medical director and the attending physician, and obedience on the part of the attendants, all of which is indispensable to the proper care of the patients and proper discipline.

In a general hospital, and in ordinary practice, a consulting physician or surgeon would not deem it right in the case of a sick person to prescribe and direct, without the knowledge of the attending physician, and if the necessity for it arose, he would, as soon as possible, inform the attending physician. It would be equally wrong and would be subversive of discipline to do otherwise in a hospital for the insane.

If a patient was to be prescribed for by more than one person or directed by more than one person at the same time, it would beget uncertainty and doubt in the mind of the patient. If directions were to be given to the supervisors and attendants indiscriminately, uncertainty and laxity would follow. Then in case of neglect or mistakes or injury the responsibility could nowhere be fixed.

I have followed this course for many years and with success in the treatment of patients and have instructed and educated my assistant physicians in the system and it has developed in them a sense of responsibility and duty and a degree of usefulness which I believe no other system could accomplish.

The true mode of executive administration, whether medical or otherwise, is for the executive officer to give the necessary authority to subordinate officers to comprehend and discharge fully their duties and then he can justly exact responsibility in return. Employees, too, must not have too many immediate masters, but must be informed and understand that rules and regulations are for their guidance, usefulness and improvement as well as for the good of the patients and general discipline of all. The justness and efficiency of this system is demonstrated, not only by the harmony of action among officers, but in the good order of the institution and by the fact that there are but few personal difficulties or quarrels among attendants and that misconduct is exceptional.

In regard to the attending physicians and their duties, two are assigned to the care of each sex; the first and fourth are the attending physicians in the women's department and the second and third in the men's department. One on each side has the responsible charge. There must be unity of action between the two to secure success. For instance the notes in the ward-book and the presciptions, and directions in regard to the patients must be made by the one actually visiting the wards. If they are both together, all instructions, etc., are given by one in charge and known to the other. If a message comes to the office from the wards, and the one in charge is not in, the other must attend to the matter at once and inform the one in charge on his return. If it is a matter requiring a

note in the physician's ward-book it must appear. In this duty two heads may work together but one must be the responsible one.

The supervisors are next in responsibility and are three in number on each side, each floor through being a department. The medicine, and extra diet list and special instructions about patients, attended to by them, under the directions of the assistant in charge. They must constantly reside with the patients and communicate with the assistants in charge, each in regard to his department. In the absence or sickness of a supervisor the attendant in charge of the ward the supervisor lives on must act in his place. This requires in all, three persons on each side of the house to leave the wards with messages to the officers and does not take the attendants from their wards and the patients.

No patients can be changed from one ward to another, even on the same department, unless by order of the physician, and this is executed by the supervisors. If the superintendent thinks a patient should be transferred from one ward to another, he directs it through the assistant in charge. If he sees such a necessity while on the ward alone, and directs it, he immediately informs the attendant in charge and gives his reason for it, that the physician may be possessed of the fullest knowledge.

If the superintendent wants to see a supervisor or an attendant in the office, he has him called to the office by the medical attendant in charge, because such attendant must know when the supervisor is off the department in view of any possible contingency, such as calling off the attendant in charge of that ward at the same time with reference to some duty.

If any patient is to be brought to the office or to the visiting room, this must be done through the supervisor of the department in person, or by an attendant on whose ward the patient may be, in accordance with the direction given in each case by the physician.

If the assistant in charge calls any attendant of any ward to the office, he does it through the supervisor of the department the ward is on; and if the superintendent wants to see an attendant in the office, he should call that attendant through the assistant in charge and the supervisor.

All the medicines prescribed by the physicians are placed by the apothecary on trays, and those trays are taken by the supervisors to the respective wards, and all medicines are given to the patients by them. If they are unable to succeed in giving the medicine, it is immediately reported to the office to the physician in charge. When restraint is applied and when any matters outside of the ordinary routine occur, information comes through the supervisor of the department to the attendant physician in charge. So from the supervisor to the ward attendants in charge of individual wards, and from these to the ward assistant and the dining room attendants these regulations extend.

Thus, in the duties assigned, responsibility is recognized at every point; and the channels for conveying directions or making inqui-

ries established, rendering service here plain and simple, and securing unity and promptness in all ordinary care and in emergencies. Furthermore, the system educates and trains both officers and attendants from the lower ranks upward in the exercise of actual duties, and the inefficient and those unadaptable are likely to be dropped from the service before reaching the more responsible positions. In this system the duties and responsibilties are clearly defined, and the location of each officer and each employee fixed so that defects in service and violation of rules are readily located and remedied.

The ward attendants in charge are placed with the patients living with them constantly in personal attendance and care. They are to see that the assistants with them do their duty properly, and report to the supervisor if they do not, that the supervisors may be able to inform the physicians.

The supervisors live on the department with patients, and their duties are the oversight of the attendants and patients, each on his department. They are to observe and report to the physician in charge any laxity, inefficiency or neglect of duty, or any violation of rules on the part of the attendants. They are also to see that all the directions made by the physicians, relating to the welfare and care of patients on the department, are faithfully carried out, and to report any instances when they are not.

The physicians on each side of the house have the responsibility of the oversight of their respective departments, the patients, attendants and supervisors. They come constantly in immediate personal relations with all the patients and attendants. They are to consult the superintendent constantly about patients and attendants and all matters pertaining to the administration of their department.

The popular idea is, that the superintendent should embody every thing in himself and should be both the attending and the consulting physician. No superintendent could intelligently direct, personally and generally, the medical care of six hundred patients and the necessary attendants and nurses, unless, perhaps, where the household was practically stationary. He might then do this in a way. But in a hospital where there are more than four hundred new cases admitted annually no man could do it. He might actually walk through the wards of the institution and see the patients, but it would be impossible for him to give the necessary investigation and thought that the condition of the patients would require. This can only be done properly and thoroughly by an efficient medical staff in hearty co-operation. The system here delineated and carried out at Utica is, in my judgment, the only thoroughly efficient one. Under a system where the superintendent assumed the duties of the attending physician as well as the consulting, the members of his staff would become merely attendants and all medical duties would necessarily sink to the lowest ebb.

While the present officered staff is large enough, in my judgment, the medical service could be further improved by having two

graduates in medicine as cadets, the appointment to be made for a year or some definite period, as in general hospitals; such cadets to receive board, lodging, etc., but not to be salaried, and not to carry the responsibility of any officer, but to act as medical assistants in the departments. They could give particular attention to the actual administration of medicines where they were not taken voluntarily; undertaking the work of looking after the baths, remaining when necessary with specially sick people, copying the physicians' notes from the ward-book into the case-books and perform other clerical medical work. Relieved of these duties the attending physicians could give more attention to the higher medical duties. This would also instruct a number of young medical men and benefit the public at large by having more physicians with practical experience, and out of these assistant physicians might from time to time be selected.

I suggested this measure to the committee of the Assembly last year, but I see in their report they did not consider it favorably.

I have occupied every medical position in the Asylum, third assistant, second assistant, first assistant, acting superintendent, superintendent. I know by experience all the duties and responsibilities of each.

Though the law organizing the Asylum, touching all the duties of the officers, has never been altered since its enactment in 1842, the rules and regulations defining more particularly the manner of performing some of the duties have been somewhat modified.

After I was appointed superintendent, I was satisfied that for the efficient working of the institution the medical assistants should be relieved of some of the duties imposed by the regulations, and their time occupied in higher service, more strictly relating to the immediate medical and general care of the patients. For instance, in the rules, the physicians were directed to take common visitors through the wards; copy correspondence, keep the accounts of the clothing of patients as they come in and leave the Asylum; take charge of the jewelry, trinkets, money and all other matters found upon the persons of patients; superintend the cold, warm and shower baths. The superintendent was actually required to do the physical labor and detail of all business matters, as well as the medical department; to look after the farm, to have the farmer, gardener, carriage driver actually come to his office in the morning to get their instructions. The steward also came to the office of the superintendent to get instructions for the day. The changes that I felt to be necessary and most important related to the duties of the assistant physicians; creation of supervisors and heads of departments everywhere, such as engineer and a responsible person in the charge of the farm, one in care of the cows, one in charge of the garden, green-house, piggery, butcher shop, and put all these under the immediate direction of the steward, only to be generally supervised by the superintendent.

Q. Now, I will ask you, in case of a vacancy in the matter of an attendant on a disturbed ward, what do you do?

A. It is supplied directly from the other wards, usually from one of the front.

Q. How long a time, if any, is allowed before the vacancy is supplied?

A. It is filled immediately.

Q. Are patients ever removed from a quiet ward for punishment?

A. No, sir.

Q. State why they are removed from one ward to another?

A. They are removed from one ward to another solely with reference to their mental and physical condition; the wards exist in a large measure with a view of classifying the patients, and changing them constantly to keep up that classification properly, so that each ward shall represent a condition or phase of the disease; there is the disturbed ward, and the less disturbed wards, wards with more or less suicidal cases on, wards with quieter patients on, with more or less will control, down to the first ward; if a patient now on the first ward, and quiet, should become restless, sleepless, he may burst in the night, or in the day, into a maniacal paroxysm, or they may become simply disturbed so that they would disturb that whole ward, and become more disturbed themselves; they would be removed from the quiet ward; a patient may be on the most disturbed ward, and they might be moved to a middle ward in that respect; so if a patient improves they are moved from one ward to another; sometimes patients in the Asylum, on the same ward, will quarrel with each other, as people do out of the Asylum; it would be unjust, either to the general discipline of the ward or to these patients themselves, to allow them to remain together, if they cannot immediately reconcile their difficulties, or apparent difficulties; in that case one of them is removed to some other ward nearly like the one from which they are removed; I do not think the idea of punishment ever suggested itself to my mind; I should not think of such a thing; I could not conceive of such a thing as the punishment of an irresponsible, insane person; they take it as punishment very often; they take medicine as a punishment.

By the CHAIRMAN:

Q. Is it not possible, doctor, that such removals might take place without your knowledge?

A. It would not take place without my knowledge, either personally or through the assistant physicians; no person can remove a patient without a direct order from the assistant physician, or of the assistant physician for the time in charge.

Q. If, as a matter of fact, a supervisor without such order should remove a patient from one ward to another, when would it first be detected?

A. It would be detected immediately on the list, and detected by the physician himself on his round; I never heard of such a thing.

Q. So that it would be impossible, would it, for a supervisor to remove a patient on their own responsibility?

A. It would be impossible without immediate detection.

Q. So that if any patients in the past have been removed for such purpose, it must have been under the order of the physician?

A. Yes, it could not be otherwise.

Q. And you say you have reason to believe it has never been done for that purpose?

A. Yes, sir; it has never been done for that purpose.

By Mr. Rice:

Q. Are not these removals made upon the representations made to the assistant physicians or superintendent by the supervisors or attendants; that is to say, is not a representation of a supervisor or attendant often taken as sufficient ground upon which to base a removal of a patient from one ward to another?

A. Yes, sir; well, not fully; for instance, an attendant or supervisor, when the doctor makes his round on the ward, may report a certain change occurring in a patient on that ward, and may report the circumstances; the doctor knowing thoroughly that and the liabilities of the patient, may direct his removal at once to some other ward.

Q. Upon the statement made by an attendant?

A. Yes, sir; upon the statement of facts, or they may direct something else to be done.

Q. Is it not often, or sometimes the case, that patients are told that they will be removed if their conduct is not different from the ward where they are and placed on another ward?

A. I don't think it is put in that form, and I do not think it is held up in the way of a threat, or a punitive measure; that is a very common thing for patients to talk about; I have said, myself, to a patient getting excited ——; a patient may say "I am afraid I will have to be put on some other ward;" I have said to a patient myself: "Now, I hope you can control yourself; if you can we would a great deal rather have you remain where you are; if you cannot control yourself, we shall have to do so;" and that is so fully understood by the majority of the patients, that there is really not much complaint; we endeavor to impress upon patients — upon every patient, and upon the friends of patients, that they will be placed just where their condition will justify; now, it is a very common thing; only the day before yesterday a man said to me: "Don't you think I am quiet enough to go to No. 1?" I said "No, I wish you were; if I believed you could control yourself, and get along on No. 1, I would send you there; but I do not believe you can; it is not your fault, and I know you think you can;" well, he said he would; he said, "Very well;" now, he did not complain of that; now, that is the idea, and the — I never have used on the worst ward, or on the worst wards; I have endeavored to discourage the use of all rough wards that tends to give any idea, directly or indirectly, of

any thing punitive; but have used the more disturbed wards because they are so; each ward is really what the patients make it by the mental condition they are in, and we endeavor to classify with reference to that solely, and that is represented externally by the power those persons possess of controlling themselves — in their speech, in their conduct, and in the personal care of themselves; a very insane patient may be on the first ward; that person may have very marked delusions, which govern and control their ideas, and largely their actions; but they may have external self-control to such an extent that they will keep these things to themselves, and therefore they remain there; the very advantage in a large institution in reference to the number of wards is the power of classification by making as many — dividing the disease up into as many conditions as you see manifested in the whole of the disease, as possible, so as to make as little attrition between individuals as you possibly can; for that reason I have urged more wards in this last year; I think that we ought to have at least fourteen wards on each department for the proper and efficient working of the institution in this very matter of classification; the committee must have recognized, if you will allow me to say it, must have recognized the effect or influence of that principle in the case of the young woman who said she would rather be where she was than on a quieter ward, because she had been moved once or twice, and realized that going back was a great deal more unpleasant than remaining while those paroxysms existed; now, I had explained to her, in the remission of the disease, when she seemed the same as she did the day the committee went through the wards that when her disease was taking that form she must tell the attendant instantly of any disturbance that she may feel, and must try and control it; the rule is, then, that when the paroxysms become less intense, and the period of remission lengthens, a person is recovering; now, she, the next day after the committee saw her, was as furious a maniac as any one could ever see; no more responsibility about it in the patient than in a man who has a chill and fever to-day, and has none to-morrow, and then the next again comes on the paroxysm fo the disease.

Q. What was the cause of that young lady's insanity?

A. General running down — simply under-tone of the system.

Q. Is that a cause of insanity?

A. Yes, sir, frequently; a person running down in that way may either have an attack of mania, an attack of melancholia, an attack of hysteria, or an attack of neuralgia; now, if I may suggest something in association or connection with this question of removals: Now, there are persons who exhibit their insanity more largely in misinterpretation of the speech and acts of others than in any other way; and they take certain ordinary things and misinterpret them, and draw delusive creation that these persons are inimical to them and are operating against them; and this delusion exists against attendants, officers and fellow patients, and if they remain with those persons they are not likely to get along as well, and it is a great deal wiser to remove them to the care of somebody else.

By Mr. HASKELL:

Q. Is it not the general impression among the patients, or talk between them, that they are removed from one ward to another for punishment or "discipline"?

A. Well, it is not general, but they do think that; there are many who take it as a punishment.

Q. Do you not understand that there is also the same talk and impression among the attendants as to removal, that it is for the same cause?

A. No, I understand that attendants know and understand that the patients consider it a punishment, but the attendant does not consider it a punishment; there might be an attendant that did not know the difference between discipline; it is possible some attendant might think it was punishment.

Q. I say discipline *or* punishment; I do not make the discipline between the terms?

A. No, sir; I don't think so; I do not think attendants do; I do not think they can under the instructions they are constantly receiving.

By Mr. GOODWIN:

Q. Are you charged as the superintendent with the business management of the Asylum?

A. As an executive officer I am; but I am not charged, as I can see, with carrying out the details of the business.

Q. Please state to the committee what you understand that system to be?

A. I have intimated in what I have said of the medical organization, that when I was at the Asylum as an assistant, the superintendent did actually superintend the external work. When I was first appointed superintendent that same thing was done; the steward came in with list of things required in his office; the farmer came in to receive his day's instructions; the gardener came in, and the kitchen man came in, and the carpenter came in, and the plumber came in; and all those men were there in an array in the office where the assistant physicians were. I realized the difficulty of working in such a place as that; of course it was not for me, as assistant physician, to say any thing at that time. When I became superintendent I tried that for a little while; but I represented to the board that it was impossible to continue that state of affairs, it made the steward practically nobody, everybody else was all over the premises, and there was no responsibility if any thing went wrong, it was the fault always of somebody else; and it was a physical labor which occupied two-thirds of my time in looking after. I then adopted the system of organizing, and I may say this, that the committee of the board associated with me agreed to the arrangement proposed; I proposed the system of putting every thing outside except the

engineer under the care of the steward, the superintendent to exercise the executive control; all the outside to be done through the steward; that the farmer, gardener, green-house man, butcher, because we established then a butchery, and the man in charge of the pigs, should all be responsible to the steward; that they should understand that he carried the authority of the superintendent, and that they could not appeal to him except through the steward, and when the steward advised them to; that the superintendent, if he saw any thing wrong, called the attention of the steward to it immediately; that system was adopted and has been in practice ever since; another thing was that every thing should be in writing, that all orders and directions instead of wasting time in talking and giving them orally, that they should be in writing; that the engineer should take charge of the general work done, and of those who did the general repairs, etc., of the institution; that the carpenter and plumber and the painter should not waste their time in going to the office and talking with the engineer about work to be done, but should go every day or every morning and get the written orders with reference to any thing that was reported to the office needing repairs, such as a door lock off or a window broken; that such matters should all go down on a ward book as soon as it was discovered that any repairs were needed; for instance, take one ward and it will serve to illustrate all; let me suppose that on ward eight some patient breaks a light of glass, it cannot be communicated by an attendant to the man who would repair it, it must be done through the office; in such a case the attendant reports immediately to the supervisor and the matter goes down in the damage book of the ward; the entry, for instance, may be in this way: "Mrs. J. (or whoever it is) broke out so many lights of glass." The supervisor takes the book to the office, then an order is written out in the office; it is written in a book like a check book, with a stub, and from that office, the engineer's office, the instructions would be given to the painter to go on to that ward and put the lights of glass in; if it should happen that the engineer was not in the office, an office boy would be sent after him, so that the proper instructions could be given; then the painter goes (or if he is at the time at work on something else, as soon as he is at liberty) he goes and attends to the matter; then there comes back to the steward's office afterward the painter's book showing the date it was done, together with the slip giving the order in writing, and that can be compared with the other part of the book from which it came, the stub; now, that refers to every single thing in connection with the ordinary current matter of damages and repairs; a broken chair or a broken bedstead would not be allowed to remain on the ward; it is reported and this written order given; there is no time wasted in talking; the order is handed to the man to do the work and he sets about doing it; if a chair is broken it must not be left on the ward, it would constitute dangerous implements for use at once; it is immediately set outside the door; the carpenter gets

an order to repair a chair on No. 6, broken; he knows what stairway to go up and get that chair and take it for repairs; on that chair will be a little piece of paper marking the name of the ward so as to designate where it is from; the farmer cannot direct the cow-man about the cows, nor can he give directions to the man at the piggery; he only has control under the steward, and he is, as these others are, directly responsible to the steward and the steward to me, and I to the board of managers; every quarter I bring any matters of changes to the attention of the board; if it is any thing emergent that arises in the interim, as is constantly the case, I bring it to the attention of Mr. Campbell, president of the board, because of his thorough acquaintance with those things, such as machinery, water tanks, or things of that kind; if it relates to other matters, I generally go to one of the auditing committee; if it is a matter of law, any legal question arising, I go to a member of the board who is a lawyer and ask his advice; the steward has control, in the same way, of the kitchens, but he has no control of the attendants or supervisors; he cannot direct a single person who is in charge of patients; those are directed in the manner I have already described, wholly; the changes that have occurred in this department have been chiefly for the purpose of creating responsibility in one direction; everybody knows just what their business is and can attend to it.

Q. Can you state briefly the changes that have occurred during your administration in the department or grounds?

A. Since I have been there the farm has been almost entirely developed; there was not over three acres of garden when I commenced; the farm has since been thoroughly drained and put into admirable condition, all the grounds about the institution have been laid out and planted and put in order since I have been there.

Q. And in regard to ventilation?

A. The matter of heating and ventilation was under contemplation under my immediate predecessor; they commenced then and, his health failing in 1852, he went away and was absent a year and never returned to duty; all the work of heating and ventilating and remodeling the institution has been done since I have been there as superintendent, and during that period the changes that have been made, and the increase in the buildings have carried the capacity of the institution from 400 up to 600, and, at the same time, we have abandoned the 80 basement rooms, which will be equivalent to so much addition.

By the CHAIRMAN:

Q. How much has the farm increased?

A. About 70 acres; we have purchased that much more.

Q. That is the amount of land which the institution owns?

A. Well, the institution now owns about 200 acres.

Q. Eighty of which have been purchased during your administration?

A. Yes, sir.

Q. From whom was the purchase made?

A. One purchase was made from the New York Central railroad; the rest of the purchases were made in small lots, from Mr. Hopper and other persons who owned lots adjoining the Asylum land.

Q. Was any land, at any time, sold to the institution by yourself?

A. No, sir.

Q. Have you, at any time, sold or conveyed to the institution any land near or adjoining the Asylum?

A. No, sir.

Q. Is there any foundation for a suggestion that you have done so?

A. None whatever, except it be in connection with the supply of water, some years ago.

Q. Please explain what there was to that?

A. Yes, sir; up to the year 1867 or 1868, it was when Judge Allen was Comptroller — I think it was in 1868 — the supply of water was obtained entirely from wells on the grounds, and for a time from Nail creek, a little stream half a mile from the institution, which had been declared in the original organic act should be used to supply the institution with water, but it never had been condemned to that purpose, and, along in 1860 or thereabouts, the factories, finding that Nail creek had never been condemned, assumed it, and the Asylum was not permitted afterward to take any water from it; between that period and 1868 it continued to get its supply of water from the wells and, in addition, from the Chenango canal, the latter being used for scrubbing, washing and bathing, etc.; and often the supply was very much interrupted, so much so that for one time we had six weeks during which time we had to melt snow for a supply of water; then the managers tried to make an arrangement with the city water-works to supply water, but the water-works had neither the quantity necessary to guarantee a regular supply, nor the elevation in their reservoir which would carry the water to the necessary height to su ply the Asylum; then the managers endeavored to sink some wells hoping to, perhaps, strike an artesian well on the ground; that was a failure; about half a mile from the Asylum there was a large spring, and they endeavored to get possession of that — to purchase the land with the spring on, but the person owning it suspected what they were trying to get it for, that it was for the State, and they were unable to do any thing with him; afterward I talked with him about it and he said he was not going to favor the State especially, and he would not sell; not long after that Mr. George R. Perkins, of Utica, met me on the street, and said, "do you want to go in with me and buy Mr. Jewett's farm?" I said, "no, I don't want any farms, what do you mean?" He said Mr. Jewett had made an offer to sell his farm to me; he said he wanted the upper part of it very much, because he wanted

to lay out some streets in connection with his land, but he said he did not like the swamp part; I said, "will you divide the land and you take the upper part and give me the swamp part?" Well, said he, "there is something in that or you would not ask that;" I said, "to be frank with you I do not want to take any advantage of any thing, but I think the swamp part is as valuable as any other part;" but, I said, "I don't want any land;" he said, "well, suppose you — do you know anybody who does?" I said, "yes, I will frankly say to you that the managers of the Asylum would like to get the water that is in that region, but I cannot do it, I cannot buy it;" I said, "if you will wait sometime, I will consult the board of managers and then come and tell you: he said that he had only until ten o'clock the next day to do it, if at all: I went right away and consulted three of the managers, and they told me to take it at once; to take half of it with him, take it jointly, with the understanding that they could take this water; I had an agreement immediately drawn up to that effect, and that I was not to hold the land if they wished it, and was not to participate in any advantages that might accrue in any way in the matter; I signed a contract with him and took this land, which was at a cost of $24,000; the reason was that he said he had not all the money to advance; I borrowed the money and advanced the payment; I simply stood in that relation for sometime, until Mr. Perkins was unwilling to convey this to the State; there was no contest or quarrel or any thing like that about it; it was discovered that there was not enough water for the Asylum elsewhere; the Comptroller came up and consulted with the board of managers, I was present then, and the whole matter was talked over, and it was thought better then to have the managers apply to the Legislature for authority to condemn this land, and thus secure a sufficient amount of water at the Asylum; it was placed in the hands of the Comptroller and he had commissioners appointed; Delos D. Wolfe, of Oswego, Van Rensselaer Richmond, who was then State Engineer, and Dr. Dutton, who was afterward Canal Auditor, who were to appraise the land; and they did so; the water is very fine water and furnishes a larger supply than we need, even if we reach the standard of 200,000 gallons a day; in this transaction with the State, I declined to do any thing; I conveyed back to Mr. Perkins; I was unwilling to be associated with any transaction, directly or indirectly, that would place me in any false position; all that was ever done was that there was paid back to me the exact sum that I paid out, without paying me the interest; that is all the relation that I had with that matter, and that was the only matter that I was at all connected with in the taking of land by State there.

Q. So that you did not directly or indirectly make any profit?

A. No, sir; on the contrary I lost six or seven hundred dollars of interest; the Legislature would no doubt have paid that back to me but I did not want to be seeming to have any profit from the State.

Adjourned until to-morrow afternoon (Thursday, April 3), at 3:30 P. M.

April 3, 1884,
"KENMORE," ROOM 76,
3:30 P. M.

Present — The full committee; Messrs. MORGAN and GOODWIN.

Dr. GRAY (continued examination):

By Mr. GOODWIN:

Q. Who makes the purchases of the liquors in the Asylum?

A. The steward makes the purchases, or part of them, but when he makes purchases of liquors it is always by my selection of the liquors, unless it is a question where we purchase the same kind afterward.

Q. Do you make purchases yourself of liquor at times?

A. No, sir.

Q. Do you select the liquor?

A. I select the liquor.

Q. For instance, you would go to wherever you were dealing and select from that stock and then the steward would buy?

A. Well, I might if we were buying there; I would sometimes order to send up the same amount; that is a barrel or whatever it was; I have done that — but the other is the more convenient way; that is, ordering it.

Q. I am speaking now in reference to the quality of the liquor?

A. We determine the quality of any liquor we buy, first by examination — chemical examination—and then we purchase that class of liquor or that kind of liquor; if we change to any new, we make another examination.

Q. Is the supervision of liquor more under your immediate direction than that of the other supplies and stores?

A. Yes, sir; because it is solely for medicine; now for instance, this last year, in reference to that question, we bought a large supply of whisky because we were able to obtain a quality of whisky which I deemed was the best for our use, a malt whisky and we got it directly out of bond; I know that whisky had been four years in bond, and we got a portion of that whisky; if they had retained that whisky we should not have bought as large an amount, but it was whisky that would not have been retained at all.

Q. I think you stated you regarded the liquors more in a medicinal point of view?

A. I regard them solely in a medicinal point of view.

Q. How is it in that connection in reference to purchasing cod-liver oil; what is your practice in reference to that?

A. We purchase cod-liver oil at times in full cans, and at other times in smaller quantities.

Q. Mr. Walker, of McClure & Co., stated to the committee that the best oil that his firm sold was sold for three dollars, and the committee, in looking over your bills, find that you paid four dollars a gallon; can you explain that?

A. That refers to an emulsion of cod-liver oil and not cod-liver oil; it refers to the making of the emulsion under a formula of our own; the emulsion being made by inter-mixture of other ingredients in order that the oil can be taken more readily and be more digestible and more useful.

Q. And that emulsion could not be furnished at the price of the best cod-liver oil?

A. No, sir; I consider that was a very moderate price for that emulsion; we could buy ordinary emulsions of cod-liver oil or make it ourselves for a less price than that if we did not want to make a particular formula; it is the same thing as though you bought pills; you might buy a hundred pills for a cathartic purpose that might cost twenty-five cents, and you might buy other pills for a cathartic purpose that would cost one dollar and twenty-five cents; those things are entirely governed by the materials themselves, of which the compounds are composed; I do not think, with an ordinary arrangement, they could have made that emulsion, such as we made, any cheaper; we got it made there because he had steam power to drive the machinery for the breaking up of the globules and intermixing it with the other materials.

Q. It has been stated by some witness that clothing has been purchased by the Asylum of Walcott and Campbell; Mr. Campbell being one of the managers of the institution; how long has it been since a purchase has been made?

A. Usually we have bought some of Walcott and Campbell's goods from their agents at the lowest price that they could be obtained, at the lowest price at which it is sold; we have not bought it from the mills; the cotton goods of Walcott and Campbell was a certain kind of strong cotton goods that we used for what is called "strong dresses" for women as untearable as possible and looking respectable; they have not made any such goods for five or six years and therefore we have had to go to other places; these goods were always purchased at the lowest wholesale price.

Q. Was there an investigation made of Asylum affairs in 1868?

A. Not by the Legislature.

Q. By anybody?

A. In 1868 I requested the managers by a written communication to make an investigation into the affairs of the Asylum.

Q. And such an investigation was made?

A. Such an investigation was made.

The CHAIRMAN — Ask him what induced him to make it.

Q. What induced you to make that request?

A. Because of the circulation of certain stories, or certain state-

ments made, and communications that I had seen in writing by Dr. Tourtellot and Dr. ——.

Q. To whom did you make that request; what managers?

A. The written request was addressed to Senator Kiernan and Dr. Bissell, I think, and Mr. Matteson.

Q. Who were present at that investigation?

A. It was a long investigation, extending from August to September, at various sessions occupying a great deal of time.

Q. Was the Comptroller of the State there at any time?

A. He was invited there at the time — at the first meeting, Comptroller Allen, and was present.

Q. I read an extract from the minutes about that time: "Resolved, That in the opinion of this board, it is not a violation of law for the superintendent to purchase supplies for the Asylum; that the statute only imposes and prescribes the duties of the steward to be performed under the direction of the superintendent; that there is no negative language in the statute, nor any prohibition of the superintendent making purchases of supplies; that the statute is only directory upon the steward, and therefore there has been no violation of the statute in purchases made by the superintendent, and that, in our opinion, the purchases made by him were advantageous to the Asylum, and particularly the purchases of medical stores, and that this has been a practice of former superintendents with the approval of the managers."

Q. Was that resolution passed by the board of managers?

A. Yes, sir.

Q. "Resolved, that the managers of the Asylum from their official intercourse with Dr. Gray, and from this investigation have not only an undiminished, but an increased confidence in his truthfulness and integrity, his skill and ability, and in his economical and faithful administration of the affairs of the Asylum." Were those passed at that meeting?

A. Yes, sir.

Q. Does the law require you to make recommendations to the managers with reference to the matters of the institution at their meetings?

A. It does.

Q. Have you made recommendations in reference to matters of improvement and alterations for the safe-keeping, comfort and health of the patients?

A. I have.

Q. When?

A. Through all the period of my position as superintendent, from year to year, such as have appeared proper, in my judgment, and necessary.

Q. In relation to the building?

A. Yes, sir, in relation to building; their repairs, their imperfections and changes and extensions, to meet the necessary conditions of the patients to be treated.

Q. And in regard to the improvement of the condition of patients?

A. Yes, sir.

Q. In regard to either securing their safety and comfort and health?

A. All these improvements and changes had had the sole object of perfecting the arrangements of the hospital, so as to secure the safety and the comfort and the recovery of the patients and the comfort of those who were associated with them, and the best possible means for guarding and taking care of them.

Q. Has your supervision of the purchase of supplies for the Asylum been substantially the same since the adoption of the resolution in 1868, as prior to that time?

A. Precisely; no change whatever.

Q. And these recommendations we were speaking of; did you recommend the getting the patients out of the basements of the Asylum?

A. I did.

Q. And doing away with those cells?

A. Yes, sir; I recommended the removal of all the patients from the basement, many patients had been removed before, the most violent class were still in the basement and those I recommended the removal of, having previously assured myself by actual experiment that it was entirely safe to take them from single rooms in which they had been kept and which was the general custom of keeping such persons in these institutions; to take them out and give them dining-rooms to eat in and keep them in the open wards, then — having demonstrated that, I recommended the erection of a ward for that purpose, which was carried out.

Q. What if any recommendations did you make in having greater accommodations for the benefit of the patients; that is, for their classification?

A. I have recommended the extension of the wards, the increase of the number of wards for the purpose of securing proper classification, which would enable the patients to be taken care of without injurious attrition with each other, and to secure their better recovery — quicker recovery.

Q. What do you mean by "injurious attrition with each other?"

A. Well, for instance, where insane persons are placed together in close proximity in small apartments without space they jostle each other, quarrel, get into troubles and difficulties and they are very liable to injure each other and keep each other in a state of excitement and irritation; the air is bad too when confined in such small places, which increases their irritability and sleeplessness, and in every way renders them more liable to quarrel with each other.

Q. Have you called the attention of the managers, and through them the Legislature, to this matter in your annual report?

A. Yes, sir; some years ago very prominently asking the extensive modification of the rear building for that purpose; I submitted it to the Legislature; submitting plans to the Legislature; submit-

ting plans to the Comptroller at that time, as the Legislature in drafting the appropriation requiring that the plans should be submitted to the Comptroller, and approved by him in writing; that was done and the Comptroller visited the institution a number of times; the Governor also four or five times in connection with it, examined the plans and proposal, and the methods of modification, and where it should be done; that was Governor Dix.

Q. How long did he remain at the Asylum at that time?

A. Ten days or two weeks altogether.

Q. Has it been the habit or custom of Governors to visit your Asylum?

A. Yes, sir.

Q. How many have failed to visit your Asylum since you have been its superintendent?

A. They have all visited the Asylum but Governor Cornell.

Q. Has the present Governor visited officially?

A. Not yet, he is not through his term; he has said he would do so.

Q. But every Governor with the exception of Cornell and Cleveland has visited the Asylum?

A. Yes, sir.

Q. Have any appropriations for that Asylum ever been vetoed by the Governors?

A. Yes, sir.

Q. By whom?

A. Governor Cornell.

Q. Any others?

A. No, sir.

Q. After the visitation of Governor Dix to the Asylum, I understand that these plans for space and light and safety to the patient were submitted to the Legislature?

A. Yes, sir.

Q. With what results?

A. With the result of appropriations from time to time that were necessary to carry on the work to a certain point; under them the entire rear part of the buildings of the women's side of the house were remodeled; the side spaces in the hall for light increased, the glass verandahs or sun-rooms constructed, the large day-rooms constructed, the bath-rooms and water-closets were re-constructed and floored with tile to make them healthy and pure; the entire plaster, which had been saturated by years of use, was taken off and it was replastered; the floors (which had been in use through all these years and were in great decay) were all removed, and every floor of the three front wards and the six rear wards were taken up and re-floored.

Q. Have you from time to time made application to the Legislature for funds to provide a similar room, and similar improvements in the wards on the men's side?

A. I never made any as superintendent, or any other way myself; I have never myself made application to the Legislature for any thing.

Q. Has it been suggested or recommended by your board of managers?

A. Yes, sir.

Q. Have you received the appropriation necessary to make the improvements on the men's side?

A. No, sir; the appropriations — the part of the men's side of the institution so reconstructed — that is the floors of a number of the wards were relaid; the plaster renewed, and over a portion of the building the water-closets and bath-rooms were renewed and the tile flooring put there also; the shops were also removed further away from the building occupied by patients, having before been directly connected with the wards, rendering them dangerous by reason of fire.

Q. I understood you to say that the improvemennt made upon the women's side had for one of its objects more room in order that there might be less injuries inflicted upon each other?

A. Well, in order that they might have more space and not endanger themselves, or be endangered of injuries, and that they might have better chances of recovery.

Q. Have the injuries decreased since the erection of these day rooms on the women's side of the house?

A. Yes, sir; they have, very ratably and very strikingly.

Q. Do you know what proportion?

A. I looked the other day.

Q. What was the result?

A. It was eleven to nineteen, reduced from nineteen to eleven and I think it would be further reduced, or will be when the other ward is completed and an opportunity of better classification is afforded to that class.

Q. Do you believe that there would have been fewer accidents than are now detailed had your suggestions been carried out?

A. I do.

Q. Will you be kind enough to state what is the origin of this injury book, what originated that?

A. I did.

Q. Is your Asylum the first in which it is used?

A. I do not know, I never heard, I have never asked much about those things, or compared, myself, these measures much.

Q. You were requested by the committee to prepare a tabulated statement of all accidents and injuries for the past five years?

A. I have done so.

Q. Have you it?

A. Yes, sir; that is the statement (presenting the same), that tabulation that classifies the accidents and injuries and shows what proportion of them occurred between patients and patients, and what between attendants and patients, and the conditions under which the accidents occurred.

Mr. Goodwin — I would ask that this report of accidents be made part of the evidence of Dr. Gray.

Report of accidents occurring in men's department during the year 1879.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping and falling or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Occurred while exercising or playing.	Due to various causes as explained below.
Black eye	25	.....	18	2	3	2	
Black eye and cuts about face	6	3	1	1	1	....	
Black eye and bruise about face	1	.....	1	....	.....	....	
Broken nose	1	.....	1	....	.....	....	
Blows causing blood to flow from nose	2	.....	2	....	.....	....	
Scratches and cuts about face and head	12	4	7	....	1	....	
Bruises about face and head	8	2	2	....	2	....	Self inflicted, 1; caused by kick of cow, 1.
Fracture of knee cap	1	1	....	....	.....	....	
Fracture of neck of thigh bone	1	1	....	....	.....	....	
Cut on throat	1	.....	....	....	.....	....	Atempted suicide, 1
Broken leg, one bone	1	.....	....	....	.....	1	
Total	59	11	32	3	7	3	Total, 3.

Report of accidents occurring in men's department during the year 1880.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Occurred while exercising or playing.	Due to various causes as explained below.
Black eyes	25	5	16	2	.....	....	Self-inflicted, 1; hit by foot of patient who was caught in fan, 1.
Black eye and cuts about the face	5	2	2	1	.....	....	
Black eye and broken nose	1	.....	1	....	.....	....	
Scratches and cuts about face and head	17	5	10	1	.....	....	Struck against table in stooping, 1.
Bruises about face and head	6	1	2	2	1	....	
Bruises about other parts of body	4	2	....	....	.....	1	Struck hand against chair, 1.
Leg sprained	1	.....	....	....	.....	1	
Hip sprained	1	.....	1	....	.....	....	
Cut on foot	1	.....	....	....	.....	....	Stepped on nail, 1.
Little finger of left hand broken	1	.....	....	....	.....	....	Cow barn door blown upon it, 1.
Swelling of testicles	1	.....	....	....	.....	....	Kicked by cow, 1.
Three fingers cut in carpenter shop	1	.....	....	....	.....	....	By buzz saw, 1.
Bite on finger	1	.....	....	....	.....	....	Self-inflicted, 1.
Wrist slightly sprained	1	.....	....	....	1	....	
Total	66	15	32	6	2	2	Total, 9.

Total number under treatment, 565.

Report of accidents occurring in men's department during the year 1881.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Occurred while exercising or playing.	Due to various causes as explained below.
Black eyes	23	1	17	3	1	....	Self-inflicted, 1.
Black eye and bruises about face	3	.....	3	....	.....	....	
Cuts and scratches about face and head	31	4	21	2	2	1	Attempt to jump through window, 1.
Bruises about face and head	22	7	10	3	1	....	Threw himself under wagon with suicidal intent, 1.
Sprained ankles	2	1	....	....	1	....	
Sprained wrist	1	1	....	....	. ....	....	
Cuts on hand	2	.....	....	....	.....	....	Due to breaking glass, 2.
Cuts on fingers	3	.....	....	....	.....	...	Done accidentally in slaughter-house, 3.
Bruises on various parts of body	7	1	1	2	1	....	While at work, box fell on one and elevator crank hit the other, 2.
Total	94	15	52	10	6	1	Total, 10.

Total number under treatment, 506.

Report of accidents occurring in men's department during the year 1882.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Occurred while exercising or playing.	Due to various causes as explained below.
Black eyes	21	3	15	....	2	...	Butting head against wall, 1.
Black eye and bruises about face	3	1	2	....	.....	....	
Blow on nose causing blood to flow	1	.....	1	...	.....	....	
Scratches and cuts about face and head	17	5	6	1	4	....	Butting head against wall, 1.
Bruises about face and head	20	9	6	....	5	....	
Fracture of skull	1	.....	1	....	.....	....	
Bruise on knee	1	.....	....	....	.....	....	Kicked by cow, 1.
Bruise on breast	1	.....	....	....	.....	....	Kicked by cow, 1.
Total	65	18	31	1	11	....	Total, 4.

Report of accidents occurring in men's department during the year 1883.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Occurred while exercising or playing.	Due to various causes as explained below.
Black eyes	21	2	19	....	.....	....	
Scratches and cuts about face and head	23	3	17	2	1	....	
Bruises about face and head	18	3	7	5	2	....	Self-inflicted, 1
Bruises on other parts of body	3	1	1	1	.....	....	
Fracture of rib	1	.....	1	....	.....	....	
Fracture of collar bone	1	1	....	....	.....	....	
Burn on shoulder	1	.....	....	....	.....	....	Fell against a heater in fit, 1.
Cuts on hand	2	.....	....	....	.....	. ..	Caused by breaking glass, 2.
Cuts on throat	2	.....	...	....	.....	...	Attempted suicide, 2.
Total	72	10	45	8	3	....	Total, 6.

Total number under treatment, 509.

Report of accidents occurring in women's department during the year 1879.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping and falling or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Self-inflicted under the influence of delusions.	Due to various causes as explained below.
Black eyes	6	.....	3	3	.....	....	
Scratches and cuts about face and head	4	.....	3	1	....	....	
Bruises about face and head	3	1	2	....	.....	....	
Blow on nose causing blood to flow	1	.....	1	....	.....	....	
Bruises about other parts of body	3	1	2	....	.....	....	
Broken finger and bruised hand	1	.....	....	....	.....	....	Caused by window falling on it, 1.
Total	18	2	11	4	.....	....	Total, 1.

Total number treated during the year, 513.

Report of accidents in women's department during the year 1880.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping and falling or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in immediate discharge of their duties.	Self-inflicted under the influence of delusions.	Due to various causes as explained below.
Black eyes	17	2	7	6	1	1	
Cuts and scratches about face and head	15	2	11	2	.....	.....	
Bruises about face and head	6	.....	2	4	.....	.....	
Bruises about other parts of body	1	.....	1	.....	.....	.....	
Bites (one on neck and one on limb)	2	.....	2	.....	.....	.....	
Cuts on hands	1	.....	1	.....	.....	.....	Patient threw saucer at another, striking her on hand.
Wrists slightly sprained	2	.....	2	.....	.....	.....	
Total	44	4	26	12	1	1	Total, 1.

Total number treated during year, 523.

Report of accidents occurring in women's department during the year 1881.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping and falling or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Self-inflicted under the influence of delusions.	Due to various causes as explained below.
Black eyes	6	1	2	3	.....	....	
Cuts and scratches about face and head	10	2	5	3	.....	....	
Bruises about face and head	7	1	4	2	.....	....	
Bruises about other parts of body	4	.....	2	2	.....	....	
Broken arm	1	1	....	....	.....	....	Patient fell while running down ward to dinner, 1
Bites on hand	2	.....	2	....	.....	....	
Cuts on hand and arm	2	.....	...	....	.....	..	
Some hair pulled out	1	.....	1	....	.....	....	Due to breaking glass, 2.
Foot scalded	1	.....	....	....	.....	....	Unascertained, 1.
Cuts on buttocks	1	.....		....	.....	....	Caused by chamber breaking while in use, 1.
Total	35	5	16	10	.....	....	Total, 4.

Total number treated during the year, 519

Report of accidents occurring in women's department during the year 1882.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping and falling or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Self-inflicted under the influence of delusions.	Due to various causes as explained below.
Black eyes	6	.....	5	1	.....	....	
Cuts and scratches about face and head	2	.....	1	1	.....	....	
Bruises about face and head	4	.....	....	2	1	1	
Cut on arm	1	.....	1	....	.....	....	
Cut on buttocks	1	.....	. ..	...	.....	....	Due to breaking of chamber vessel while in use, 1.
Total	14	.....	7	4	1	1	Total, -

Total number treated, 530.

Report of accidents occurring in women's department during the year 1883.

NATURE OF ACCIDENT.	Number of cases.	Due to accidental slipping and falling or to falling in fits and striking on floor or against furniture.	Due to blows and altercations between patients.	Occurred at night in rooms or dormitories.	Occurred in struggles with attendants while in the immediate discharge of their duties.	Self-inflicted under the influence of delusions.	Due to various causes as explained below.
Black eyes	5	1	2	2	.....	....	
Cuts and scratches about face and head	5	1	2	1	.....	1	
Bruises about face and head	4	.....	3	1	.....	....	
Cuts on wrist and hand	2	.....	....	....	.....	....	Breaking glass, 2.
Bruises on other parts of body	2	1	....	1	.....	....	
Dislocation of elbow	1	.....	1	....	.....	....	
Sprain of ankle	1	.....	....	...	.....	....	Jumped over wall in attempt to elope, 1.
Fracture of wrist	1	.....	....	....	.....	....	Fell out of bed, 1.
Bruises on wrist	1	.....	....	....	.....	....	Attempt to get hands out of muff, 1.
Total	22	3	8	5	.....	1	Total, 5.

Total number treated during year, 473.

Summary.

During the five years from 1879 to 1883, inclusive, a period of 260 weeks, there were 489 accidents, the majority being very slight ones, such as scratches and bruises, or less than an average of two a week (1.88).

During the five years the daily average number of patients under treatment was a little over 611. This gives a weekly percentage of accidents of about three-tenths of one per cent (.003+per cent), and a daily percentage of accidents on the average number treated of three-seventieths of one per cent or .0004+ per cent.

Of the 489 cases which occurred during the five years, from 1879 to 1883, inclusive, 260 were due to blows and altercations between patients. This is just one a week or .14 of an accident per day, which gives a percentage on the daily average of .000229+per cent; 198 cases were due to slipping and falling, falling in fits, or occurred at night while in rooms or dormitories or were self-inflicted, etc. This is .76+of an accident per week and .108+of an accident per day and a percentage on the daily average of .000176+per cent. Thirty-one cases occurred in struggles between attendants and patients while the former were in the immediate discharge of their duties; this is .00119+ of an accident per week and .00017+ of an accident per day, and a percentage on the daily average of .0000028 — per cent.

By. Mr. MORGAN:

Q. In making up this report, you rely upon the reports of the attendants?

A. I get them from the injury book and case book. No injuries can be inflicted or escape the attention of the physicians and be absolutely within the control of the attendants.

Q. You do rely upon the attendants yourself as to the cause of the injury, don't you?

A. No, sir; not solely, by any means; we rely upon the examination of the case, upon what is stated by others; on the supervisors, attendants and the patients themselves.

By Mr. HASKELL:

Q. This tabulated statement of injuries, did you make it yourself?

A. I went over them all myself.

Q. Whose handwriting is it in?

A. The handwriting is one of the physicians; I went over them myself, tabulating them before I handed it to the physician.

Q. This is a copy then of material furnished by you to the physician?

A. No, sir; this is not a copy.

Q. Specify how it was made?

A. It was made first, I went over the matter myself; over the injuries for the last five years, from the injury books; and in all cases of any thing beyond a little scratch, referring to the case book; and I made a tabulated statement of that; then I asked one of the physicians, or two of them, to take that and go over it all carefully; then I compared it again.

Q. With the material that you had made?

A. Yes, sir; and I have no doubt of its correctness.

Q. So that all the basis you have for saying, or *the* basis you have for saying it is a correct statement, is based upon the assumed correctness of the injury book?

A. Oh certainly, from the records alone; it is not made from the memory of anybody.

Q. So that this is simply an analysis by you of what appears in the injury books for the last five years?

A. That is precisely what I was requested to make.

By Mr. GOODWIN (resuming):

Q. Were you acquainted with Miss Lathrop during her confinement in the Asylum?

A. I knew her very well while a patient there, not before.

Q. Have patients any notions in regard to anæsthetics being given for immoral purposes?

A. Yes, sir; that is not an uncommon thing.

Q. Be kind enough to explain fully in reference to that?

A. I have known a great many, or at least quite a number of persons who have such ideas, who believed that not only that ether and other substances could be used, but that they are used; I have known them in their own families where I have been to see them, as well as cases in the Asylum, young women and old women, some who have said or claimed that ether or chloroform was given; and then some would say some substance that would put them in a state of unconsciousness for immoral purposes; I have known cases where they believed that powders were dusted over them to produce a state of insensibility for the same purpose, and where they were intoxicated with gases; I have known of a woman who believed as a delusion, firmly, that gas was carried in through the window, and that she could hear the apparatus in motion, to produce a state of insensibility and unconsciousness for this purpose; and a short time ago, since the committee were there, a man was brought to the Asylum; he declared in the presence of his wife — first to me privately — then in the presence of his wife, insisting that she should hear it, and of his sister and his brother-in-law, that he had had practiced upon him the use of ether and chloroform to render him insensible and unconscious in his bed, and that men came in and had intercourse with his wife by his side, he knowing it, but not having the power to move; as he finally got the power of resisting it, or the secret of resisting it, they then resorted to powder, which was dusted on by a little box something like an insect powder-box he said; and the same things were carried on; that finally he was rubbed all over with powdered chloral in the same way when he was half asleep, his wife would get him half asleep and rub him all over with powdered chloral, and that as many as four persons all came into the room and had these relations with his wife in succession; that they were his neighbors and people about him; and I have had a woman on the first ward — a case I recall of a woman who would not be on the first ward because of the danger to her of persons producing an effect upon her without their presence; that improper relations could be had without personal contact; one case where a woman took a pistol and went to the store of one of our merchants to shoot the man, on the ground that he had exercised some sort of influence, or "gases," as she called it, over her for immoral purposes in church, until she was afraid she was impregnated by these means; she never gave up the delusion; also that he had arranged to put her in proximity on the street with certain persons whom she did not know; in other words, when she was walking on the street (as I found by examination), and she was jostled by any person, that she misinterpreted that as being done by one of those persons; I have had a woman who insisted on sewing up her night-gown, making it two feet longer than necessary, and fixing over night a particular kind of stitch up at the neck, so that she could recognize by that stitch the next morning whether she had been violated or not; she said she had been violated in her brother-in-law's house before she came, and also in the Asylum; that there were men in women's clothes on the wards for such general

purposes, yet she was a respectable, intelligent woman; she was laboring under some physical derangement which induces this character of delusion; I have known persons laboring under similar delusions; I remember one instance of a lady who would stand by a window looking toward a certain house — a very accomplished woman — who insisted that a certain gentleman was impregnating her from his house, and she was standing at the window with her clothes up; all these cases arise from peculiar sexual conditions growing out of their disease; they have to be looked after; I had to remove that person from the first ward, but not as a punishment by any means; I have visited patients in consultation in their own homes where women have declared to me that they had been violated by their own father.

Q. (By Mr. Olin.) Reputable women?

A. Yes, sir; good people; disease makes no difference between king or peasant.

Q. Were you aware, at any time during Miss Lathrop's detention in the Asylum, of the delusions she had in regard to violation of her person?

A. Yes, sir; I examined Miss Lathrop very carefully within the first week of her being placed in the Asylum, and she communicated to me all the delusions that she then had with reference to persons in Rochester, with reference to poisoning; that she was poisoned by acids, and had to wash herself in alkalies to counteract it; and with reference to her own family; that her own family were inimical to her, and that she was in danger there of being poisoned in her own house, and had been, as she believed, and had taken certain mixtures for analyzation; that a certain man there, whose name she gave, and all the circumstances, who was about to divorce, or had divorced, his wife, she did not know which, but would do it to marry her; that her family then received into their house this woman; that she was in disguise, and dyed her hair and made certain changes for the purpose of destroying her. She then gave me all the symptoms that she had of poisoning, which, in reading her testimony over, are the symptoms which she gives now for violation of her person, and she insisted on writing those down, and did write them down, and they are contained in the case book.

By Mr. Morgan:

Q. The symptoms which Miss Lathrop gave, were they such as you would expect under such circumstances, that is, if her person had been violated; did she give symptoms such as you would expect?

A. Well, I never knew the symptoms of any person who had ever been violated in any way of sensations or violence or any thing of the kind.

Q. Has your attention ever been called to it?

A. Yes, sir; but not as to violence; my attention has been called

to that subject, and I should expect symptoms in way of physical injury.

Q. Such as she described?

A. No, sir; not such as she described.

Q. Lameness in the hips, would you not expect that?

A. I don't know whether I should expect lameness in the hip unless there had been a great deal of a struggle: I do not see any relation between sexual congress and lameness of the hip, unless it is resistance; I have examined women who have professed to have been violated, at the request of some officer, and those who have been; but all those symptoms of Miss Lathrop's were given as a slow poisoning; they are not the symptoms of slow poisoning.

Q. The symptoms she gave as occurring at Rochester - – were they such as you would expect in a case of poisoning?

A. No, sir.

Q. And your opinion is that the history she gave of her misfortunes at Rochester were delusions?

A. Yes, sir, delusions due to her impaired and feeble health, and the overwork she had gone through before hand.

Q. And she thought that her own family were engaged in a conspiracy against her?

A. So she told me.

By Mr. Goodwin (resuming):

Q. Is it possible, in your opinion, to etherize a person in a state of sleep?

A. Without their waking?

Q. Yes.

A. No, sir; ether is a very irritating substance, and produces such irritation that it would waken the person; now it is often a difficult process to get a person under the influence of ether with all the appliances around.

Q. How about chloroform?

A. I should say the same of chloroform, though looking at the literature in regard to it, there is an occasional statement that it has been accomplished.

Q. Would you make any distinction between an adult and child in reference to chloroforming during sleep?

A. Yes, sir, a child would be much more susceptible to this influence than an adult would be, just as they are more susceptible to poisons.

By Mr. Morgan:

Q. Could ether be blown into one of your doors to your patients' rooms so as to stupefy a person in bed in the room?

A. No, sir, that would be physically impossible; I think it would fill the whole hall with ether; ether is a very permeable thing.

Q. Chloroform might, might it not?

A. I doubt very much whether it would.

Q. It would be more likely to be done with that?

A. Yes, sir; but I do not think a pint of chloroform blown under the door would have such an effect; it might stupefy them a little, and make them sick at the stomach, but I do not think it would put them in a condition of prolonged anæsthesia, such as would allow of any such relations as are referred to.

Q. Would it be sufficient so that an entrance might be made to the room, and then the stupefying made complete?

A. No, sir.

By Mr. Rice:

Q. How is ether administered?

A. It is administered usually by various machines; either a tin cup with a wet arrangement or a sponge put in; an affair such as this (*indicating with a piece of paper twisted into a conical shape*); it is usually administered with a cup so arranged with a sponge in it, the sponge holds the ether, and gradually yields it from the mouthpiece over the person's mouth; for temporary purposes when such a cup, or any article or arrangement, is not attainable it may be done by placing it in a piece of paper like this (indicating), and a towel round it, and pouring ether in, and holding it over the mouth and nose in that way (indicating).

Q. Is it not possible to give a person ether while they are sleeping so that, although it may arouse them, it will deprive them of consciousness immediately afterward?

A. No, sir, unless they were about to die, I should think, that is to let them wake up and then relapse do you mean? Please repeat your question.

Q. Is it not possible to give a person ether while they are sleeping so, that although it may arouse them, it will deprive them of consciousness immediately afterward?

A. No, sir, that would be impossible.

Q. So that you say, do you, that to put a person under the influence of ether, they must be awake?

A. They must be awake to start with, you would awake them, it is by the irritating action of the ether, they awake.

Q. What you mean to say is, you must administer the ether to them while awake?

A. Yes, sir, to secure its proper action.

By Mr. Morgan:

Q. And how is that as to chloroform?

A. I should think it would be the same thing, but not so conspicuously; I can think it possible that a person might do that, but I think it is not probable.

Q. You frequently read of cases of burglaries and larcenies being committed by chloroforming people in their houses?

A. I do not recall any instance where that has been verified; I know it has been claimed, but I do not recall any instance where it was verified.

By Mr. GOODWIN (resuming):

Q. If insane persons after recovery, or partial recovery, have they clear or even recollection of occurrences?

A. They have a confused recollection, and they have imperfect recollection, and they mix in the actual with the unreal, some of them retaining the ideas, or the false impression, through life, although entering upon the business in all their ordinary relations.

Q. Do persons in convalescence still retain toward their own family the same views as to charges, etc., and wrongs as when they were insane?

A. Not when they are fully convalescent; convalescence means recovery; convalescing means the process of recovery, and convalescence means recovery; when a person is fully recovered they do not retain their delusions. They may think some of the ideas they have had, that are mixed in with reality, may be true, as a person may in connection with a dream; but when they are fully restored they recognize their delusions, and very often will recognize the distinguishing lines between the delusive ideas and the reality, and can give the reasons that carried them over the boundary.

The CHAIRMAN — Into the delusion?

A. Yes, sir; into the delusion; they very often have said that certain words uttered to them had converted an idea into a delusive reality, because a delusive reality is simply an intense delusion; and very often after apparent recovery they retain their delusion. We have patients now in the Asylum, and have at all times, who seem to be entirely well, you can talk to them upon some point, and you will find they are nervous directly, and develop their ideas and notions. Some time ago, a man who seemed very anxious to see some of his family, he had some very gross and unpleasant delusions toward his father, and his wife, and the minister and the doctor; all the persons who were related to his case at home, and he said those delusions were all disappeared, that he did not care any thing about them. His wife came, and in an hour he was — they were all again as fully developed as ever.

Q. I desire to ask a few questions in relation to the supervision of correspondence; what is the rule that obtains in the Asylum in reference to that matter?

A. In reference to letters that come in — the supervision consists only of those letters coming to the table of the superintendent unless there is — there are such cases that I recognize the handwriting and the address of the regular correspondent of the individual, if those letters come to my table, those letters go in directly to the patient unopened; if I am doubtful as to the person writing I cut the end of the letter to find out; I do not suppose I read a letter that comes once in a month; I have no idea that I do, though I see who it is from; if it is a person who is not a correspondent of the patient and especially if it is a person whom I know the friends do not wish them to correspond with —(I know instances, persons

whom the friends have directed me they do not desire to have them correspond with) — I read that letter and sometimes I have retained that letter for the friends sometimes, and have written to the person saying that the friends had directed me not to permit correspondence; sometimes I have sent the patient the letter in, notwithstanding, and asked them about it; sometimes I have returned the letter to the person; indecent letters have come to patients, improper letters in every way; and that is all the guard that is put upon the correspondence entering into the Asylum; in regard to letters of patients themselves, they are in one sense examined unless there is permission to the contrary; the letters are unsealed and come to the office, some of them are read and some are not read; they are sent if they are from the proper person, unless they are obscene or blasphemous or in other ways improper.

Q. Have patients after recovery expressed gratitude to you for the suppression of their letters?

A. That has been done in a great many instances.

Q. On account of what was in the letter?

A. On account of what they had written; persons will write their delusions as they speak them, will write of their families and friends the most shocking things which their families should never know, any more than they should know the delirium of a sick person; some of them remember afterward in a general way that they have written, and as a general rule they have exaggerated what they have written; I can recall many instances of that where I have, from the nature of the case, sealed up the letters and kept them for the person; I remember some years ago a member of the Legislature, a very excellent man, his wife a very educated, cultivated woman, was brought to the Asylum and I think she was one of the most obscene women I ever knew, yet an educated, cultivated woman and a very good woman; her departure from herself was just as far in the direction of perversion as could possibly be; she wrote a great many letters, if she did not write she was doing mischief in every possible way, I did seal these letters up, in that case never said a word about her condition or conduct to any one, her husband or herself or any one else, no letter ever went out; on her recovery she passed toward recovery into a state of melancholy depression, I found in talking to her that it was largely due to her conduct, the remembrance of much of her conduct and what her conduct would represent to others; finally she said to me, "I should like to go into your office, I want to see you;" I told the supervisor when I got through the wards that this lady might go to the office, she came to the office and her mission was simply to know about the letters, if her letters had been sent, I said "no," and took them out of the drawer in that package which were not sent; she said "are these the letters?" I said "yes;" she said did you ever say any thing to my husband? No. My uncle? No. My daughter? No. Did you ever tell them any thing about me? No. Well, said she, will you give me the letters to destroy? I handed them to her, she put them in the grate and stayed until they were burned; she never said another word about them.

Q. She did not look at them?

A. No, sir; she knew her handwriting; I have known her since, very well; she has never uttered a word about it since.

Mr. Goodwin — I desire to call the attention of the committee to this letter which I do not care to have on the records (Mr. Goodwin then read a letter to the committee which was not taken by the stenographer) — a letter written by a female patient.

Q. Now, doctor, in reference to correspondence; if a patient were to write a letter to his or her relatives or friends complaining of the management of the Asylum, or ill treatment by attendants, or the want of proper food, would such a letter as that be suppressed?

A. No, sir, that would be their opinion, and the friends would know about it; if they did not they would inquire; I should not think of suppressing any such letter.

Q. Has any such letter ever been suppressed, to your knowledge, during your service at the Asylum?

A. Not to my knowledge; I have sent out many letters which were abusive of me and everybody else; sometime ago, two or three years ago, I sent a letter written by the wife of a lawyer, I suppose from his knowledge of his wife's condition and manner of talking of every thing else he would appreciate this letter and see it personally as an indication of her condition, and he immediately came to see me and asked me if I had seen this letter; I said "yes, I inclosed it myself to you; in that letter she said she had just given birth to twins; I said she has shown me the twins a good many times; they are two rag dolls that she has on the bed; she has any number of children there, I suppose you knew all about it and understood it, I said; well, he said, "I do now," he went over and saw her, she told him they were all his; sometimes I am requested not to permit them to write letters or receive them without supervision.

Q. What, if any, complaints have been made by any person against the Asylum since the Hughes accident?

A. I have not heard of any except in the newspapers.

Q. How many patients have been sent to that Asylum from Madison county since the accident?

A. Four.

Q. Can you give the dates?

A. Two of them were in February; one February 8th, one later, two of them in March.

Q. How many patients have been sent from other localities in the State since that time?

A. Fifty-seven; I do not think there is any change in the current of influx or deflux.

Q. Have any letters been received from any persons expressing anxiety on the one hand or confidence on the other, since the Hughes accident?

A. I have received one letter expressing anxiety, and a great many of an opposite character.

Q. Have county officers made any statement in reference to it?

A. What do you mean?

Q. Have county officers made any statement to you either verbally or in writing in reference to the Hughes matter?

A. Some of them have asked me about it.

Q. Well, in what way?

A. Simply asking me how it occurred, there has been every expression of confidence, and no expression to the contrary by public officers since this occurrence.

The CHAIRMAN — What do you mean by public officers?

A. I mean county superintendents of the poor who bring patients to the Asylum, and who commit them there.

Q. Has this average of patients since this Hughes difficulty been about the same as any other year?

A. I stated before that it has gone right along without any change whatever.

Q. I call your attention to page 317 of the printed testimony, Mr. Hughes says; "Q. You say J. R. Jones came in? A. Yes, sir; and father was going out of the room; Dr. Gray came in and shook hands with father; and Dr. Gray asked me 'how long has your father been in this condition?' says I, 'since last Monday.' 'Is that all?' say he, 'yes,' says I; 'Well,' says he, 'I am glad of it.' 'Do you think that he will be cured?' says I; 'why, we cannot tell,' says Dr. Gray; 'his age is a little against him;' that was all that was said, and father was taken out of my sight, and I left the institution with these two men." He was speaking of the time his father was brought to the Asylum, do you remember that occasion?

A. Yes, sir, I remember his coming there, and I went into the office to examine him; after the statement had been taken down by Dr. Backus, I met Mr. Hughes, recognized him, and shook hands with him, and he said "Mr. Anderson;" I said no, do not you know me? he then said ——— ; says I, "were you thinking of Dr. Andrews?" he said "yes;" then he said "Dr. Gray?" I said "yes;" I then asked him a few questions as to how long he was sick; he answered one or two questions, and then shut his lips; I examined his pulse while I was holding his hand; I looked at the general condition of his face and expression; then his son stepped up; I did not say what his son says there; I said nothing about his age being against him; what I recollect is this, I asked him how long his father had been insane; he said about a week, and then gave the exact time, the Monday before, when they first noticed it; I asked him how he had been, and he said, well, he had been very unhappy, and very anxious and depressed; I asked him a few more questions; I don't recollect now; I said "have you given the case to the doctor?" he said "yes;" I said "very well, I will read it in the minutes;" I will say this in regard to him, the son himself was then very nervous and agitated; and that was one reason I did not ask him much, I think he did ask if I thought he would recover; I said I did not know; I do not think any thing else occurred.

Q. I call your attention to his testimony on page 318; after the

injury or accident to his father, upon his return he says: "Q. When did you get to Utica? A. I think I arrived at the Asylum about 6:30 P. M. Q. Where did you find your father? A. I was called into Dr. Gray's office before I saw father. Q. State if you had any conversation with Dr. Gray? A. Yes, sir. Q. Give us the conversation with Dr. Gray? A. Dr. Gray told me what father's injuries were. Q. Try and give us as near as you can, Dr. Gray's language? A. Dr. Gray talked so long, and went around so much, that it would be very difficult for me to tell what he did say; he said so much that I was very anxious to come to the matter about my father, which he did not seem to want to do." Will you please state as much of that conversation as you remember, if any such conversation occurred?

A. I do not think I conversed with him for one minute; I asked him if he had received the letter, he said he had (a letter which I had written him), and I said to him, your father is seriously hurt, his ribs are fractured and he is sick, can you come up and see him; and after you see him I will talk to you about him; that is about the substance of what I said.

By Mr. HASKELL:

Q. What letter do you refer to?

A. The letter I wrote to him in respect to the injuries of his father.

Q. Did not you telegraph?

A. I telegraphed and wrote both; I wrote first and telegraphed afterward.

Q. (By Mr. GOODWIN.) Do you remember what day it was he came to the Asylum?

A. On Monday.

By Mr. HASKELL:

Q. Do you recollect when you telegraphed, and when you wrote?

A. I wrote on Saturday, directly after the accident.

Q. When did you telegraph?

A. I tried to telegraph on Sunday, but could not get Morrisville up, and then they said they would send it early in the morning; soon as they could get the office open; that was Monday morning.

By Mr. GOODWIN:

Q. I refer to page 320 of the printed testimony, in which Mr. Hughes was asked: "What other conversations did you have with Dr. Gray, or any of the physicians in regard to the matter of your father's injuries, than what you have stated you had with Dr. Gray on the first night? A. On Friday evening at seven o'clock I had a conversation with Dr. Gray. Q. Go on and state that conver-

sation? A. I had found out for certain that father would die soon; about four o'clock he changed. Q. How did you find that out? A. By the doctor that had been up there; I think Dr. Gray had been up to see him about three or four o'clock, and he said in his room, 'it is just as I expected, you can see the veins on his forehead,' and we knew from that, that the change was for the worse; I was called into Dr. Gray's office about seven o'clock in the evening; I asked him how long patients in that condition lived; he said he had seen them live six, twelve, forty-eight, and even seventy two hours; I said: Do you think father will die soon, says I, right away? Well, no, says he, I don't think that he will die very soon, says he, we may look for a change about two o'clock in the morning, or four o'clock; doctor, says I, are you certain there are only three ribs broken; well says he, I cannot be certain about that, but we will have an examination which will give you satisfaction. Q. What time did your father die, with reference to the time of this talk? A. This was about seven o'clock in the evening; I stayed there with Dr. Gray until 9:30, and father died at 8:40, I think it was. Q. Is that all the conversation that took place between you and Dr. Gray, at seven o'clock? A. Yes, sir.'' Is that so?

A. His recollection is very different of what was stated; I had several conversations with Mr. Hughes. After he had seen his father, I told him how I thought and believed the accident occurred and who the persons were, and said to him at several times, his father being very ill, that I doubted very much his recovery from it; in substance I said that the rib had punctured the lung, and that occasionally persons recovered after such an injury, but it was only occasionally, therefore, it was only within the range of possibilities that he would recover; my conversation with him in the room with his father was very little, because I am not in the habit of talking at the bedside of a patient.

Q. I am calling your attention now to the conversation at seven o'clock?

A. Well, I will give that conversation: I had seen his father about half-past five; Mr. Hughes came into the office a little while after I came down from tea, perhaps it was about seven, and asked me what I thought of his father; I said I thought he was very ill, and falling steadily; he asked me if I thought he could go out a little while and get a little air and come back; that his father would not die as soon as that. I said yes, I think you can; he may die in an hour or he may die in four or five hours, or I have seen persons that have passed into a condition of coma live as long as seventy-two hours; I do not think he will; I think those were just about my words; he then went out; he did not remain in the office; he is mistaken there.

Q. Did you state in that conversation that his rib punctured the lung?

A. No, sir, not in that conversation; I had said that long before; the first day he was there; I said in this conversation at that time in

the evening nothing more or nothing about his case further; I had a conversation with him that evening after the death of his father.

Q. I am going to call your attention to that now; on page 320 of the printed testimony he answers: "This was about 7 o'clock in the evening; I stayed there with Dr. Gray until 9:30, and father died at 8:40, I think it was. Q. Is that all the conversation that took place between you and Dr. Gray at 7 o'clock? A. Yes, sir; and at 11 o'clock we had another conversation. Q. Now give the conversation that took place at 11 o'clock? A. Dr. Gray asked me if I thought it was best to have an inquest, and before I could answer the question he said he would call the coroner in the morning and see what was best to be done. Q. This conversation at 11 o'clock, was that after your father died that night? A. Yes, sir; and the conversation in regard to father, I think we began to talk about the undertaker and taking the remains home; I told Dr. Gray that I wanted to leave soon as possible in the morning with the remains, as it was Saturday, so as to be at home before night for them to have an inquest; says Dr. Gray, we will have it early in the morning, and have it so that you can leave to-morrow, and with regard to the undertaker, he said he would advise me to go to Whitton's; at that time I was with Dr. Gray; and I went with Dr. Brush down to Whitton's undertaking rooms." Now what, if any thing, occurred at 11 o'clock?

A. Well, that is very different from my impression, but probably not with any intent; after his father's death he came into the office and I think the first question he asked me was how soon he could get his father's body away, if he could take the body in the morning; I told him no, and then stated to him again the nature of the injury and that it was my duty to inform the coroner at once, that I proposed to inform the coroner then by a note and ask him to come in the morning at least by nine o'clock; that I intended further to inform the chairman of the business committee who had known of this matter, that was General McQuade, and that I proposed to send him word by a messenger at once; he asked me then if an inquest was necessary, I said it was, and it was my duty to refer the matter at once to the coroner; I do not know whether he asked me any further question in regard to that or not, I don't recall, but I said I should like to make an examination; he said "is that necessary?" I said not necessary for me to form my opinion of the cause of his death, or the nature of these injuries, I know that, but I should like to do so; he said "I would rather you would not, I want to take him home and keep him quietly over there on Sunday and bury him on Monday;" I said I will refer the matter to the coroner and when the coroner has taken charge of him I will have no more control over the case; and then he said "who is the best undertaker?" I said "there are several undertakers, that is generally left to the friends themselves to select, I said Mr. Cassidy, Mr. Whitton and Mr. Douglas; he said, "I have been to see Mr. Whitton;" I said "very well he is a very good man;" I do not think any thing more was said on that subject; then he said "I have been making arrange-

ments to take him early in the morning; " I said "that cannot alter this, there is no question about it in justice to you and your father's condition, and every thing else, this must be referred at once to the coroner; I wrote the note then as I was afraid the coroner would be in bed; I gave directions for the night watchman, when he went off duty in the morning, to take that and leave it at the coroner's; he (young Hughes) said he wanted to go down; I said do you wish to remain here all night or to go down town; he said he would go down town; I then directed a sleigh to take the letter to General McQuade, and for him to go in the sleigh, and to take him where he desired to go and return; I went out and gave these orders, and he remained in the office; when I returned he asked me whether I thought that the coroner had made an examination (he did not use the word "*post-mortem*" and I did not use it) or viewed the body; if he could get off by the 11:40 train; I told him I did not think it possible; that he would have to have a jury called, and it could not be done in that time; he asked if it could be done by four o'clock in the afternoon; I said I hoped it would; it was simply what the coroner would say about it; that I would not have any direction of the case; he then asked if I thought it would not do to put the body in a box, not a regular case, but a box, and take him home and have the undertaker there; I said no, I should not advise that; I should advise to let the body alone until they were prepared to remove him; that if they took him in that way they would have to pack the body in ice; that as far as I was personally concerned I thought it was a very disagreeable way of doing it; that if he let him remain until they were just ready to take him away, with a case around the body with ice in it, the body would be cooled without the ice touching the body; that was the whole of it; there might have been something else, but that was the substance.

Q. I call your attention to page 321 of the printed testimony: "Q. When was the first time that Dr. Gray told you that he did not think your father would recover? A. He told me on Monday evening, when I first saw him, that if he was a sane man the injuries he had received would be nothing; that he would be willing — that there would not have been any doubt about it whatever. Q. About what? A. About his injuries, as to their being fatal or not; he said that he was an insane person, had acute mania, a disease which of itself was liable to kill a person; and in addition to that he had these injuries — these fractured ribs; that he might have infusion of the blood on the brain or to the brain which would cause death. Q. Do you mean to say that the doctor told you that if your father had been a sane man, there would be no doubt about his recovery? A. Yes, sir; that there was no doubt he would recover." What have you to say about that?

A. I am sorry to have to say that I never made any such statements, and no such questions were ever asked me; he had melancholia, he had not mania; I think the sum of all my conversations with him was simply about what I have stated; I used but very few words in the case.

By the CHAIRMAN:

Q. You say he had melancholia; does a patient suffering from melancholia ever have violent outbreaks?

A. I think that the frenzy of melancholia in an outbreak is as violent as that of mania.

Q. Define the difference briefly, between maina and melancholia in that respect?

A. Mania is where the ideas are expansive and exhilarating, and what is called raving; in the case of melancholia all the ideas are circumscribed—are depressing — they are full of apprehensions and fears; in the other form they are aggressive; mania is aggressive.

Q. Have you stated substantially all the conversation which you have had with Mr. Hughes?

A. I have.

Q. Did you have any conversation with him at the bed-side of his father?

A. Scarcely a word; I asked him once when I thought his father did not understand me, if he would address to him the same question that I had in Welch.

Q. Did you state to him at the bed-side of his father, that there was a great mystery about his father having his jaw fractured, as he states, on page 321 of the printed testimony; "how could it have happened?" "well," said he, "it could have happened in many ways, he might have fallen against a chair, or even against a door, or he might have had a blow."

Q. Did you state that?

A. No, sir; I never spoke of his father's condition at the bed-side.

By Mr. HASKELL:

Q. When did you first learn of the removal of Mr. Hughes from the ninth ward?

A. I learned it after the accident had occurred; or the injury had occurred.

Q. Did you go yourself, after you heard of Hughes' injury, and visit him?

A. I will detail — I did, but there were circumstances occurred between the announcement of his injury and my going.

Q. You may detail?

A. Dr. Backus came to the office and said to me that Mr. Hughes had been hurt; I said how; he said his jaw is fractured; I said how; he said, "I made no further inquiry than that, and reported at once to you;" I then asked Dr. Brush to go in, and said I would follow; as I was about to go in — Dr. Brush had been told by Dr. Backus before he came to me on his way from the office, and had gone in; just as I was starting in he came out to get some adhesive straps at the office, and said to me — he said he had briefly examined him, and that his ribs were fractured, at least two

of them; I said, what have you done; he said we have directed him to be placed on 8 in a bed, and I am taking some adhesive straps in to put on at once; I then immediately telephoned, or directed to be telephoned to Mr. Campbell, president of the board, and telephoned down to the city, and directed that also to be done at once, for General McQuade to come up at once, in regard to an injury to a patient; then I went to see Mr. Hughes.

Q. Did you make examination of him yourself?

A. I did as far as was justifiable; I examined his jaw; by that time they had the adhesive straps across his ribs.

Q. Did you discover by your own examination, or were you informed by Dr. Brush, that the lung had been punctured?

A. No, sir; I discovered that at the moment I put my finger on the place.

Q. Dr. Brush had not at that time informed you?

A. No, sir; he had simply said what I stated; I do not know whether he had or not, but I think not.

Q. What steps did you take personally yourself to discover how the injury occurred?

A. I immediately afterward went down to the ward and looked at the ward; in the mean time my direction to one of the doctors to examine into the case; they thought they were directed to examine as to how the occurrence took place, which I did not intend they should do; I looked at the place and spoke to one or two of the patients who were standing there, and went out; I saw where the injury occurred; I then examined — I spoke to the supervisor, and asked what he knew of it; I talked to the doctors, and then I talked to Mr. Weir, Mr. Bills and Mr. Brown, and examined them separately.

Q. Was this on Saturday, the day of the injury?

A. Yes, sir, on Saturday; I asked them how this occurred at that time; I subsequently made an examination of them further; I examined them three times separately, and talked to some of the patients about it.

Q. Were the statements made to you taken down?

A. Only partially.

Q. Not fully?

A. No, sir.

Q. When were you informed that Mr. Brown had stated to Dr. Pilgrim and to Supervisor Barisdale that he had struck Mr. Hughes?

A. Almost directly after I had examined him; when Mr. Brown went out I said to him, "Is this all? I said I expect you to speak to me as though you were on oath; you will have the answer on oath;" and then he told Dr. Pilgrim and Dr. Pilgrim told me.

Q. And this was what day?

A. I do not remember the day; I cannot recollect the day; it was directly after.

Q. Was it Monday or Tuesday?

A. It must have been Monday or Tuesday succeeding the injury.

Q. Why, after you received that information, did you allow Mr. Brown to remain as an attendant upon that ward in the institution, taking charge of patients down to, I think, three weeks from the date of the injury?

A. He was discharged just before the coroner's verdict; it was because of the advice of the managers who talked with me about it.

Q. Which manager advised you to retain him?

A. General McQuade, and Mr. Campbell said too that it was not prudent to do any thing under the circumstances.

Q. When did they give you that advice?

A. I told them this and General McQuade came up and made an examination of these men separately from me, and did not tell me of the result of his examination; he examined all these persons separately.

Q. Are not the rules of the institution imperative in that respect?

A. The rules are that they shall be discharged at once, and I proposed to do that.

Q. Do you mean to say the managers prevented your doing it?

A. No, sir; I think it was a question in their mind, and my mind of discretion.

Q. Whether these men had done any thing that required their discharge?

A. No, sir; whether these men under all the circumstances of the case should not be held there, and held with such supervision, to see the result of this case, and that they might be, if it was proper, handed over to the authorities; afterward the district attorney told me — I wanted to discharge them directly —

Q. When did you have a talk with the district attorney?

A. I could not give you the date; it was after the district attorney took charge of the case I spoke to him about it, I said I felt I ought to discharge these men; he said if you discharge them I think you would be blamed, they are not going to do any mischief there, they ought to be held there to see what the public ought to do with them; after I had discharged the other men, and before Mr. Brown was discharged, I went to see the district attorney and I did not find him; I went to see Mr. Rogers, one of the managers, and I said I feel I ought to discharge them, no matter what may occur with the public; I then went down and saw Mr. Winston and Mr. Lowery; Mr. Rogers thought the same, and Mr. Winston and Mr. Lowery thought the same; Mr. Swan thought the same; these are all I saw; I immediately discharged them; I had prepared to discharge them and thought if I did it in the face of the district attorney, and any thing should be wrong, and they should get away I should be held as not exercising discretion and judgment.

Q. The district attorney did not appear in the case until two weeks after the death, did he?

A. He appeared there; I have forgotten the time he appeared, but that is the whole history, and after I had discharged them I went down and told the district attorney; he says, "I wish you had kept them until to-morrow, until the coroner's jury had returned their verdict."

Q. Do you remember what day of the week it was that they were discharged?

A. They were discharged the day before the coroner's verdict.

Q. Were they not discharged Saturday?

A. I don't know what day of the week.

Q. And you cannot give the day of the month?

A. No, sir; not without looking at the date; I have not the date with me.

Q. It was only a day or two before the coroner's jury returned their verdict?

A. Yes, sir; I think they were discharged on Saturday, and the coroner' jury returned their verdict on Monday or Tuesday.

Q. Will you swear positively that you told young Mr. Hughes that his father's lung had been punctured by the broken rib?

A. Yes, sir; I swear positively that I told him the nature of it; I told him that the rib, one or more, was broken, and that it had penetrated the lung, and that it was not a matter of simply a broken rib, but that the injury to the lung would produce his death.

Q. Did you tell the coroner at the time he came up to the Asylum the morning after Mr. Hughes' death to see the body that Mr. Hughes had died from — that his ribs were fractured, and that they had punctured the lung?

A. I did.

Q. You swear to that positively?

A. Yes, sir; I do.

Q. Did you, in your evidence before the coroner's jury, when you were on the stand the first time, testify to the fact that the broken ribs had punctured the lung?

A. I think I did; I was not present at any of the examinations, and have never read the minutes of the coroner.

Q. Do you swear positively you testified to that?

A. I think I did, though I only answered questions asked me there; I volunteered nothing.

Q. Who asked the questions when you were examined?

A. Several asked the questions.

Q. You were examined before the district attorney took charge of the case?

A. Yes, sir.

Q. Are you not aware as a fact that nothing was known by the coroner, or his jury, or the public, that Mr. Hughes' lung had been punctured by these broken ribs until after the inquest that was held in Madison county on the body of Mr. Hughes?

A. I am not aware of that fact, but I know to the contrary of that statement, I do not think the public knew any thing about it, but I am speaking of others.

Q. Do you not know as a fact that the jurymen who composed the panel sat at the coroner's inquest did not know until after it was discovered at the inquest in Madison county that the lung had been penetrated?

A. I do not know what the jury knew.

Q. Do you not know as a fact that the coroner did not know of that fact until after it had been demonstrated by the coroner's jury in Madison county?

A. I know I told the coroner on the morning he came there, and I asked him about it — about the body — I told him what Mr. Hughes had said to me in regard to removal of the body; he said "Mr. Hughes has been to me;" I said I would like to make a *post-mortem;* he said "can you determine the cause of death without that;" I said "yes," that he died from injuries received to the lungs from a fracture of the ribs, and the ribs punctured the lung, and that I could not conscientiously say that I needed an examination or *post-mortem* to determine the cause of his death.

Q. Did you not become satisfied that Mr. Hughes had been improperly treated by the attendants as early as Monday or Tuesday succeeding the injury?

A. I was satisfied in my own mind that two of the attendants had struck Mr. Hughes from their own statement to me; I was not satisfied that the other had, Mr. Bills.

Q. You were satisfied that Weir and Brown had?

A. Yes, sir, that they had struck Mr. Hughes from their own statement to me.

Q. As early as Monday or Tuesday succeeding the injury?

A. Yes, sir.

Q. And, notwithstanding that fact, you still retained those men in the institution?

A. For the reasons stated I did.

Q. And allowed them to take care of insane persons under their charge?

A. Yes, sir.

Q. Would it not, in your judgment, have a bad effect upon other attendants in the institution if men known by you to have violated a rule in regard to striking patients were retained in the Asylum?

A. As an abstract question or a practical one it would; my sole reason of this was not concealed in any way — the sole reason was for public consideration.

Q. I assume that that was not made known to the other attendants in the institution?

A. I do not communicate any thing about one attendant to another under any circumstances.

Adjourned until 10 o'clock to-morrow morning.

WAYS AND MEANS COMMITTEE ROOM,
FRIDAY, *April* 4, 10 A. M.

Present — Messrs. HOWE, HASKELL, OLIN and RICE, and Messrs. GOODWIN and MORGAN of counsel.

Dr. JOHN P. GRAY:

Continued examination by Mr. GOODWIN:

Q. Doctor, to the question put by Mr. Haskell at your examination yesterday afternoon, "Q. Were you examined before the district attorney took charge of the case?" you answered "yes, sir." Do you desire to explain that?

A. Yes, sir; I understood it, as far as I could hear the question, to be "were you examined by the district attorney before the coroner?" and I answered to that.

Q. And you mean now to say that you were not examined?

A. No, sir, I was not examined —

Q. Wait a minute; you were not examined at the coroner's inquest except by the district attorney?

A. Except by the district attorney, and a few questions asked me by members of the jury.

Q. To the question of Mr. Haskell: "Are you not aware as a fact that nothing was known by the coroner, or his jury, or the public, that Mr. Hughes' lung had been punctured by these broken ribs until after the inquest that was held in Madison county on the body of Mr. Hughes?" your answer was: "I am not aware of that fact, but I know to the contrary of that fact." What did you mean by that?

A. I mean that I knew that his ribs were fractured, and that it had punctured the lung, and that I had so stated to the coroner, and I would like to say further that I never read the testimony of the coroner in the papers, and never read the newspapers at all in reference to any matters during the whole period, and did not talk to any person or permit any person to talk with me about it; I did not wish to mix my mind and the ideas and knowledge I had with any other knowledge, or any thing that anybody else had that was said or done.

By Mr. MORGAN:

Q. When the young man Hughes came to the Asylum upon your dispatch after the injury of his father did he appear to be sober and in his right mind?

A. I do not think I have said any thing to the contrary.

Q. No, you have not, but I am asking you the question?

A. Yes, sir; certainly he did.

Q. And did he appear while there to understand what was said to him, and what he was saying?

A. I do not know whether he understood it or not.

Q. Did he appear to you to?

A. I suppose he understood what was said to him.

Q. And did he appear to understand what he was saying himself?

A. Well, I understood what he was saying; I don't know what a man can appear to do.

Q. Did he have the appearance of candor and of being an honest young man?

A. I think he was rather reticent.

Q. Do you mean when he was there after the injury?

A. The whole period he was there, I thought he was rather reticent.

Q. That does not answer the question?

A. That won't admit of a categorical answer; he did not seem disposed once or twice to extend any information.

Q. And did you think that was an indication that he meant to suppress any thing?

A. I did not think much about it in that connection; I did (at the last interview I had with him) say to him that I would like to know in substance what his father's condition was at home, that we had been —

Q. Was that after his father was injured?

A. Yes, sir; after his father was dead I told him "we have been very frank and candid with you, I should like you to be equally so," that is, I should like to know your father's condition, and I stated to him that the sudden change in his father's condition from what had been described to Dr. Backus, and contained in the case book, was not usual with cases of simple melancholia, though I did say to him, as I recall now, I said to him some days before that, that I had thought a great deal about the case and that I could appreciate that a man in his condition would be subject to hallucinations, and that in my judgment the conduct of the patient on No. 9 was due to hallucinations; that he either mistook who these persons were or else he had hallucinations of hearing as well as of sight.

Q. Before the injury?

A. I was going to complete that sentence, if you will allow me; he then said that he would state to me that his father at home was very violent; that part of the time it took two men, and part of the time four men to take care of him; that they were afraid.

Q. That was after the injury?

A. Yes, sir, and that he was afraid that his father would kill his mother, or somebody else, and that the doctor had so instructed him; then I asked him why he did not tell Dr. Backus that in taking the history of the case; he then said, "I did tell him he was violent" (I

may not use the exact words, it is too long a time past); I said I read the case immediately afterward and talked to Dr. Backus about it.

Q. Before Mr. Hughes received his injury in the Asylum, you did ascertain the fact that he was a violent patient, did you not?

A. No, sir, I think not.

Q. Did not ascertain that?

A. I did not ascertain that, the son did not communicate that to me.

Q. Did you not ascertain it there by his conduct in the Asylnm?

A. No, sir, because the whole period embraced a very brief space of time.

Q. How long was he on number nine?

A. From Friday afternoon until Saturday morning, and the violence attacking the patient was on Saturday morning some time toward noon, and not long before this injury to his ribs occurred, and I did not know that until after the injury had occurred.

Q. On what ward was he first placed?

A. On number nine.

Q. Then where was he taken that morning — Saturday?

A. After that attack on the patients he was removed toward four by the direction of Dr. Backus, who was in charge; he remained on four until the injury occurred.

Q. That was the next week?

A. No, sir, the same day.

Q. He was taken to number four on account of his violence?

A. On account of his attacking these patients on this quiet, suicidal ward.

Q. Did you learn then just his condition when he was taken on to number four; did you yourself learn?

A. I stated that until Dr. Backus reported to me his injury shortly afterward, I had heard nothing of him.

Q. And you heard nothing of him, except the fact that he was taken from number nine to number four?

A. I did not learn that until after the injury, because this attack on the patients occurred while — just shortly before — well, that was on nine and then he was removed to four.

Q. And that was an indication that he was a violent patient?

A. No, sir, it was not; that is not an uncommon thing, under a sudden hallucination, in cases of melancholia or cases of mania, and the doctor saw him shortly afterward when it was quiet on number four, directly afterward.

Q. (By Mr. Haskell.) That was after he was injured?

A. No, sir; before he was injured.

Q. Which doctor saw him then?

A. Dr. Backus went there and saw him on his visit on that ward, and attempted to talk with him, and he was then quiet and walking up and down the day room; that was the report Dr. Backus gave me; it is not at all uncommon for a person to make an attack of that kind, and that will end it, and the hallucination not appear again at all, or, perhaps, not for some time.

Q. Were you informed of Mr. Hughes' condition on Friday night?

A. That was the day he came there; there was nothing in his case Friday night; I knew nothing about his condition Friday night until I was informed by Dr. Backus the next day; that was after he was injured.

Q. Then no one reported to you his wakeful and disturbed condition on Friday night?

A. No, sir; that was not reported to me.

By Mr. Haskell:

Q. Did you not know that Dr. Backus, when examined before the coroner at the inquest, did not state any thing about the punctured lung?

A. I don't know; I never examined his testimony, and he did not tell me what his testimony was.

Q. Did Dr. Pilgrim also fail to state that fact?

A. I don't know; I never read the coroner's minutes, or any of the testimony, and I have not to this day.

By Mr. Goodwin (resuming):

Q. When patients are brought to the asylum by their friends, do they tell as good a story as possible, and often conceal material facts of violence in order that the patients may be placed on quieter wards?

A. A good many do that.

Q. Are people brought to the Asylum injured and bruised?

A. Yes, sir; some of them very severely.

Q. Will you state the case of the man brought from Schenectady on Saturday last?

A. Yes; he was brought there by a young physician, a son of the superintendent of the poor, his (the patient) son, and a police officer; when he came in he had iron manacles on his wrists, his hands were cut and scratched and bloody, and the skin was abraded from his wrists; he had on straps fastening his arms back, strapped tight around each; the skin burned and abraded where the straps were; he had a large rope around his ankles, twice the size of that gas tube — about three-fourths inch in diameter, looped two or three folds round; the skin bruised and abraded under that; in addition to that he had iron manacles on his ankles, his feet were swollen and bruised, and the skin was off under the manacles; he had bruises over various portions of his body; he was a furious, maniacal man; he was a man seventy-four years of age, and their statement was that it took four or five men to do any thing with him; the officer said that either in the station-house, or the poor-house, he had torn up the iron bed-stead in the cell, all to pieces, with the pieces he had torn open the floor, and torn off the side ceiling; and had cut himself, and bruised himself, and had taken off the end of one of his fingers with pounding on the doors; we have had persons brought there with broken ribs, which has been done in the endeavors to take care of

them; we have had persons brought in so badly injured that they died within a few hours; brought in simply to die there, and the friends to take the body away with them; died from furious raving until they were exhausted, and from attempts to restrain them, and take care of them; we had a woman brought in since this committee were in session bruised almost all over — terribly bruised; there was no unkindness on the part of her friends or family, but they did not know how to hold her or take care of her; another woman was brought in all bruised, and with a black eye, which she said her husband had done, while he said she had done it in the struggle in the cars; these things are inseparable from lunacy; to abolish all those things, you would have to abolish the disease and abolish humanity.

Mr. GOODWIN — I would ask the stenographer if the portion of testimony on page 28 has been erased.

(The stenographer says no, but he will so instruct the printer.)

By Mr. GOODWIN;

Q. Doctor, did you in November last receive a letter from the Civil Service Commission, asking your opinion in regard to methods and details, with such modifications and recommendations as you might suggest in reference to the rules governing the admission to the service of the State of attendants at the Asylum?

A. I did.

Q. Did you reply to that letter?

A. I did.

Q. What reply did you make; please read your reply?

A. On December 1 I made the following reply: "To General Silas W. Burt, Chief Examiner, Civil Service Commission, New York. Sir — Referring to my letter of the 26th and yours of the 17th ult., respecting the application of the Civil Service Law to persons employed in asylums for the insane, I submit the following:

1. "Regarding the method for ascertaining the qualifications of persons employed as attendants, nurses and orderlies."

As to the qualifications suggested by the Commission that "no restrictions are to be imposed regarding nativity, citizenship or place or length of residence, * * * that men at the time of application should be not less than twenty nor more than forty-five years of age; women not less than eighteen nor more than forty years of age * * * to be free from physical defects or disease calculated to impair efficiency; to furnish vouchers as to moral character, cleanly and temperate habits and equable and humane disposition—such applicants to be able to read and write and work correctly simple sums in addition and subtraction."

All this, as you suggest in your letter, is in "accord with the present requirements in all the asylums, except as to the limits of age which you indicate."

Practically this latter is also. I have tried persons under and be-

yond these ages. I have found some men under twenty and women under eighteen who fully met the requirements of attendants, but these are rather exceptional. Those who proved most serviceable are over these ages and up to thirty. We have also occasionally engaged persons over the proposed limit, forty and forty-five, who were highly recommended for character and even for seemingly additional qualifications in nursing, but almost invariably with ultimate failure. Persons engaging in this service after forty do not easily acquire the necessary systematic habits of watchfulness, care of door and keys, and personal subjection to definite rules and regulations, all so essential in the process of educating and molding the faculties and will to spontaneons obedience and to the execution of fixed rules. The establishment of qualifications will doubtless elevate the service. While almost, without exception, the present employees would pass the examination plus, still the public mind needs to be disabused of the error that attendants are ordinarily ignorant, inefficient or cruel, and such promulgation of qualifications will do much to enlighten the public and sustain the hands and work of the administrative officers of asylums. I approve this proposition of the Commission.

Respecting the employment in the first grade of the eighth subdivision, attendants, nurses and orderlies, whose qualifications are above referred to, the Commission proposes that the board of examiners certifying to their qualifications shall be "selected from the officers in each asylum." This would be also, as your letter states, in accord with the law and the rules and regulations and usages of the institution. The organic law, section 10, title 3, chapter 446, Laws of 1874, with which you are familiar, provides that the superintendent shall appoint, with the managers' approval, such and so many other officers, assistants and attendants as he may think proper and necessary for the economical and efficient performance of the business of the Asylum, and to prescribe their several duties and places.

The rules and regulations declare that "it shall be his duty to determine, under the direction of said board, what attendants and assistants are necessary to be employed, and prescribe their respective places and duties." The law further requires, section 10, that the steward shall, "under the direction of the superintendent, make contracts in the superintendent's name with the attendants and assistants." The rules and regulations require "in the name of the superintendent and by his directions in each case, and not otherwise, the steward shall hire attendants and assistants."

The practice has been for the superintendent to examine the applicants and their recommendations, or designate a medical officer to do so. An agreement, a copy of which you have received, is then signed. The references and recommendations are filed.

If it is desired to designate distinctly a board of examiners, I would suggest that it consist of the superintendent and steward, and that the superintendent should be empowered to direct any member or members of the medical staff to make examination to be submitted

to the board. The further question arising in my mind is whether one of the managers should not be associated with this examining board ; that any certificate of qualifications of this board should be approved in writing by the manager so designated. The next query would be whether any thing could be gained by including, otherwise than suggested, a member of the medical staff. The subordinate members of the staff have more immediate and constant relations with this class of employees, and it is their duty to report to the superintendent any defects, negligence, misconduct, etc., on their part. It does not seem advisable to me to have such officers designated as examiners, otherwise than as suggested, of persons whom it is their duty so to report to the executive head. Such an examining board as I have suggested would maintain administrative authority and responsibility conjoined, in the execution of the law as applied to administration and discipline necessary to the best working and best results in an institution.

It is often quite difficult to secure a sufficient number of attendants. It is a common experience to receive applicants highly approved by physicians and other responsible persons, supposed to be competent to judge, who prove most incompetent in fact, and unfortunately when the services of such persons are dispensed with, they feel unkindly toward those who have have recommended them as well as toward the officers of the institution. The difficulty in obtaining attendants is not so much because the applicants are lacking in education, habits, character, etc., but for their lack of adaptability to the service. The service is peculiar, and though of a public nature, it is far more domestic in its real character than public, and the nearer such institutions can be brought to home and ordinary life the better and more efficient they will be.

Respecting class seven, subdivision eight, second grade, "supervisors ot asylums and wards."

Persons are never originally employed as supervisors of departments or wards in this Asylum. No attendant on first employment is hired for any particular place, but simply as an attendant and for such place or places as the chief officer shall determine, from time to time, that he is competent to fill. They commence either in the dining-room, or as assistants on the wards, and the promotions to the positions of head ward attendants and supervisors of departments are by advancement according to proved fitness. Not, however, as a rule applied to all, for in many cases, persons reach the maximum of their ability to do good and satisfactory work at a quarter or midway in the scale of promotion — and it would be injury to the service as well as to the individual to promote any one to a position he would be incompetent to fill. Indeed it is not unusual for persons after promotion, feeling this, to request a return to their former positions with less responsibility and less remuneration.

It must appear that this grade of employees, "supervisors of asylums and wards," practically have their qualifications certified on entering the institution in a different capacity. The promotion in

all cases through all grades upwards is by the direct authority of the responsible executive head. Would the Commision deem it necessary to have any formal re-examination or certification in such cases, or would it be sufficient for the examining board to certify the promotion on a record, or in what other form the Commission might determine? During the last fifteen years all the positions in both the men's and women's department, relating to the immediate management and care of the wards and patients, have been filled by promotion.

Respecting the examination for positions in the ninth subdivision "all other persons employed," I have nothing to add to the suggestions of the Commission.

The Commission would probably prepare to be printed, or furnish printed, a blank book with questions, etc., so that the examinations and certifications of the examining board would in every case be recorded, and this book open at all times to the inspection of the Commission.

Within the past fifteen years 583 persons have been examined engaged as attendants in the care of the wards and patients, ninety of whom are now in the service. Of this whole number, 367 left the Asylum with a good record, either having completed their term of service or, by permission, to engage in other pursuits Eight of the number left on account of ill-health; thirty-four were found to be inefficient or negligent and discharged, thirteen were discharged for abuse of patients; six for intoxication; fourteen for profanity and rough speech; three were found untruthful; five were discharged for wearing articles of clothing belonging to patients; three for quarreling among themselves; three for immorality outside, while away from the Asylum though still in the service; twenty-four were discharged for staying out at night or leaving their respective wards without permission; six were discharged for insubordination; one for sending out letters, retaining money of patients and general untruthfulness; three for sending out letters; one for giving keys to patients; one for obscene language; one for impertinent language to patients.

It is proper to add that the great majority who proved inefficient, negligent and unadaptable to this service were persons of full age, of good character and education, and other qualifications, some of them having been nurses outside, who upon simple examination gave promise of being useful persons.

In respect to class 7, subdivision 1, "superintendents of insane asylums," subdivision 3, "assistant physicians and pathologists in insane asylums," subdivision 5, "stewards of asylums" (in which I presume you include matrons), subdivision 6, "engineers and expert mechanics and tradesmen."

You say in your letter "it is proposed that persons named to fill vacancies in the first six subdivisions shall procure before appointment the certificate of the Commission that they are duly qualified and that the character, scope and degree of requisite qualifications shall hereafter be determined in conference with you and other superintendents."

1. Respecting qualifications. The law declares that the superintendent "shall be a well-educated physician, of experience in the treatment of the insane." In order that no question should arise in regard to the word "experience" it seems to me that these words should follow: "and no physician shall be appointed superintendent who has not served as a medical officer in an institution for the insane." In regard to the superintendents, the question as to qualifications, character, etc., it is undoubtedly assumed in the law. They ought to be either assumed or stated.

The law authriozes the appointment of assistant physicians by the superintendent and managers, and the rules and regulations state that they shall be "well-educated physicians." In respect of education and character I have assumed these to be essential They ought to be stated in the law as well as the rules and regulations. When I was appointed superintendent I submitted to the board of managers the rule that the assistant physicians should be educated men, garduates in medicine, and as far as I was able to secure it they should have some service in a general hospital and should be men of good character and habits. I adopted the rule of promotion in regular grades, to third, to second and first, but have not been in every instance able to carry out this rule. Persons might be qualified for subordinate positions and not competent to the higher. I have never hesitated in the matter of promotion to do what seemed to me best for the public interest. For the past thirteen years every oneof my assistants has been promoted.

Though applications for the position of assistant physicians have been numerous, it has not always been easy to obtain really suitable persons. The method of promotion has, however, enabled me to secure experienced men in the most responsible positions in the staff; in only one instance in thirty years the person promoted was found to be incompetent to the place.

Respecting the method of determining the qualifications for these positions, the law declares: "The government of the State Lunatic Asylum shall be vested in the board of managers. * * * The managers shall appoint a superintendent; * * * upon the nomination of the superintendent four assistant physicians." The managers are appointed by the Governor and Senate and, I observe, are not required to be classified or to pass an examination. Whether the managers should not be the examiners and certifiers in the selection of the chief executive officers for whom and for whose character they are responsible, is a very vital question, and I can discuss it personally with you or with the Commission, especially as I do not expect to be affected and only feel, as you do, the most anxious interest that whatever course is adopted, it shall be for the dignity, character and welfare of the institutions.

In respect to assistant physicians, I am not sure that the certificate of qualifications would work to the advantage of the service. Looking through my own experience there has been no dearth of applications, but the best men have generally got some other person

to apply for them, or they have written privately, not wishing to have it known that they applied unless successful. What the effect of having a number of persons, a sort of chronic list of certified applicants, would be, I hardly know. I have had applicants recommended in writing by very competent medical men, who were persons of education and good character, but who, from my personal judgment and examination, were not qualified for the peculiar positions they sought, who afterward re-applied with the names of prominent men in social and political life, Congressmen, Senators, bankers, etc., accompanied, in some instances, by letters pressing me to give the appointment.

The superintendent should have a staff in whom he could have implicit confidence as to their ability, character, adaptability to carry out the measures, medical and other, required for the treatment of the patients, and the order, discipline and integrity of employees; and a staff who would harmonize and respect each other in their duties. Though this position is one in a public service, so-called, there is very little resemblance between this particular medical service and that of the army and navy. In the latter they can remain indefinitely under good conduct. In the asylums the service is more temporary, resembling that in a general hospital; a large proportion remain but a short time and then go into general practice. The public advantage of having competent men in these positions is the increased number of medical men educated and practically familiar with insanity. Out of the six assistnats appointed by Dr. Brigham between 1842 and 1849, three became superintendents, namely, Dr. Buttolph of New Jersey, Dr. Brown, formerly of Bloomingdale, Dr. Nichols, now of Bloomingdale. One went into private practice, another took a subordinate position in a similar institution until his death, and the other organized a private asylum. Of the five assistants appointed by Dr. Benedict between 1849 and 1854, one, Dr. Gray became superintendent (of the State Asylum, Utica), and the other four went into private practice. Of the twenty-seven appointed between 1854 and 1883 by Dr. Gray six became superintendents, viz.: Dr. VanDeusen of the Michigan Asylum, Dr. Chapin of the Willard Asylum, Dr. Cleveland of the Hudson River Asylum, Dr. Shantz (deceased) of the Minnesota Asylum, Dr. Kempster of the Wisconsin Asylum, Dr. Andrews of the Buffalo Asylum; two accepted subordinate positions in other asylums, twelve went into private practice, one organized a private asylum, one died in the service, and five remain as the staff of the institution, making thirty-seven assistants nominated in forty years. Out of these thirty-seven assistants, eleven were appointed superintendents, three took subordinate positions in other asylums, two organized private asylums, one died in the service, sixteen went into private practice and five remain.

In respect to subdivision 5, class 7, "stewards (including matrons)."

Neither the law nor the regulations mention the qualifications of those appointed to these positions. They are both offices of importance, and the persons filling them should be of mature age, should have a knowledge of business affairs, should be of high moral character and unquestioned integrity, and be in sound health. Both of these places are filled by appointment by the managers on the nomination of the superintendent.

During the years from 1842 to 1849 Dr. Brigham nominated three stewards and three matrons, the latter being the wives of the former. The first steward and matron served a little over three and a half years (from September 14 to April 1, 1846). The second a little over two years and eight months (from April 1, 1846, to December, 1848). The third a little less than a year, (from January 22, 1849, to October 1, 1849). Dr. Benedict from 1849 to 1854 nominated two stewards and two matrons. The first steward held office a little less than a year (from November 5, 1850, to October 15, 1851). The first matron held office a year and five months (from October 1, 1850, to March 8, 1852). The second steward held office less than three years and ten months (from October 15, 1851, to August 1, 1855). The second matron, the wife of the last steward, held office a little over three years (from June 29, 1852, to August 1, 1855).

Dr. Gray, from 1854, twenty-nine years, appointed but one steward, who has filled the office twenty-eight years and four months, and is in the service, (from August 1, 1855). He has nominated four matrons, one temporarily for three months, the next acted as matron eight years and three months. The next one year and three months. The fourth has continued in the position of matron ever since. This last matron was promoted from a subordinate position in the institution.

Sub division 6, " engineers and expert mechanics and tradesmen."

There is no doubt in my mind that these persons should be certified when making application as persons of good character, temperate habits, common education and sufficient technical knowledge and practical experience in the sphere of their particular vocation. The present engineer in this institution was appointed in 1853. His recommendations were from the officers of the Lake Ontario Steamship Company, in whose service he had been as an engineer. Within the past fifteen years, three carpenters have been employed successively in charge of shops, two masons, and four painters, all of whom were practical mechanics.

On giving my opinion on the matters suggested by the Commission, I have presented certain statistical facts bearing on the qualifications of officers as well as employees, which tend to show the results of the present system, and may possibly throw some light upon the problems with the solution of which your commission is charged.

That was my reply to his letter on that matter. I received a leetter from the chief examiner, saying that the Commission after considering the matter (I do not use the exact words), had come

to the conclusion that the law required that some other person than the head of the department should constitute the examining board, and that, therefore, they would request me to name three persons among the officers for such examining board, that they might submit it to the action of the Commission ; I submitted the steward, the first assistant physician, and the matron, and those persons were commissioned as such examining board.

Q. Will you be kind enough to state the character of the attendants and how they are obtained, in your Asylum, outside of what you have stated in that letter that has just been read?

A. I can only say that I believe the attendants in the Asylum are good, upright and efficient people, as much so as we have been able to get from the class of persons from whom we must draw our attendants, and I may say that my experience in attempting to get persons of higher positions or places in life as attendants has been a failure ; they would not submit themselves to the necessary discipline and subordination, and to the drudgery and more or less unpleasant work that is necessarily associated with the life and services of an attendant ; of course I will say, and the very fact of discharging persons shows, that some do not succed, that in spite of all we can do, that persons give way to sudden temper, and violate the rules, just as they do anywhere in the world, but that there is any thing beyond that, any system of cruelty, or any cruelty in the sense of being cruel, I do not believe it, and it is not true ; the constant supervision that is exercised there would detect any thing of the kind at once ; furthermore, I have tried the system tentatively of getting persons of a lower grade to do the rougher work, that has been suggested to me by various persons, and I have found that work poorly, the very illustration — I could give a number of illustrations where that class of persons are put in rougher work in the dining-rooms, where they have no responsibility of the care of the patients, only to do what they are told to do there, they are apt to become rough in speech and manner toward the patients and they soon get discontented and want to be placed above those that are able to fill a higher grade ; they are not promoted, and then they become ugly, or become suspicious of others ; I have abandoned that and made up my mind deliberately, that that is not a system that can be practiced ; that the persons must all be as near as possible of the grade that can be promoted ; and when they find they are not adapted to the service, they go away, and they are allowed to leave ; I have had people come in to scrub, etc., and if any patient annoyed such a person, or such woman, the patient would say disagreeable things to a patient, or threaten to strike them with a broom ; and they had no idea that there was any impropriety in it ; and I explained this thing then to the attendants, supervisors and matrons, that the persons there in such positions must discharge their whole duties, just as a doctor has to do disagreeable things in the discharge of his duties, associated with his profession ; necessarily he must give a patient an injection, or do any thing else required for his

welfare; and that attendants must be beyond a person who would not be willing to submit themselves to every one of these things, and I will say that the best people do it cheerfully.

Q. What effect have investigations and newspaper reports of a sensational nature had upon the attendants as a rule?

A. They have had the effect of making it very difficult to get attendants, and to make us lose some of our very best people; after the last committee, last year, I found it very difficult to get attendants, I had to write to Ohio, Canada, and various places; it was impossible to fill places and keep up the list of attendants, people said they would not come there to be called keepers and brutes and such expressions.

Mr. Goodwin — In reference to this question I desire to read a letter I have received from Mrs. Barker, the matron.

The Charman — You may do so.

Mr. Goodwin—(Reading.) "Hon. Alex. T. Goodwin — Sir—In regard to the question you asked me concerning the effect of the testimony given before the investigating committee upon the attendants at the Asylum I desire to say, that while it has already deprived us of some that were both kind and efficient, it has a tendency to prevent our getting others at all fitted for the position. Particularly since the beginning of the investigation now in progress have I heard expressions of the strongest feeling against the injustice of being called upon to defend not only their best motives and kindest acts, but their character even from the grossest misrepresentation. The life of an attendant in an institution of this kind is at best one of care and responsibility, requiring an amount of patience and forbearance far in excess of that which is generally understood or accorded patients by their friends. Add to this the perplexity attendant upon an investigation and the duties become doubly hard and unpleasant. Some of our best attendants have already said to me that if they are to live in constant fear of such an occurrence, no amount of money would tempt them to continue their work. Believing that I have correctly expressed the feeling of all,

I am very respectfually yours,

EMMA BARKER."

Q. A great deal has been said in reference to Mr. Sage, an attendant in that Asylum, who has been accused by witnesses of greabrutality; what have you to say in reference to him?

A. I have not seen the testimony myself; if there is such a thing I am ready to answer about it.

Q. I will call your attention to the testimony of Mr. Weir, in which he relates — have you heard his testimony?

A. Yes, sir.

Q. Do you know what he says about the conduct of Attendant Sage to patients?

A. I think he referred to that; I do not recollect it distinctly.

Q. Was there any difficulty existed between Sage and Weir, to your knowledge?

A. Only from what some person else said.

Q. Did you make investigation of any charges made against Sage?

A. In regard to that, that matter occurred before the former committee of the Legislature, or just previous to the investigation made by the committee of the last Legislature, that is, certain charges were made by Mr. Weir to the assistant physician that he had discovered bruises on two persons, one at this time and one at another, who had come from the twelfth ward, of which Mr. Sage had charge, to the fourth ward, of which Mr. Weir had charge, which was brought at once to my attention; I made a very careful examination into that matter, examining each person separately, examining all persons who knew any thing about it, or could know any thing about it.

Q. Examining the patients?

A. Yes, sir; and I was satisfied that there was no -- that, well, -- the bruises were on the person, that they had not occurred from any injury or brutality or any thing else from Mr. Sage; that in each particular it was exaggeration and misrepresentation; that Mr. Weir believed this I have no doubt, but his only ground, as I learned then from him and the others, was that these persons came from the other ward there on to his ward, and that these bruises were on the body; he knew nothing personally of how they occurred; I found out how they did occur, and Mr. Sage was not to blame in the matter; and that matter was brought up at the meeting of the former committee and there stated, and they examined Mr. Weir; I do not know whether they examined Sage; I offered Sage and all the rest of them to examine; they said they did not want to; Mr. Sage was discharged last fall for going out at night without permission.

By Mr. Haskell:

Q. He was not discharged until winter, was he?

A. He was not discharged until the time I now mention; that was for another cause.

Q. That was in the winter?

A. Well, he was discharged recently; it might be called winter; I don't remember the date, but that was the reason of his discharge.

Q. Was Mr. Weir the only one who made charges in regard to Mr. Sage's treatment of the patients?

A. Mr. Weir and Mr. Quine was one of the persons who made charges at that time.

Q. Mr. Orendorf?

A. He did not at that time.

Q. Did he at any time?

A. I don't think he did.

Q. He substantiates the same charge that Weir and Quine made?

A. I don't know that he did.

Q. You do not know whether he did or not?

A. He could not have known any thing about it, except what he heard them say ; I found, in making a long examination, extending two or three weeks, made in accordance with my judgment in investigating such matters in such an institution, that the majority just stated what they heard from other people, and stated it as their own. Roberts was on the fourth ward and not on the twelfth ward, and did not see any injuries occur.

Q. Neither did Weir or Quine ?

A. No, sir; I found they knew nothing of the case at all, except that they saw the bruises and heard the complaints of the patients, and heard the statements made by other attendants to them ; the other attendants could not complain to them ; that would be an utter violation of the rule for the attendants to undertake any discipline of that kind, or inquiries ; I should discharge an attendant for undertaking to assume the duties either of assistant physician or superintendent.

Q. Discharge an attendant for inquiring what had been done on another ward ?

A. No, sir ; I don't say that, if an attendant went on to another ward.

Q. And asked what happened ?

A. Yes, sir, and neglected his duties ; the rules would command me to discharge him ; he could not go off his ward without neglecting his duties unless he went by permission or on some service, and he could not go.

Q. You would discharge an attendant for asking what had occurred ?

A. No, sir ; I would not discharge him for asking what occurred ; I would discharge an attendant who undertook to make these investigations, and leaving this ward to go to another ward to breed insubordination and disturbance ; these things belong to the officers, and they are their duties.

Q. Suppose he did not neglect any of his duties, and did not make the inquiries for the purpose of breeding insubordination, but simply his attention having been called to the fact that a patient had been injured ; and the patient then being under his care, and the patient claiming that he had been injured by an attendant, and he made inquiries in regard to that so as to satisfy himself as to the truth of the charges of the patient, would you discharge him for doing that ?

A. I should not answer that categorically, because it cannot be answered so ; when he has reported that matter to the officer that is the end of his duty, and none of his duties require him to go further, and any attendant going further and instituting inquiries would be outside of his duties ; it is the duty of the assistant physician ; I and should not consider him a proper person to be in the service.

Q. Do you believe at the time Weir, Quine and the other attendants on the fourth ward, believe that Mr. Sage had inflicted these injuries ?

A. I said I think Mr. Weir did; I do not know whether Quine did or not.

Q. Had you some doubts about that?

A. I had no doubts about it at all; I merely say Quine knew nothing about it.

Q. He knew as much as Weir did, did he not?

A. Yes, sir; and I stated that Weir told me he had only heard it from some other persons.

Q. Do you think these charges were made without foundation?

A. I think they were made on good ground, as far as they were concerned, for us to investigate, but their opinions as to how they had occurred were not based upon any knowledge whatever.

Q. But Mr. Weir believed —

A. Well, belief of a question does not constitute any thing in that respect without the facts.

Q. Would it not have a very bad effect upon the attendants to retain a man in the institution who was believed by his brother attendants to have been cruel and to have inflicted injuries on the patients?

A. No, sir; it could not be if it was an injustce; I could not do an injustice to a man in regard to any thing of the kind; I should not do such an injustice as to discharge a man because some brother attendant told he did a thing he did not do.

By Mr. Goodwin:

Q. I want to ask a question I neglected to ask; it was as to obtaining attendants; did you call the attention of the board to that subject in the fortieth annual report?

A. I did formally at the meeting and at the time of the report.

Q. To the matter of changes of the attendants?

A. Yes, sir.

Q. And did you state in your report as follows: "There have been a greater number of changes in the attendants during the past year than usual. Indeed it has been exceptional, and during a part of the year it was difficult to obtain a sufficient number of suitable persons for this service, notwithstanding the wages are somewhat above the amount paid outside for the services requiring the same class of persons. This has been partly due to the increased demand for labor in the vicinity, but quite as largely to the disposition of the times to scandalize and degrade the hospital service. The best class of people are not tolerant of the vulgar epithets, 'keepers,' 'brutal keepers,' 'coarse and cruel hirelings,' etc., so liberally dealt out by the sensational 'authors.' These things do great injustice to the attendants and infinite harm to the service of the hospital. The rules are strict and they are law and they are well obeyed. The spirit of the rules, I can well say, in the majority, is more than obeyed. It is only justice to say it is no uncommon thing for attendants to voluntarily do more than they are required. That some prove inefficient and some do wrong is only proof of a common hu-

manity. The law provides that such shall not be retained, and the law is carried out. The abuse and detraction of attendants and employees in a State charitable institution, a class of subordinates who can make no reply, is a pitiable spectacle under any circumstances, but especially so when those engaged in it have no knowledge of the persons or of the services the employees are required to render or how they are rendered. The corps of employees is deserving of the confidence of the public and of the friends of the patients." Did you make that?

A. Yes, sir.

Q. Are these your views?

A. Yes, sir.

Q. Will you state to the committee your views about shortening the hours of service of attendants; do you regard them as too hard worked?

A. I do not; that matter has been a matter of great consideration with me and discussion; often, with the managers, and with other persons; I do not think that a hospital for the insane can be made to conform to the regulations in regard to the attendants in an ordinary hospital with any possible success; a hospital for the insane is a home, it ought to be so as far as possible, as far as the disease would permit it, and all institutional features should be obliterated as far as possible; the attendants should be made to understand that they are the companions and constant associates of the patients, and they must be with them day and night, they must be with them, they are as a person is in a family, it would be as imprudent to take one person and substitute another in that way as it would be with a nurse of a child; an attendant with the charge of a ward must have the responsibility of that ward, and cannot hand it over at given hours to anybody else, and so the assistants must have their duties in the same way, (and the dining-room persons also) and they must sleep with them there, and my observation and experience, and the observations I have made in institutions in this country and abroad touching that matter (because it is one of the most vital of the matters associated with the government of a hospital) is that the best system is that in which the attendant eats at the same table with the patients, and is at the head of the table, and they are associated with them all the time; I believe there is more concord, more harmony, more agreement and better service rendered; and provisions are made by which attendants get out-door work and exercise; get away occasionally to see their friends, and get out at nights sufficiently to go to church or to go to some places of pleasure or amusement; the fact is that attendants as a general rule improve in health if they go to the Asylum, and there are very few deaths, they have been very few indeed, either from consumption from persons who have sought that place because of the delicacy of their lungs or from cancer; we have had one or two attendants die of cancer; that is a disease that a person dies of anywhere, but from

wearing out or getting nervous, so as to become insane, or any thing of that kind, that is so exceptional as not to be recognized even.

By Mr. MORGAN:

Q. What is the greatest length of time any attendant now in the Asylum has been there as an attendant?

A. One has been from the time the institution opened — a woman, and she is a woman in good health for her age.

Q. How long the next?

A. I cannot tell, but a good many years; some of our best people have been there a great many years, on both sides of the house.

Q. Who is the eldest on the male department?

A. I cannot recollect; I know the longer we can get attendants to stay the better it is for the institution; and abroad they were subject, I noticed, to a great many more changes than we are, and the Commissioners in Lunacy speak of that in all their reports as a thing to be remedied; persons who have got used to the service are the most forbearing, kind and considerate; I have had very good people come here who would resign the first time a patient spit in their face; had a woman very highly, some time ago, recommended by a number of persons, and she said herself "I cannot bear this at all, and would not endure it;" she could not take in that they were irresponsible people, as she said she would box a child's ears for doing such a thing, she recognized that she was not adapted to the service; another very excellent woman, a very intelligent woman, I think she would have made a most admirable attendant, but could not bear the humiliation of going out walking with them; that was a sensitiveness that is not to be commended; but she could not help it, she tried to help it but could not do it.

By Mr. GOODWIN:

Q. Are vacancies ever permitted for any length of time on disturbed wards?

A. No, sir.

Q. How are they filled?

A. They are filled at once from other wards, and when I have not had persons that I could spare in that way, I have sometimes brought in outside help to fill the vacancies.

Mr. GOODWIN — I think it should appear on the record, and I ask that it should appear, that the committee have been furnished a list of all attendants at the Asylum since the year 1874; that is true, is it not?

Mr. MORGAN — Dr. Gray, at my request, furnished me with the names, last known place of residence, of all attendants, giving the date of the employment, the date of the discharge (if they had been discharged), the cause of discharge, or if they left of their own accord as stated, from 1874 to 1884, inclusive, and which I have presented to the committee, and it has been used before the committee during its various sessions.

By Mr. Goodwin:

Q. In regard to Miss B., how do you regard her in character and fitness for the position she occupies?

A. I regard her as an admirable attendant; she is a woman of great forbearance and kindness, and I will say further that the ward that she is on is a ward where a great many of the disagreeable and troublesome patients are kept, and I consider her a woman of great forbearance and great kindness.

Q. Now in regard to Mr. Halpin, you have read his testimony?

A. Yes, sir.

Q. I need not, perhaps, call your attention in detail to his statement; what have you to say about it?

A. Mr. Halpin was never any thing but an assistant attendant, he was never placed in any position of responsibility, he was moved about from one ward to another, more or less, as a convenience; he was a good worker and a quiet sort of man when he was there, but not a man to whom I ever gave any responsibility; the statement that he was ever a private attendant on a person is utterly untrue, his statement about a person from Albany, a hatter, with a trouble of his urinary organs, etc., is an entire fabrication, not a word of truth in it.

Q. He left the Asylum some years ago?

A. Yes, sir; in 1878, I think; but up to that time he was simply as a worker; he was one of such men that you cannot employ as attendants or subordinates; that you must have a better class; if he was discharged for the reasons named, I do not deem it my duty or as proper that I should go into the evidence that was brought to me, touching all these matters, which were matters I was concerned with, as a chief officer to understand, that I fully understood them, and directed the steward to discharge him; he was told fully about his discharge by the steward and asked to see me.

Q. What was he discharged for?

A. He was discharged for immorality; most of it outside.

Q. Since his discharge, have you received letters from him?

A. Yes, sir; some abusive and some threatening; he wrote a letter before the meeting of the last Assembly committee, demanding a recommending from me in place of the one he had received (as though he had received one); he never did receive any recommendation from me whatever; I am very sorry that I mislaid the letter; I showed it to Mr. Morgan; I never paid any attention to any communications.

By Mr. Morgan:

Q. You say you gave Halpin no letter of recommendation when he left?

A. No, sir; I never gave him a letter or line to anybody, or about any thing.

Q. But he has applied to you for one?

A. Yes, sir; since he has been away, he says, "I have lost the recommendation you gave me and want it replaced;" he said "I do not want it just now, but may need it sometime."

Q. Now, in regard to Mr. Buckley?

A. Mr. Buckley came to the Asylum in precisely the same way, as a common, subordinate laborer; it was very difficult to get a better class of attendants to work in the dining-room; he came well recommended as an honest, sober, industrious man; I put him on a dining-room and he never was anywhere else except in the dining-room; he was at that time a rather silent man, very industrious and a good worker; after a time he got a little more money ahead and began to dress better; then he wanted some other employment; he wanted to be an attendant on the ward, but I did not consider him competent for the discharge of any duties above that of the ordinary care of the dining-room; afterward he became rather rough; he was a coarse-grained man at any rate, in his speech, and I discharged him; his statement about my going into the twelfth ward and seeing Mr. Heath there is an utter fabrication; I never saw Mr. Heath on the twelfth ward; I saw Heath three or four days before his death in eighth ward with his brother (Mr. Heath's brother); Heath complained in the presence of his brother that he had been abused and his ribs broken, and pounded, etc.; in the presence of his brother, first to his brother alone in a part of the ward while I was doing something else and afterward in my presence; and Mr. Jones, the supervisor, came over and stripped him, and he was examined in the presence of his brother; there was not a bruise or an injury on him.

Q. Was he examined in your presence?

A. Yes, sir; all the rest is a sheer fabrication made up from one person talking to another; it is a common thing for one person to tell a story and that person to adopt it; as an illustration of that, I refer to the case that Mr. Weir speaks of, where he speaks of a person on the seventh ward, in December, a year ago, where a person had been injured by an attendant and was in bed for several weeks; the truth about that was, that Weir knew nothing about it whatever except what some person told him, and that person either misrepresented or Weir exaggerated; he was in bed about a week from a sprained ankle, which he got from suddenly attacking some patients right in the open recess, I have no doubt at all, under hallucination of sight and the endeavor or take care of him.

Q. You were examined before the committee at Utica, on February the twenty-second; the first witness called before the committee; you then stated to the committee in reference to your visits upon the wards of the institution?

A. I did.

Q. Since that time you have read the testimony of the attendants and various other persons in reference to that subject; do you desire to say any thing further upon the subject to the committee?

A. I have given my statement, on oath, of my personal attend-

ance on the wards, and what it is, and I simply repeat that, and I have nothing more to say; that is the manner in which I have discharged my duties, and I have discharged them faithfully, as I have stated, and I have nothing more to say.

Q. I am very anxious that the committee should hear what Dr. Gray has said on the matter of Halpin and Buckley, and I call the attention of absentees to the importance of looking at that.

By Mr. HASKELL:

Q. I wish you would state how Smith came to be appointed supervisor?

A. Because I deemed it the best appointment I could make out of the attendants I then had.

Q. He is a very young man?

A. Yes, sir; he is an intelligent, kind-hearted man and his services had been long before such as to commend him; he was not consulted about the matter one way or another; in making this appointment I make my best judgment.

Q. Do you have any rule or system in regard to promotions?

A. I do not promote persons in order as you will see.

Q. Do you have any rule or system in regard to promotions?

A. Yes, sir; I have a rule and system of promotion; when a vacancy occurs at the head of a ward, I look over the matter with the help of the assistants, and appoint the best person that we have, that can be spared, that I believe most competent to that position, and do the same precisely with supervisors.

Q. It is not then a usual or regular thing to appoint the eldest attendant?

A. No, sir; many of the eldest attendants would be entirely incompetent to any such duty.

By Mr. GOODWIN:

Q. Now a few questions in reference to the commitment patients and difference between criminal and private patients, give a brief account how are patients committed?

A. They are committed to the Asylum on an order of the superintendent of the poor of the county, if they are considered, by the superintendent of the poor, paupers; that is within his own judgment, that he calls an insane pauper. As a general rule I ma say that that class of persons are persons with very small means, and they are sent at the expense of the county, either wholly or they pay something; a good many of these I have learned from them and their families that they repaid to the county some part of it.

Q. So far as the Asylum is concerned, you receive your pay?

A. Yes, sir; sometimes they will say their family will furnish clothing in certain cases if they say that it is put down, and goes to the clothing clerk so that he will know; he will only know they are

there on the order of the superintendent of the poor, and the bills are charged from the counties from which they come, in detail.

Q. Is it true that part of the board of the patients paid by the county is reimbursed to the county by the patient or the friends?

A. County superintendents have sometimes told me that as well as their friends; an indigent person is a person described in the law as "unable to support themselves under the visitation of insanity, but not paupers," such a case is sent on an order of the county judge; as far as the Asylum is concerned, the bills go to the county precisely as in cases of persons sent by the order of the superintendent of the poor; formerly that distinction rested upon this, that the judge sent persons who had been insane less than a year, who were not paupers, and the order contained the direction that at the expiration of two years, if they had not sooner recovered, the judge would be notified, and if they remained afterward their expenses would still be chargeable.

By Mr. Haskell:

Q. Do I understand you to say that is not the law now?

A. No, sir.

Q. What is the law?

A. There is no restriction now in regard to length of time, either in respect of the insanity, existence of the insanity or their remaining in the Asylum.

Q. Now, in regard to criminal patients, how are they brought to the Asylum?

A. There are three classes of criminals brought to the Asylum, denominated as such; the judge of the county can send any person who is dangerous to be at large and whose friends have not taken care of him; the county judge may also send any person who is confined in a jail under a charge, and who appears to be insane, after due investigation with the district attorney, etc.; then there is another class of criminals sent by the courts, who have committed crimes, where the plea of insanity has been raised and a commission has been appointed and the insanity determined; the judge then issues his order for their commitment to the Asylum.

By Mr Morgan:

Q. That was like Renshaw's case?

A. Yes, sir.

Q. He was examined by a commission?

A. Yes, sir; determined by a commission; he was not sent to our Asylum, though; the law, as it stands, allows the judge the discretion to send them to any State Asylum; persons under indictment for crime may be sent at that stage, pending the indictment, if they appear to be insane, after like investigation, and persons acquitted after trial for crime, on the ground of insanity, may also be sent.

Q. That is by order of the judge holding the oyer and terminer?

A. Yes, sir.

By Mr. Goodwin (resuming):

Q. Now in reference to private patients?

A. Private patients are admitted on a bond or agreement made to the treasurer of the Asylum; that agreement always setting forth the exact sum per week to be charged to the individual, and a provision in that agreement saying, that in case of a person requiring extra attendance, or in case of death, etc., that the expenses are to be paid.

Q. In case of a patient brought to the Asylum with defective papers, and suppose the bond was not in accordance with the law or what you require, what would be done in such case?

A. They would not be received; they would not be received on any bond (if a private patient) except the bond prescribed by the board of managers for the treasurer.

By Mr. Haskell:

Q. What other papers beside a bond are required for private patients?

A. A certificate of two physicians who are Commissioners in Lunacy, and those certificates must be certified by the county judge from the county from which the patient comes, or a justice of the Supreme Court, within five days of the time of admission.

Q. Certified in what respect?

A. Well, approved.

Q. You mean that the finding of the physicians is approved?

A. Yes, sir; you may take that as you choose; I will illustrate the facts; the law provides that such certificates shall be made in all cases and that they shall be made after forms prescribed by the Commissioner in Lunacy, and blanks of the forms are filled out and the physicians give the facts, as required by the statute, in this certificate, and swear to it, and they also declare under that oath the person who has authorized them as lunacy examiners; then on the back of that the county judge says: "I approve the within certificate," or something of that kind; some judges say one thing, some another; it is an approval by the county judge; whatever the clause is it is an approval; the law says "approval;" some persons think with that carries with it — I have heard judges say they thought it carried it an approval of the actual certificate itself; others think it does not; I have heard them say so.

By Mr. Goodwin:

Q. Have there not been patients brought to the Asylum on two bonds, and one is torn up or destroyed, or something of that kind?

A. Sometimes they make a temporary agreement on condition that as soon as they furnish another person in their place that that shall be returned to them.

Q. Was that the case of Miss Lathrop?

A. No, sir; in the case of Miss Lathrop it was thus: her sister visited the Asylum before hand; I did not see her; she was brought

there by a doctor, and he had not the order with him; he said she was to be received on the order of the county judge; that steps had been taken to that end. He was informed that she could not be received except some person became responsible, and he became responsible temporarily by executing a bond on the agreement that when that order was furnished as agreed that he should not be further responsible; that is the whole of the case. It is true that persons come there without a single paper and a letter from a doctor, and sometimes from a lawyer saying simply, "these persons are entirely responsible." That is in reference to the security, and also to the commitment; in such cases either they can take them home, or they can get two physicians in Utica to examine the case before we do any thing in the matter, and then execute a bond for their support and care there, and take these papers home to the judge, and if they are not returned within five days as the law directs, they must remove them; that is what we do in these cases. In the case of Miss Lathrop, I think one of the certificates was defective, and the person was, therefore, examined in Utica; I think one was defective; often one is defective in having too long a date; it must be within the ten days within the time of admission.

By Mr. HASKELL:

Q. Do you say the law says you're to receive any patient and wait five days for the certificate?

A. They may wait five days before the approval of the certificate by the county judge; the certificate must be made out and duly sworn to by a physician.

Q. You say Halpin was never employed as a private attendant in the institution — do you mean to say while he was an attendant there that he was never detailed to look after one patient particularly?

A. No, sir; he never was; and the case he refers to is an utter fabrication from beginning to end.

By Mr. OLIN:

Q. How do you explain that? Is he a lunatic?

A. I would not like to characterize him now.

By Mr. GOODWIN:

Q. At page 27 of the printed testimony, you were asked whether you were aware that people outside said you were in the habit of making large sums for expert testimony; have you ever heard any thing of that kind?

A. I never heard any thing of that kind except from certain communications from Dr. Tourtellot, and I believe Dr. Wilbur; I have read statements, and Dr. Tourtellot stated that before the "Woodin" committee, and perhaps before the last committee; they

know nothing about my private affairs; I do not know that I have spoken to them in ten years or more.

Q. State to the committee, briefly, your views about expert testimony and what do you regard as expert testimony, testimony which you have been summoned to give?

A. I regard what is technically called "expert testimony" as testimony as I stated the other day in that connection, where persons are called — where men are called to give an opinion upon a hypothesis, without their reading the testimony or hearing the case, simply the forming of a question which persons are called upon to answer before a court; medical testimony is where the person called is made familiar by reading testimony (if it is in a will case) beforehand and by hearing the testimony if it is a case of a criminal, that it is taken before the court, and examining the criminal, or examining the criminal alone, and giving opinion upon that — upon the examination.

Q. Do you desire to say any thing more about the testimony at page thirty-two of the printed testimony, in regard to the Vanderbilt case than what you have stated?

A. I only want to say if I did not say it in that connection, that I occupied none of the public time no time in that case; I had some correspondence since in regard to the matter to refresh my own recollections about it; I read all the testimony, which was no small task, in the Vanderbilt will case, without getting a single hour or minute of the part of the day that I would give to the public service; I appeared four times on the stand and testified in regard to the case during part of the days that I was in New York lecturing; of course that part of the day I would simply have been doing something else there. In regard to the case of Mr. B. I have also taken pains through others to ascertain, and I find that during the period of some months I was absent once two days, Saturday and Sunday, going down on Friday night and coming back on Sunday night; I was absent twice in that way and once three days, that was the whole time taken; the rest of the work I did at nights in that case. I was trying to think from inferences from the question, where I had been in will cases, and I can only recollect one beyond those mentioned, some number of years ago at Bath, when I was called by Judge Rumsey, I have not been in the habit of going to will cases, and am not willing to go for the main reason that if I had the time, if I could command the time, for the main reasonthat I am not willing to give an opinion on a hypothesis. I resolved a few years ago that I would not do it, and I appealed to the court; and in regard to the two cases I stated, first of Mr. Smith, of Cattaraugus county, I understood they were to take very little of my time, that I would not be obliged to hear any testimony, but simply go there and answer the hypothesis; I declined to do it, because I was not willing to put myself in a false position in which justice and the profession would be misrepresented; then an attachment was made as I before stated.

Q. Have you been called upon privately for medical advice and by whom?

A. I have by every class of people; I have been called by governors and senators, and assemblymen, and congressmen and doctors, and lawyers and judges of the Court of Appeals, and Supreme Court, down to the humblest citizen. * * * *

Q. Did you assume that you were right in giving this advice to persons to whom you were requested to do?

A. I certainly did or I should not have done it, and I cannot but infer from the character of the persons calling on me for services, had they deemed it right; I have taken care as I stated before not to interfere with my official duties; I view it largely at times a matter of convenience with reference to my duties; sometimes, however, I have instantly left my duties and gone on a case for instance, I will relate a case without its being taken down. * * * *

Q. Have you been called upon to make examination and for affidavits in reference to patients in the Asylum?

A. Yes, sir.

Q. In lunacy commissions?

A. Yes, sir.

Q. And in regard to pension certificates in case of death?

A. Yes, sir.

Q. And for insurance policies?

A. Yes, sir; a great many.

Q. Have you ever charged any thing for these services?

A. No, sir; I never charged a patient for any service rendered directly or indirectly in any way whatever; that service is of course outside of my duties, but I have never been willing to receive any thing.

Q. Have you ever left the Asylum for any length of time, without the knowledge or consent of the managers, or its president or executive committee?

A. I do not think I have ever been away two days in my life since I have been there, without their consent and knowledge, and in all other matters, if I wanted to go away for any recreation, as I did to Newport, I have always laid the matter before the board, and it has always been a matter of written permission.

Q. Are you cognizant of the fact that protests against your going out on consultations have been sent to the board of managers?

A. Yes, sir, written protests by some doctors in Utica; Dr. Tourtellot and two or three others.

Q. What action, if any, was taken by the board to those protests?

A. They showed them to me.

Q. Did you ever receive any instructions?

A. No, sir, no attention paid of any kind, they did not think such a thing was proper; as far as they said, I, myself, and they with me, understood what my duties were and what I should do.

Q. Before commencing the Bellevue medical lectures, with whom did you consult?

A. Before I laid the matter before the board of managers, I consulted some prominent medical gentlemen, and I consulted Judge W. F. Allen.

Q. What was his then position?

A. He was judge of the Court of Appeals; and several others — and they all advised me to do it; I also consulted Judge Johnson, Mr. Kiernan, Judge Church, and then I brought it after that — I brought the matter to the attention of the board of managers and asked them what to do.

Q. And those resolutions are in evidence?

A. Yes, sir.

Dr. GRAY — I want to make one further statement; I was asked whether I received compensation for lectures at Bellevue; I don't know; I did for some time; I then made up my mind that I would rather deliver the lectures when I could make it convenient to do it gratuitously, than to take a period of time when I might not be able to devote my time for remuneration.

Q. The case of H. C., what was the agreement; was there any agreement made between her or her friends by which she was to be charged one price and she paid another?

A. No, sir; no such thing has ever occurred in the history of the institution in that case or any other.

Q. Did you in the thirty-fourth annual report of the managers state to them your views fully upon the question of "occupation for patients in the Asylum?"

A. I did.

Q. And is that embraced on pages 53 to 67 of that report?

A. It is.

(Part of the report referred to is offered in evidence and admitted, and marked "Exhibit No. 37, J. H. M." See Appendix.)

Q. Did you in the same report give your views in regard to improvements, repairs and temperature of the wards?

A. I did; it is contained from pages 67 to 71 of the same report. (See Exhibit No. 37 in Appendix.)

Q. Did you in the thirty-sixth annual report of the managers present a detailed statement, furnished by you at the request of the British government, concerning the appliances and methods of heating and ventilation of the Utica Asylum?

A. I did; it is on pages 10 to 17 of that report.

(Extract from report offered in evidence and admitted; marked "Exhibit No. 38, J. H. M." See Appendix.)

Q. In the same report, did you present an abstract prepared by you of the laws of the State of New York in regard to the commitment of insane to asylums, their detention and discharge, and a comparison of the same with the statutory provisions of England?

A. I did; pages 61 to 77.

(Offered in evidence and admitted, and marked "Exhibit No. 39, J. H. M." See Appendix.)

Q. Did you in the thirty-seventh annual report of the managers give your views on improvements and organization in the Asylum?

A. I did; pages 17 to 23.

(Offered in evidence, admitted, and marked "Exhibit No. 40, J. H. M." See appendix.)

Q. Did you in the same report present your views on the "progress of treatment?"

A. I did; on pages 34 to 42.

(Offered in evidence and admitted; marked "Exhibit No. 41. J. H. M." See Appendix.)

Q. Did you in the thirty-eighth annual report of the managers present your views in regard to custody and treatment?

A. Yes, sir, I did; on pages 43 to 65 of that report.

(Offered in evidence, admitted, and marked "Exhibit No. 42, J. H. M." See Appendix.)

Q In the fortieth annual report of the managers, have you given your views on commitment, detention and discharge of patients?

A. I have; on pages 50 to 69 of that report.

(Offered in evidence, admitted, and marked "Exhibit No. 43, J. H. M." See Appendix.)

Mr. Goodwin — I offer these papers in evidence as exhibits giving the views and opinions of the superintendent as to the care, custody and treatment of the insane as practiced in the Utica Asylum.

The Chairman — They are admitted.

Mr. Goodwin — I desire to say that I regard those exhibits as the most important testimony presented by the Asylum authorities.

By Mr. Morgan:

Q. There are four horses used on the farm, are there not?

A. There must be more than four on the farm, but whatever the steward testified is correct.

Q. And there is a yoke of cattle?

A. Yes, sir; whatever he testified to in that respect is correct.

Q. There are seven carriage horses kept, are there not?

A. No, sir; only four.

Q. How many horses are there in all?

A. Four carriage horses; one steward's horse; four on the farm,

that is nine, and the two team horses; making eleven in all; sometimes we have one yoke of cattle, sometimes two.

Q. But there are not but four horses and two teams that are kept for farm purposes?

A. Only those four on the farm.

Q. Is it necessary to have seven horses for the use of the Asylum, outside of the four farm horses?

A. Yes, sir, it is necessary to have the other horses for the purpose of doing the work; there is the work on the lawn, mowing the lawn, carrying away the rubbish — carrying out swill; working in the garden, and for all those purposes; I do not think the service would be efficient with less.

Q. Is there a large bay horse that is kept in a box stall, a valuable horse, that is not used?

A. No, sir.

Q. Is there such a horse kept in a box-stall?

A. I do not recollect any horse; I know we have a box-stall, but what horse anybody saw there, I don't know; I don't know of any such horse myself.

Q. I understood that there was a large bay horse in the box-stall that was not used of any account?

A. I don't know of any such horse as that.

Q. You say the seven horses outside of the four farm horses are necessary?

A. Yes, sir; they are necessary for the services of the establishment; they are necessary in the care of the institution and grounds; there is a great deal to do, work which cannot be done without horses.

By Mr. Haskell:

Q. Did you prepare the paper I spoke about showing your absences from the institution?

A. No, sir, I could not prepare any such paper as that; I have stated all about my absences; and I have said two or three times that I never at any time left the institution except the instances I have mentioned; I have neglected no duty, either in seeing private patients or any other purpose, except when I have been called by some court on an order that I could not disregard. In regard to my going to Newport, I looked that up from my bills, that has varied from two weeks to the longest period thirty-six days.

Q. That is your annual absences to Newport?

A. Yes, sir; well, when I have gone, I have not gone there annually, and none of those absences have been made without the permission of the board.

Q. Has your attention been called to the evidence of Deputy Comptroller Benedict in regard to the matter of interest on deposits?

A. No, sir.

Q. On the daily balances of the Asylum funds?

A. No, sir, I would not really know any thing about that; I don't know any thing about the finances of the institution, they are neither under my direction nor care; I have never seen the treasurer's books in my life; I would no more think of going to ask to see them, than I would of going to the Comptroller's office and asking to see the books there.

Q. And you do not know as to the matter of balances at the bank?

A. I know the steward has informed me at times that there was no money in the treasury, and that we have had to postpone the payment of bills, sometimes a month, sometimes longer, after they were due.

By Mr. MORGAN:

Q. Does the bank where you keep your deposits allow you to overdraw?

A. Yes, I understand so; I don't know it personally; but I understand that was the arrangement.

By Mr. HASKELL:

Q. And you do not know what the daily average balances would be?

A. No, sir, I do not know any thing at all about that.

EDGAR K. APGAR,

Sworn and examined, testified as follows:

NOTE.—The testimony of Mr. Apgar, being in the nature of a reply to Dr. Gray's analysis of the "Apgar Report," will be found following said analysis, which is Exhibit No. 35, and appears at the close of the testimony in this volume.

The CHAIRMAN—This is to be our last meeting; is there any thing further you have to bring up, Mr. Goodwin?

Mr. GOODWIN—I understood the committee, at some previous session, to rule that if the article in the "Albany *Evening Journal*," written by Mr. White, was not put in evidence, that the whole of Mr. White's testimony upon it should be stricken from the record; we do not deem it of sufficient importance to put the article in, and we consent that the testimony of Mr. White may be stricken out.

The CHAIRMAN The chair states that the testimony relating to that matter will be stricken out.

Mr. GOODWIN—I regard the exhibits put in evidence the last three days as the most important evidence submitted by the managers of the Asylum, and it is evidence, in my judgment, that it will be necessary for the committee to give careful consideration before any

report is made; I therefore ask that sufficient time be given for the printing of all of the evidence, including exhibits, and that I may have twenty-four or forty-eight hours after I have received the final testimony to put in the brief suggested by the Chairman.

The CHAIRMAN — The chair will see that arrangement is made to have the earliest copies sent to Mr. Goodwin, of the first printed testimony, and that he shall have the time requested to furnish the brief, viz.: forty-eight hours; probably you shall have more, because when we get the testimony, I shall have to make a skeleton report, and we shall have to submit it to the committee, and the committee will have to consider it, and that will take probably a whole week, so that you will have time to file a supplemental brief if you desire; but we shall hold you to the forty-eight hours on your first brief. You will have time, before the report is made up, to file any supplemental brief you desire to.

The committee then adjourned subject to the call of the Chairman.

DR. GRAY'S ANALYSIS OF MR. APGAR'S REPORT.

EXHIBIT 35.

In his annual message to the Legislature, the Governor in speaking of the State charitable institutions refers to information obtained from a report made six years ago by F. P. Olcott, Comptroller of the State; the criticisms of the Governor would seem to be based mainly upon this report.

This report of the Comptroller consists of a communication to the State Senate, dated April 9, 1879, in his own name, accompanied by one from Edgar K. Apgar, who was the agent of the Comptroller in examining these institutions.

The Comptroller states: "The elaborate tables in the appendix have been prepared with great care, and they prove their usefulness by demonstrating the need of establishing a responsible supervision over the charities maintained by the State * * * The text of the report, in a measure, presents an analysis of its tables, and various instructive comparisons are made between the institutions of our State and those of other states and countries."

Just how elaborate tables which consist simply of the classification of the expenditures from the annual reports of managers of institutions in and out of the State of New York, made from time to time to Legislatures, can demonstrate the need of further responsible supervision, the Comptroller does not state. The institutions have long been, and were then, under the "responsible supervision" of boards of managers, nominated by the Governor and appointed by the Senate under statutory provisions.

The agent of the Comptroller declares that these managers are responsible men and says: "Comparatively few people, outside of those brought into direct contact with them, appreciate the magnitude of the charities of our State. It is far from my purpose to withhold the praise due to those who manage them. One cannot spend much time in looking into the subject without being deeply impressed by the sacrifices made by so many noble men and women, in a work, the only reward of which is the consciousness of doing good. Many of the managers of our State institutions give much valuable time, and the most careful attention to the duties which are not only self-imposed and without reward, but which, though fully as useful, do not confer any special distinction as is the case in the faithful performance of another kind of public work. The superintendents and officers generally of the charitable institutions of the State accept onerous responsibilities and the hardest kind of work for small compensation. They are mostly men and women who have consecrated their lives to the service in which they are engaged; and I am persuaded that in almost every case they are unselfishly devoted to a work, than which surely none can be nobler or more useful. I believe that no class of public servants are more conscientious. If they have allowed in some cases the expenditures of their institutions to increase unduly, they have only fallen into a habit of the times; they are not singular."

The agent of the Comptroller, as the result of his investigations, states: "I am glad to believe there is no reason for thinking that dishonesty or intentional wrong-doing exists in connection with the business administration of any of the State institutions I have been called upon to examine."

The statutes place the asylums for the insane under these boards of managers, who are charged with the control of all the property and interests connected with such institutions, and with the duty of forming such by-laws and regulations for their general business management and internal government, and prescribing the duties of the officers and attendants in the immediate care of the inmates They are to hold all lands, donations, moneys in trust, and maintain an effective inspection of the institutions by personal visitation, and in all ways to supervise, control and manage them for the sole interests of the public and benefit of the insane.

Under the statute adopted in 1842, in the State of New York, when the institution at Utica was organized (and every other institution is organized under the same law, in this State), each institution is governed by such a board of managers, which board is charged with the responsibility of reporting to the Legislature directly each year, the operations of the institution, its condition, and its receipts and expenditures, together with such recommendations as may seem to them necessary for the public good.

The agent evidently has given but little attention to the statute organizing the asylums and the respective duties of the managers

and superintendent and confounds these duties through his entire report.

The report contains inaccuracies and misleading statements; notwithstanding what he says of the managers and officers as to character and integrity, he states that he had consumed a great deal of time endeavoring to analyze figures contained in annual reports "to make them agree with themselves, or with the known facts accessible at the Comptroller's office, or elsewhere, only to find at last that it was impossible to produce such agreement, and that the report under consideration was, from one cause or another, misleading instead of contributing to an understanding of its subject-matter," and adds: "It is not a necessary inference that there existed an intention to mislead; the trouble is as likely to have been that the person making the report or furnishing the figures failed to bear in mind the object of publishing them; yet it may be that in some cases a desire to avoid an appearance of extravagance has led to such a purposed arrangement of figures as should not enable the general reader to gain a knowledge of the subject."

Just here, in connection with these statements of possible manipulation of figures by boards of managers to conceal their real intent, the agent in his report is himself an illustration; for instance, he says: "The cost of fuel and light at the Utica Asylum in 1878 was $20.47 *per capita*; at Northampton, $7.71 *per capita*."

He would permit the inference to be drawn from this that Northampton in 1878 was actually formed and lighted at the cost of $7.71 *per capita;* the annual report of the treasurer of the Northampton institution having put down $2,281.31 as a disbursement for fuel in 1878, the agent would make the misleading statement that this was the whole cost of fuel in that institution for that year, that he might draw an unfavorable comparison with Utica. The report of the treasurer of the Northampton Asylum for 1877 gives the cost of fuel, $7,936.34; for 1876, $4,774.65; for 1875, $8,355.53; for 1874, $8,325.80; for 1873, $9,397.49.

We quote these figures to show the unfairness of such a statement and the insincerity or incompetency that should lead to such a statement and comparison.

The agent makes the extraordinary statement that an understanding exists with the business houses of Utica to furnish the Asylum with supplies at an advance of five per cent upon the cost; there is no truth in this, and had the agent consulted any of the managers or any of the business houses dealing with the Asylum, he would not have made such a statement; the only shadow of truth for such a statement was that the managers contracted, after having received bids on sealed proposals of certain groceries in bulk, at five per cent on the wholesale prices as contained in the original invoices, which five per cent included boxing, cartage, freight, etc. The main supplies in the Utica Asylum are obtained at first hands as largely as possible; cattle, sheep, etc., are bought directly from the farmers and slaughtered on the prem-

ises; eggs, butter, poultry, etc., are bought directly from the farmers also; cotton and other goods directly from the manufacturers or their agents, and other supplies are bought either in Utica, Albany, New York, Buffalo, Boston, Philadelphia, wherever the articles can be obtained with the best economy.

A large part of the report of the agent is taken up with a comparison with the Utica Asylum with the Northampton institution. I have carefully examined into that part of his report. Of Utica he says:

"In the case of the New York State Lunatic Asylum, at Utica, the tables contain its full and detailed financial history since 1850, and a synopsis of its financial relations with the State since its foundation. These tables contain also, for all these years, a complete classification of the expenditures, so that at a glance may be seen the cost in detail for the support of the inmates of the various institutions and comparision may be easily instituted between different institutions and different years of the same institution. The division into which the expenditures have been made are classified as follows: "Salaries and wages, provisions and supplies, clothing, medical stores, fuel and light, ordinary repairs, all other expenses."

We are glad to note that the agent declares the figures of the Utica Asylum to be "a complete classification of the expenditures." All the statistics contained in the report of Mr. E. K. Apgar, the agent of the Comptroller at that time, it is just to say, were prepared in the Asylum, either by myself or under my immediate direction, and in every instance they were compared by me with the original records, either in the Asylum or at Albany. These are: Table four, giving a detailed statement of expenditures of the State Lunatic Asylum from 1850 to 1878 inclusive; table five, detailed statement of receipts from 1860 to 1878, inclusive; table six, tabular statement of expenditures and legislative appropriations for buildings, furnishing, etc., from 1839 to 1857, inclusive; table seven, statement of expenditures and legislative appropriations for water supply from 1843 to 1873, inclusive; table eight, statement of enpenditures and legislative appropriations for land, improvement of grounds, sewers, fences, farm buildings, city assessments for paving and grading, 1836 to 1878, inclusive.

These were all furnished by me, while table ten, showing the amount received from counties for patients for 1878, and table eleven, showing the amounts received for private patients during the year 1878, were furnished by the treasurer of the Utica Asylum.

As we have before stated, the agent, in his report, selects the institution at Northampton, Massachusetts, which he personally visited, for comparison with Utica; he visited no other institutions out of the State; therefore, the reports from other institutions out of the State contained in the tabulations were not in any wise known to him; it is only fair, therefore, to confine myself wholly to the figures and statements contained in the report of Dr. Earle, the superintendent and treasurer of the Northampton Asylum and the

other officers of that institution, and those given by the managers and treasurer of the Utica Asylum.

Mr. Apgar starts with the proposition that the institution at Northampton and that at Utica are of similar character; this is an error; they are not of the same character; the institution at Northampton is largely an asylum for chronic insane, that at Utica is an hospital for acute insane; evidently the agent did not give that attention to the character, history, statistics and expenditures of the institution at Northampton that he has to the character, history, statistics and expenditures of the institution at Utica.

Since the establishment of the Willard Asylum in 1863, for the care of the chronic insane, the Asylum at Utica has become more conspicuously than before an hospital for acute cases, the most troublesome and expensive and difficult to care for; it is known, on the contrary and set forth in the reports of the institution at Northampton, that that Asylum has long been a receptacle for chronic insane.

In his first annual report of the Northampton Asylum, in 1864, Dr. Earle, its superintendent, states that a very large majority of the patients there were cases of chronic insanity, many of them having been inmates of the State hospitals, and transferred as incurable to Northampton, and adds: "Of the 334 patients remaining this day (end of the fiscal year) in the hospital not one in ten presents any reasonable probability of recovery."

In his report for 1865, he says of the institution: "It has constantly been made the receptacle of the incurables of the other two hospitals," and further states that of the 134 admitted during the year, "the disease of only thirty-four was of less duration than one year; in all the rest it had passed into a chronic stage."

In his report for 1866, he says: "A very large proportion of those who were admitted from the general population are incurables, while those who are transferred from other State institutions are almost wholly so."

In his report for 1869, Dr. Earle states: "This hospital, as is well known, being the last erected, and being situated in the least populous section of the State, has always hitherto been the receptacle for many of the chronic, incurable cases of the other and smaller hospitals in the Commonwealth."

In 1870, Dr. Earle makes a similar statement as to the chronic character of the inmates.

In 1874, Dr. Earle says: "Not nine-tenths alone, but nearly nineteen-twentieths of the patients here are incurable."

In the report of Dr. Earle, for 1877, he states that only 139 patients were admitted during the year (against 435 patients admitted at Utica), and of those admitted at Northampton the report show that fifty nine were transferred from the Worcester and Taunton Asylums, the State alms-houses and the State work-house, and that of the remaining eighty admitted that year from the

general population "not more than one in five," according to Dr. Earle, "are *apparently* curable."

In the report of Dr. Earle, for 1878, it is stated that only seventy-eight patients were admitted during the year, against 427 in the Utica Asylum; only twenty-six recoveries are reported at the Northampton Asylum, against 144 recoveries at Utica.

It is submitted that the statements taken from the reports of Dr. Earle himself show conclusively that the Northampton Hospital is almost wholly a chronic institution, and that there was no justification for the agent of the Comptroller to run a parallel between that asylum and the Utica Hospital, either in the matter of expenditures or responsibility. The agent himself admits, as any reasonable man must, that much more is required in an hospital for acute cases than for the custody of the chronic insane.

The agent states: "The Willard Asylum has not been included in the following condensed statements for the reason hereafter stated, that it is intended only to receive only the chronic insane, and that a comparison of its expenditures with those institutions receiving acute cases would not be fair to the latter."

The conclusion is irresistible that the agent of the Comptroller had not read and investigated the character of the Northampton institution, although he visited it, as he ought to have done, if he desired to compare it with an institution in the State of New York for public purposes.

The agent has thus selected a semi-chronic institution out of the State to compare expenditures with the Utica Asylum, which he admits is an hospital for acute cases. The amount received per week for board and care of patients at public charge at that time at the Utica Asylum was (and is now) four dollars per week. At the Willard Asylum for the Chronic Insane it was $2.60 per week, while at the Northampton institution, a semi-chronic asylum, it was $3.50 per week. If the *per capita* cost of the patients at public charge at Utica and Willard are taken together as representing both acute and chronic, the weekly cost would be $3.30 per week for each patient, which would bring them below the charge for public patients at Northampton in the sum of twenty cents per week.

Pages 39, 40 and 41 of Mr. Apgar's report are largely taken up with an actual quotation from the report of Dr. Earle, and yet no excerpts are taken where reference is made to its being so largely a chronic asylum.

The agent quotes from the report of Dr. Earle as follows: "The amount paid by the hospital for repairs and improvements in the course of the thirteen years from September 30, 1865, to September 30, 1878, is $156,701.31;" quoting also from the report the over-surplus, cash, supplies on hand, increase of provisions, furniture, etc. Then the agent adds:

"Let us contrast this with the financial results in the Asylum at Utica for the same period.

"It appears from the report of the superintendent of the Utica

Asylum, that for the year ending November 30, 1878, there was received from sundry counties for patients' board, clothing and miscellaneous expenses the sum of $101,946.51; from sundry private patients, $54,805.57, making a total of $156,752.08, received from counties and private patients. Dividing this sum by 600, the average number of patients for the year, we find that the average amount received for each patient was $261.25, or a trifle over five dollars per week, as against three dollars seventy-eight cents and eight mills at Northampton." The agent also reports that for the same years at Utica, "For additions, alterations and repairs" there was expended $384,886.71.

The agent does not take the pains to state, what the managers have fully set forth in their reports to the Legislature, that is, that this money was expended for renewal, and rearrangement, and enlargement of an old building, which had been made by these additions and modifications to accommodate 175 more patients, and to abandon at the same time forty rooms in the basement. The agent also fails to state in this connection, that the Asylum at Utica has paid out for current repairs, farm buildings, land, etc., from the receipts of board of patients, etc., the sum of $104,271.81.

The agent makes no reference to the report of the treasurer and no reference to the fact that at Utica the finances are entirely in the care of the treasurer; that the superintendent never either receives or disburses moneys; that the treasurer is not an appointee of the superintendent; that he is appointed by the managers; that he is required to give bonds and to deposit all moneys in a bank approved by the Comptroller of the State as treasurer of the Asylum.

A point was attempted to be made that the superintendent of Utica Asylum was its financial officer, as stated above; "it appears from the report of the superintendent of the Utica Asylum, that for the year ending November," etc., making the misleading statement that the report of the superintendent actually contained and discussed the financial matters of the institution, whereas, the report of the superintendent of the Utica Asylum does not contain one sentence or word in regard to finances or expenditures.

This is grossly misleading, and with the knowledge that the agent must have had, first from the fact that he visited the Utica Asylum, conversed with the superintendent upon these very points, visited the treasurer's office in the city of Utica, examined his accounts, and further, that he had the reports of the managers, treasurer and superintendent before him, is unpardonable in such an official document intending to go to the public. The whole tendency of such misrepresentation is to cast unjust suspicion upon the institutions of the State and those placed in charge of them.

How about the Northampton Asylum?

The agent does not state the fact appearing in every one of the reports of the superintendent of the Northampton Asylum and in the very one for 1878, from which he so largely quotes, that the

superintendent of that institution, Dr. Earle, is the treasurer of that asylum and receives and disburses all the moneys, and that the bills are not audited before payment.

On page 10 of the report of the Northampton Asylum, after the report of the treasurer we read: "We have attended to the duty of our appointment as auditors of the accounts of the hospital and have found the entries sustained by proper vouchers.

ADAMS C. DEAN.
SILAS C. SMITH."

The agent omits to state that the actual cost is to the public at Utica for the support of the dependent classes, the only fair method in which any true and straightforward statement could be made in such an investigation. His report shows, what is true, that at Utica, there are private patients paying larger sums than are paid by the same class at Northampton, for the agent does not array the private patients and the per weekly charge of the Northampton Asylum, which would be the only way to make any true parallel. However, in all this the agent might justly have summed up the whole financial contrast between Northampton and Utica in these regards in a few sentences, viz.:

1. At Utica the charge per week for all patients at public charge for board, care, washing, compensation of attendants, chaplain, apothecary, book-keeper, engineer, fuel, lights, wages of all laborers in the buildings, on the grounds and farm, and also the ordinary wear and tear of buildings and materials, is four dollars per week. The charge at Northampton for patients at public charges for the same items is $3.50 per week; that the charges for private patients at Utica are from six dollars upwards per week (a few lower than this), according to the circumstances and requirements of the case; at Northampton, in the report quoted by the agent, Dr. Earle states: "For private patients there is no uniform price."

The agent gives two pages of his report to the discussion of gas, apparently to show that the managers of the Utica Asylum were not as well posted on gas as they were at Northampton, Massachusetts and other places; he states that after the expiration of a certain contract mentioned in the managers' report for 1860, "the managers had not received a sufficient reduction," and, to use the words of the agent, "when I came to inquire into this subject I found that the institution was paying $2.50 cash per thousand for gas, which was precisely the sum paid by the smallest general consumer in Utica, which was twenty-five per thousand, more than the amount paid by the hotels."

Had he given sufficient attention to have made inquiry upon this point, either of the managers or at the gas works he would have learned that the concessions on gas during the twelve years to the Utica Asylum below the prices paid by ordinary consumers and hotels, amounted to $12,446.66, and he would not have been led to an absolute misstatement by saying that the hotels were only paying

$2.25, when they were paying precisely the sum paid by the Asylum on the gas question, "the loose and somewhat careless method o business" would rather apply to the agent of the Comptroller than to the managers; Dr. Earle states that he secures gas from the city works at $3.50 per thousand feet.

As a further illustration of the accuracy of these statistics of the agent, he gives a table of the annual cost *per capita* of fuel and light in twenty institutions, and draws the conclusion that the three asylums for acute insane in this State "occupy the highest places in the scale of expenditure of the States;" in this table Northampton is put down at $19.01, Utica, $22.03; take out the cost of gas in Northampton in 1877 from fuel, $2.17 *per capita* for that year, and it leaves the Northampton institution as costing for heating or fuel $16.84 *per capita;* take out the *per capita* cost for gas at Utica that year, $5.26, and it would leave, according to the figures of the agent's table, the heating at Utica to cost $16.83; inasmuch as the agent makes an error in computation amounting to nineteen cents *per capita* at Utica on heating, it would leave twenty cents less *per capita*, or $16.64, at Utica against $16.84 at Northampton; the error which the agent makes in his figures would represent Utica as expending $1.15 more than the real expenditure represented; more than this, the average outside temperature at Northampton that year was six degrees higher than that at Utica; taking the rate of coal combustion as authorities would have shown him, and as kept by the engineer at Utica, would give in favor of Utica 180 tons of coal; in other words, if Utica had only had the average temperature at Northampton, she would have used 180 tons of coal less, and this would have reduced the *per capita* of heating still further below the Northampton institution.

We do not deem it worth while to go through the whole of this table of the agent, with the extremes of temperature like Oshkosh, Wisconsin, St. Peter, Minnesota, Jackson, Mississippi, and Catonsville, Maryland, where no reference is made to the necessary data of temperature. It is interesting, however, to see that at Catonsville, Maryland, the agent makes the *per capita* for fuel and light $36.63 as against $26.46 at Oshkosh, Wisconsin. Which is gas and which is warmth in the latter institution.

In respect of accounts and accounting the agent says: "It is not too much to say that the reports of none of the institutions are entirely satisfactory in this respect. A few are carefully prepared and only fall a little short of being all that is desired. Some are carelessly compiled and contain little of the information needed, while others are so meager and so blind as to convey to the general reader, at least, no accurate information of the financial records of the institution they referred to."

He does not indicate, however, what institutions are defective and what ones "fall a little short of being all that could be desired."

The statement of the agent of the Comptroller touching the matter of clearness and uniformity of accounts would lead one to sup-

pose that the institution at Northampton, Massachusetts, which he has selected as a business model, does furnish such clear statements as the agent would advise. An examination of the reports of that institution shows less detail in the presentation of accounts than is shown by the reports of the State Lunatic Asylum at Utica, both in the manager's and treasurer's report. I name Utica, not because other institutions are not as clear in their accounts, but because the agent has seen fit to run a parallel between the Utica Asylum and the Northampton institution, the latter being neither accessible to the Legislature or the people, except through the eyes and figures of the agent of the Comptroller.

In this connection the agent states: "It may be that in some cases a desire to avoid an appearance of extravagance has led to such a purposed arrangement of figures as should not enable the general reader to gain a knowledge of the subject."

This is a grave accusation. This charge would seem, however, to be a mere "may be," a ghost of suspicion which can only come from rumor or from the inner consciousness of the agent. Certainly he gives no facts in his report on which to predicate such an accusation. He presents no evidence or statement in the report that he was in correspondence with the board of managers touching any matters of accounts, expenditures or any thing else. Indeed the report in the main would convey the impression that there were no responsible managers connected with any of the institutions in the State of New York.

The agent of the Comptroller has found in the State, however, an institution which is satisfactory. He says: "It is agreeable to turn to an institution whose showing of expenditures, as compared with former years, may be said to be entirely satisfactory." This is the Idiot Asylum at Syracuse.

He begins at the year 1860, instead of at the origin of the institution, as at Utica. The agent's report shows that in 1860, there were 140 idiot children there; that the *per capita* cost of their care was $186.83 or $3.75 per week, and he puts down repairs as $5.64 *per capita* per year, making a total for repairs of $780.60.

Thus the cost for board, care, etc., of idiot children at that time was seventy-five cents per week more than was received at that time for the care of county patients in that year, and seventy-five cents per week more than was received for county patients at the Utica Asylum for four years afterward.

By turning to the supply bill of 1860, we find this item: "To the New York Idiot Asylum for deficiency on account of current expenditures, the sum of $5,500.

The agent states that if he were to compare the financial results of 1860 with those of 1865, it would be unduly favorable to the Idiot Asylum.

Turning to the supply bill for 1865 we find: "For the Idiot Asylum to meet a deficiency in annual expenditures, $6,000."

The whole financial accounts of that institution, however, as given

by the agent, is so muddled in his report that it is difficult to see what he is aiming at, but it does not contain references to the supply bill which we have indicated nor references to further supply bills.

The supply bill of 1866 has "For the State Asylum for Idiots at Syracuse, $6,000." In 1867: "For the State Asylum for Idiots for the deficiency in the last fiscal year and to prevent deficiency for the present fiscal year $8,000."

In 1868: "For the State Asylum for Idiots for the deficiency in the last fiscal year and to prevent deficiency in the present fiscal year, $4,000."

Neither has the agent stated that the Idiot Asylum is represented in the various supply bills down to 1877 to the aggregate $168,000, and this is a school for idiot children.

These facts would show either that the inquiries made in connection with that institution were superficial, or that there was such a "purposed arrangement of figures, as should not enable the general reader to get a fair knowledge of the subject."

He says this is "an institution where the showing of expenditures is entirely satisfactory."

In following the hiatus from 1865 to 1878 — which we are able to do through the reports of the State Board of Charities — we find the following facts in regard to the Idiot Asylum: Eighteen hundred and sixty-six, for support, $4.15 per week; 1867, $4.25 per week; 1868, $4.25 per week; 1869, for each pupil and an additional appropriation to make up deficiency of $11,000, $278.57 *per capita*, or $5.35 per week for each child; 1870, for support, for board and care outside of clothing and repairs, $3.94 per week; 1871, ditto, $4 per week; 1872, ditto, $4 per week; 1873, ditto, $3.92 per week; 1874, ditto, $4.25 per week; 1875, ditto, $3.91; 1876, ditto, $3.89.

The agent does not refer to the important fact in connection with the financial affairs of the idiot school that there is a summer vacation, in which a large proportion — if not most of them — are away at their homes. This ought to be considered in calculating *pro rata*. Such an exhibit would seem to lay at the agent's door the charge that he would seek to put upon others the arrangement of figures so as to conceal their real intent. It often happens that what is not said is quite as important in illustrating truth as what is said.

The agent closes the parallel between Dr. Earle, of the Northampton (Massachusetts) institution — who, as we have said, is both the superintendent and treasurer — and Dr. Gray, the superintendent at Utica. Of Dr. Earle he says: "His long experience and his natural capacity for work have enabled him to make the Northampton Hospital a model institution." Of Dr. Gray he says: "Dr. Gray is widely and justly celebrated for his skill as a medical superintendent, and for the organization and discipline which he has developed in the institution over which he presides. It is hardly to be expected that the medical superintendent in an institution with six hundred inmates, charged with the duties that belong to his position, can at

the same time bring to its business administration the qualities and the close attention which are requisite to secure the most economical results consistent with the proper maintenance of a proper standard of care. It is phenomenal when in the same individual are united in the highest degree the capacity for medical superintendence and business administration."

As to the question of any non-professional controlling agent in an hospital with reference to furnishing supplies "of a uniform grade," it could not be done with justice to the sick. The furnishing of a uniform diet might answer well enough for prisons, among criminals who are in good health, but it could not apply to an hospital for the sick. Neither should any non-professional man be authorized to judge of either the quality or the quantity of food, diet or medicines that should be furnished for the sick in a hospital or insane hospital. Such matters must necessarily be under the direction of a physician, and a physician alone can judge of the needs of a patient.

As an illustration of the danger that any such policy or system would work we have only to turn to the report of Mr. Apgar, a man who simply visits the several asylums of the State, talks with their officers, spends a day at Northampton, an asylum out of the State, and sets himself up as an authority on the subject of diet.

From the annual report of each of these institutions he finds figures which show that less money is expended at Northampton for the cost of provisions than at Utica. He knows nothing about the patients at either place, or what they require. What is his utterance? Of Northampton he says: "In respect of diet I am inclined to believe that in quantity and quality it is equal to Utica. If it is not, I am very confident in saying that the excess at Utica is unnecessary and does not add to its curative results."

This needs no comment.

In respect of expenditures for attendants and nurses in the two institutions he finds in the treasurer's report of the Utica Asylum a larger sum in proportion to the number of patients than in the treasurer's report of the asylum at Northampton. What is his comment? "It ought not to cost as much as four thousand dollars a year, or less than ten dollars *per capita*, to give Northampton a sufficient additional number of attendants to meet the only possible criticism to be made upon its administration."

What are the facts? At Northampton, in the report to which he refers, the number of attendants are given and shows that in that institution there was one attendant to every eighteen (?) patients, while at Utica there was one attendant to every seven patients.

Woe betide the institutions and the insane of the State if they ever should come into such hands! Such utterances in a public document which is intended to enlighten the people in regard to asylums and their wants can only breed distrust in the public mind.

The late Governor Butler of Massachusetts, in his message to the Massachusetts Legislature January 4, 1883, states: "I would recommend that a purchasing officer for all State supplies of

every name be appointed, with a salary sufficient to insure the services of a competent business man, to be commissioned by the executive for three years unless sooner removed for cause, to give adequate bond, with sureties for the faithful performance of the duties of his office, who should be charged with the making of all purchases of supplies of every kind now bought, or to be bought and paid for by the State."

He would be "Doctor" Butler also and make a classification by "putting together those in one institution who give hopes of recovery, in another those who are violent and need physical restraint, and in still another those afflicted with dementia or imbecility, who are harmless and need no restraint, but care only," what insane person needs "care only," and he proceeds: "this can be done efficiently only by consolidating all the hospitals under the charge of some one responsible head, of sufficient executive ability and scientific skill, who can, having full control, make this classification and separation which, because of our system of separate boards of trustees and separate government, cannot now be done;" who but Butler could be so wise and able?

Further he would recommend the Swiss system (sic) "of families in cottages, for the harmless and quiet, which may be cheaply constructed. A family of harmless chronic insane, for whom no physician is needed, could be taken care of by a single man and woman, and the cottages being contiguous, they may have a common dining-room for all;" Swiss system is news; where is it located?

EDGAR K. APGAR,

Treasurer of the State of New York, sworn, testified as follows:

Mr. Chairman, I want to say first that about half an hour since, on going to my office from my room, where I had been detained by illness, I found this somewhat voluminous statement (Exhibit No. 35) with a note from your stenographer, saying that it was proposed to embody this document in the report of the committee, as an exhibit, and that if I wished to say any thing in reply to it, I must appear before the committee do-day, as this was to be the last meeting. It will readily be understood that inasmuch as this report was made five years ago, and that other duties of an entirely different character have occupied my attention, the whole subject has passed out of my mind during that time, and I am laboring under a very serious disadvantage and embarrassment in endeavoring to meet, as it ought to be met, this criticism of my report which has only been in my hands about half an hour; not long enough to even read it through with care.

The CHAIRMAN — If, from the hasty inspection you have made of it, you think it requires any serious answer, the committee will be

glad to give you a hearing some afternoon next week, and will have the counsel for the Asylum present; that will give you time to look it over, unless you prefer to make an answer to it now.

Mr. APGAR — I will hastily go through the report now and point out what has struck me as calling for some reply; with the qualification I have made, I am willing to go on now. I will state in the first instance, that notwithstanding any statement made in this criticism, I stand by every statement and every figure contained in this report, and assert its absolute accuracy; (referring to the "Apgar" report, so-called, transmitted to the Legislature April 9, 1879, Senate document 67.)

The body of my report was transmitted to the Legislature April 9, 1879; as to this particular edition of the report I will not say that there may not be certain typographical errors; it is a reprint of the original, but the original report I carefully compared myself, and know it to be correct; I entered upon the discharge of the duties assigned to me entirely without prejudice for or against any institution of the State; I carefully collected all the information accessible which I thought had a bearing upon the subject I was about to investigate; I visited the several institutions, and remained at each one as long as it seemed to me necessary to gain the information requisite to make a proper report, and as I have said, without any prejudice whatever, endeavoring to make a fair and impartial report; I charge that this criticism which I hold in my hand is not made in a fair and impartial manner, as I think I can prove to the committee before I close; of course it is understood an allowance must be made for the fact that Dr. Gray is a vitally interested party, and it may be without intention to do me an injustice, and with the sole purpose of defending himself and his institution he has been misled into doing what I consider a very serious injustice to me; I will here say that if this criticism is to become a part of the record, or a part of the report of your committee, to go on file in the archives of the State as such, I think, as a matter of justice, although it may involve additional expense, I think, as a matter of justice, the report to which it is a reply should be printed alongside of it, and I simply ask those who shall read the criticism to read carefully the report, and see, on the points mentioned, if the criticism is deserved.

Mr. MORGAN — You will furnish the committee a report that is correct?

Mr. APGAR — I will; I want all the report to appear, because the criticism refers to other parts of the report. In my hasty examination of this criticism (and I have had to glance at it as one would a newspaper) I do not know but I have overlooked some very important points, but two or three have struck me that seem worthy of some answer.

The first criticism which strikes me as being worthy of notice is this: "Under the statute adopted in 1842 in the State of New York, when the institution at Utica was organized (and every other institution is organized under the same law in this State) each insti-

tution is governed by such a board of managers, which board is charged with the responsibility of reporting to the Legislature directly each year the operations of the institution, its condition and its receipts and its expenditures, together with such recommendations as may seem to them necessary for the public good. The agent evidently has given but little attention to the statute organizing the asylums and the respective duties of the managers and superintendent, and confounds these duties through his entire report."

I assert here, substantially, that that criticism, as applied to the report, is meaningless; the report deals entirely with the institutions as *institutions*, and nowhere is it meant to hold or decide the responsibility, or divide it, or hold the superintendent or the board of managers separately responsible; it deals with those institutions as *institutions* — no effort was made to divide the responsibility; so that this criticism I have just quoted has absolutely no meaning as applied to that report.

The criticism goes on to say: "The report contains inaccuracies and misleading statements," etc., etc. That I deny.

The next thing that strikes my attention is this: "The agent makes the extraordinary statement that an understanding exists with the business houses of Utica to furnish the Asylum with supplies at an advance of five per cent upon the cost; there is no truth in this, and had the agent consulted any of the managers, or any of the business houses dealing with the Asylum, he would not have made such a statement; the only shadow of truth for such a statement was that the managers contracted, after having received bids of sealed proposals of certain groceries in bulk, at five per cent on the wholesale prices as contained in the original invoices — which five per cent included boxing, cartage, freight, etc.; the main supplies in the Utica Asylum are obtained at first hands as largely as possible; cattle, sheep, etc., are bought directly from the farmers and slaughtered on the premises; eggs, butter, poultry, etc., are bought directly from the farmers also; cotton and other goods directly from the manufacturers or their agents, and other supplies are bought, either in Utica, Albany, Buffalo, Boston, Philadelphia, wherever the articles can be obtained with the best economy."

The statement made in the report was: "Its purchases are largely made of business houses in Utica, with which an understanding exists, that they are to furnish supplies to the institution at five per cent advance upon the cost to them." (P. 31, Apgar Report.) That information came to me direct from Dr. Gray himself at the Utica Asylum.

Dr. GRAY — In reference to what point?

Mr. APGAR — The five per cent advance.

Dr. GRAY — I shall have to respectfully, just at this point, deny that.

Mr. APGAR — You have denied it in this criticism?

Dr. GRAY — And I deny it now.

Mr. APGAR — I respectfully submit that Dr. Gray should wait until I get through, then he may reply.

Mr. MORGAN — I suggest that Dr. Gray should wait until Mr. Apgar is done.

Mr. APGAR (continuing) — Although this criticism starts out by saying: "The agent makes the extraordinary statement, etc.;" before the statement closes it substantially acknowledges the gist of the report, because it says: "After having received bids or sealed proposals, etc.;" * * * "as contained in the original invoices."

If there were sealed proposals and bids, I cannot understand what the original invoices have to do with it; if it was done on a sealed proposal, and on a bid, I utterly fail to understand what those invoices have to do with it; it seems to me that that statement contains in itself proof of its own inaccuracy, and is a substantial admission of the gist of the charge made in the report; then it goes on in great detail to talk about the comparison made by the agent, of the Utica Asylum with the Northampton institution; it charges some inaccuracies in figures which I totally deny, and which I only ask those who shall see the two reports — or rather, the report and the criticism — to compare carefully the part of the report criticised with the language of the criticism; the main part of the criticism with regard to the comparison between Northampton and Utica is made up of the statement that the Northampton institution is substantially for chronic insane, while Utica is for the acute insane; now, here comes in a matter in which I am taken at a disadvantage by reason of the short time I have had to look over the criticism, and the fact that five years have elapsed since the report was made; but I will say generally, what I think will be admitted by every one who has given attention to the subject, that the figures given in this criticism as showing the number of cures at Northampton, and the number of curable cases there, arises very largely from the well-known difference of opinion existing between the head of that institution and the head of the institution at Utica as to the curability of insanity. It is well known that the head of the institution at Northampton believes there are a far less number of cases actually cured or curable than Dr. Gray believes; there are such differences of opinion among experts on that matter; and with that difference, I am willing to admit that there are probably more cases known as "chronic" cases at the Northampton Asylum than at Utica; at the same time the Northampton Asylum is not what is called an asylum for the chronic insane, as Willard is in this State, and as this criticism would attempt to convey the impression that it was.

Now, I will not attempt in detail to go over these figures, but I want to state that, in my judgment, the figures have been purposely (perhaps with no hostile intention to myself, but perhaps rather with the purpose of defending the institution and its officers, which were deemed to be assailed) that the figures have been purposely taken from this report, it seems to me, and used in the criticism in such a way as to convey a false impression of the facts in the case; for example,

the figures are used to show that the cost or amount that the counties pay, or the State pays, in Massachusetts, to the Northampton Asylum is $3.50, and that the counties here pay four dollars, and that, therefore, the difference in the cost of support is misleading and unjust to the institution at Utica; but the criticism omits to state the fact, stated in the report (which must be taken into account in order to have a fair understanding of the subject), that while Northampton institution receives $3.50 from the public funds for the support of those who are dependent upon the public, and the institution at Utica receives $4, he omits to state in the criticism that in the years this report covers, hundreds of thousands of dollars were paid to the Utica Asylum for purposes similar to which the surplus over the ordinary expenses at Northampton was sufficient to do for that institution; the purchases of land, repairs — not only ordinary but extraordinary repairs — at Northampton, were paid out of the ordinary receipts of the institution to a large amount, whereas at Utica, the State was called upon to make appropriations for the institution in that respect; I charge that this criticism, leaving that out of view, would attempt to show that there was only half a dollar difference between the cost per week of patients at public charge at Utica and Northampton; I charge that in that respect it is an unjust criticism in making that statement without taking into account the other consideration I have mentioned; I charge that in that respect the criticism is misleading and unjust to the report itself.

Now, here is a long criticism, perhaps it is unworthy of notice, but it seems to me to be somewhat characteristic of the whole criticism, and, as it seems to me, showing a disposition to becloud the subject and make the assertion that the agent has been ignorant, or maliciously wrong, without furnishing the proof, it says: "The agent does not take the pains to state what the managers have fully set forth in their reports to the Legislature, that is, that this money was expended for renewal and re-arrangement, and enlargement of an old building which has been made by these additions and modifications to accommodate one hundred and seveny-five more patients and to abandon at the same time forty rooms in the basement; the agent also fails to state in this connection that the Asylum at Utica has paid out for current repairs, farm buildings, land, etc., from the receipts of board of patients, etc., the sum of $104,271.81." All that information will be found in this report, but the agent has not chosen, in the text of his report, to comment upon those facts; it is to be supposed that the reason was that nothing in them in his mind demanded it, though the facts themselves are all contained in his report. In another part of the criticism which I supposed I was going to read, when I began reading the last paragraph, I noticed another part of the criticism that I intended to read in that connection, but I cannot put my eye upon it immediately, and I will let it pass.

Now, it is stated that the superintendent — and the superintend-

ent himself has made the same statement here this morning — that he has nothing whatever to do with the finances of the institution; that the treasurer is solely responsible for them, and that the report is unjust in assuming that the superintendent is responsible for the financial control of the institution. I assert that during my visit to the institution I learned from the superintendent himself that he practically conducted the business affairs of the institution; he told me about purchases that he had made; about cattle that he had bought; he showed me on the books of the institution (not at the treasurer's office, but at the institution), the price he paid for gas; he told me in various details, which I will not attempt to recall; I could not recall all the things; but they showed that while the treasurer keeps the accounts, it is just as a clerk in a public office may keep the accounts; the Comptroller probably does not go and look over the accounts as kept, but still he is the head of the department; I do not know whether Dr. Gray is the head of that department in its business affairs or not, but I do know, as I have said, that he stated to me that he had purchased stock on different occasions where he thought he had benefited the State by the purchase of such and such things, and doing such and such things, which, if he was not charged with the business management of the institution, was a usurpation upon his part.

Perhaps the best illustration of the unfairness, and, as I assert, the untruthfulness of this criticism in part is in reference to the question of the gas supplied at Utica. Now this is a question which has been agitated before. The statement made in the report is: after showing that originally there was a contract with the gas company to lay pipes from the city of Utica up to the institution at large cost, provided the institution would agree to take gas for ten years, at a price that was a reduction from the regular rates; I think it was fifty or sixty cents; it may have been eighty cents; I do not remember the precise sum, but it was a considerable reduction of over fifty cents; I will say fifty cents or over, and the argument was made in the report that inasmuch as the gas company had put down these mains at this large expense, in view of a contract from the Asylum to take its gas for ten years at this reduced price, it was to be compensated in that time for the outlay; that they expected in that ten years to get back the cost of laying down the mains, and it was a fair argument that after the ten years expired, the Asylum should at least have as much reduction from the price paid by the private consumers as it had before, and the statement was then made, and I found when I came to inquire into the subject that the institution was paying $2.50 per thousand, which was precisely the same price paid by the smallest consumer in Utica, and was twenty-five cents more than the amount paid by the hotels. The criticism goes on to say: "Had he given sufficient attention to have made inquiry upon this point, either of the managers or at the gas works, he would have learned that the concessions on gas during the twelve years to the Utica Asylum, below the prices paid by ordinary con-

sumers and hotels, amounted to $12,446.66, and he would not have been led to an absolute mis-statement by saying that the hotels were only paying $2.25, when they were paying precisely the sum paid by the Asylum. On the gas question, the 'loose and somewhat careless method of business,' would rather apply to the agent of the Comptroller than to the managers."

I want to make this part of the criticism a test — a test of the whole criticism, and as between the fairness and absolute accuracy of the report made by me and the unfair spirit of the criticism; because this statement in the criticism is not here made quickly or thoughtlessly; it is a subject which has been before agitated by the managers of the institution, or by some one representing them, and by the superintendent of the gas company through the public prints; the whole question has been discussed, and by reference to the columns of the Utica *Herald*, the Albany *Argus* and the Utica *Observer* of the period, it will be seen that the whole question was discussed. Dr. Gray, when he makes this statement, makes it knowing all the facts in the case and after mature reflection and deliberation; and I want the committee and people who see and read this criticism, to read also the report and take this part of the criticism as a test of the fairness and accuracy of the whole of it.

Now, as to the facts in this gas question: the first person I went to as to the cost of gas at the institution (as in regard to every thing connected with it) was Dr. Gray and the managers of the Asylum; I found by their books and by their statements that they were paying $2.50 per thousand for the gas; I asked them when they paid it and was told they paid it when the bill came in, immediately; I then went to the Utica *Observer* office and asked the proprietor of the Utica *Observer* to let me see his gas bill; I also went to two other business institutions in Utica and saw their gas bills, and the bills were made out in this way: so many thousand feet of gas, $3.00 per thousand — fifty cents per thousand off for prompt payment; and every man in Utica who was a gas consumer, I assert without a possibility of its being contradicted — I assert what Dr. Gray knows, what the superintendent of the Utica Asylum knows and what the learned counsel here knows from his own private gas bills — that every man in Utica at the time the report was made who chose to pay his gas bills promptly, as the Utica Asylum did, had a reduction of fifty cents per thousand, so that he was only paying $2.50, precisely the same as the Asylum. And if it were to be considered that this $2.50 per thousand was fifty cents less than the regular charge, then the managers of the institution were derelict that they did not demand fifty cents off their bill for prompt payment; but, as a matter of fact, they were paying precisely what every private consumer was paying who chose to pay his bills as the Asylum did, when they were sent in. The attempt is here made to put me into a falsehood, and to argue that I have done an injustice to the institution, and that attempt is made deliberately, after full reflection, and with all the facts; an attempt to show in a public document that I have been

guilty of gross misrepresentation, to bring me under reproach for having either carelessly or maliciously misstated facts concerning the institution. I do not state this as an absolute fact, but from the way I know figures are made up at the institution, I think it will be found, by any one who will take the trouble to look, that this amount of $12,446 is made upon the theory that the private consumer was paying $3.00, when, as a matter of fact, it was only $2.50 when bills were paid as they were at the institution, promptly. The honorable gentleman who is counsel here — who is counsel before this committee for Dr. Gray, as I understand it, knows himself—

Mr. GOODWIN — Not for Dr. Gray, no, sir.

Mr. APGAR — Well, for the Asylum; when he was a member of the Senate he received a letter from some person in authority, either from the Asylum or the gas company, after this thing had been in controversy, charging that I had misstated, and he showed me that letter (I do not think I am revealing any confidence) before he should read it in the Senate; I stated the facts to him, and where I had got my information; I said: "You know all about this thing; you know what you yourself pay for gas; they admit they pay $2.50; now you know what you pay;" the letter was not read in the Senate, and the counsel knows and every private citizen in Utica knows what he pays for gas; you will find no single instance in which a private consumer who chose to pay his bill promptly paid one penny more than the Utica Asylum; it seems incomprehensible that a man of Dr. Gray's standing should thus misstate facts, being as they are uncontrovertible, and knowing them as he does, should come before this committee and make a statement like that; he says: "And he would not have been led to an absolute misstatement by saying that the hotels were only paying $2.25, when they were paying precisely the same as the Asylum;" I will state this, as to that: that I did not say $2.25, I said "twenty-five cents less" in my report, that the Asylum paid twenty-five cents more, and I make a point of that because I want to show with what great care I went over the figures connected with that report; on my return from the Asylum and after going to these private consumers, I went to the hotel at which I was boarding — it was the Butterfield House; I asked the proprietor to come to my room; I said, "what do you pay for gas?" he says, "I pay—" I asked him if he had a bill, and he brought up a bill and showed me; it was made like the bills of the private consumers, $3.00 per thousand, and fifty cents off for prompt payment, making two dollars and fifty cents, the same as paid by the Asylum; I said, "I should think they would throw something off, you consume such a large quantity; that is all they charge to small consumers in Utica;" he said, "They do; they give me my December bill receipted; I do not pay it at all;" there is the statement and that has been made known before; it was made known through the columns of the Utica *Observer*, that it was made upon the authority of the proprietor of the Butterfield House; notwithstanding all these facts have been

discussed in the public prints since the report was made, and their accuracy established, notwithstanding that, Dr. Gray comes before this committee and makes this statement, which is intended to fasten upon me a falsehood, when it seems to me he must have known, absolutely known, that the facts stated in the report were correct in every particular; I am, I admit, I feel heated about this; I made this report conscientiously; I had no prejudice against Dr. Gray or any institution; I endeavored to discharge the duty imposed upon me, a duty which I accepted reluctantly upon the ground that I had no familiarity with the subject; I sought to avoid it upon the ground that I was not the best person to undertake the work, but having undertaken it, I intended to do it, and did do it, as conscientiously as I could; I took pains to make a very careful report, and I confess I am heated when I find Dr. Gray coming before your committee, making a statement which is to go in the public documents of the State, and to be forever there recorded, I am heated, and I think I may be pardoned for being so when I find him deliberately coming before this committee and attempting to stamp upon me a falsehood without any regard whatever for the facts, when it has been made publicly known that every assertion of the report was known to be true and established to be true; I desire that this one point—having had, as I said when I began, but half an hour to glance over this criticism, and not having been able to read it in detail -- I desire that this one case shall be taken as a test between the criticism of Dr. Gray and the report of which it is a criticism, and that this committee, and every person who shall hereafter be interested to read the report of this committee, and the documents embraced in it shall examine the question with reference to this one point, and from it decide between the criticism and the report; I ask no better test than that, and it surely is a fair test toward Dr. Gray, because as I have said, this statement could not have been hastily made, the facts have all been brought before the public heretofore; immediately after the report was made the Utica *Herald* charged upon the authority of the managers of the institution and the superintendent of the gas company that the report was wrong in that particular, and that the facts were not so; that the private consumers were paying more than the institution; the Utica *Observer* stated immediately after that that Mr. Apgar had received his information as they knew from private consumers and had verified his facts; the Albany *Argus* afterward went into the whole subject, giving the figures and reasons for knowing it was true, and a reply was made by the *Herald* and it was kept up for several days, or two or three weeks, I do not remember how long; and I state that after all that, there is absolutely no excuse; it cannot be said that this charge has been hastily made, and I assert now that Dr. Gray knew at the time, that he knows now, and that he has known ever since the time this report was made and for the years covered by it when the criticism was made, as to the cost of gas in the Asylum, he knew absolutely that the private consumer who paid his bills

promptly as the Asylum did, paid just as much as the Asylum; I do not know whether he knew that the hotels received a discount or not, but if he did not know it, he had no right in his criticism to say that it was an absolute mistake, because the agent who made that statement had taken the pains to get his information from the proprietor of the hotel himself.

It is said somewhere in the course of this criticism — a question with reference to the Asylum at Syracuse, that is worth considering, because it shows the whole purpose and spirit of the criticism. It says, "The agent of the Comptroller has found in the State, however, an institution which is satisfactory. He says: 'It is agreeable to turn to an institution whose showing of expenditure, as compared with former years, may be said to be entirely satisfactory.' This is the Idiot Asylum at Syracuse. He begins at the year 1860 instead of at the origin of the institution as at Utica. The agent's report shows that in 1860 there were 140 idiot children there; that the *per capita* cost of their care was $186.83, or $3.75 per week, and he puts down repairs as $5.64 *per capita* per year, making a total for repairs of $789.60. Thus the cost for board, care, etc., of idiot children at that time for the care of county patients in that year, and seventy-five cents per week more than was received for county patients at the Utica Asylum for four years afterward."

Now mark this criticism; the whole purpose of this report was to show the enormous increase that had taken place since 1860 in the care and support of inmates at the various institutions. And at Utica, as it happened the increase had been — I will not pretend now to be absolutely accurate, but in the neighborhood of three hundred per cent, since the institution was formed, going back to 1850, or wherever the reports began. In some other institutions there had been a similar increase, and the reference made to the Idiot Asylum was precisely that there had been no such growth of expenditures in the institution since 1860, as there had been in some of the other institutions of the State. Yet Dr. Gray takes the figures for 1860 and shows that because Utica has largely increased and because at that time the cost at Syracuse was much larger than now, he attempts to make it appear that there is something wrong with the report, when the very fault he states bears evidence to the truthfulness of the statement made in the report.

He says in the criticism: We are glad to note that the agent declares the figures of Utica Asylum to be "a complete classification of the expenditures." All the statistics contained in the report of Mr. E. K. Apgar, the agent of the Comptroller at that time, it is just to say were prepared in the Asylum, either by myself or under my immediate direction, and in every instance they were compared by me with the original records, either in the Asylum or at Albany. These are: Table 4, giving a detailed statement of expenditures of the State Lunatic Asylum from 1850 to 1878, inclusive. Table 5, detailed statement of receipts from 1860 to 1878, inclusive. Table 6, tabular statement of expenditures and legisla-

tive appropriations for buildings, furnishing, etc., from 1839 to 1857, inclusive. Table 7, statement of expenditures, etc., etc. * * * These were all furnished by me, while table 10, showing the amount received from counties for patients for 1878, and table 11, showing the amounts received for private patients during the year 1878, were furnished by the treasurer of the Utica Asylum."

Now, I will state in regard to that part of the criticism that table No. 4, "detailed statement of expenditures of the New York State Lunatic Asylum for the years 1850 to 1878." While it is true that the information contained in that table was gathered from the reports of the institution, that table is made upon a different plan and by very great labor, the intention being to make it more clear than any tables had been made before; and to say that table was prepared at the Utica Asylum is absolutely and unqualifiedly false. The figures contained in that table were taken from the reports of the Utica Asylum for different years, not in the form in which they are here presented; they were analyzed and reduced to a *per capita* basis and every thing was done for the purpose of making them as clear and explicit as possible.

It is not of much importance perhaps but to the casual reader (I do not know that such was Dr. Gray's intention) but to the casual reader, the inference would be that the agent had gone hastily round giving no attention to the subject, and taken such tables as the institutions gave him nd put them into a report and then claimed the credit for making them.

I say that the greater part of a year was spent by me in hard work, tabulating and preparing this information.

Again, in the criticism it is stated that because the agent did not visit other institutions — I do not think Dr. Gray could have been correctly reported in that statement — but the criticism is made that because the agent visited no other institution outside the State except at Northampton, that he has no authority for his figures! That is absolutely absurd, as the committee can see. The agent received figures from every such institution in the United States, application was made to all for their reports, and most of the institutions asked complied with the request; and from those reports with great labor and care this systematic tabulation was made which is given in the report.

With regard to the information furnished by Utica perhaps it is just to say, inasmuch as the question has been brought up, that in some particulars the agent appointed by the State found it very difficult to secure the information he wanted at Utica. For example reference is made here to the table showing the amount received from private patients during the year 1878, "furnished by the treasurer of the Utica Asylum," the criticism says. It is perhaps worth remarking that the agent made application to the treasurer of the Asylum for such a list, and the treasurer informed him he could

not give it to him, that it was a private matter of the Asylum, and that he had no right to use it.

The CHAIRMAN—What list was that?

Mr. APGAR — Table eleven, the number of private patients and the amount they paid the Asylum. The treasurer informed the agent that it was a private matter between the Asylum authorities and the patients; the agent called his attention to the fact that this was a State institution, that the State was the controller of its affairs and had a right to know them and to receive the information asked. The treasurer said he could not do it but would consult the board of managers; he did consult them and in the course of a few hours he reported to the agent that he had consulted the board of managers and Dr. Gray, and that it could not be done, that the information could not be given The agent told him if that report was not furnished before he left the city of Utica the next day, he would go to Albany and would subpœna every one of the board of managers and the superintendent to come to Albany and bring all the books and papers of the institution, as he was authorized to do under the law; thereupon that report was furnished, but not until then; I desire that statement to go in connection with the criticism made to my report, and the statement in the criticism about furnishing the tables to the agent.

I have necessarily overlooked many other points that could be met as easily and as thoroughly as the ones to which I have called attention; at the risk of repetition I desire it to be borne in mind that this statement was only placed in my hands half an hour before I came before your committee; that it referred to the subject of a work which was completed five years ago, and that, therefore, I am at a disadvantage; but, nevertheless, as to all the statements I have made, I state them absolutely and unqualifiedly; and as to the gas question — which is the one I am most familiar with and which is most fresh in my mind, because of the controversy which arose after the report was made — as to that question, I want it to be kept in sight that the statement of Dr. Gray in this criticism is made with all deliberation — made after the facts were all known; I desire that that question — by any person who shall be interested enough in the subject to read it — shall be taken as a test of the truthfulness, fairness and accuracy of Dr. Gray's criticism, and on deciding upon the question of falsity as between the superintendent of the Utica Asylum and the agent appointed by the Comptroller of the State to examine the institutions of the State.

Mr. HASKELL — If you desire to take the criticism and desire to make further answer to it, we shall be happy to hear it, giving us notice long enough ahead.

Mr. APGAR — I cannot tell whether I should desire to do that.

Mr. GOODWIN — I think it is important that the committee should see and read the statement of Dr. Gray, exhibited in evidence, so that the matter can go to the printer as fast as possible; if there can be any way devised by which the exhibit might go to the printer,

and at the same time Mr. Apgar have the opportunity of presenting such further answer as he desires, it can be printed without delay.

The CHAIRMAN — Do you desire to make any reply to Mr. Apgar?

Mr. GOODWIN — No, sir; only that Dr. Gray desires to deny the statements made in relation to himself.

Mr. APGAR — In what respect?

Dr. GRAY — Especially with reference to the point that I was the financial officer or controlled the business, or showed him (Mr. Apgar) the bills, or any thing else; that is an unqualified falsehood.

Mr. APGAR — I would like that Dr. Gray be given the liberty of asking me any questions bearing upon the subject, and that I in turn may ask him some questions.

The CHAIRMAN — The chair will put to Dr. Gray any questions Mr. Apgar suggests.

Mr. APGAR — The question as to whether or not Dr. Gray denies that private consumers at Utica, who paid three dollars per thousand nominally for their gas, were not allowed fifty cents deduction for prompt payment; whether he does not know or believe that to be true?

Dr. GRAY — I did not know that, and do not know it now; my whole criticism was with reference to the statement that we did not secure our gas at the price that others did — that other large consumers did, that is all the meaning that is in it.

Mr. APGAR — Another question. What ground he (Dr. Gray) had for saying that the statement that the hotels paid twenty-five cents less, etc., was an unqualified falsehood?

Dr. GRAY — The sources of information I had for whatever declaration I did make was from the hotel keepers themselves.

Mr. APGAR — Did you ask the hotel keepers?

Dr. GRAY — I did, afterward.

Mr. APGAR — After you made the statement?

Dr. GRAY — No, sir; after the appearance of the report.

Mr. APGAR — And they told you they paid two dollars and a half per thousand, did they?

Dr. GRAY — I received my information, upon which I made that statement, from them.

Mr. APGAR — I desire that the statements made shall be compared together, that is all.

New York (State) Agent appointed to examine the charitable institutions of the state of New York

COMMUNICATION FROM THE COMPTROLLER

SUBMITTING TO THE SENATE

THE

REPORT OF THE AGENT APPOINTED TO EXAMINE THE CHARITABLE INSTITUTIONS

OF THE

STATE OF NEW YORK.

TRANSMITTED TO THE LEGISLATURE APRIL 9, 1879.

ALBANY:
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COMMUNICATION

FROM THE COMPTROLLER, SUBMITTING TO THE SENATE THE REPORT OF THE AGENT APPOINTED TO EXAMINE THE CHARITABLE INSTITUTIONS OF THE STATE OF NEW YORK.

STATE OF NEW YORK:

COMPTROLLER'S OFFICE,
ALBANY, *April* 9, 1879,

To the Senate:

I submit herewith the report of E. K. Apgar, who was appointed by me to investigate the affairs of the charitable institutions of the State.

Under examination the subject developed so much of interest that more time has been used than was at first deemed necessary.

The elaborate tables in the appendix have been prepared with great care, and they prove their usefulness by demonstrating the need of establishing a responsible supervision over the charities maintained by the State.

The expenses of the several State institutions, added to the sum expended by the State for the support of inmates in institutions other than State institutions, amounts in the aggregate to more than $1,000,000 annually.

It is expected that the joint expenses of the canals and prisons for the current year will be less than the above sum. If anything is needed to strengthen the story told by the tables in favor of greater care and supervision, this statement seems to be all that is necessary.

The text of the report, in a measure, presents an analysis of its tables, and various instructive comparisons are made between the institutions of our State and those of other States and countries.

I beg to suggest the following plan to the Legislature, as calculated to produce the desired supervision, and that, too, without creating a new department, or adding to the expenses of government:

First. Require all the receipts of the institution to be paid into the State Treasury. Provide appropriations sufficiently large to cover all their expenses, the appropriations to be advanced by the Comptroller upon monthly estimates.

Second. Require the appropriations asked for annually to be estimated for and submitted to the State Board of Charities on October 1st of each year. Make it the duty of said board to examine said estimates, and certify the amount needed by each institution to the Legislature. No appropriations to be made for any purpose, except they are so certified.

Third. Make it the duty of the State Board of Charities to require of the institutions an annual report, classified as to the items of expense and receipt, covering such details as the board may deem wise. Also a statement of the quantity and price of the various articles used.

It seems to me, that with these three simple requirements, all the elements of a complete supervision will be in the hands of the proper State officials.

F. P. OLCOTT,
Comptroller.

REPORT.

ALBANY, N. Y., *April* 4th, 1879.

Hon. FREDERIC P. OLCOTT, *Comptroller:*

In June last I was designated by you as the agent to conduct the examination, provided for in chapter 252, Laws of 1878, into the financial affairs and business administration of the charitable and penal institutions, receiving appropriations from the State treasury.

My first efforts were directed toward obtaining from a large number of institutions outside of this State, such information, as to their business management and financial results, as would allow an intelligent comparison to be made between them and the similar institutions, which are the subject of the present inquiry.

With this view, I entered into correspondence with the managers of the various institutions under State control throughout the United States, and have obtained from them a mass of statistics in relation to construction of buildings, cost of support, amounts paid for salaries, labor, provisions, fuel and lights, and other details to which more particular reference will be made in another part of this report.

Similar results have been gathered from a number of local and private institutions in this country, and from various public asylums in Great Britain and Canada. This information has been digested, and such of it as was deemed valuable, has been arranged in tables which are hereto appended. Much labor has been expended upon these tables and every effort has been made to secure for them fullness and accuracy, and it is believed that they will prove useful to all who may be interested in the subject to which they pertain, whether in this State or elsewhere.

The prisons of the State have so recently been brought under a new system of administration, and the results of the change have been so entirely satisfactory that it has not been deemed necessary to enter into a prolonged or detailed examination of their affairs in this connection.

I have made personal visitation to, and examination of, the following charitable institutions and reformatories which receive aid from the State:

Name of institution.	Location.
New York State Lunatic Asylum	Utica.
Willard Asylum for the Insane	Willard.
Hudson River State Hospital	Poughkeepsie.
State Homœopathic Asylum for the Insane	Middletown.
Asylum for Insane Criminals	Auburn.
New York Institution for the Blind	New York city.
New York State Institution for the Blind	Batavia.
New York Institution for the Deaf and Dumb	New York city.
New York Asylum for Idiots	Syracuse.
New York State Inebriate Asylum	Binghamton.
New York House of Refuge	Randall's Island.
Western House of Refuge	Rochester.

Name of institution.	Location.
New York State Reformatory	Elmira.
New York Catholic Protectory	Westchester.
Institution for the Improved Instruction of Deaf Mutes	New York city.
St. Joseph's Institution for Deaf Mutes	Fordham.
State Emigrant Refuge and Hospital	Ward's Island.

I have also visited a number of institutions which derive their support wholly from local authorities and private sources, such as the New York City Lunatic Asylum (female), the New York City Asylum for the Insane (male), the Workhouse on Blackwell's Island, the Bloomingdale Asylum for the Insane, and others. In making these visits my purpose was to familiarize myself so far as possible, especially in regard to the former class of institutions, by personal examination, with the methods of business administration and the details and sums total of expenditure. A not less important object, and one which could only be reached by personal inspection, was to ascertain the results of such expenditure in the way of attendance, diet and condition of the inmates.

The report which I have the honor herewith to submit is divided into two parts. In the first are contained such general observations and reflections regarding the management of State charities as have occurred to me during the prosecution of the examination, while in the second are given detailed but brief accounts of the facts ascertained regarding each institution which it was my duty to visit, together with such explanations and comments as seem called for in connection with the tables therewith presented.

UNIFORMITY OF ACCOUNTS.

In the examination of the various institutions of the State, I have found the system of making reports characterized by such an absence of uniformity as to make the work of comparison one of great difficulty and labor. This lack of system is one of the serious defects in the present management of our charitable institutions, and until there has been substituted uniformity and clearness in place of the complications, diversities and imperfections of the systems now in use, there will always be unjust discriminations and occasion for misunderstanding and criticism.

The advantages of a uniform system can hardly be overestimated. It would enable those who make provision for the maintenance of State institutions, to arrive at a basis upon which an equitable distribution could be made to each institution. One has only to make a casual examination of reports of institutions in the States where such uniformity has been secured, to see the great benefits derived therefrom. It is the only way possible by which the State can place the cost of maintaining all institutions which are similar in character, on an equal footing.

The executive committee of the Board of Charities of this State, in a report regarding the management and affairs of the New York State Institution for the Blind, at Batavia, used the following language:

"We beg also to suggest to the Comptroller that a system of book-keeping and forms for verifying and returning accounts to his office might be prepared, and, subject to the modifications necessary for organizations of dissimilar character and purpose, be required in all institutions supported by the State. Such uniformity in the State institutions would lead to its adoption by the cities and counties. A

common method of keeping and verifying public accounts throughout the State would tend to prevent fraud, facilitate its detection and protect the fiscal agents of the public against unjust accusation and suspicion."

I cordially concur in the recommendation thus made. There are in many of the systems existing at the various institutions excellent single features. If one system of bookkeeping and of making up reports could be adopted, embracing the best points of all the systems now in use, it could not fail to result in much good. Some of the features which ought to be provided for in any such system are here noted.

There should be an inventory of all property on hand at the end of each fiscal year. The annual report of each institution should contain, first a statement of receipts and disbursements during the year, classified under such general heads as salaries and wages, labor, provisions, household stores, clothing, fuel, lights, medical stores, ordinary repairs, miscellaneous. Second, a statement in detail of the expenditures under each head, as for example, under salaries, the name of each officer and his salary, the number of attendants of various grades and the pay of each grade, the pay of engineers, watchmen, etc. Under the head of provisions should be stated the quantity and cost of various articles consumed, for example, the number of barrels of flour consumed during the year and the total cost, the number of pounds of sugar and total cost, and so on. Such a statement could be compressed into two or three printed pages, and would thus not materially add to the length of the report. Its advantages are many and obvious. Each superintendent would thus have the benefit of the experience, as to quantities and cost, not only of his own institution, but of all the others.

A comparison of the quantities of various articles consumed in the different institutions, taking account of the number to be provided for in each, would attract attention at once to waste when it existed, and would prove a valuable aid to all the superintendents and stewards. Such tables published in all the reports and continued from year to year, would soon come to possess great value also for the opportunity they would offer for a consideration of the sanitary effects arising from the greater or less consumption of different articles of food. The comparison of one year's experience with another in the same institution, and of different institutions for various years, would be likely, in a short time, to lead to valuable results in connection with the dietary of each. So, too, with regard to the prices of articles purchased. Every superintendent would have it in his power to ascertain, at a glance, the prices paid for various articles by other institutions, and he could thus judge as to whether the prices paid by himself were excessive or otherwise. With such publicity as to quantity and prices, neither wastefulness in use nor extravagance in cost could long be maintained in any institution without attracting the attention, not only of its officers, but of the general public; nor in such case could the remedy be long delayed. An examination of the few figures collected in table No. 44, in reference to the cost of articles consumed in the institutions there named, will show how widely different may be the prices paid for the same article by different superintendents. I am convinced that in many cases, officers of our public institutions are paying a higher price for many of the articles used than they would find it necessary to pay, had they the advantage which a knowledge of the purchases of other institutions would give them.

There should be, in addition, a statement of the actual cost of maintenance during the fiscal year as distinguished from the cash disbursments. This could be arrived at by charging against the institution all supplies on hand, at the beginning of the year, and crediting it with supplies on hand, as per inventory, at the end of the year, charging it with all bills due at the end of the year, and crediting it with all payments during the year on account of bills of the previous year. Such a statement is important as showing the actual cost of supporting the institution for the period covered in each report. Under the present system of giving merely cash disbursements, it is easy to see that fair comparisons of one year with another, or one institution with another, cannot always be made, since, in many instances, considerable sums are expended for supplies which are carried over into the next year, and in other cases bills are paid during one year, which have been incurred before its beginning.

Publicity of accounts is of great value as a check upon extravagance. It needs no argument to prove that in order to have this value, the accounts must possess such clearness, simplicity and uniformity as will enable even the general reader to understand them. It is not too much to say that the reports of none of the institutions are entirely satisfactory in this respect. A few are carefully prepared and only fall a little short of being all that is desired. Some are carelessly compiled and contain but little of the information needed, while others are so meagre, or so blind, as to convey to the general reader at least no accurate information as to the financial record of the institutions they refer to.

In the preparation of this work, much time has been consumed in repeated instances, to so analyze the figures contained in the various annual reports as to make them agree with themselves, or with known facts accessible at the Comptroller's office, or elsewhere, only to find at last that it was impossible to produce such agreement, and that the report under consideration, was, from one cause or another, misleading instead of contributing to an understanding of its subject-matter. It is not a necessary inference that there existed an intention to mislead. The trouble is as likely to have been that the person making the report, or furnishing the figures, failed to bear in mind the object of publishing them; yet it may be that in some cases, a desire to avoid an appearance of extravagance has led to such a purposed arrangement of figures as should not enable the general reader to gain a full knowledge of the subject. It can readily be seen, from what has been said, how important it is to secure uniformity in the system of accounts at the various institutions, and especially uniformity in the manner of presenting their financial statements. No greater check to possible extravagance could be devised than such uniformity coupled with a degree of clearness that would render it possible, for those interested, to make a fair analysis of the figures and proper comparisons of expenditures, comparing one institution with an other, while making proper allowance for the different circumstances under which each is placed. It is obvious, however, that uniformity in bookkeeping and in the presentation of their financial statements, is not likely to be secured so long as each institution has a different and entirely independent system of administration.

State Supervision.

I am very clear that the best interests of the State, and of the several institutions would be subserved by a more direct State supervision than now exists. Its advantages would be numerous. In addition to securing the uniformity which has been spoken of, there would be some one representing the interests of the State, as distinct from local feeling or professional pride, which sometimes leads to undue expenditure. It would secure uniformity of treatment. Now each institution comes to the Legislature directly, seeking such aid as its superintendent or its board of managers may deem requisite. One superintendent may have economical ideas, another extravagant ones. The Legislature cannot know of the necessities in each case, and must largely rely upon the statements of superintendents. The result is, that when the necessity exists for appropriations by the State for any one of the several institutions, its superintendent is obliged to present himself before the Legislature, perhaps to remain in Albany many days during the winter, and to make such efforts to secure the sums needed as to subject him to the imputation of spending much time in lobbying for appropriations, which could be better spent in the performance of the ordinary duties of superintendents at home. Neither the superintendent nor any other officer of a State institution should be compelled, or indeed allowed, to appear at Albany, year after year, to lobby through the appropriations which may be necessary. All estimates should be sent for approval to, and all appropriations should be recommended by, one supervising body or person.

This would not only protect the State treasury, but would be an actual benefit to State institutions. The Legislature would have confidence in the recommendations of such a head, and needed appropriations could be secured without the boards of managers and superintendent spending half the winter, or any part of it, in Albany.

All receipts ought to be covered in the State treasury, and all payments made on monthly estimates, as in the case of the prisons.

From a report made last winter to the Legislature of Massachusetts by a commission appointed to inquire into the expediency of revising the system of administration of the public charities of that Commonwealth, I extract the following, which is equally applicable to our own institutions:

"Another feature of the present system is a lack of unity between the several institutions. Each has been created as occasion required, without any regard to those already established. Each has been managed, without doubt, with a desire for the best results, both as regards economy and efficiency, so far as each particular institution was concerned; but there the interest ceased. No effort has been made, apparently, to create a feeling of unity of interest, in order that the good results attained in one institution might be carried into effect in the others, and the result has been a different system of administration for each institution. The Board of Charities has only the right to advise, and in most instances whenever such advice has been given, the trustees and inspectors naturally felt they were better judges of the needs of their several institutions than an outside board, with only a limited knowledge thereof; and consequently the board having no power to enforce its advice, it went for naught; so that to-day there is no uniformity in the several institutions, as regards administration, discipline or methods of purchasing supplies, while the operation of so

many supervising boards are liable to be antagonistic from the very nature of the system. Another feature of the present system is, that owing to the multiplicity of supervision, and the division of responsibility by the laws upon boards of inspectors or superintendents, it is almost impossible to determine the responsibility of the management of the institutions; and in cases of investigation into alleged abuses, it is naturally uncertain upon whom the blame should be placed for anything that may possibly be found wrong. * * *

"In regard to the relation of the various institutions to the treasury of the Commonwealth, it is much to be desired that all should be placed on equality; that the same system of disbursements, of accounting, and of everything relating to financial arrangementts should operate for all alike."

The advantages of a uniform system adopted by the State of Kansas are set forth as follows by the trustees of the Kansas State Insane Asylum, in their annual report for 1876:

"In conclusion, the trustees respectfully submit that the operation of the law of 1876, consolidating the asylums under one board, fully sustains the expectations of its most ardent advocates. It gives a uniform direction to their management, it removes local jealousy, it enables them to compare the advantages and disadvantages of the different systems of management, and to abolish the evil and engraft the good features thereof into each to their benefit; it occasions a close scrutiny of the condition and requirements of each, and prompts those recommendations only which are indispensable to the public good; it affords an opportunity to exchange the manufactures of each other, and has thus opened a market for the products of the industrial departments thereof; it impels the board to consider the demands of each from the standpoint of citizens, not champions, whose duty it is, with a due regard to the general welfare, to promote the efficiency of all, so that the benefactions of the State may accomplish the object sought, in the most economical manner, and it has resulted in a large reduction of the expense of the trustees' management of the four asylums."

The Wisconsin State Board of Charities and Reform exercise a supervision over the financial management of the State charitable institutions, and the carefully prepared tables which they publish, of the various institutions under their charge, make their annual reports of special value. Each is required, before receiving an appropriation, to furnish carefully prepared estimates, and upon these the board base their recommendations to the Legislature. This system enables the board to bring all institutions under a general classification. The information which they are enabled to derive from each, furnishes a basis upon which a uniform and equitable provision can be made for all.

Under the laws of 1875, the State Board of Charities of Illinois, adopted a similar system, and the result has been a great reduction of expenses in all the State institutions under their supervision. At the fifth annual Conference of Charities, held in connection with the general meeting of the American Social Science Association, at Cincinnati, May, 1878, Mr. G. S. Robinson, president of the Illinois State Board of Charities, made a report from which I extract the following:

"The annual cost of maintenance (1877) in our institutions averages about $200 for each inmate, part of which is derived from sources other than the State treasury. No charge is made by the State for board, treatment or tuition, in any of them; they are absolutely free to our own

citizens. We have an able body of superintendents; we retain them in their positions and pay them liberal salaries, and we think our institutions will compare favorably with those of any other State. We hear very little complaint of the management from any quarter. I may say that political considerations do not enter into the appointment of any of their officers or employees, so far as I know; both political parties are represented on their boards of trust. Our system of financial supervision has another advantage; it makes it easy for us to estimate with great accuracy the amounts necessary and proper to be appropriated for their support. The Legislature has confidence in our estimates, and follows them with but little variation."

The Prisons.

The change in the system of prison management and the establishment of one responsible head has justified all the expectations that were performed concerning it, even by the most sanguine of its advocates.

Three years ago the excess of expenditures over earnings in a single year was more than $700,000. The new system has been in operation about two years, and to-day the prisons of the State are practically self-supporting; and if the rapid improvement in results which has hitherto been secured shall continue, they promise to become in the near future a source of revenue to the State. According to the last monthly reports, the excess of earnings over expenditures at the Sing Sing and Auburn prisons was greater than the deficiency at Clinton, showing that amount of net revenue to the State. This gratifying result is largely due, no doubt, to the good fortune of the State in securing for a superintendent the services of a gentleman so experienced and competent for the work to be done; but it cannot be doubted that the change from divided to undivided responsibility, and the substitution of single-headed for triple-headed superintendence was in itself desirable, and is to be credited with a very considerable portion of the good work accomplished.

The Necessity for Economy.

That there is need of a like change toward economy in the charities of the State, can hardly be questioned. The revolt against high taxes and extravagant expenditures in all departments of government—national, State and local—is universal. For many years there was a constant and rapid increase in public expenditures of all kinds. This increase has been so great that the aggregate burdens of taxation are many times heavier than they were twenty years ago. During the period of apparent prosperity which accompanied the era of inflation, and continued for some years after the close of the civil war, these constantly increasing burdens were lightly felt, but now that the inevitable reaction has come, and the people are brought face to face with the actual condition of their affairs; now that property is rated at its real rather than at a fictitious valuation; now that we have reached an ante-war basis, they have become intolerable. The demand for reduction is absolute and must be complied with. The people ask for and will have a lessening of these burdens. If they fail to secure it from one set of public servants, they will replace them with others more responsive to their demands. The growth of expenditures in nearly all the public

institutions has kept full pace with the general increase in the cost of government.

THE TABLES CONTAINED IN THE APPENDIX.

I would call attention to the very full tables, showing all the facts in connection with this question relating to the several institutions, which are appended hereto. From them it may readily be seen how, in the various institutions, the aggregate cost of support has been largely augmented since 1860. It will be seen that in almost every item the increase has been very marked, and so great as to preclude the belief that it has been altogether necessary. The tables have been so prepared as easily to be understood by all, and it is hoped that such attention may be given to them by the Legislature and the public as will lead to a general understanding of the financial history of the several institutions. It is believed that never before, in the United States at least, have tables been prepared covering so many years and containing such full and accurate information as to the financial operations of so many institutions as those herewith presented. It will be a comparatively easy task to supplement them from year to year with the latest results, thus giving them a permanent and constantly increasing value for purposes of comparison. It is impossible, in the limits to which I must confine the text of my report, to include here even a tithe of the interesting and useful deductions to be derived therefrom. Nothing but a personal examination of these tables on the part of each reader can give a just idea of their interest and value. As I have remarked at the outset, much care and great labor have been bestowed upon their preparation in order that they might contain not only full and accurate information on the subjects with which they deal, but that this information should be conveyed in a manner so clear and understandable that, though the tables are simply vast masses of figures, they would still be entirely within the comprehension of the ordinary reader, and it is hoped they possess more interest than ordinarily adheres to statistical information. In each institution the cost of support, in the aggregate and per capita, has been traced through all the years since its beginning, except in the case of those founded prior to 1860, in which cases the tables begin with that date. In the case of the New York State Lunatic Asylum at Utica, the tables contain its full and detailed financial history since 1850, and a synopsis of its financial relations with the State since its foundation. These tables contain also, for all these years, a complete classification of the expenditures, so that at a glance may be seen the cost in detail for the support of the inmates of the various institutions, and comparison may be easily instituted between different institutions and different years of the same institution. The divisions into which the expenditures have been made, are classified under these heads: salaries and wages, provisions and supplies, clothing, medical stores, fuel and light, ordinary repairs, all other ordinary expenses.

In each case for every year, the aggregate and per capita expenses under these heads are given. Like tables have also been prepared and are appended, of a large number of institutions in other States. So far as possible these tables have been made to present a comparative statement of the results of the operations of several years. The years selected for this comparison were 1860, 1865, 1875, 1876, 1877 and 1878. These years were selected because the expenditures of 1860 were made before the war, and upon a gold basis; those for 1865 at the close of the

war in the period of excessively high prices and with the currency so depreciated that the paper dollars with which the supplies were purchased and all labor paid for represented less than half of their face value in gold, while the years last named, 1875, 1876, 1877 and 1878, are those in which we have seen our paper money rise to an equality with gold, and the prices of commodities and wages of labor return to nearly the ante-war standard.

The Growth of Expenditures.

As illustrating the growth of expenditures in our State institutions, I shall here make a brief reference to the figures to be found in the tables above referred to. It is impossible, as I have stated, in this place to reproduce even a small proportion of those which possess great interest and value, and it must not be supposed that the statistics here quoted have been selected because they possessed any special completeness or value not contained in all the others. Taking first those institutions whose foundation dates back prior to 1860, let us see what has been the cost of supporting their inmates for the following specified years:

The New York Institution for the Deaf and Dumb, in the city of New York, for the year 1860, contained an average number of inmates estimated at 300. The cost of their support, including salaries and wages, provisions and supplies, clothing, fuel and light, and all other ordinary expenses, except ordinary repairs, was $160.47 per capita for the year; including repairs, $174.43. Last year (1878), the average number of inmates was 494. The cost of support, including as before, all ordinary expenses except repairs, was $270.78 per capita for the year; including repairs $293.27. It may be admitted that in some respects the cost of support in such an institution, is now necessarily somewhat greater than in 1860. Many articles have fallen below even the standard of that year; but in the main it is probable that, including labor and all articles purchased under the head of provisions and supplies, the average cost is now slightly in excess of the prices prevailing at that time. It cannot, surely, be claimed, however, that there is any such increase as would account for the fact that the per capita cost of support is now almost $120 greater than it was in the year first named; and that, too, although the number of inmates for 1878 was 194 more than in 1860, a fact which should tend, other things being equal, to largely reduce the cost of support for each. The comparison with 1865 is even more startling. It will be remembered that in that year, the paper money with which all the supplies had to be purchased, and all wages paid, was depreciated so much that it represented not more than half its face value in gold. It would surely be expected that now when we have returned to a gold standard, and when the price of labor and of provisions has been reduced probably fifty per cent below the average of 1865, that the financial exhibit of the institution should show a large decrease from that time. What are the facts? In 1865, with an average number of 363 inmates the cost of support including, as before, all ordinary expenses, except repairs, was $227.26 per capita for the year; including repairs, $239 per capita. In 1878 with an average number of 494, the cost of support, including all ordinary expenses, except repairs, was $270.78 per capita for the year; including repairs $293.27 per capita. It is difficult to account for an increase of more than twenty per cent in the per capita cost of support for 1878 over 1865 upon any theory consistent with the belief that the institution is now

managed with all the economy and all the carefulness possible in connection with its affairs. Either the provision formerly made for its inmates was wholly inadequate, or that now provided is in excess of their real requirements. Let us see in what consists this increase. Take the item of salaries and wages. In 1860 the amount expended for this purpose was $14,967.01, or 49.89 per capita; in 1865 the amount expended was $15,994.89, or $44.06 per capita; in 1878 the amount expended was $52,597.55, or $106.47 per capita. Comment is unnecessary. In 1860 the sum expended for provisions was $16,160.33, or $53.87 per capita; in 1865 the amount spent for the same purpose was $34,328.88, or $94.57 per capita; and in 1878 the cost for provisions and supplies was $44,184.99, or $89.44 per capita. It is difficult to believe that there might not have been a greater reduction than that of $5.13 per capita in the cost of provisions for the institution since 1865.

In this connection I would call attention to table No. 43, in the appendix, showing the prices paid for, and quantities consumed of, different articles of food for each year since 1861, down to 1878, excepting alone the year 1862. I commend a careful study of the table to all who may be interested in the subject. I shall only stop here to note that from 1861 to 1878, with an increase of sixty-one per cent in the number of inmates, the number of pounds of butchers' meat consumed in 1878 was 161 per cent greater than in 1861, the increase being just 100 per cent greater than the increase in numbers. In 1861 the consumption of milk was 1,059 quarts; in 1870 it was 6,520 ; in 1874 it was 71,459 quarts, and in 1878, with a smaller number of inmates, 107,575 quarts were used. It should be stated that the consumption of 1870 was condensed milk, that of the other years being of the common article. The consumption of ice in 1861 was 17,350 pounds; in 1865 it was 22,050 pounds; in 1870 it was 27,530 pounds; in 1873 it was 53,224 pounds; in 1875 it was 85,690, and in 1878, with a smaller number of inmates than in either of the three years last named, there were 136,535 pounds of ice consumed. It is not intended here to decide that the quantity now consumed of these articles is too great, but only to call attention to the surprising increase, and to suggest that, if the experience of other institutions is similar to this, we may possibly have arrived at one of the causes to account for the large growth in expenditures since 1860.

The Legislature appropriated for the support of the State pupils in this institution for the years 1860, 1861 and 1862, $150 each per annum. In 1863 this amount was increased to $180 per pupil, which was allowed during the following years until 1868, when it was again increased to $200 per pupil. In 1869, a year of great liberality, the amount was increased to $300 per pupil, at which figure it remained until last year when it was reduced to $275. This sum has again been reduced by the present Legislature to $250 per pupil.

It is impossible to comprehend how an allowance of $275, or even of $250, is now necessary, if they were able to get on down to 1862 for $150 per pupil, and after that, duing all the years of the war and of highest prices, for $180 pupil. It may here be stated that the State pupils in the New York Institution for the Blind, were paid for in the years 1860, 1861 and 1862, at the rate of $150 each per annum. For the next three years, 1863, 1864 and 1865, at $200 each per year, and from 1866 to 1878, inclusive, at $300 per annum, while for the next ensuing year the rate has been fixed at $275.

In the New York State Lunatic Asylum, at Utica, the average

number of inmates for the year 1860, was 516. The cost of their support, including salaries and wages, provisions and supplies, clothing, fuel and light, and all other ordinary expenses, except repairs, was $185.95 per capita for the year, including repairs, $198.72. In 1865, with an average number of 591, the cost of support, including as before, all ordinary expenses, except repairs, was $249.94 per capita, including repairs, $266.90. For the year 1878, with an average number of 600 inmates, the cost of support, including all ordinary expenses, except repairs, was $277.62 per capita for the year; including repairs, $346.59. It should be stated in this connection, that in the annual reports of this institution, no distinction is made between ordinary and extraordinary repairs, all being brought under the one head of "additions, alterations and repairs." During the last year a large portion of the expenditures for repairs, sixty-eight dollars and ninety-seven cents per capita, would appear to have been for other than ordinary repairs.

In 1860 the amount paid for salaries and wages, at the Utica asylum was $26,798.45, or $51.93 per capita; in 1865 it was $33,075.50, or $55.96 per capita; in 1878 it was $56,227.97, or $93.71 per capita. For provisions and supplies, the amount expended in 1860 was $38,782.93, or $75.16 per capita; in 1865, $64,022.24, or $108.33 per capita; in 1878, $60,085.58, or $100.14 per capita. It is evident that either the quantity of the food consumed by each inmate must have greatly increased since 1865, or that there has been a great improvement in quality.

For fuel and light the amount expended in 1860 was $11.65 per capita; in 1865, $25.45 per capita; in 1878, $20.47 per capita. I shall have occasion to refer to this item of expenditure in another part of my report.

Going back to 1850 it appears that the per capita cost of support at Utica, including all ordinary expenses, except repairs, was $140.12; including repairs, $149.45, considerably less than half the present cost.

The houses of refuge make a better showing of comparative expenditures; and yet it would seem not so good a one perhaps as might have been made.

The New York House of Refuge, in 1860, contained an average number of 574 inmates. The cost of their support, excluding repairs, was $94.01 per capita for the year; including repairs, $101.22; earnings, $32.94; net cost of support per capita for the year, $68.28. In 1865, with an average number of 820 inmates, the cost per capita was $119.62 for the year, or including repairs, $123.86. The earnings for this year were $44.38 per capita, making the net cost $79.48. For 1878, with an average number of 930, the cost of support was $115.99, or including repairs, $118.48; earnings, $33.61; net cost of support, $84.87. The amount paid for salaries and wages in 1860 was $12,636.46, or $22.02 per capita; in 1865 the amount paid for this purpose was $16,323.71, or $19.91 per capita; in 1878 the amount paid for salaries and wages was $37,454.09, or $40.27 per capita. For provisions and supplies in 1860, the sum expended was $20,197.67, or $35.18 per capita; in 1865, for the same purpose, $39,486.04, or $48.15 per capita; in 1878 the cost of this item was $43,414.23, or $46.68 per capita.

In the Western House of Refuge, Rochester, with an average number of 425, the cost of support in 1860 was $81.72 per capita for the year, or including repairs, $83.77; earnings, $40.16 per capita; net cost, $43.61. In 1865 the average number of inmates was 475; cost of support, exclud-

ing repairs, was $117.01; including repairs, $120.85 per capita; earnings, $33.25; net cost, $87.60 per capita. In 1878 the average number was 588. Their support cost for the year $133.54 each, or including repairs, $140.23; the earnings were $24.03 per capita, making the net cost of support $116.28 each for the year. The amount expended for salaries and wages in 1860 was $8,999.69, or $21.18 per capita; in 1865, $11,770.58, or $24.78 per capita; in 1878, $22,148.92, or $37.69 per capita. For provisions and supplies, the sum expended in 1860 was $12,268.17, or $28.87 per capita; in 1865, $20,461.63, or $43.05 per capita; in 1878, $23,722.26, or $40.34 per capita.

It is agreeable to turn to an institution whose showing of expenditures, as compared with former years, may be said to be entirely satisfactory. In the New York Asylum for Idiots, Syracuse, there were for the year 1860 an average number of 140 inmates. The cost of their support, including all ordinary expenses, except repairs, was $186.83 per capita for the year; including repairs, $192.47. If I were to compare the financial results of this year with those of 1865 and 1878, it would be unduly favorable to the institution by showing a greater reduction of expenses than actually exists, because a considerable amount of the sum expended for support was on account of bills incurred in previous years. I shall therefore make a comparison with 1861 instead of the previous year. In 1861 the average number of inmates in the asylum was 135. The cost of their support, including all ordinary expenses, except repairs, was $146.01 per capita for the year; including repairs, $157.38; in 1865, with an average number of 144 pupils, the cost of support $207.74 per capita for the year, or including repairs, $223.30. For 1878, the average number of pupils was 265, and the cost of their support was $164.38 per capita, or including repairs, $177.53. It will be seen that in this institution the reduction in ordinary expenses, excluding repairs, from 1865 to 1878 amounts to $43.36; while the increase over 1861 is only $18.37 per capita. In 1861, the amounts paid for salaries in the asylum for idiots was $8,144.86, or $60.33 per capita; in 1865, $9,115.82, or $63.30 per capita; in 1878, $15,670, or $59.13 per capita. For provisions and supplies in 1861, $6,096.85, or $45.16 per capita; in 1865, $12,049.58, or $83.67 per capita; in 1878, $14,380.05, or $54.26 per capita. It will be observed that the per capita cost of salaries is a trifle less than in 1861, while in the provisions the variations from 1861 to 1865 and 1878 are about what would be expected from the general course of prices in those years. It will, of course, be borne in mind that these comparisons are simply of the results of one year with another in the same institutions, and are not at all intended to institute a comparison of results for the same year as between dissimilar institutions. It should also be said that wherever in this report, or in the tables and explanatory comments accompanying them, the word "inmates" is used, it is not intended to include officers and attendants, but only patients and pupils, or, in the house of refuge, the boys and girls committed their charge.

In this connection a glance at the growth or diminution of expenses during recent years in the institutions founded since 1860 will not be uninteresting.

The Institution for the Improved Instruction of Deaf Mutes, in the city of New York, was founded in 1867. The table relating to it contains a classified statement of its expenditures for each of the years from 1871 to 1878 inclusive. No full and accurate figures regarding its operations prior to 1871, are accessible. The average number of pupils, which was

fifty-seven in 1871, has gradually increased, until last year, when the number was 107. The annual cost per capita of support, including repairs, has been as follows: 1871, $289.66 (it is evident that the cost of support during this year was largely augmented owing to the recent foundation of the institution, and the fact that it had not yet been brought into such working order as to secure the best financial results); in 1872, $168.73; 1873, $214.90; 1874, $209.51; 1875, $200.87; 1876, $215.91; 1877, $197.75; 1878, $200.58.

It needs to be stated, in regard to this institution, that it occupies leased property, and that it has been under a yearly expense averaging $7,500, for rent. This item has not been included in the per capita cost just mentioned, for the reason that the other institutions to which reference has been and will be made, occupy buildings either owned by the State or erected in whole or in part by private contributions, and have no rent to pay. It is necessary, however, in considering the relation of the Institution for the Improved Instruction of Deaf Mutes to the State, as regards the price allowed it for each State pupil, to include this item of rent in the per capita. Adding it would bring the cost of support for the last two years up to about $275 per year, and a larger amount for the years preceding. It is believed that, condsidering the great change in prices within the past four years, there should have been a reduction in the expenditures of this institution greater than that shown in the table of twenty-nine cents per capita, exclusive of rent. The per capita cost of salaries and wages should naturally be reduced with the increased numbers, but it is found that with a considerable addition to its numbers the amount paid for salaries and wages in this institution for the year 1878, $94.19, was larger, with a single exception, than for any of the years preceding since 1871. In the cost of provisions and supplies there has been a reduction since 1873, when the average number of pupils was seventy-five, of $6.04 per capita, the amount in that year having been $67.03 per capita, and in 1870, $60.99 per capita.

New York State Institution for the Blind, Batavia.

This institution was opened in the fall of 1868. The report for the year 1869 was found to be too imperfect to incorporate its figures in the table. For the years 1870 and 1871 the annual cost of support per capita, including repairs, was, for the former year, $367.27, and for the latter $338.79. The results of these years can hardly be taken for comparison with later results owing to the fact, as is always the case with newly founded institutions, that the expenditures of the first two or three years are largely augmented by causes easily understood which arise from the newness of the institution. The course of expenditure since 1871, has been as follows: Total cost per capita for support, excluding repairs, 1872, $275.54; 1873, $261.93; 1874, $252.21; 1875, $227.39; 1876, $228.27; 1877, $225.88; 1878, $280.99. It is necessary to state that in the year 1878, there was a payment of $7,152 on account of bills contracted prior to the beginning of that fiscal year, which would amount to about $44 per capita, and which would reduce the expenditure properly chargeable to that year to $236.99 per capita, provided no bills chargeable to 1878 were left over to be paid in the following year. It would surely seem that within the last four years, considering the course of prices, both of provisions and labor, that there should have been a large reduction in the per capita expenditures of this institution. On the

contrary, we find them to have increased, even after making full allowance for the payment made 1878 on account of bills previously contracted. The amounts paid for salaries and wages since 1874, have been as follows: 1874, $13,095.39, or $87.30 per capita; 1875, $13,770.88, or $88.84 per capita; 1876, $13,110.49, or $84.04 per capita; 1877, $14,691.24, or $90.69 per capita; 1878, $16,085.35, or $99.29 per capita. The increase per capita in the item of salaries and wages during the very years when a considerable reduction might reasonably have been looked for, led me to make special inquiry as to the facts in relation to this subject. From the results of that inquiry, I am convinced that a large reduction can be made without in the least impairing the effciency of the institution. This opinion is concurred in, not only by members of the board of managers, but by officers and teachers in the institution itself. There are, or were, at the time of my visit, five teachers of music; a principal at $800 per year, one assistant at $600, two at $400 and one at $300. It would seem that by a proper classification, and by making use of the labor of pupils as instructors for the beginners, a smaller force would be ample. The benefits to be derived from allowing the older pupils to teach, are manifest, giving them the very experience in teaching that they need in preparing to earn a livelihood.

The reports of this institution are very imperfect, and it was impossible, from them alone, to complete anything like a satisfactory table of figures, regarding its operations. It was only by securing access to all other sources of information, and with considerable labor and difficulty, that the table was finally completed. The examination into the affairs of the New York State Institution for the Blind, made by the executive committee of the State Board of Charities at your request, resulted in the discovery of a grave want of good management and of serious irregularities. While my own investigations more than confirmed the existence of these irregularities at that time, I am glad to believe that there is no reason now to suppose that they continue, or that intentional wrongdoing exists in the administration of its financial affairs. I was convinced by my visit to the institution, of the want of harmony in its board of management, which extends to the officers of the institution, and the effect of which I am told is even visible among the pupils, and is an insuperable obstacle which must be removed before there can be hope of obtaining the best results, either financially or otherwise, in its government. I found illustrated in this case an example of both the evils likely to arise in connection with the government of State institutions by local boards. In the first place the prevalent idea in the locality, shared too largely by the managers, was that the purchase of supplies for the institution and the employment of its labor were to be chiefly considered as sources of local patronage; and second, that owing to jealousies, partly political and partly personal, the board of managers came to lack entirely that harmony which is absolutely essential to successful administration. To illustrate the extent of the feeling existing in the board it is only necessary to state that for a considerable time a majority of its members refused to recognize as one of their number a gentleman appointed by the Governor, under the law, and whose commissson was placed before them. I would recommend either that the local board be reorganized, or what might be perhaps still better, that it be altogether abolished, and that the institution be placed under the direct and immediate supervision of some central State authority.

New York State Inebriate Asylum.

This institution was chartered in 1854. The location was made in Binghamton in 1858, and the building commenced in that year. I cannot stop here to refer to the long story of its difficulties and of the quarrels which arose in connection with its management during many of the years of its building, and after it was opened for patients. Though the story is an interesting one, and in some respects worth repeating, I shall refrain from doing so. I would refer, however, those who may be interested, to a pamphlet entitled "A Statement of the local trustees," reprinted in 1868, by C. S. Westcott & Co., printers, New York, and to a "Report of the commissioners of the Land Office relating to the management of the New York State Inebriate Asylum at Binghamton," made April, 1871, and constituting Senate Document No 71, of that year. The table relating to the inebriate asylum covers the years from 1870 to 1878, inclusive. In the year 1870, the average number of inmates was 66; in the next year the number was increased to 84, since which time there has been a gradual though steady decrease, the average number for last year, 1878, being 46. The cost of their support per capita, excluding ordinary repairs, has been as follows: 1870, $585.46; 1871, $440.61; 1872, $482.27; 1873, $456.19; 1874, $495.96; 1875, $484.01; 1876, $510.06; 1877, $597.95, and 1878, $663.58. Inasmuch as during the past year the average number of private patients was 40, and of county patients only 6, and as the charge for county patients is confined to seven dollars per week, the question of its running expenses is chiefly interesting to those who support the private patients of the institution; yet it may be affirmed that, since it is a State institution designed for a charitable purpose, its cost, even to those who are not so destitute as to rely upon the counties for support, should be made as light as possible.

For salaries and wages the cost per capita was $137.11 in 1871; $184.51 in 1874; $190.16 in 1877; and $240.94 in 1878. For provisions and supplies the amount expended per capita was $173.67 in 1871; $178.53 in 1874; $233.77 in 1877; and $211.01 in 1878. For fuel and light the cost was $56.77 per capita in 1871; $48.94 per capita in 1874; $47.69 in 1877, and $83.55 in 1878. The amount expended for the construction of and furnishing this institution may be roundly stated at a million of dollars. A very small portion of this sum came from private sources; the great bulk of it from the excise moneys which belonged to the people of the various counties, principally the city and county of New York. I was informed by the superintendent on the occasion of my recent visit, that the present capacity was one hundred; although it has been reported to the State Board of Charities for a number of years at two hundred. I suppose this discrepancy arises from the fact that one wing of the building although enclosed, is not yet finished and ready for occupancy. The sum required to finish it would not, as compared with the amount already spent, be a large one; and the institution would then have accommodation for two hundred, the number reported to the State Board of Charities. Taking, however, its present capacity, one hundred, it appears that it has cost $10,000 per capita to furnish a home for the cure of inebriates. Counting the number actually present during the past year the cost of the institution has been about $22,000 per capita. When the interest on this sum is added to the per capita cost of support for the year 1878, it makes the real expense of maintaining each patient for the year about

$2,200. This seems a pretty large sum to expend in an effort which as yet cannot be called other than experimental, though there are those who believe it has already proved a failure. If we consider, however, only the county patients in the institution, the result is a startling one.

The chief advantage which the institution offers, and in this opinion I am borne out by many who favor its existence and have had experience in its management, is in the fact, that a residence within it, is supposed to remove those who have acquired habits of intoxication beyond control, from the associations and temptations of their ordinary life at home. There are few, I imagine, who put much faith in any medical treatment to eradicate the taste for intoxicating stimulants, especially when it has reached such a stage that its victims are ready to go, or their friends to send them, to an inebriate asylum. If this be true, it may be asserted that for the wealthy class and for those who are able and willing to pay the price charged to private patients for their support, the same advantage of residence and corresponding freedom from the temptations and associations of home life, could be secured if this institution were not in existence.

This being a charitable institution, we need then only consider it in its relation to the county patients who are committed to its charge under the law, and whose support is paid for by the counties. There were six such during the past year. The counties paid for their support, seven dollars per week, amounting to the sum of three hundred and sixty-five dollars for the year. The amount paid out of the State Treasury for salaries and wages and expenses of commissioners for the last year was $6,337, being over $1,056 for each county patient. The interest on the outlay of $1,000,000 at seven per cent is $70,000, being $11,666 for each county patient. This would make the cost of supporting, for the year 1878, each inmate of the Inebriate Asylum who can properly be considered as depending upon the charity of the State $13,087. There is something almost grotesque in the appearance of these results, and if it were not for the question of taxes which imparts a serious view to the subject, the experience of the State in connection with its Inebriate Asylum, would seem farcical. The Governor has already recommended that no further appropriations be made for its support, and that it be converted into an asylum for the insane. The State Board of Charities make a similar recommendation. It is to be feared, that owing to the style of the building and the manner of its construction, the necessary alterations will cost nearly or quite as much as a new building capable of accomodating the same number on the plan of those recently erected at Willard. There is also, I believe, some question as to the rights of the original stockholders in the present building, they having, I am informed, released it to the State upon the condition that it was to be maintained as an inebriate asylum. Whatever may be decided upon this point, it is quite evident that it would be an act of folly for the State to continue paying $6,000 a year for salaries, in order that five or six county patients may be cared for at seven dollars, and thirty private patients at from ten to twenty dollars a week.

EXPENDITURES OF INSANE ASYLUMS OTHER THAN UTICA.

The Asylum for Insane Criminals, at Auburn, was opened in 1858. For the years 1859 and 1860 the expenses, owing to the newness of the institution and to causes already mentioned in connection with other

institutions similary situated, were so large as to furnish no fair comparison with other years. In 1861 the average number of inmates was 62, and the per capita cost of their support $201.49, or, including repairs, $228.61. Two years later, in 1863, with an average number of 80 inmates, the cost per capita of support for the year was $146.79, or, including repairs, $150.44. Two years later than this, in 1865, with an average number of 73 inmates, the cost per capita for the year had risen to $220.47, or including repairs, $228.75. From this time the expenses were gradually decreased until 1869, when, with an average of 80 inmates, the expense per capita for the year was $171.43, or including repairs, $174.43. The next year, 1870, with 78 inmates, the expenditure per capita, including repairs, bounded up to $254.86; in 1871 the expense per capita for the year, including repairs, was $288.55; in 1872, $261.65; in 1873, $242.47; in 1874, $246.17; in 1875, $228.86, and in 1876, with an average of 101 inmates, the highest cost of support was reached, being $292.18. Toward the end of this fiscal year the present superintendent, Dr. Carlos F. MacDonald, was placed in charge of the asylum. In 1877, with 98 inmates, the per capita for the year, including repairs, was reduced to $244.69, and in 1878, with 114 inmates, to $201.99. It is hoped to make a still further reduction during the present and ensuing years.

The State Homœopathic Asylum for the insane at Middletown, was opened in 1874. The table relating to it contains a classified statement of its expenditures for all purposes for the years 1875, 1876, 1877 and 1878. With an average number of sixty-six patients in 1875, the per capita cost of support for the year was $660.01, or including repairs, $661.86. In 1876, with an average number of eighty-two inmates the per capita cost of support was $607.84, or including repairs $630.64; in 1877, with 109 inmates, the per capita cost of support was $419.75, or including repairs $431.14; in 1878, with 130 inmates, the per capita cost was $394.23, or including repairs $402 35. During all these years large sums in excess of the amount on which this per capita is based have been expended for buildings, extraordinary repairs, improvements, farm equipments, house furnishing, etc. The number of private patients in this institution is very large and many of them pay high prices for their board (in at least one instance as high as fifty dollars per week has recently been paid); so that the charge of $4.50 for county patients, taken with the amount received for private patients and the sum appropriated by the State for officers' salaries, will probably suffice to cover the expense of maintenance. There can be no question, however, that it is the duty of the State, in the case of private patients as well as those sent by the counties, to make the burden of their support as light as possible. The law provides for the commitment of the insane to asylums. These institutions are furnished by the State as receptacles for persons so committed. In a great majority of cases the friends of private patients are people in moderate circumstances; in comparitively few cases are they so situated that the difference between a reasonable and an unreasonable charge is of little account to them. In many cases they are people who have slight means, but who are too proud to allow the insane relative to become a county charge, and it is the interest of the State as well as its duty that to such, as much as to the counties, its benefits should be open for the smallest sum consistent with a reasonable and proper care of those committed to its keeping. It is to be hoped and expected that the reduction in the per capita expense at this institu-

tion will be continued until it reaches a figure very much below the present one.

The Hudson River State Hospital, at Poughkeepsie was opened in 1871. The tables printed in the appendix cover the years from 1873 to 1878 inclusive. There are two separate tables published for these years of the classified expenditures of this institution, covering, as in other cases, salaries and wages, provisions and supplies, clothing, fuel and light, ordinary repairs, all other ordinary expenses, construction and all other extraordinary expenditures. One of these tables is made up from the figures contained in the reports of the superintendent to the Legislature, and from such other information as I could find access to. After spending much time and labor upon it, and bringing it to completion, it was discovered that the information which it conveyed was deprived of much of its interest and usefulness from the fact already referred to, in connection with other institutions, that payments made during one year were, in many cases, on account of supplies purchased and consumed in previous year, and on the other hand that supplies purchased and paid for during any given year were frequently carried over in considerable quantities to the next. No account was made of this fact in the reports alluded to, or in the reports to the State Board of Charities. I therefore applied to the superintendent and obtained from him a statement of his expenditures, classified as above named, charging to each year only the amount of expenditure and indebtedness incurred on account of the maintenance of that year. From this statement was compiled the second table I have referred to. The figures which I shall here quote are from the last mentioned table, though both tables, as I have said, are published in the appendix. The years 1873 and 1874 hardly furnish a proper basis for comparison for reasons mentioned in connection with other institutions similarly situated arising from the recent beginning of operations. In 1875, with 207 inmates, the cost of support per capita for the year was $339.51, or including repairs, $348.73; in 1876, with 197 inmates, the per capita cost of support was $399.69, or including repairs, $407.11; in 1877, with 219 inmates, the per capita cost of support was $353.20, or including repairs, $365.59; in 1878, with 236 inmates, the per capita cost of support was $344.40, or including repairs, $351.70. The per capita cost for salaries and wages during the last year was $135.36; for provisions and supplies, $124.09; for fuel and light, $47.99. It would seem that each one of these items was much too large. At the Utica Asylum, which may be said to be conducted with liberality, the cost for provisions and supplies for the past year was $100.14 per capita, and the larger number of patients can hardly account for so great a difference. In the Massachusetts State Lunatic Hospital at Northampton, with 442 inmates, the cost of provisions and supplies for the spme year was $57.68 per capita. The cost of fuel and light at the Utica Asylum for 1878 was $20.47 per capita, at Northampton, $7.71 per capita. It would certainly seem, taking everything into account, that $47.99 per capita for fuel and light at the Hudson River State Haspital is greatly excessive. From 1873 to 1878 the average cost for fuel and light for each year has been $52.51 per capita. At the Northampton Asylum, before referred to, the average cost per capita for the same years has been $17.26. Whether this excessive cost of fuel arises from waste now, or from the adoption of an extravagant system of heating at the beginning, extravagant not only in its original cost, but in that of subsequent years, I will not stop here to inquire. The question may, however, be discussed in the notes to be added to the tables contained in the

appendix to this report. The price charged for county patients in this institution was $5.50 per week up to the first of November last, at which time it was reduced to $4.50 per week. The cost of support of each inmate during the year 1878, excluding officers' salaries and clothing, was $5.80 per week. At the time of my visit to the institution I was informed by the superintendent that the number of pay patients was under thirty; that the highest prices paid by any one was $7.00 per week, and that most of them were paying between $4.50 and $5.00 a week. It would appear, therefore, that the pay patients even are not paying as much as the actual cost of their support, unless that cost has been considerably reduced since last year; and it is apparent with the price $4.50 charged to county patients, there can be no other prospect than that the end of the year will show a deficiency in the maintenance account which will have to be made up by the State.

The Williard Asylum for the insane was opened in 1869. The average number of inmates for the year 1870 was 216 and the cost of their support per capita, excluding repairs, was $184.56. This, considering the number of inmates, and the fact that it was the first complete year of the institution, may be considered a remarkably good showing. In 1871 with an average number of 436, the cost of support, excluding repairs, was $183.43; in 1872 with an average number of 564 inmates the cost per capita for the year was $190.67. From this time until 1876, the average number greatly increased and the cost of support was correspondingly diminished. In 1876 the average number was 1,076, and the cost of their support per capita for the year was $164.20, or including repairs, $167.96. Last year, 1878, the average number was 1,340, and the cost of their support per capita for the year was $148.51, or including repairs, $161.88. It is proper to state here that in this case as in the case of all the other asylums the salaries of officers, and clothing, are included in the total ordinary expenditures on which the per capita is based. The cost per capita of salaries and wages in the Willard Asylum has been as follows, since the opening of the institution: 1870, $83.69; 1871, $66.84; 1872, $57.05; 1873, $58.53; 1874, $56.80; 1875, $53.07; 1876, $49.63; 1877, $49.49, and 1878, $49.38. The cost of fuel and light the last year was $15.88 per capita; for the preceding year, 1877, it was $17.26; and for 1876, it was $19.76 per capita. The cost of light, alone, last year was but eighty-eight cents per capita. This is a good showing. The gas used is made on the grounds by the institution. It is believed that this would be the wisest and most economical course to be pursued at all our State institutions. In a number of cases this was formerly done, while in recent years contracts have been made with the gas companies in the cities or villages adjacent to the institutions. In every case the cost of light after the change has been vastly greater than before, and in one instance, at least, as I was informed by the superintendent, the quality was not so good. The charge to the counties for each patient at Willard has recently been reduced from $2.80 to $2.60 per week. This, however, does not include clothing, which is made a separate charge, nor officers' salaries, which are paid by the State. It should, of course, be borne in mind, when comparing the cost of support in this institution with our other State asylums, that the Willard Asylum is exclusively for the care of the chronic insane, while in the other institutions a large proportion of cases are acute and of comparatively recent origin, and the possibility of their cure renders a somewhat larger scale of expenditure justifiable and necessary.

The State Reformatory, at Elmira, has been so recently opened that I am only able to furnish complete figures for the year 1878. For that year the average number of inmates was 231; the cost of their maintenance per capita for the year was $161.87. The cost for the year for salaries and wages was $38.87 per capita; for provisions and supplies, $47.42, and for fuel and light, $23.65. It is reasonable to expect that a very large reduction can be made from these figures when the institution shall have been brought into perfect order. The same remark will apply to its scale of expenditures for the last year as has been made with regard to all other institutions newly opened, namely, that its expenditures were necessarily higher than for subsequent years.

The New York Catholic Protectory in 1865 had an average number of 417 inmates; the cost of their support per capita for the year was $126.51. In 1876 the average number was 2,115 and the per capita cost of support for the year was $89.31; in 1877, with an average number of 2,284 the per capita cost of support was $96.32. The cost per capita for the year 1865, for provisions, was $55.57; 1876, $38.14; 1877, $43.42. For fuel and light in 1865, the cost was $2.95 per capita for the year; 1876, $5.23 per capita; 1877, $5.43 per capita. For salaries and wages there were expended in 1865, $11.42 per capita; in 1876, $16.85 per capita; and in 1877, $20.11 per capita. The smallness of the item of salaries and wages is accounted for by the fact that the officers and teachers of the institution, in the main, serve without compensation, having given up their lives to this work, and accepting nothing in return but their maintenance at the institution. It will be observed by a reference to the tables for the different State institutions that the cost of fuel and light has ranged from $2.95 per capita for the year, the lowest figure, to $89.57, the highest, or taking the year 1877, from $5.43 per capita, for the year, to $57.33.

FINANCIAL RESULTS IN THE NEW YORK STATE INSANE ASYLUMS, COMPARED WITH THOSE OF OTHER STATES AND COUNTRIES.

It will be interesting at this point to compare the expenditures in the insane asylums of this State with those of corresponding institutions elsewhere. The tables in the appendix numbered from sixteen to twenty-two, inclusive, will be found of great value to those who may care to make a thorough examination of such comparative expenditures. Table No. 16 contains a classified statement of the expenditures of the State Lunatic Hospital at Northampton for the years 1860 to 1878, inclusive. Table No. 17 contains a detailed statement of expenditures of various hospitals for the insane for 1860. No. 18, a similar statement of various hospitals for 1865. Table No. 19, a similar statement for 1875. No. 20, a similar statement for 1876; and No. 21, a similar statement for 1877. In each of these tables are given for the various years named the average number of inmates and the aggregate as well as the per capita cost of support for the year both excluding and including ordinary repairs. The tables also contain for each year in each institution the aggregate and per capita cost of salaries and wages, provisions and supplies, medical stores, fuel and light, ordinary repairs, and all other ordinary expenses; also the amounts paid for construction and all other extraordinary expenditures. Table No. 22 brings into comparison the results of the years named for several of the leading institutions. Table No. 4 contains a classified statement of the expenditures for various pur-

poses, and the aggregate thereof, in the New York State Lunatic Asylum at Utica, for all the years from 1850 to 1878, inclusive. Tables numbered 5 to 11, inclusive, contain various details concerning this institution. Table No. 12 contains a classified statement of the expenditures for all purposes, and of the aggregate thereof, in the Willard Asylum for the Insane, from 1871 to 1878, inclusive. Table No. 13 is a similar statement for the Hudson River State Hospital for the years 1873 to 1878, inclusive. Table No. 14 contains a similar classified statement of expenditures of the State Homœopathic Asylum for the Insane for the years 1875 to 1878, inclusive. A careful study of these tables will convey much interesting and useful information as to the financial history and administration of a large number of insane asylums in the United States and elsewhere, and by a comparison of results in the best institutions with those of our own State, valuable deductions may be made. I shall here attempt to do no more than make a brief reference to some of the figures which these tables contain, for the purpose of indicating their general scope and character. With this view I have made a comparison of the expenditures of our three State asylums which receive acute cases, with seventeen similar institutions elsewhere. The year 1877 has been selected for this purpose, because the statistics, which I have been able to gather, are much more complete for that year than for the year 1878. In fact it has been impossible to procure reports, or anything like complete statistics for the year last named, from any considerable number of asylums in other States. An effort was made to do so, but it resulted in failure, for the reason that in most cases the reports have not yet been printed. Table No. 21 of appendix, from which the figures are taken which I shall here quote, contains a classified and detailed statement of the expenditures of forty-four insane asylums in various parts of the United States and in Canada. Thirty-four of these are State hospitals and asylums, one is the Government Hospital for the Insane at Washington, four are foreign asylums and the other five are leading county and municipal asylums in this country. I have selected thirteen of the State asylums, the Government Hospital at Washington, two asylums in the Province of Ontario and the asylum at Halifax, Nova Scotia, for the purpose of comparison with our State asylums.

These selections have been made because it is believed in each case that the institution named is of such a character and standing as to make the comparison legitimate and fair, the purpose having been to select institutions of a high grade, so far as their standing could be ascertained. The Willard Asylum has not been included in the following condensed statements for the reason heretofore stated, that it is intended to receive only the chronic insane, and that a comparison of its expenditures with those institutions receiving acute cases would not be fair to the latter.

The first statement following, shows the average number of patients and the cost of support for the year 1877, both excluding and including repairs, of each patient in the institutions named.

The second statement contains for the same year and the same institutions the aggregate and the per capita cost for salaries and wages. The third statement shows for the same institutions and the same year, the cost per capita of provisions and supplies and of fuel and light. The figures for the Hudson River State Hospital are those furnished me by the superintendent before referred to, and are taken from table thirteen instead of twenty-one.

No. 1.

Statement showing total cost of support of each patient for the year 1877.

NAME OF INSTITUTION.	Average number of patients.	Annual cost per capita excluding repairs.	Annual cost per capita including repairs
1. Asylum for the Insane, Toronto, Ontario	651	$128 30	$133 39
2. Asylum for the Insane, Brattleboro, Vermont	472	136 07	150 77
3. Asylum for the Insane, London, Ontario	604	136 84	140 20
4. Hospital for the Insane, Halifax, Nova Scotia	347	140 46	154 27
5. State Lunatic Asylum, Jackson, Mississippi	350	161 34	167 58
6. Hospital for the Insane, Dayton, Ohio	571	161 88	166 00
7. State Lunatic Hospital, Taunton, Mass	727	162 81	194 90
8. State Lunatic Hospital, Northampton, Mass	476	166 34	183 72
9. Hospital for the Insane, Cleveland, Ohio	577	170 35	177 19
10. Hospital for the Insane, St. Peters, Minn	563	177 77	180 60
11. Central Insane Asylum, Jackson, Ill	487	185 52	217 81
12. Government Hospital for the Insane, Washington, D. C	770	202 69	213 64
13. Hospital for the Insane, Oshkosh, Wis	542	206 11	216 92
14 Maine Insane Hospital, Augusta, Me	411	208 49	219 45
15. State Lunatic Asylum, Harrisburg, Pa	434	213 93	231 59
16. Hospital for the Insane, Middletown, Conn	463	226 24	240 34
17. Hospital for the Insane, Catonsville, Md	245	235 15	246 01
18. State Lunatic Asylum, Utica, N. Y	608	283 96	362 53
19. Hudson River State Hospital, Poughkeepsie, N. Y.	219	353 20	365 59
20. State Homœopathic Asylum, Middletown, N. Y	109	419 75	431 14

No. 2.

Statement showing annual cost, aggregate and per capita, for salaries and wages for the year 1877.

NAME OF INSTITUTION.	Average number of patients.	SALARIES AND WAGES.	
		Aggregate cost.	Cost per capita.
1. Asylum for the Insane, Toronto, Ontario	651	$22,897 13	$35 17
2. Asylum for the Insane, Brattleboro, Vermont	472	17,817 18	37 75
3. Asylum for the Insane, London, Ontario	604	22,314 50	36 94
4. Hospital for the Insane, Halifax, Nova Scotia	347	14,003 42	40 35
5. State Lunatic Asylum, Jackson, Miss	350	16,191 57	46 26
6. Hospital for the Insane, Dayton, Ohio	571	25,610 73	44 85
7. State Lunatic Asylum, Taunton, Mass	727	28,215 16	38 81
8. State Lunatic Hospital, Northampton, Mass	476	25,880 77	54 37
9. Hospital for the Insane, Cleveland, Ohio	577	27,982 64	48 49
10. Hospital for the Insane, St. Peters, Minn	563	24,935 07	44 29
11. Central Insane Asylum, Jacksonville, Ill	487	30,604 69	62 84
12. Government Hospital for the Insane, Washington, D. C.	770	47,883 39	62 19
13. Hospital for the Insane, Oshkosh, Wis	542	32,266 29	59 53
14. Maine Insane Hospital, Augusta, Me	411	20,494 74	49 86
15. State Lunatic Asylum, Harrisburg, Pa	434	27,653 02	63 71
16. Hospital for the Insane, Middletown, Conn	463	34,986 17	75 56
17. Hospital for the Insane, Catonsville, Md	245	18,687 54	76 28
18. State Lunatic Asylum, Utica, N. Y	608	56,918 9[illegible]	93 62
19. Hudson River State Hospital, Poughkeepsie, N. Y.	219	34,181 06	156 08
20. State Homœopathic Asylum, Middletown, N. Y	190	16,020 88	146 98

No. 3.

Statement showing annual cost per capita of provisions and supplies, and fuel and light, for the year 1877.

NAME OF INSTITUTION.	Average number of patients.	Annual cost per capita of provisions and supplies.	Annual cost per capita of fuel and light.
1. Asylum for the Insane, Toronto, Ontario	651	$53 14	$23 24
2. Asylum for the Insane, Brattleboro, Vermont	472	72 65	5 48
3. Asylum for the Insane, London, Ontario	604	54 52	16 79
4. Hospital for the Insane, Halifax, Nova Scotia	347	58 62	15 18
5. State Lunatic Asylum, Jackson, Miss	350	56 39	11 19
6. Hospital for the Insane, Dayton, Ohio	571	76 84	15 63
7. State Lunatic Hospital, Taunton, Mass	727	71 70	20 14
8. State Lunatic Hospital, Northampton, Mass	476	59 37	19 01
9. Hospital for the Insane, Cleveland, Ohio	577	55 67	19 87
10. Hospital for the Insane, St. Peters, Minn	563	64 10	33 72
11. Central Insane Asylum, Jacksonville, Ill	487	63 58	12 69
12. Government Hospital for the Insane, Washington, D. C	770	101 74	10 55
13. Hospital for the Insane, Oshkosh, Wis	542	72 00	26 46
14. Maine Insane Hospital, Augusta, Me	411	81 87	21 07
15. State Lunatic Asylum, Harrisburg, Pa	434	74 38	18 83
16. Hospital for the Insane, Middletown, Conn	463	79 95	17 51
17. Hospital for the Insane, Catonsville, Md	245	77 42	36 63
18. State Lunatic Asylum, Utica, N. Y	608	105 88	22 03
19. Hudson River State Hospital, Poughkeepsie, N. Y.	219	140 78	28 39
20. State Homœopathic Asylum, Middletown, N. Y	109	157 22	57 33

It will be seen that our State possesses the distinction of having her three asylums, in which are received for treatment the acute insane, occupy the highest place in the scale of expenditure of any in the list; and not merely the highest, but so much higher, taking the three together, than any others as to attract and deserve serious consideration. A reference to table No. 21, from which the figures are taken, will show the same relative position for these institutions as compared with all the others therein contained, that is to say, of the forty-four institutions in the United States and elsewhere from which figures have been obtained, the Utica, Poughkeepsie and Middletown asylums rank highest in the scale of expenditure and in the order named. It will be noticed in statement No. 1 above that the costliest of the first four institutions named supported its insane during the year 1877 at a rate per capita, excluding repairs, more than $140 less than the rate at Utica, more than $210 less than the rate at Poughkeepsie, and more than $270 less than the rate at Middletown. This would represent, on the 608 patients at Utica, an excess of more than $85,000; on the 219 patients at Poughkeepsie the excess of expenditure would be upwards of $46,000, and on the number at Middletown (109) the excess is over $30,000, making a total excess of more than $161,000 in the three asylums for the care of their inmates for the one year 1877, over the rate in the highest priced institution of the first four named above in statement No. 1.

I do not assume here to say whether or not the cost of supporting the insane in our State asylums should be reduced to the figures with which these comparisons are made. I merely call attention to them in order that the vast difference in the cost of supporting the insane in different institutions may be seen. A comparison of these figures, with the cost of maintenance in foreign insane asylums, is of interest in this connection.

In Scotland, in 1876, there were 3,207 lunatics confined in royal and

district asylums, and 440 in parochial asylums. The average cost of their support, per capita, including clothing and ordinary repairs, was $135.20 for the year.

In England the county and borough asylums correspond to our State institutions. In them were maintained during the year 1877, 35,523 lunatics, and the average cost of their support per capita, including clothing and repairs, was $130 for the year.

From 1867 to 1877 the average cost of support in these institutions increased to the extent of one dollar and four cents per capita for the year. When it is remembered that in England the expenditures of both years were upon a gold basis, and that whatever improvement has taken place in the care of the insane, has certainly been as great there as here, it will be seen that the plea for increased expenditures on the score of improved methods possesses little force.

THE MASSACHUSETTS STATE LUNATIC HOSPITAL AT NORTHAMPTON.

This institution ranks among the foremost in the country, both for its financial management and general administration. Its superintendent, Dr. Pliny Earle, is one of the oldest and most favorably known of asylum superintendents in the United States. He has been at the head of the hospital at Northampton for more than thirteen years. Many years ago he was the superintendent of the Bloomingdale asylum in the city of New York. His long experience and his natural capacity for the work have enabled him to make the Northampton hospital a model institution. The result of a visit to it, and a careful examination both into its methods of financial management and general administration, convinced me that it provides for the care of the insane in a manner calculated to secure the best results, and that those who would ask for more in a State institution must have in their minds a very high standard. From Table No. 16 of the appendix, I reproduce a few figures to show its financial history and operations. In 1860, with an average number of 259 inmates, the per capita cost of their support was $174.84 for the year, or including repairs, $179.11. In 1865, with 342 inmates, the per capita cost of support was $208.02 for the year, or including repairs, $216.34. In 1875, with an average number of 475 inmates, the per capita cost of their support for the year was $173.18, or including repairs, $190.47. In 1876, with 474 inmates, the per capita cost was $167.08, or including repairs, $188.70. In 1877, with an average number of 476 inmates, the per capita cost of support for the year was $166.34, or including repairs, $183.73. In 1878, with 442 inmates, the per capita cost of support for the year was $159.93, or including repairs, $171.94. The following extract, taken from the last annual report of this institution, gives an interesting account of its financial operations since 1865:

"Although a State institution, this hospital has received no gratuitous assistance from the State since the spring of 1867. Since that time it has relied for its income solely upon the products of its farm, the board bills of its patients, and the small sum of ten dollars each for the burial expenses of State patients who die in the hospital. The receipts from the last mentioned source during the past year were one hundred dollars.

"For the entire support of State patients, including clothing and all loss from breakage and other kinds of destruction, the hospital receives three dollars and fifty cents each per week from the treasury of the Commonwealth. This is the compensation fixed by the statute law. Nearly

one-half of the inmates belong to this class. During the past year the weekly average of them was 48.14 per cent of the whole.

"For town patients it receives three dollars and fifty cents each per week, from the town treasurers respectively, for board, together with pay for clothing furnished by the hospital, and for damages suffered from them. Of town patients the weekly average for the year was 39.75 per cent, or about two-fifths of the whole.

"For private patients there is no uniform price. The average pay from all who were here September 30, 1878, was five dollars and seventeen cents and three mills each per week. Clothing and damages are extra charges. The weekly average of these patients during the past year was 10.12 per cent, or a trifle more than one-tenth of the whole.

"The average weekly pay per capita which the hospital received for all its patients, State, town and private, in the course of the year, is three dollars and seventy cents and eight mills. Such are the only pecuniary resources of the hospital. We turn to the results of

"The Finance of the Last Thirteen Years.

"In April, 1865, the hospital was freed from debt, and the financial statement at the close of that month showed a balance of $302.04 in its favor. Between that time and the first of June, 1867, it received a direct bonus from the State of $5,000, in two appropriations, for specific purposes, one of $2,000 and the other of $3,000.

"As an offset to the $5,000 bonus, the hospital has purchased and paid for several lots of land, amounting to about one hundred and forty-two acres, the total cost of which was $22,565. The State, then, has been overpaid for its bonus in the sum of $17,565.

"The amount paid by the hospital for repairs and improvements in the course of the thirteen years from September 30, 1865, to September 30, 1878, is $156,701.31.

"The surplus of cash assets now on hand is $27,590.88, or $27,288.84 larger than it was on the 30th of April, 1865.

"The purchased provisions and supplies, including fuel and stored clothing now on hand, are estimated to have cost $11,019.57. The amount of similar supplies on the 30th of April, 1865, was $2,500. The increase of assets under this head is, therefore, $8,519.57.

"The value of household furniture in the hospital is, at a low estimate, at least $10,000 greater than it was on the 30th of April, 1865, at the same rate or standard of appraisal. To be certain, however, of no exaggeration, let it be called $8,000. Collecting these several sums, the account of debit of the Commonwealth to the hospital appears to be as follows:

Excess of cost of land over direct bonus	$17,565 00
Repairs and improvements	156,701 31
Excess of present cash assets	27,288 84
Increase of provisions and supplies	8,519 57
Increase of furniture	8,000 00
Total	$218,074 72

"The necessary current repairs of the buildings may be estimated at $3,000 annually. Deducting this sum for each of the thirteen years since September 30, 1865, a total of $39,000, there is a remainder of $179,074.72. To this amount, then, has the hospital assisted itself to

things, for most of which it is generally expected that such institutions will rely upon direct appropriations from the treasury of the Commonwealth."

Let us contrast this with the financial results in the asylum at Utica for the same period. It appears from the report of the superintendent of the Utica Asylum that for the year ending November 30th, 1878, there was received from sundry counties for patients' board, clothing, and miscellaneous expenses, the sum of $101,946.51; from sundry private patients, $54,805.57, making a total of $156,752.08 received from counties and private patients. Dividing this sum by 600, the average number of patients for the year, we find that the average amount received for each patient was $261.25, or a trifle over five dollars per week, as against three dollars, seventy cents and eight mills at Northampton. To this latter sum, however, should be added a few cents, not to exceed twenty, to cover the amount received for clothing and damages from town and private patients. It therefore appears that for the year 1878 the amount received on account of patients was at least a dollar and ten cents per capita per week more at Utica than at Northampton; or stated for the year, the amount received from counties and private patients was $57.25 per capita more than was received from corresponding sources at Northampton. The excess of receipts from these sources at Utica over Northampton was greater, rather than less than this amount, for the twelve years preceding 1878, yet we find that while at Northampton during the years 1866 to 1878 inclusive, every expense, including repairs and improvements to the extent of $156,701.31, has been met out of the receipts from patients, the Utica asylum, with its receipts from this source $57.25 per capita for the year greater than at Northampton, has received from the State, during the thirteen years from 1866 to 1878 inclusive, the same period covered by the figures given above, $156,159.37 for salaries, and $384.886.71 for additions, alterations, repairs and other purposes, making a total of $541,046.08 received from the State, in addition to the amount received on account of board of patients. This contrast appears the more striking, when it is reflected that the excess of receipts from patients, $57.25 per capita, multiplied by the average number of inmates in the Utica asylum for 1878, produces the sum of $34,350 for that single year. If it be claimed that at Utica the proportion of private patients is somewhat larger than at Northampton, and that the excess of cost of support of county patients beyond four dollars falls upon these private patients; I would suggest whether it might not have been expected for this very reason that the State should be free from these large annual demands upon its revenues. If the comparison between a first class institution like Northampton and the Utica asylum is so unfavorable to the latter as regards financial results, what shall be said of the asylum at Poughkeepsie, the per capita cost of support at which was more than sixty-six dollars greater than at Utica, or of the Middletown asylum, the per capita cost of support in which was, for the year 1878, more than $116 greater than at Utica. From the result of my visit both to the Northampton and Utica asylums, I am of the opinion that in every point, except as to the number of attendants, the former institution compares favorably with the latter. In point of cleanliness and wholesomeness on all the floors above the basement each institution seems perfect. In the basement story, where are located in each case the store-rooms, bakery and kitchens, the Northampton institution was superior, being more free from offensive odors, and in every way better arranged, if one who is not an expert can judge of these matters.

It ought not to cost as much as $4,000 a year, or less than ten dollars per capita, to give Northampton a sufficient number of additional attendants to meet the only possible criticism to be made upon its administration. In respect to diet, I am inclined to believe that in quantity and quality it is equal to Utica. If it is not, I am very confident in saying that the excess at Utica is unnecessary and does not add to its curative results. I have spoken particularly of the Utica asylum, because it is by far the best known of our State institutions, if not of all the asylums in the country. Its superintendent, Dr. Gray, is widely and justly celebrated for his skill as a medical superintendent, and for the organization and discipline which he has developed in the institution over which he presides. It is hardly to be expected that a medical superintendent in an institution with 600 inmates, charged with the duties that belong to his position, can at the same time bring to its business administration the qualities and the close attention which are requisite to secure the most economical results consistent with the maintenance of a proper standard of care. It is phenomenal when, in the same individual, are united in the highest degree the capacity for medical superintendence and business administration. During my examination at Utica, I thought I could see some of the reasons which contributed to its large scale of expenditures. Its purchases are largely made of business houses in Utica, with which an understanding exists that they are to furnish supplies to the institution at five per cent advance upon the cost to them. At Northampton, as at Willard, in this State, bids are invited from all the leading wholesale houses in the largest cities for furnishing the supplies needed in these institutions, and I am convinced that this course leads not merely to the saving of the five per cent alluded to, but to the securing of prices considerably below the cost to the middle men who receive the five per cent at Utica.

Prior to 1860 the Utica Asylum manufactured its own gas. From the report of the trustees for that year (1860) I quote: "A contract has been made with the Utica Gas Company to supply the asylum with coal gas of standard illuminating quality, for ten years, at the rate of $2.85 per 1,000 feet, with a promise of a ratable deduction from that price whenever the company shall reduce the price charged to its general consumers, which is $3.50 per 1,000 feet. The contract requires a long line of independent main pipe to be laid by the company, and contains such agreements and conditions as were deemed necessary to protect the interests of the institution in all respects in reference to this subject. The gas is only about to be introduced and we cannot yet speak of its results." In the report of the previous year it had been stated that the gas company would not agree to furnish the supply at such rates as they (the trustees) were willing to pay, unless the asylum would contribute at least $1,500 towards the expense of laying the necessary main iron pipes. Now, since it appears that in the following year the gas company consented to lay this long line of independent main pipe, at its own expense, provided the institution would enter into a ten years' contract to pay $2.85 per thousand for gas, a sum sixty-five cents less than was being charged to general consumers, and a sum which was to be ratably reduced when a reduction was made to such general consumers, it is tolerably evident that the gas company fixed its price and the term of years with a view to get back, in addition to the cost of the gas furnished and a reasonable profit upon it, the cost of the independent main pipe alluded to. And it would seem entirely reasonable to have ex-

pected, that, after the expiration of this contract, gas should be furnished to the institution at a reduction from the price charged to general consumers, at least as great, if not greater than that named in the contract. Yet, when I came to inquire into this subject, I found that the institution was paying $2.50 cash per thousand for its gas, which was the precise sum paid by the smallest general consumers in Utica, and which was twenty-five cents per thousand more than the amount paid by the hotels, whose consumption is less than that of the asylum. Now turn for a moment to the tables and note this fact, that the cost of light at Utica for the year 1878 was $6.13 per capita, while at the Willard Asylum, which makes its own gas, the cost of light was eighty-eight cents per capita. This, in itself, is not a very large item, nor did the failure of the superintendent and the managers see to it that they secured from the gas company the terms to which they were entitled, make a difference of any vast sum to the institution; but it can readily be seen that if in other details the same liberality toward those who furnished supplies to the institution, and the same failure to secure the best possible terms was exhibited, we have gone far toward discovering at least one of the reasons why the cost of support is so much greater than at an institution like Northampton, where every detail is more carefully scrutinized.

I am glad to believe there is no reason for thinking that dishonesty or intentional wrong-doing exists in connection with the business administration of any of the institutions which I have been called upon to examine, but I am equally convinced that many of them, including the Utica Asylum, have grown into loose and somewhat careless methods of business administration. I do not refer so much to the system of bookkeeping, or of making up their reports, as to the failure, similar to the one I have just recited, to secure, in every instance down to the smallest detail, the best possible terms in making purchases and contracts for the State. I believe it is because this is done at Northampton, that that institution, while maintaining a high standard of care, shows such favorable financial results; and I equally believe because it is not done in all the institutions of this State, that some of them are justly liable to the criticism that they are extravagantly conducted. It is not strange that it should be so, and they are not singular in this respect. In all departments of government, Federal, State and local, extravagance and loose methods came to prevail during the war, and for many years succeeding it. Probably the institutions most subject to criticism on this score, could challenge a comparison of their affairs with other departments of State and local administration. The evil is one of the times, and it is only recently that public attention has been directed to it to a sufficient extent to insure its correction.

THE ARGUMENT FOR EXPENSIVE MANAGEMENT.

There have been many pleas made for high-priced management on the ground that the percentage of recoveries could be largely increased by the improved methods and care which it was claimed rendered necessary the enhanced cost of support. The average life of the incurably insane may be stated at from thirteen to seventeen years. An ingenious argument is made, that it is better to spend $300 on the acute case and discharge it cured at the end of the first year than to confine the expenditure to $150, and have the case become incurable, thus subjecting the

community to the necessity of continuing the expenditure of $150 per annum for thirteen to seventeen years longer. There is scarcely a State to whose authorities some such argument as this has not been addressed. The possible proportion of recoveries has been stated as high as eighty per cent. There would be much force in this argument if it could be demonstrated that recoveries are in proportion to cost of treatment. A brief examination of this question will be of interest. Such an examination will show that since 1850, during the very period when the cost of asylum management has so largely increased, there has been a steady *decrease* in the number of reported recoveries. Dr. Chapin, the Superintendent of the Willard Asylum, in a "Report on Insanity," read before the Conference of Public Charities at Saratoga, N. Y., September 5th, 1877, uses the following language:

"The results of the modern asylum management, being an improvement upon the system preceding it, must be accepted as the best now attainable. It appears from an examination of reports of treatment in three American asylums, extending over a period of thirty years, that in the first asylums examined the percentage of recoveries to admissions for a decade, ending with the year:

1856, was 43
1866, was 34
1876, was 35

"In the second asylum examined, the per cent of recoveries on admissions for the decade ending:

1856, was 44
1866, was 41
1876, was 41

"In the third asylum, the same, for decade ending:

1856, was 42
1866, was 39
1876, was 35
In the English county, private and borough asylums, the per cent of recoveries on admissions for eight years was 34
For ten years, ending 1876 34

* * * * * *

"These statistics show results quite uniform in the treatment of the insane in different asylums, and under various systems, both in this country and in Great Britain. It also appears that, notwithstanding the advance of science, the percentage of recoveries during the last decade has not increased, but is not quite equal to that reported during the first decade."

Dr. Chapin's deductions are more than confirmed by further investigation.

The Utica Asylum was opened in 1843. The per centage of recoveries for the first five years of its existence, based on its average population, was 49½. The percentage of recoveries on the average population for the last five years has been 22½. The difference is not so striking when the comparison is made of the per centage of recoveries based on admissions, but in this case also the per centage is much smaller for the last five years than for the first five years in the life of the institution. On the other hand, the per centage of deaths whether based on the whole number treated, or on the average population has been larger for the past five years than for the first five years after the opening of the asylum, yet, in the intervening time the expenses have doubled.

Dr. Earle in his last annual report discusses this question in so forcible and interesting a manner that I cannot do better than to quote his words. He says:

"STUDIES RELATIVE TO THE CURABILITY OF INSANITY.

"In our last three preceding reports, the question of curability has been subjected to a somewhat searching investigation, by which it was shown that the permanent recoveries from mental disorders are far less frequent than has generally been supposed, and that a very considerable proportion of the reported recoveries are not recoveries of so many different *persons*, but merely the recoveries of *one* person, or a *few* persons, a large number of times. Instances were given in which one person was reported recovered six times, and another seven times, in one year; and others in which in the course of their lives respectively, one person had been reported recovered twenty-two times, and another forty-six times. The duplicate and multiplicate recoveries of these few persons have led public opinion astray by having as reported, the appearance of permanent recoveries of a large number of different persons. * * *

"ARE RECOVERIES IN PROPORTION TO COST OF TREATMENT?

"The proposition involved in this interrogation would not be devoid of interest at any time; but at this juncture, after the experience of the last few years in greatly increasing the cost of hospitals, under a vague impression that recoveries from insanity, will always be in direct ratio with the sum of pecuniary expense, it becomes a matter of absolute importance.

"That degree of bodily comfort which is necessarily included in the best attainable hygienic condition—pure air, cleanliness of person and surroundings, sufficient wholesome and nutritious food, a proper amount of exercise, and protection from the inclemencies of the weather—is doubtless essential to the attainment of the greatest probability of cure; but it is quite doubtful, that, beyond this attainment, the lavishing of money, however profusely, in mere luxuries, is of any benefit. And yet there are many persons who think that it is, and who measure their hope of recovery by the sum of money expended. To such an extent, indeed, is this notion sometimes carried in practice, that the very object of treatment is apparently thereby defeated, and recovery is prevented, instead of secured.

"There are no statistics by which either the affirmative or the negative of our proposition can be positively demonstrated; but there are some which offer an interesting study when considered in relation to it, and, so far as they go, would seem to prove that increase of expenditure does not enlarge the proportion of cures. I allude particularly to the statistics of the McLean Asylum, at Somerville, Mass., one of the oldest corporate institutions for the insane in the United States. In 1840 that asylum was under the medical care of Dr. Luther V. Bell. In the course of that year 155 patients were admitted, and the reported recoveries were seventy-five, which is equal to 48.38 per cent of the admissions. The average weekly cost of support of the patients was, for that year, three dollars and fourteen cents each; in other words, when paying three dollars and fourteen cents each, per week, forty-eight patients in the 100 recovered.

"Thenceforward, although with some fluctuation from year to year, there was, upon the whole, a gradual increase in the current expenses of the institution, until, in 1875, the average weekly cost for each patient was twenty-one dollars and seven cents. The increase of cost during the period of thirty-five years was 671 per cent, or a small fraction less than seven-fold. In the course of that period, the Appleton wards, which for luxurious accomodation will not suffer by comparison with the best in Europe, were erected, as well as the two buildings for refractory patients, which, so far as I am informed, are unequaled by any others in the world.

"With these additional elegancies of accommodation, and a nearly seven-fold augmentation of current expense, what was the condition of things in regard to recoveries? Were they increased, not, indeed, seven, nor six, nor five, nor even three-fold (for that would have been impossible); but were they doubled? Alas, no! They had *diminished sixty-one per cent* of the ratio in 1840; so that, instead of *forty-eight* (48.38) recoveries to the hundred admissions, there were only *nineteen* (18.82). The number of patients admitted in 1875, the closing year of the period, was eighty-five, and the number of recoveries sixteen, equal to 18.82 per cent.

"The following table has been prepared in justification of the foregoing assertions. Beginning with the year 1840, it was intended to present the results of every fifth year subsequently, until 1875. The reports, however, of several of those years, were not readily accessible, and consequently the available years most nearly approaching those fifth years were taken. The years 1876 and 1877 were added to show that the diminished proportion of recoveries was not a temporary incident.

DATE.	Admitted.	Recovered.	Daily average.	Whole cost.	Weekly cost per capita.	Per cent of recoveries.
1840	155	75	128	$20,919 63	$3 14	48.38
1846	148	65	164	32,892 00	3 85	43 92
1848	143	82	171	33,130 09	3 70	57.34
1854	120	59	195	46,724 31	4 61	49.16
1855	123	56	192	60,867 26	6 09	45.53
1859	131	61	185	59,478 92	6 16½	46.56
1861	111	54	193	63,311 87	6 30	48.65
1865	82	38	186	120,885 84	12 50	46.34
1870	79	33	187	134,339 63	13 81	41.77
1872	93	15	173	152,327 60	16 50	16.13
1875	85	16	151	165,660 47	21 07	18.82
1876	92	18	160	164,973 80	19 72	19.56
1877	110	15	175	143,148 94	15 66	13.63"

This would seem effectually to dispose of the argument for a high rate of expenditure based on the theory of increased curative results.

The Urgency of Retrenchment.

The necessity for retrenchment to the lowest point consistent with reasonable and proper care is urgent. The saving of money which would result is not the chief consideration. A much more important one is to extend the benefits of our charities to all who are entitled thereto.

There is a limit to the amount which the State and the counties will provide for charitable purposes. It is better that this sum, whatever it may be, should be used in such a way as to reach all those for whom it

is intended, than that half of them should be maintained in State institutions in a costly manner and at a high rate of expenditure per capita, while the other half are left without even such ordinary care as humanity demands. Of course it would be pleasing to organize and carry on a system of charitable work which would leave nothing to be desired. There are many cases of illness constantly coming under our observation where an ocean voyage or a long rest from work and care, combined with good living and agreeable surroundings, would not merely be a blessing to the individual, but where such means would save a valuable life to the community, which for want of them is lost. It might be well, if in these cases, government or society could step in and provide all these desirable things, but it is impossible. If the effort were seriously made, only a few could receive aid to such an extent, and the great mass of sufferers would be left without that aid and assistance which it is the duty of the community to extend. The argument is not for pushing economy to the extent of parsimony; but for such reasonable prudence as will enable the authorities, with the amount of money at their disposal, to reach all, instead of half, those for whom it is our duty to care. It is necessary to consult what we have to do with, as well as what we would like to do. If there are so many thousand who need our care—and we know from experience that there is a limit to the means which it is possible to obtain for that purpose—it is surely the dictate of prudence, of wisdom, and, not less, of true philanthropy, to exercise such a supervision and degree of economy as will allow all to participate in the blessings of our charity, rather than that a few should receive everything that is desirable and the many nothing. The temptation, however, in public institutions is all the other way. Even the best and most careful of men placed in charge of an institution, and having nothing to do but to go to the Legislature for such sums as they may deem necessary, in excess of their receipts from other sources, will find it extremely difficult to resist the natural inclination to introduce all possible improvements, to give all possible comforts, and generally, not to look quite so closely to the expenditures of their institutions as they would were they responsible for the care of all the wards of the State.

I have spoken thus far in this report, of the cost of support in various institutions, without discriminating as to the sources of revenue. The claim is often made that the State ought not to complain, because it after all bears only a portion of the expense of the State institutions; and, as to the insane asylums, only a comparatively small portion of such expenses; that in these latter, the bulk of revenue comes from the counties and a considerable sum from private patients. In reply to this, it is to be said that the people of the counties are the same who constitute the State, and it cannot make much difference to those visited by the tax gatherer whether the burdens of oppresive taxation fall upon them as county or as State taxpayers. The State provides these institutions; in most cases legislates as to their superintendence, and by law regulates the sending to them of their inmates. It is the duty of the State to see that they are carefully conducted.

There is a very positive and growing discontent in a large number of counties with the price which they have to pay for the care of their insane in the State asylums, and in a number of them steps have recently been taken with a view to withdrawing their cases from the care of the State and providing for them at home. I have no doubt it will be found necessary, in the near future, to make a considerable reduction from the

sum of four dollars a week now charged at Utica, and the four dollars and a-half a week charged at Poughkeepsie and Middletown for county patients, yet how can this be done if even at present prices one of these institutions finds a certain deficiency staring it in the face, while the other two are obliged year after year to come to the State for appropriations for purposes which ought properly to be provided for out of ordinary receipts. I do not see how the conclusion can be resisted that there *must* be a reduction in the scale of expenditure.

Cost of Buildings.

This subject has been so thoroughly discussed in recent years, and the popular condemnation of the extravagance which has been exhibited is so marked that little need here be said in regard to it. The erection of the Hudson River State Hospital for the Insane was begun in 1867. The institution now has a maximum capacity of 350, and its cost, exclusive of land, furniture, improvements and some other items which should properly be included in construction account, has been $1,163,502. This makes the per capita cost of the bare buildings, $3,324. There are in the county of Dutchess, in which this institution is located, 13,224 private dwellings, the value of which is $29,534,993, making the average cost of each dwelling $2,233.44, the average number of persons to each dwelling being a trifle under six. The average per capita value of all the private dwellings in the county is $386.92, being slightly more than one-ninth of the cost of the buildings erected by the State for the care of the indigent insane. It seems strange that the per capita cost of buildings erected for a charitable purpose and to hold over 300 inmates should be nearly nine times as great as the per capita valuation of the separate dwellings in which reside the people, who not only support themselves, but who are relied upon to furnish the means for such extravagant expenditure.

The building of the Homœopathic Asylum for the Insane, at Middletown, was commenced in 1872. Its present capacity is 200; cost of its construction excluding land, furniture, improvements of ground, etc., has been $436,147; making the per capita cost of buildings alone, $2,180. The per capita value of the private dwellings in Orange county in which this institution is located is $377.90. The inmates of this institution are therefore housed at a cost between five and six times as great as the per capita value of the dwellings of the self-supporting residents of the county.

There had been expended upon the Buffalo State Asylum for the Insane up to September thirtieth last $1,096,352.91. This institution is not yet open for inmates; but is, I believe, expected to be so during the present year.

The Willard Asylum with a capacity of 1,500 has cost for construction of buildings $1,008,476, the per capita cost being $672. I am of opinion that it would be to the advantage of the State to erect at Willard an additional group of detached buildings similar to those already completed. While it may be admitted that the cost of buildings for the reception of acute cases of insanity is necessarily somewhat higher than those intended only for chronic insane, it is not believed that the excess should be more than $200 per capita.

Dr. Wilbur in a paper on "Buildings for the Insane," read at the Saratoga Conference of Charities, September 6, 1877, uses the following language:

"To appreciate the stupendous folly of such expenditure of the public money, it may be mentioned that the cost of the ten most expensive hotels in America would probably not exceed $1,500 a guest. And, furthermore, that in a legislative investigation (in the State of Massachusetts), in regard to the expenditure of public money, in the case of one of these asylums, superintendents of insane asylums, experts, testified 'that buildings at a cost of a thousand dollars a patient, *with no expense for mere architectural display, would still afford all that is essential or really desirable for the treatment of the insane.*' '*That not a patient would be cured at one of these expensive hospitals, that could not be cured at those built at the smaller cost named.*'

"Dr. Wilkins, a commissioner appointed by the State of California, after visiting all the leading institutions of this country and Europe, thus speaks in his report to the Legislature of that State, of the Willard Asylum for chronic insane, in the State of New York, which cost less than $1,000 a patient. After mentioning its splendid location, beautiful and picturesque surroundings, and excellent arrangements, he adds: 'We failed to discover even the shadow of a reason why a person, becoming insane in the neighborhood of this beautiful asylum, should be sent to Utica because he was considered curable.'"

The sums already unnecessarily expended in the construction of the extravagant buildings at Poughkeepsie, Buffalo and Middletown, would have made ample provision for the care of all the insane in the poor-houses of the State in those counties not exempt from the operations of the Willard Asylum act, under chapter 713 of the Laws of 1871, and in which no adequate provision is made for their support. The recent strong appeal of the State Board of Charities to the Legislature presents, in a forcible manner, the urgent necessity for such provision. In this instance, at least, the wasteful expenditure of money in the erection of too costly edifices has operated to deprive nearly a thousand indigent insane of any participation in the charity of the State, in order that a smaller number of other insane may be housed in an unnecessarily luxurious and costly manner.

The cost of building and furnishing the New York State Lunatic Asylum at Utica, from 1839 to 1857, inclusive, including the cost of introducing steam heating and ventilating apparatus ($144,957.90) and an appropriation made in 1857 for reconstructing center building and portions of wings and the barns destoryed by fire ($68,742), was $642,799.90. From the opening, 1843 to 1857 inclusive, the sum expended for additions, alterations and repairs was $58,675.15; from 1858 to 1867, inclusive, the sum expended for additions, alterations and repairs was $119,538.41, and from 1868 to 1878, inclusive, the sum expended for the same purpose was $314,404.81.

From 1866 to 1878 inclusive, a period of thirteen years, there was paid by the State to the several asylums for the insane for construction, salaries, maintenance and other purposes the sum of $5,495,668.30. About half of this sum was contributed by the counties of New York and Kings, which provide for their own insane in their own buildings and at their own expense.

The State Reformatory at Elmira, in the county of Chemung, was completed in 1876. Its maximum capacity is 600, and the cost of its buildings was $1,128,314, amounting to $1,880 per capita for each possible inmate. The average number of inmates for the past year was 231. The per capita valuation of private dwellings in Chemung county,

mainly occupied by the non-criminal class, is $402. If the Legislature shall deem it wise to take steps looking to the erection of a reformatory for women, it is to be hoped that those who may be charged with the work will be content to begin with a small and comparatively inexpensive building, and to increase the accommodations only when the demands upon it shall indicate such a necessity.

Comparatively few people outside of those brought into direct contact with them appreciate the magnitude of the charities of our State. It is far from my purpose to withhold the praise due to those who manage them. One cannot spend much time in looking into the subject without becoming deeply impressed with the sacrifices made by so many noble men and women in a work, the only reward of which is the consciousness of doing good. Many of the managers of our State institutions give much valuable time and the most careful attention to duties which are not only self-imposed and without reward, but which, though fully as useful, do not confer any such special distinction as is the case in the faithful performance of another kind of public work. The superintendents and officers, generally, of the charitable institutions of the State accept onerous responsibilities and the hardest kind of work for small compensation. They are mostly men and women who have consecrated their lives to the service in which they are engaged; and I am persuaded that in almost every case they are unselfishly devoted to a work, than which surely none can be nobler or more useful. I believe that no class of public servants are more conscientious. If they have allowed, in some cases, the expenditures of their institutions to increase unduly, they have only fallen into a habit of the times; they are not singular. Indeed, their very zeal for good and for producing the best results, coupled with the fact that they have only to consider the one institution under their care, is apt to produce just that tendency towards a too liberal scale of expenditure which a more direct State supervision is needed to counteract and restrain.

In the course of my investigations a large amount of information has been gathered, which it has been determined not to include either in this report or in the tables and comments in the appendix. This information relates to the system of purchasing and distributing supplies; of keeping accounts, and of the general management and discipline of the several institutions. A more or less full description of the system of keeping the books of each institution, with blank forms illustrating the manner in which supplies are ordered, charged and accounted for, has been obtained. Also, in many cases, plans of buildings, with a full description and a detailed statement of their cost. It was the original intention to embody these details in comments attached to the tables, but as the appendix has already grown to a greater length than was expected, and as the kind of information to which I have referred will be useful rather to those who may be charged with the duty of unifying the systems now existing than to the general public, it has been deemed best to omit them, and to place them on file in your office, where they will be accessible to those who desire to consult them.

It is proper that I should, in this place, acknowledge the obligation I am under to the officers of the State Board of Charities for the readiness with which they have placed at my disposal all the sources of information at their command, and the interest which they have kindly manifested in my work.

I should also acknowledge my indebtedness to the Commissioners of Charities and Correction in the city of New York, and to the superintendent's and officers of the various institutions under their charge, and I desire to mention the very creditable condition of those institutions considering the means at their disposal. The charities of the city of New York, vast beyond my previous conceptions, would certainly not seem to be subject to the charge of extravagance in management.

To Dr. Earle, of the Northampton Asylum, in Massachusetts, and to the Superintendents and other officers of all the institutions, I have visited in this State I am indebted for the utmost courtesy and for all the aid, most cheerfully rendered, which they could give me.

I have the honor to be, very respectfully,

Your obedient servant,

EDGAR K. APGAR.

TABLES

CONTAINED IN THE

APPENDIX TO THE REPORT.

TABLE No. 1.

List of institutions examined, embracing the several State institutions and others receiving aid from the State, their location, date of opening, name and date of appointment of the superintendent.

TABLE No. 2.

Classified valuation of State institutions, their capacity, number of acres, cost of land, per capita cost of buildings, and average number of inmates, for the year 1878.

HOSPITALS FOR THE INSANE.

TABLE No. 3.

List of principal hospitals for the insane in the United States, their location, name, date of opening, capacity, number of acres, cost of land and buildings, and number of inmates.

TABLE No. 4.

Detailed statement of expenditures of the New York State Lunatic Asylum, Utica, for the years 1850 to 1878, inclusive.

TABLE No. 5.

Detailed statement of receipts of the New York State Lunatic Asylum, Utica, for the years 1860 to 1878, inclusive.

TABLE No. 6.

Tabular statement of expenditures and legislative appropriations for buildings, furnishing, etc., 1839 to 1857, inclusive, Utica Asylum.

TABLE No. 7.

Statement of expenditures and legislative appropriations for water supply, 1844 to 1873, inclusive, Utica Asylum.

TABLE No. 8.

Statement of expenditures and legislative appropriations for land, improvement of grounds, sewers, fences, farm buildings, city assessments for paving and grading, 1836 to 1878, inclusive, Utica Asylum.

TABLE No. 9.

Tabular statement of expenditures for additions, alterations and repairs from opening January 1843, to December 1, 1878, Utica Asylum.

TABLE NO. 10.

Statement showing the amounts received from counties for patients during the year 1878, Utica Asylum.

TABLE NO. 11.

Statement showing the amounts received from private patients during the year 1878, Utica Asylum.

TABLE NO. 12.

Detailed statement of expenditures of the Willard Asylum for the Insane, Willard, N. Y., for the years 1870 to 1878, inclusive.

TABLE NO. 13.

Detailed statement of expenditures of the Hudson River State Hospital, Poughkeepsie, N. Y., for the years 1873 to 1878, inclusive, made up from annual reports to the Legislature and State Board of Charities.

Detailed statement of expenditures of same hospital, furnished by the superintendent, as the actual expenditures and indebtedness incurred chargeable to each year, 1873 to 1878, inclusive.

TABLE NO. 14.

Detailed statement of expenditures of the State Homœopathic Asylum for the Insane, Middletown, N. Y., for the years 1875 to 1878, inclusive.

TABLE NO. 15.

Detailed statement of expenditures of the Asylum for Insane Criminals, Auburn, N. Y., for the years 1859 to 1878, inclusive.

TABLE NO. 16.

Detailed statement of expenditures of the State Lunatic Hospital, Northampton, Mass., for the years 1860 to 1878, inclusive.

TABLE NO. 17.

Detailed statement of expenditures of various hospitals for the insane in the United States for the year 1860.

TABLE NO. 18.

Detailed statement of expenditures of various hospitals for the insane for the year 1865.

TABLE NO. 19.

Detailed statement of expenditures of various hospitals for the insane for the year 1875.

TABLE NO. 20.

Detailed statement of expenditures of various hospitals for the insane for the year 1876.

TABLE NO. 21.

Detailed statement of expenditures of forty-four hospitals for the insane in the United States and elsewhere, for the year 1877.

TABLE NO. 22.

Detailed statement of comparative expenditures of various hospitals for the insane for the years 1860, 1865, 1875, 1876, 1877 and 1878.

HOUSES OF REFUGE AND REFORM SCHOOLS.

TABLE No. 23.

Detailed statement of expenditures of the New York House of Refuge, Randall's Island, for the years 1860 to 1878, inclusive.

TABLE No. 24.

Detailed statement of receipts of the New York House of Refuge, Randall's Island, for the years 1860 to 1878, inclusive.

TABLE No. 25.

Detailed statement of expenditures of the Western House of Refuge, Rochester, N. Y., for the years 1860 to 1878, inclusive.

TABLE No. 26.

Detailed statement of expenditures of various houses of refuge and reform schools in the United States for the year 1860.

TABLE No. 27.

Detailed statement of expenditures of various houses of refuge and reform schools for the year 1865.

TABLE No. 28.

Detailed statement of expenditures of various houses of refuge and reform schools for the year 1875.

TABLE No. 29.

Detailed statement of expenditures of various houses of refuge and reform schools for the year 1876.

TABLE No. 30.

Detailed statement of expenditures of various houses of refuge and reform schools for the year 1877.

TABLE No. 31.

Detailed statement of comparative expenditures of various houses of refuge and reform schools for the years 1860, 1865, 1875, 1876, 1877 and 1878.

INSTITUTIONS FOR THE DEAF AND DUMB.

TABLE No. 32.

Detailed statement of expenditures of the New York Institution for the Deaf and Dumb, New York city, for the years 1860 to 1878, inclusive.

Detailed statement of receipts of the New York Institution for the Deaf and Dumb, for the years 1860 to 1878, inclusive.

TABLE No. 33.

Detailed statement of expenditures of the Institution for the Improved Instruction of Deaf Mutes, New York city, for the years 1871 to 1878, inclusive.

TABLE No. 34.

Detailed statement of expenditures of the Le Couteulx St. Mary's Institution for the Instruction of Deaf Mutes, Buffalo, N. Y., for the years 1873 to 1878, inclusive.

TABLE No. 35.

Detailed statement of comparative expenditures of various institutions for the deaf and dumb in the United States, and elsewhere, for the years 1860, 1865, 1875, 1876, 1877 and 1878.

INSTITUTIONS FOR THE BLIND.

TABLE No. 36.

Detailed statement of expenditures of the New York Institution for the Blind, New York city, furnished by the superintendent, for the years 1860 to 1878, inclusive.

TABLE No. 37.

Detailed statement of expenditures of the New York State Insti ution for the Blind, Batavia, for the years 1870 to 1878, inclusive.

TABLE No. 38.

Detailed statement of comparative expenditures of various institutions for the blind in the United States and elsewhere, for the years 1860, 1865, 1875, 1876, 1877 and 1878.

ASYLUMS FOR IDIOTS OR FEEBLE-MINDED YOUTH.

TABLE No. 39.

Detailed statement of expenditures of the New York Asylum for Idiots, Syracuse, for the years 1861 to 1878, inclusive.

TABLE No. 40.

Detailed statement of comparative expenditures of various asylums for idiots or feeble-minded youth in the United States and elsewhere, for the years 1865, 1875, 1876, 1877 and 1878.

MISCELLANEOUS.

TABLE No. 41.

Detailed statement of expenditures of the New York State Inebriate Asylum, Binghamton, for the years 1870 to 1878, inclusive.

TABLE No. 42.

Detailed statement of expenditures of the State Emigrant Refuge and Hospital, Ward's Island, New York, for the years, 1868, 1875, 1876, 1877 and 1878.

TABLE No. 43.

Showing the quantity and cost of various articles used at the New York Institution for the Deaf and Dumb, during the years named.

TABLE No. 44.

Showing average cost of principal articles used at various institutions in the State during the years named.

APPENDIX.

TABLE NO. 1.

List of Institutions Examined.

NAME OF INSTITUTION.	Location.	When opened.	Superintendent.	Date of appointment.
New York State Lunatic Asylum	Utica	1843	Dr. John P. Gray	July 1, 1854
Willard Asylum for the Insane	Willard	1869	Dr. John B. Chapin	April 1, 1869
Hudson River State Hospital	Poughkeepsie	1871	Dr. J. M. Cleveland	March 28, 1867
State Homœopathic Asylum for the Insane	Middletown	1874	Dr. Selden H. Talcott	April 13, 1877
Asylum for Insane Criminals	Auburn	1858	Dr. Carlos F. MacDonald	April 1, 1876
New York Institution for the Blind	New York city	1832	William B. Wait	October 1, 1863
New York State Institution for the Blind	Batavia	1868	C. D Wilbor	August 3, 1878
New York Institution for the Deaf and Dumb	New York city	1818	Dr. William Porter	——— —, 1873
New York Asylum for Idiots	Syracuse	1851	Dr. H. B. Wilbur	September —, 1851
New York State Inebriate Asylum	Binghamton	1864	Dr. Moreau Morris	July 16, 1878
New York House of Refuge	Randall's Island	1852	Israel C. Jones	April —, 1863
Western House of Refuge	Rochester	1849	Levi S. Fulton	February 15, 1870
New York State Reformatory	Elmira	1876	Z. R. Brockway	May 12, 1876
New York Catholic Protectory	Westchester	1863	Henry L. Hoguet, President	——— —, 1873
Le Couteulx St. Mary's Institution for Deaf Mutes	Buffalo	1859	Sister Mary Ann Burke	Januar 7, 1870
Institution for the Improved Instruction of Deaf Mutes	New York city	1867	D. Greenberger	March —, 1873
Central New York Institution for Deaf Mutes	Rome	1875	E. B. Nelson	September 1, 1876
St. Joseph's Institution for Deaf Mutes	Fordham	1875	Mary B. Morgan	——— —, 1877
Western New York Institution for Deaf Mutes	Rochester	1876	Z. F. Westervelt	——— —, 1876
State Emigrant Refuge and Hospital	Ward's Island	1847	J. D. Krehbiel	——— —, ———

TABLE No. 2.

Classified Valuation of State Institutions.

NAME OF INSTITUTION.	FISCAL YEAR CLOSES.*	Capacity.	REAL ESTATE.				Per capita cost of buildings.	Average number of inmates, 1878.
			LAND.		Buildings.	Total cost of real estate.		
			No. acres.	Cost.				
New York State Lunatic Asylum	November 30....	600	209	$24,879	$637,065	$661,944	$1,062	600
Willard Asylum for the Insane	November 30....	1,500	776	81,200	1,008,476	1,089,676	672	1,340
Hudson River State Hospital	November 30....	350	333	90,000	1,163,502	1,253,502	3,324	236
State Homœopathic Asylum for the Insane	November 30....	200	211	42,117	436,147	478,264	2,181	130
Buffalo State Asylum for the Insane†	December 31....	300	203	60,000	1,017,760	1,077,760	3,392	.....
Asylum for Insane Criminals	September 30....	160	8	....	.....	‡138,775	867	114
New York Institution for the Blind	September 30....	225	33	§150,000	194,702	344,702	865	200
New York State Institution for the Blind	S ptember 30....	175	66	40,000	292,250	332,250	1,670	162
New York Institution for the Deaf and Dumb	September 30....	550	80	‖86,000	417,000	503,000	758	494
New York Asylum for Idiots	September 30....	310	55	21,800	163,000	184,800	526	265
New York State Inebriate Asylum	December 31....	100	470	47,000	1,000,000	1,047,000	10,000	46
New York House of Refuge	December 31....	1,000	37½	35,000	500,000	535,000	500	930
Western House of Refuge	December 31....	720	42	4,200	270,770	274,970	376	588
New York State Reformatory	December 31....	600	280	38,052	1,128,314	1,166,366	1,880	231
State Emigrant Refuge and Hospital	December 31....	2,000	120	.....	.....	1,304,816	¶652	483

* By a recent act of the Legislature the fiscal year of all State institutions is made to correspond with the fiscal year of the State, ending September 30

† Will be ready for the reception of patients on or before October 1, 1879.

‡ Includes $76,015 estimated value of real estate in 1860, and $62,760 for addition made in 1872.

§ Present value of land.

‖ Includes 28 acres upon which the institution is located, and 52 acres at Tarrytown, N. Y.

¶ Includes the cost of land.

TABLE NO. 3.

List of Principal Hospitals for the Insane in the United States.

STATE INSTITUTIONS.

Number.	LOCATION.	Name.	When opened	Capacity.	REAL ESTATE.				Per capita cost of buildings.	No. of patients, 1878.
					LAND.		Buildings.	Total cost of real estate		
					No of acres.	Cost.				
1	Alabama, Tuscaloosa	Alabama Insane Hospital	1861	400	320	.....	.....	$250,000	*$625	400
2	California, Stockton	Asylum for the Insane	1853	750	107	.....	.....	583,100	*777	1,202
3	California, Napa City	Hospital for the Insane	1875	628	208	.....	.....	1,331,000	*2,119	556
4	Connecticut, Middletown	Hospital for the Insane	1868	450	300	.....	.....	640,043	*1,422	463
5	District Columbia, Washington	Government Hospital for the Insane	1855	563	419	$66,000	$569,907	635,907	1,012	801
6	Georgia, Milledgeville	State Lunatic Asylum	1842	400	1,250	.....	350,000	.....	875	500
7	Iowa, Mount Pleasant	Hospital for the Insane	1861	350	350	.....	370,000	.....	1,057	400
8	Iowa, Independence	Hospital for the Insane	1873	400	320	.....	.....	700,000	*1,750	360
9	Illinois, Jacksonville	Central Insane Hospital	1851	600	171	.....	.....	550,000	*916	487
10	Illinois, Elgin	Northern Insane Hospital	1872	525	480	.....	.....	658,000	*1,253	464
11	Illinois, Anna	Southern Insane Hospital	1873	500	313	.....	.....	631,000	*1,262	247
12	Indiana, Indianapolis	Hospital for the Insane	1848	1,200	160	8,000	1,250,000	1,258,000	1,041	600
13	Kentucky, Lexington	Eastern Kentucky Lunatic Asylum	1824	550	240	50,000	350,000	400,000	636	550
14	Kentucky, Hopkinsville	Western Kentucky Lunatic Asylum	1854	350	375	.....	.....	283,000	*808	377
15	Kentucky, Anchorage	Central Kentucky Lunatic Asylum	1873	375	230	20,000	200,000	220,000	533	423
16	Kansas, Osawatomie	Kansas State Insane Asylum	1868	150	215	5,000	167,546	172,546	1,117	230
17	Louisiana, Jackson	Insane Asylum of Louisiana	1848	160	580	.....	135,000	.....	844	194
18	Maine, Augusta	Maine Insane Asylum	1840	400	325	.....	.....	423,648	*1,059	410
19	Massachusetts, Taunton	State Lunatic Hospital	1854	550	134	20,100	275,000	295,100	500	614
20	Massachusetts, Worcester	State Lunatic Hospital	1833	700	375	.....	.....	1,160,195	*1,657	524
21	Massachusetts, Northampton	State Lunatic Hospital	1858	400	332	.....	.....	443,175	*1,108	434
22	Massachusetts, Danvers	State Lunatic Hospital	1877	600	197	.....	.....	1,520,000	*2,533	136
23	Maryland, Catonsville	Hospital for the Insane	1872	350	137	.....	600,000	.....	1,714	281
24	Michigan, Kalamazoo	Asylum for the Insane	1859	550	200	6,875	823,297	830,172	1,497	700
25	Mississippi, Jackson	State Lunatic Asylum	1855	375	468	.....	.....	500,000	*1,333	426
26	Missouri, Fulton	State Lunatic Asylum, No. 1	1851	350	500	.....	270,000	.....	777	350
27	Missouri, St. Joseph's	State Lunatic Asylum, No. 2	1874	200	120	.....	.....	300,000	*1,500	206
28	Minnesota, St. Peter's	Hospital for the Insane	1870	500	400	15,400	531,250	546,650	1,062	530
29	New Hampshire, Concord	Hospital for the Insane	1842	290	175	.....	225,000	.....	776	275
30	New Jersey, Trenton	State Lunatic Asylum	1848	500	170	.....	.....	453,213	*906	520
31	New Jersey, Morristown	State Lunatic Asylum	1876	800	436	82,672	2,225,000	2,307,672	2,781	480
32	New York, Utica	State Lunatic Asylum	1843	600	200	24,879	637,065	661,944	1,062	600
33	New York, Willard	Asylum for the Insane	1869	1,500	776	81,200	1,008,476	1,089,676	672	1,340

34	New York, Poughkeepsie	Hudson River State Hospital	1871	350	333	90,000	1,163,502	1,253,502	3,324	236
35	New York, Middletown	State Homœopathic Asylum	1874	200	211	42,117	436,147	478,264	2,181	130
36	New York, Auburn	Asylum for Insane Criminals	1859	160	8	.....	.....	138,775	*867	114
37	Nebraska, Lincoln	Hospital for the Insane	1871	100	196	.....	.....	115,000	*1,150	93
38	North Carolina, Raleigh	Insane Asylum for North Carolina	1856	225	203	.....	.....	250,000	*1,111	270
39	Ohio, Newburgh	Cleveland Hospital for the Insane	1855	630	128	.....	.....	1,000,000	*1,587	600
40	Ohio, Columbus	Hospital for the Insane	1839	902	300	.....	.....	1,526,226	*1,692	815
41	Ohio, Dayton	Hospital for the Insane	1855	550	170	.....	.....	520,000	*945	571
42	Ohio, Athens	Hospital for the Insane	1874	600	150	.....	950,000	.....	1,583	661
43	Oregon, East Portland	Hospital for the Insane	1862	260	150	.....	70,000	.....	269	235
44	Pennsylvania, Harrisburg	State Lunatic Asylum	1851	400	131	.....	200,000	.....	500	434
45	Pennsylvania, Danville	State Hospital for the Insane	1872	700	250	26,000	965,000	991,000	1,379	355
46	Pennsylvania, Dixmont	Western Pennsylvania Hospital	1862	400	375	38,000	550,000	588,000	1,375	570
47	South Carolina, Columbus	Lunatic Asylum of South Carolina	1828	300	50	2,500	405,000	407,500	1,355	322
48	Tennessee, Nashville	Hospital for the Insane	1852	400	450	.....	.....	300,000	*750	370
49	Texas, Austin	State Lunatic Asylum	1861	275	78	.....	.....	.....	.....	250
50	Vermont, Brattleboro	Asylum for the Insane	1836	400	600	.....	.....	350,000	*875	459
51	Virginia, Williamsburgh	Eastern Lunatic Asylum	1773	300	200	.....	.....	.....	.....	306
52	Virginia, Richmond	†Central Lunatic Asylum	1870	240	48	.....	.....	41,700	*174	260
53	Virginia, Staunton	Western Lunatic Asylum	1828	375	270	.....	.....	200,000	*533	360
54	Washington Territory, Steilacoom	Asylum for the Insane	1871	100	450	.....	.....	.....	.....	78
55	West Virginia, Weston	Hospital for the Insane	1867	300	300	13,000	575,000	588,000	1,916	420
56	Wisconsin, Mendota	State Hospital for the Insane	1860	350	400	.....	.....	500,000	*1,428	382
57	Wisconsin, Oshkosh	Northern Hospital for the Insane	1873	550	380	.....	.....	615,700	*1,119	557

STATE HOSPITALS IN PROCESS OF CONSTRUCTION, WITH PROPOSED CAPACITY.

1	Kansas, Topeka	State Lunatic Asylum	.....	400	.....	.....	.....	.....	.....	.....
2	Michigan, Pontiac	Asylum for the Insane	.....	400	.....	.....	.....	.....	.....	.....
3	New York, Buffalo	State Asylum for the Insane	.....	500	.....	.....	.....	.....	.....	.....
4	North Carolina, Morgantown	Asylum for the Insane	.....	400	.....	.....	.....	.....	.....	.....
5	Pennsylvania, Norristown	State Hospital for the Insane	.....	600	.....	.....	.....	.....	.....	.....
6	Pennsylvania, Warren	State Hospital for tha Insane	.....	500	.....	.....	.....	.....	.....	.....
7	Illinois, Kankakee	Eastern Hospital for the Insane	.....	300	.....	.....	.....	.....	.....	.....

* Includes cost of land.

† For colored insane.

Total cost of *land* and *buildings* of 28 State Hospitals	$15,983,775
Total cost of *buildings* of 26 State Hospitals	15,302,190
	$31,285,965
Average cost of *land* and *buildings* of each of the 28 State Hospitals	$570,849
Average cost of *buildings* of each of the 26 State Hospitals	588,546
Average per capita cost of *land* and *buildings* of the 28 State Hospitals,	1,262
Average per capita cost of *buildings* of the 26 State Hospitals	1,203

Total capacity of 57 State Hospitals for the Insane	26,083
Total capacity of 7 State Hospitals for the Insane in process of construction	3,100
Number of patients in 57 State Hospitals for the Insane, under treatment	24,928
Average number under treatment in each hospital	437
Number of acres of land attached to 57 State Hospitals for the Insane	16,814

TABLE No. 3—(*Continued*).

ORGANIZED CITY OR COUNTY INSTITUTIONS, WITH RESIDENT SUPERINTENDENTS.

Number.	LOCATION.	Name.	When opened.	Capacity.	REAL ESTATE.				Per capita of buildings.	No. of patients, 1878.
					LAND.		Buildings.	Total cost of real estate.		
					No. of acres.	Cost.				
1	Illinois, Chicago	Cook County Asylum	1870	375	160	.....	.....	.....	.....	400
2	Maryland, Baltimore	Bayview Asylum	.....	1,000	60	.....	$800,000	.....	$800	714
3	Massachusetts, Boston	Lunatic Hospital	1839	200	2	.....	100,000	.....	500	200
4	Missouri, St Louis	St. Louis County Asylum	1869	250	43½	.....	800,000	.....	3,200	333
5	New York, Blackwell's Island	New York City Lunatic Asylum	1861	986	.....	.....	1,000,000	.....	1,014	1,400
6	New York, Ward's Island	New York City Asylum for the Insane	1871	434	.....	.....	866,734	.....	1,997	653
7	New York, Rochester	Monroe County Asylum	1857	140	20	.....	36,750	.....	262	178
8	New York, Flatbush	Kings County Lunatic Asylum	1855	450	.....	.....	564,000	.....	1,253	632
9	New York, Troy	Rensselaer County Lunatic Asylum	1859	125	20	.....	.....	.....	.....	108
10	New Jersey, Newark	Essex County Lunatic Asylum	.....	.....	.....	.....	.....	.....	.....	.....
11	Ohio, Carthage	Longview Asylum	1860	400	117	.....	.....	$700,000	*1,750	580
12	Pennsylvania, Philadelphia	Dep'tment for the Insane, alms-house	.....	500	.....	.....	.....	.....	.....	.....
		INCORPORATED CHARITABLE INSTITUTIONS.								
1	Connecticut, Hartford	Retreat for the Insane	1824	150	87	.....	.....	.....	.....	.....
2	Maryland, Baltimore	†Mount Hope Retreat	1867	200	.....	.....	.....	.....	.....	.....
3	Massachusetts, Somerville	McLean Asylum for the Insane	1818	190	130	.....	.....	.....	.....	.....
4	Missouri, St. Louis	†St. Vincent's Asylum	1858	250	.....	.....	.....	.....	.....	.....
5	New York, Manhattanville	Bloomingdale Insane Asylum	1821	180	40	.....	280,000	.....	1,555	190
6	New York, Buffalo	†Providence Asylum	1861	150	30	.....	.....	160,000	*1,066	80
7	Ohio, Toledo	Northwestern Hospital for the Insane	1871	100	.....	.....	40,000	.....	400	105
8	Pennsylvania, Philadelphia	Pennsylvania Hospital for the Insane	1841	500	113	.....	800,000	.....	1,600	415
9	Pennsylvania, Frankford	Friends' Asylum for the Insane	1817	60	80	.....	.....	.....	.....	.....
10	Rhode Island, Providence	Butler Hospital for the Insane	1847	160	130	.....	200,000	.....	1,250	156

* Includes cost of land.

† Under charge of religious orders.

Table No. 3 has been prepared from data obtained from the last annual reports, or by special inquiries in each case.

Table No. 4.

Detailed Statement of Expenditures of the New York State Lunatic Asylum for the years 1850 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	Salaries and Wages.		Provisions and Supplies.		Clothing.		Medical Stores.		Fuel and Light.			
		Aggregate cost.	Cost per capita.	Aggregate cost	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1850	433	$15,282 25	$35 29	$22,687 99	$52 39	$5,363 79	$12 39	$1,756 65	$4 05	.....	.....	$5,826 89	$13 45
1851	440	18,463 62	41 96	25,768 20	58 56	6,080 42	13 82	757 89	1 72	.....	.....	8,965 95	20 37
1852	441	19,183 31	43 50	27,537 42	62 44	7,228 61	16 39	650 05	1 47	.....	.....	6,215 48	14 09
1853	423	18,626 46	44 03	27,997 89	66 19	5,652 48	13 36	642 96	1 52	.....	.....	8,206 41	19 40
1854	441	22,150 14	49 89	30,420 41	68 51	7,589 13	17 09	1,163 05	2 62	.....	.....	9,906 19	15 55
1855	467	22,590 06	48 37	38,706 42	82 88	7,365 09	15 77	2,663 68	5 06	.....	.....	9,686 98	20 74
1856	454	23,463 66	51 68	34,738 46	76 52	6,624 72	14 59	1,080 91	2 38	.....	.....	8,569 63	18 87
1857	463	23,125 66	49 94	35,423 03	76 51	6,051 83	13 07	1,334 55	2 88	.....	.....	13,029 92	28 14
1858	489	25,263 50	51 66	33,968 53	69 46	6,771 81	13 85	2,042 04	4 18	.....	.....	8,959 25	18 32
1859	509	29,332 98	57 63	34,657 81	68 09	8,879 31	17 44	2,399 38	4 71	.....	.....	5,781 66	11 36
1860	516	26,798 45	51 93	38,782 93	75 16	8,519 45	16 51	2,096 59	4 06	.....	.....	6,010 07	11 65
1861	519	30,469 03	58 70	31,581 51	60 85	8,050 79	15 51	2,408 32	4 64	*$8,263 03	†$1,114 46	9,377 49	18 07
1862	526	27,656 38	52 58	31,606 35	60 09	7,272 31	13 82	2,775 55	5 28	6,409 58	†1,455 71	7,865 29	14 95
1863	528	27,222 74	51 56	42,015 50	79 57	6,391 86	12 11	2,784 47	5 27	12,330 76	†1,697 99	14,028 75	26 57
1864	560	30,110 88	53 77	48,941 73	87 39	8,733 43	15 59	4,545 85	8 12	17,122 31	†1,881 69	19 004 00	33 94
1865	591	33,075 50	55 96	64,022 24	108 33	10,792 80	18 26	4,267 76	7 23	13,276 06	†1,762 95	15,039 01	25 45
1866	643	36,974 17	57 50	69,399 64	107 93	13,356 87	20 77	5,874 6	9 14	‡12,647 55	†2,415 58	15,063 13	23 42
1867	610	37,226 29	61 02	70,846 99	116 14	14,622 17	23 97	5,253 43	8 61	‡10,947 46	†2,378 06	13,325 52	21 84
1868	589	42,319 95	71 85	66,316 47	112 59	13,362 70	22 69	4,137 90	7 02	‡10,897 25	†2,501 69	13,398 94	22 75
1869	600	47,983 49	79 96	74,603 87	124 34	11,090 49	18 48	4,464 89	7 44	‡15,801 66	†2,781 02	18,582 68	30 97
1870	629	48,508 33	77 12	69,570 68	110 60	13,311 29	21 16	3,735 81	5 94	‡11,054 06	†3,612 80	14,666 86	23 32
1871	605	50,631 00	83 68	72,193 18	119 32	14,143 42	23 37	5,221 90	8 63	‡5,431 95	†3,850 69	9,282 64	15 37
1872	588	49,963 30	84 97	67,402 70	114 63	11,537 78	19 62	4,652 15	7 91	‡8,708 38	†3,617 65	12,326 03	20 96
1873	563	52,291 85	92 88	65,725 20	116 74	10,038 96	17 83	5,088 90	9 04	10,469 95	3,331 70	13,801 65	24 51
1874	581	55,005 24	94 67	69,988 71	120 46	9,059 87	15 59	5,264 12	9 06	12,360 11	3,825 18	16,185 29	27 86
1875	595	57,471 87	96 59	70,302 18	118 15	8,646 20	14 53	6,353 43	10 67	14,452 00	3,297 06	1 ,749 06	29 83
1876	615	58,535 96	95 18	70,621 33	114 83	9,544 39	15 52	7,183 42	11 68	12,734 87	3,385 09	16,119 96	26 21
1877	608	56,918 92	93 62	64,377 81	105 88	9,476 47	15 59	4,711 91	7 75	10,211 54	3,185 70	13,397 24	22 03
1878	600	56,227 97	93 71	60,085 58	100 14	9,109 04	15 18	4,212 62	7 02	8,597 80	3,682 90	12,280 70	20 47

* Includes the cost of a large and substantial coal house on the Asylum canal dock.

† Includes gas and expense of keeping machinery in order.

‡ Includes fuel and lights, excepting gas.

TABLE No. 4—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ADDITIONS, ALTERATIONS AND REPAIRS.		Annual cost per capita including repairs.	Cost of apparatus for warming and ventilating the build'g by steam, and repairs connected therewith.	Rebuilding and repairing the center build'g, barn, and part of south wing destroyed by fire	Land.	Cash refunded to patients.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.							
1850	$9,757 60	$22 53	$60,675 17	$140 12	$4,039 10	$9 33	$149 45	.....	.....	.....	$313 89	.....	$65,028 16
1851	10,688 71	24 29	70,724 79	160 74	7,147 30	16 24	176 98	.....	.....	.....	106 62	.....	77,978 71
1852	10,960 88	24 85	71,775 75	162 76	7,928 86	17 97	180 73	.....	.....	.....	296 74	.....	80,001 35
1853	10,779 11	25 48	71,905 31	169 98	5,201 36	12 29	182 27	$33,687 56	.....	.....	334 62	.....	111,128 85
1854	12,207 99	27 49	80,436 91	181 16	6,988 10	15 74	196 90	46,594 32	.....	.....	26 67	.....	134,046 00
1855	12,828 73	27 47	93,540 96	200 30	4,876 33	10 44	210 74	12,755 56	.....	.....	271 83	.....	111,444 68
1856	11,670 90	25 70	86,148 28	189 75	4,060 04	8 94	198 69	17,629 40	.....	.....	224 21	.....	108,061 93
1857	12,001 22	25 92	90,966 21	196 48	4,286 96	9 26	205 74	23,392 45	.....	.....	134 44	.....	118,780 06
1858	14,796 94	30 26	91,802 07	187 73	10,201 98	20 86	208 59	6,543 45	$68,031 57	$1,830 00	.....	.....	178,409 07
1859	15,121 60	29 71	96,172 74	188 94	11,567 71	22 72	211 66	3,654 56	1,602 87	1,696 55	28 46	.....	114,722 89
1860	13,745 66	26 64	95,953 15	185 95	6,588 55	12 77	198 72	268 58	.....	3,232 29	91 45	.....	106,134 02
1861	15,278 91	29 44	97,166 05	187 21	16,950 59	32 66	219 87	.....	.....	.....	.....	.....	114,116 64
1862	11,860 27	22 55	89,036 15	169 27	10,771 52	20 48	189 75	.....	.....	.....	142 14	.....	99,949 81
1863	13,843 64	26 22	106,286 96	201 30	9,976 36	18 89	220 19	.....	.....	.....	243 19	.....	116,506 51
1864	18,194 84	32 49	129,530 73	231 30	9,170 44	16 39	247 69	.....	.....	.....	67 48	.....	138,768 65
1865	20,521 80	34 72	147,719 11	249 94	10,021 13	16 96	266 90	.....	.....	.....	187 51	.....	157,927 75
1866	24,970 96	38 85	165,639 73	257 69	19,446 48	30 24	287 84	.....	.....	.....	296 13	.....	185,382 34
1867	28,038 06	45 96	169,312 46	277 56	16,070 17	26 34	303 90	.....	.....	.....	233 55	.....	185,616 18
1868	29,743 36	50 50	169,279 32	287 40	29,833 75	50 65	338 05	.....	.....	.....	160 56	.....	199,273 63
1869	34,210 41	57 02	190,935 83	318 22	21,197 38	35 33	353 55	.....	.....	.....	123 18	$114 93	212,371 32
1870	31,637 81	50 34	181,460 78	288 49	26,837 23	42 67	331 16	.....	.....	.....	267 20	498 16	209,063 37
1871	30,421 06	50 28	181,893 20	300 65	23,308 00	38 52	339 17	.....	.....	.....	187 74	.....	205,388 94
1872	29,501 74	50 17	175,383 70	298 27	22,475 59	38 22	336 49	.....	.....	.....	108 07	.....	197,967 36
1873	24,351 39	43 25	171,297 95	304 26	41,033 41	72 88	377 14	.....	.....	.....	351 15	.....	212,682 51
1874	29,686 82	51 09	185,190 05	318 74	44,248 23	76 16	394 90	.....	.....	.....	94 97	.....	229,533 25
1875	27,775 75	46 68	188,298 49	316 47	27,108 77	45 56	362 03	.....	.....	.....	.....	.....	215,407 26
1876	29,993 35	48 44	191,798 41	311 87	37,422 44	60 85	372 72	.....	.....	.....	222 18	.....	229,443 03
1877	23,768 98	39 09	172,651 33	283 96	47,771 81	78 57	362 53	.....	.....	.....	154 36	.....	220,577 50
1878	24,658 44	41 01	166,574 35	277 62	41,380 24	68 97	346 59	.....	.....	1,326 11	43 59	.....	209,324 29

Table No. 5.

Detailed statement of receipts of the New York State Lunatic Asylum, Utica, for the years 1860 *to* 1878, *inclusive.*

YEARS.	Cash on hand at commencement of fiscal year.	Appropriations from the State.			Steward's sales, farm produce, etc.	For Support.		From all other sources.	Total receipts.
		For salaries of officers.	For other purposes.	Total from the State.		From counties.	From private patients.		
1860	$8,455 88	$6,900 00	$13,168 75	$20,068 75	$2,545 00	$66,247 68	$23,253 16	$1 00	$120,571 47
1861	14,706 03	7,350 00	9,044 08	16,394 08	2,993 00	68,048 22	25,901 63	.....	128,042 96
1862	13,926 32	7,416 35	774 62	8,190 97	3,065 00	78,868 16	23,413 89	9 52	127,473 86
1863	27,524 05	6,950 59	693 22	7,643 81	2,837 56	69,887 65	26,049 45	6 80	133,949 32
1864	17,442 81	7,725 00	10,794 30	18,519 30	3,848 91	76,988 60	32,895 72	350 00	150,045 34
1865	11,276 69	8,000 00	11,585 96	19,585 96	4,588 65	97,803 69	40,594 84	.....	173,849 83
1866	15,922 08	10,000 00	10,391 24	20,391 24	2,964 59	120,562 67	45,329 92	121 86	205,292 36
1867	19,910 02	7,952 60	16,049 74	24,002 34	5,310 00	113,384 30	44,854 35	233 70	207,694 71
1868	22,078 77	10,000 00	7,185 71	17,185 71	6,007 06	115,149 17	52,162 38	.....	212,583 09
1869	13,309 46	10,000 00	33,790 20	43,790 20	4,745 42	101,191 41	51,716 66	.....	214,753 15
1870	2,381 83	10,000 00	45,723 69	55,723 69	3,565 00	114,067 43	50,403 11	.....	226,141 06
1871	17,077 69	11,000 00	46,100 45	57,100 45	4,190 69	110,155 31	51,728 03	.....	240,252 17
1872	34,862 49	10,888 05	23,148 68	34,036 73	4,799 50	104,062 81	54,433 72	.....	232,195 25
1873	34,227 89	11,979 71	44,565 04	56,544 75	2,555 46	94,691 33	53,174 10	.....	241,193 58
1874	28,510 87	14,610 58	27,840 69	42,451 27	5,477 15	96,701 56	65,906 96	.....	239,047 81
1875	9,514 60	15,000 00	60,851 52	75,851 52	5,026 00	101,923 98	74,290 11	.....	266,606 21
1876	51,198 95	14,749 80	23,429 87	38,179 67	6,535 42	87,622 41	75,775 75	.....	259,312 20
1877	29,869 17	15,000 00	25,809 88	40,809 88	4,520 35	97,554 17	70,602 08	....	243,355 65
1878	22,778 15	14,978 63	20,000 00	34,978 63	5,102 36	101,946 51	54,805 57	.....	219,611 22
	$394,973 75	$200,501 31	$430,947 64	$631,448 95	$80,677 12	$1,816,857 11	$917,291 43	$722 88	$3,841,971 2

TABLE NO. 6.

New York State Lunatic Asylum.

TABULAR STATEMENT OF EXPENDITURES AND LEGISLATIVE APPROPRIATIONS FOR BUILDINGS, FURNISHING, ETC.

1839 to 1842.	Appropriations for centre building and front wing, stone,	$275,000 00
	For furniture, stock, etc.	16,000 00
	For maintenance	8,000 00
1843.	Appropriation for building two hospital wards and workshops, brick	16,100 00
1844 to 1848.	Appropriations for building two wings, brick	77,000 00
	Appropriations for completion of new buildings	17,000 00
1844 to 1848.	Appropriation for furniture	7,552 00
	Appropriation for furnaces and fixtures	7,448 00
1844 to 1848.	Appropriation for gate-house and front gate	1,205 02
	Appropriation for fencing in front grounds	1,794 98
1844 to 1848.	Appropriation for constructing resin gas works	5,000 00
1850.	Appropriation for furniture	5,000 00
1852 to 1857.	Appropriation for steam heating and ventilating apparatus, constructing flues throughout building for same, boiler and engine-house, fan-house, new laundry buildings, carpenters', plumbers' and painters shops	144,957 90
1857.	Appropriation for reconstructing centre building and portions of wings, and the barns destroyed by fire	68,742 00
		$650,799 90

TABLE NO. 7.

New York State Lunatic Asylum.

EXPENDITURES AND LEGISLATIVE APPROPRIATIONS FOR WATER SUPPLY.

1844.	For water supply	$5,000 00
1867.	For water supply	1,500 00
1867.	or engine-house, engine, setting and connecting at pump-house, paid from current funds	1,790 79
1869.	For water supply, 5,000 feet cast iron pipe, from Jewett farm to fifth lock on Chenango canal, and laying same, machinery, etc.,	6,300 00
1870.	For water supply, purchase of land and springs on Jewett farm, and construction of receiving reservoir	11,651 02
1873.	For water supply, for 4,500 feet cast iron pipe and laying same from fifth lock, Chenango canal, to asylum buildings, pumps and necessary connections, with water tanks in buildings	7,285 47
		$33,527 28

TABLE NO. 8.

New York State Lunatic Asylum.

EXPENDITURES AND LEGISLATIVE APPROPRIATIONS FOR LAND, IMPROVEMENT OF GROUNDS, SEWERS, FENCES, FARM BUILDINGS, CITY ASSESSMENTS FOR PAVING AND GRADING.

1836.	Farm and building site, 133 acres, paid by State appropriation	$10,000 00
	Paid by citizens of Utica	6,000 00
1841.	Appropriation for improving grounds	2,000 00
1844.	Appropriation for additional land and fencing	2,000 00
1846.	Appropriation for improving grounds	441 27
1852.	Appropriation for improving, draining and planting lawn	2,000 00
1860.	Appropriation for forty-eight acres of land, and sewers	10,880 00
	Paid by current funds for lots for line of water-pipe, from canal lock to asylum	1,830 00
1861.	Appropriation for storehouse, vegetable cellar, fences and painting	3,855 52

1870.	Appropriation for main brick sewer, from Erie canal to Mohawk river	$7,170 00
1871.	Appropriation paid to city of Utica, for grading and paving Court and Whitesboro streets, fronting asylum grounds	12,976 00
1874.	Appropriation for fencing	2,000 00
1875.	Appropriation for construction of iron fence in front of asylum grounds	3,000 00
1875.	Appropriation for grading, paving and sidewalks	676 25
1876.	Appropriation for taking down iron fence around Capitol park, Albany, and putting up same on stone posts in front of asylum grounds	1,870 65
	Appropriation for high picket fence on York street and grading street	2,000 00
1877.	Appropriation for reconstructing main and branch sewers on grounds	3,156 47
1877.	From current funds, farm, buildings, cisterns and wells	12,137 67
1878.	From current funds, farm buildings	9,719 49
	From current funds, paid for land	1,326 11
	From current funds, fences, drains and roads	1,352 45
		$96,391 88

Table No. 9.

New York State Lunatic Asylum.

Tabular Statement of Expenditures for Additions, Alterations and Repairs from opening, January, 1843, to December 1, 1878.

1844.	Additions, alterations and repairs	$2,778 62
1845.	Additions, alterations and repairs	1,403 52
1846.	Additions, alterations and repairs	1,641 42
1847.	Additions, alterations and repairs	3,174 96
1848.	Additions, alterations and repairs	2,629 99
1849.	Additions, alterations and repairs	2,586 80
1850.	Additions, alterations and repairs	4,039 19
1851.	Additions, alterations and repairs	7,147 30
1852.	Additions, alterations and repairs	7,928 86
1853.	Additions, alterations and repairs	5,201 36
1854.	Additions, alterations and repairs	6,919 80
1855.	Additions, alterations and repairs	4,876 33
1856.	Additions, alterations and repairs	4,060 04
1857.	Additions, alterations and repairs	4,286 96
1858.	Additions, alterations and repairs	10,201 98
1859.	Additions, alterations and repairs	11,567 71
1860.	Additions, alterations and repairs	6,588 55
1861.	Additions, alterations and repairs	16,950 59
1862.	Additions, alterations and repairs	9,861 84
1863.	Additions, alterations and repairs	9,976 36
1864.	Additions, alterations and repairs	8,853 60
1865.	Additions, alterations and repairs	10,021 13
1866.	Additions, alterations and repairs	19,446 48
1867.	Additions, alterations and repairs	16,070 17
1868.	Additions, alterations and repairs	29,833 75
1869.	Additions, alterations and repairs	21,197 38
1870.	Additions, alterations and repairs	21,205 86
1871.	Additions, alterations and repairs	19,705 74
1872.	Additions, alterations and repairs	16,207 31
1873.	Additions, alterations and repairs	34,744 80
1874.	Additions, alterations and repairs	43,571 98
1875.	Additions, alterations and repairs	21,471 87
1876.	Additions, alterations and repairs	32,902 42
1877.	Additions, alterations and repairs	35,634 14
1878.	Additions, alterations and repairs	37,929 56
		$492,618 37

TABLE No. 10.

Statement furnished by the Treasurer of the New York State Lunatic Asylum, at Utica, showing the amounts received for board, clothing, etc., from the various counties of the State, for the year ending November 30, 1878.

	Board.	Clothing, etc.	Total.
Albany county	$16,921 59	$2,168 07	$19,089 66
Allegany county	709 69	38 60	748 29
Broome county	1,141 13	112 39	1,253 52
Cattaraugus county	1,027 42	172 58	1,200 00
Cayuga county	2,901 70	341 85	3,243 55
Chautauqua county	639 41	54 45	693 86
Chemung county	2,364 75	309 64	2,674 39
Chenango county	2,678 83	181 40	2,860 23
Cortland county	1,471 98	165 35	1,637 33
Delaware county	1,655 41	156 20	1,811 61
Dutchess county	625 71	63 63	689 34
Erie county	7,292 51	1,013 99	8,306 50
Essex county	251 99	17 27	269 26
Franklin county	499 99	47 83	547 82
Fulton county	812 54	57 79	870 33
Genesee county	25 14	18	25 32
Herkimer county	2,598 86	229 34	2,828 20
Jefferson county	1,420 57	281 13	1,701 70
Kings county	105 14	11 38	116 52
Lewis county	1,362 27	172 37	1,534 64
Livingston county	788 00	77 39	865 39
Madison county	829 14	56 16	885 30
Monroe county	3,266 86	488 56	3,755 42
Montgomery county	499 42	110 50	609 92
New York county	206 86	89	207 75
Niagara county	3,167 98	506 02	3,677 00
Oneida county	9,166 23	715 35	9,881 58
Onondaga county	2,404 57	358 10	2,762 67
Ontario county	2,101 71	271 83	2,373 54
Orleans county	326 85	49 98	376 83
Oswego county	1,228 59	147 39	1,375 98
Otsego county	1,042 85	126 66	1,169 51
Queens county	2,302 85	299 12	2,601 97
Rensselaer county	2,734 28	226 66	2,960 94
Richmond county	205 93	25 83	231 76
Rockland county	105 14	12 13	117 27
St. Lawrence county	1,779 41	262 83	2,042 24
Schenectady county	2,462 86	233 44	2,696 30
Seneca county	328 57	59 83	388 40
Steuben county	1,134 85	154 28	1,289 13
Tioga county	443 42	58 45	501 87
Tompkins county	700 57	81 36	781 93
Washington county	2,956 57	408 77	3,365 34
Wayne county	1,197 14	209 21	1,406 35
Westchester county	1,037 42	143 01	1,180 43
Wyoming county	1,147 43	113 85	1,261 28
Yates county	290 28	56 17	346 45
State of New York	578 85	153 04	731 89
Total	$90,941 26	$11,005 25	$101,946 51

Table No. 11.

Statement furnished by the Treasurer of the New York State Lunatic Asylum, at Utica, showing the number of private patients and amounts received for their support for the year ending November 30, 1878.

	Board.	Extras.	Total.
One patient, 19 1-7 weeks' board, at $6	$114 86	$2 24	$117 10
One patient, 52 1-7 weeks' board, at $15	782 15	288 50	1,070 65
One patient, 15 4-7 weeks' board, at $6	93 43	1 54	94 97
One patient, 3 4-7 weeks' board, at $6	21 43	1 50	22 93
One patient, 52 1-7 weeks' board, at $6	312 85	32 40	345 25
One patient, 27 2-7 weeks' board, at $6	163 71	6 21	169 92
One patient, 52 1-7 weeks' board, at $5	260 71	8 47	269 18
One patient, 46 3-7 weeks' board, at $6	278 57	92 87	371 44
One patient, 52 1-7 weeks' board, at $4	208 57	39 94	248 51
One patient, 52 1-7 weeks' board, at $10	521 43	26 31	547 74
One patient, 43 2-7 weeks' board, at $6	201 14	4 16	205 30
One patient, 78 1 7 weeks' board, at $6	467 99	8 18	476 17
One patient, 52 1-7 weeks' board, at $6	312 85	19 48	332 33
One patient, 52 1-7 weeks' board, at $5	263 42	9 38	272 80
One patient, 57 1-7 weeks' board, at $6	355 71	10 78	366 49
One patient, 35 1-7 weeks' board, at $6	210 85	17 15	228 00
One patient, 4 3-7 weeks' board, at $6	26 57	6 90	33 47
One patient, 11 weeks' board, at $6	66 00	4 27	70 27
One patient, 4 weeks' board, at $6	24 00	4 00	28 00
One patient, 24 4-7 weeks' board, at $6	147 43	27 99	175 42
One patient, 14 3-7 weeks' board, at $6	86 57	7 53	94 10
Money advanced	.....	12 41	12 41
One patient, 14 4-7 weeks' board, at $6	87 43	5 02	92 45
One patient, 52 1-7 weeks' board, at $10	521 43	24 68	546 11
One patient, 4 weeks' board, at $6	24 00	1 00	25 00
One patient, 23 weeks' board, at $6	138 00	24 39	162 39
One patient, 52 1-7 weeks' board, at $6	312 85	24 04	336 89
One patient, 8 1-7 weeks' board, at $6	48 86	3 96	52 82
One patient, 18 2-7 weeks' board, at $6	109 71	6 63	116 34
One patient, 11 2-7 weeks' board, at $6	67 71	12 29	80 00
One patient, 21 4-7 weeks' board, at $6	129 43	6 57	136 00
One patient, 52 1-7 weeks' board, at $6	312 85	29 48	342 33
One patient, 66 5-7 weeks' board, at $6	400 28	12 23	412 51
One patient, 52 1-7 weeks' board, at $6	312 85	16 29	329 14
One patient, 52 1-7 weeks' board, at $5	260 71	20 42	281 13
One patient, 51 6-7 weeks' board, at $6	311 14	5 82	316 96
One patient, 32 1-7 weeks' board, at $6	192 85	9 50	202 35
One patient, 9 4-7 weeks' board, at $6	57 42	2 68	60 10
One patient, 20 1-7 weeks' board, at $6	120 85	4 74	125 59
One patient, 52 1-7 weeks' board, at $6	312 85	25 27	338 12
One patient, 28 2-7 weeks' board, at $6	169 71	5 89	175 60
One patient, 39 1-7 weeks' board, at $7	274 00	11 54	285 54
One patient, 52 1-7 weeks' board, at $5	260 71	10 36	271 07
One patient, 52 1-7 weeks' board, at $5.50	286 99	13 97	300 96
One patient, 8 3-7 weeks' board, at $6	50 57	43	51 00
One patient, 48 1-7 weeks' board, at $6	288 85	56 61	345 46
One patient, 51 4-7 weeks' board, at $6	309 42	34 72	344 14
One patient, 26 2 7 weeks' board, at $6	157 71	2 29	160 00
One patient, 63 weeks' board, at $6	378 00	8 21	386 21
One patient, 52 1-7 weeks' board, at $8	417 15	14 53	431 68
One patient, 14 3 7 weeks' board, at $6	86 57	38	86 95
One patient, 48 weeks' board, at $6	288 00	1 03	289 03
One patient, 24 3-7 weeks' board, at $6	146 56	69 04	215 60
One patient, 52 1-7 weeks' board, at $10	521 43	169 89	691 32
One patient, 52 1-7 weeks' board, at $6	312 85	14 68	327 53
One patient, 52 1-7 weeks' board, at $6	312 85	3 59	316 44
One patient, 65 2-7 weeks' board, at $6	391 71	7 19	398 90
One patient, 22 2-7 weeks' board, at $6	133 71	24 93	158 64
One patient, 35 1-7 weeks' board, at $6	210 85	8 12	218 97
One patient, 3 2-7 weeks' board, at $8	26 29	2 39	28 68
One patient, 26 3-7 weeks' board, at $6	158 56	16 09	174 65
One patient, 6 weeks' board, at $6	36 00	3 43	39 43
One patient, 18 1-7 weeks' board, at $6	108 86	2 69	111 55
One patient, 43 3-7 weeks' board, at $6	261 57	14 28	275 85
One patient, 52 1-7 weeks' board, at $6	312 85	1 81	314 66
One patient, 1 6-7 weeks' board, at $8	14 86	15	15 01
One patient, 13 3-7 weeks' board, at $6	80 56	2 87	83 43
One patient, 15 2-7 weeks' board, at $6	91 71	5 39	97 10
One patient, 8 1-7 weeks' board, at $10	81 43	24 74	106 17
One patient, 15 weeks' board, at $6	90 00	5 87	95 87
One patient, 31 4-7 weeks' board, at $6	189 42	1 38	190 80

TABLE No. 11 — (*Continued*).

	Board.	Extras.	Total.
One patient, 52 1-7 weeks' board, at $6	$312 85	$17 34	$330 19
One patient, 40 5-7 weeks' board, at $6	244 28	38 20	282 48
One patient, 13 6-7 weeks' board, at $6	83 14	26 84	109 98
One patient, 8 6-7 weeks' board, at $6	53 14	25	53 39
One patient, 9 4-7 weeks' board, at $6	57 43	29 95	87 38
One patient, 52 1-7 weeks' board, at $5	260 71	18 56	279 27
One patient, 1 6-7 weeks' board, at $6	11 14	.....	11 14
One patient, 14 2-7 weeks' board, at $6	87 42	92	88 34
One patient, 52 1 7 weeks' board, at $6 50	338 72	2 08	340 80
One patient, 17 3-7 weeks' board, at $6	104 57	98	105 55
One patient, 35 6 7 weeks' board, at $6	215 14	55	215 69
One patient, 37 weeks' board, at $6	221 99	4 49	226 48
One patient, 52 1-7 weeks' board, at $5	260 71	57 11	317 82
One patient, 50 weeks' board, at $6	300 00	5 88	305 88
One patient, 52 1-7 weeks' board, at $6	312 85	9 74	322 59
One patient, 28 weeks' board, at $6	168 00	23 04	191 04
One patient, 45 6 7 weeks' board, at $8	366 86	74 59	441 45
One patient, 17 5-7 weeks' board, at $6	106 28	.....	106 28
One patient, 52 1-7 weeks' board, at $6	312 85	22 56	335 41
One patient, 36 1-7 weeks' board, at $4.50	162 64	9 50	172 14
One patient, 49 6-7 weeks' board, at $10	498 57	11 60	510 17
One patient, 38 weeks' board, at $6	228 00	46 25	274 25
One patient, 14 4-7 weeks' board, at $6	87 43	3 51	90 94
One patient, 4 weeks' board, at $6	24 00	.....	24 00
One patient, 3 3-7 weeks' board, at $6	20 36	.....	20 36
One patient, 1 week's board, at $10	10 00	.....	10 00
One patient, 21 4-7 weeks' board, at $6	129 43	6 62	136 05
One patient, 9 5-7 weeks' board, at $6	58 28	2 22	60 50
One patient, 35 3-7 weeks' board, at $6	212 57	7 29	219 86
One patient, 9 5-7 weeks' board, at $6	58 28	09	58 37
One patient, 52 1-7 weeks' board, at $7	365 00	7 74	372 74
One patient, 52 1-7 weeks' board, at $6	312 85	1 59	314 44
One patient, 41 weeks' board, at $6	245 99	6 27	252 26
One patient, 35 1-7 weeks' board, at $50	1,757 14	88 20	1,845 34
One patient, 26 3-7 weeks' board, at $6	158 57	87	159 44
One patient, 11 5-7 weeks' board, at $6	70 28	37	70 65
One patient, 24 6-7 weeks' board, at $6	149 14	9 79	158 93
One patient, 73 1-7 weeks' board, at $5	365 71	3 20	368 91
One patient, 53 1-7 weeks' board, at $5 25	278 85	18 87	297 72
One patient, 52 1-7 weeks' board, at $10	521 43	63 04	584 47
One patient, 50 2-7 weeks' board, at $6	301 71	34	302 05
One patient, 52 1-7 weeks' board, at $15	782 15	42 84	824 99
One patient, 40 1-7 weeks' board, at $6	240 85	11 54	252 39
One patient, 28 weeks' board, at $6	167 99	8 31	176 30
One patient, 10 weeks' board, at $6	60 00	1 65	61 65
One patient, 43 1-7 weeks' board, at $6	258 85	17 50	276 35
One patient, 10 6-7 weeks' board, at $6	65 14	1 40	66 54
One patient, 52 1-7 weeks' board, at $7	365 00	48 16	413 16
One patient, 31 2-7 weeks' board, at $25	760 72	60 31	821 03
Cash advanced	.....	25 00	25 00
One patient, 52 1-7 weeks' board, at $10	521 43	14 89	536 32
One patient, 14 weeks' board, at $6	83 99	23 11	107 10
One patient, 5-7 week's board, at $10	7 14	.....	7 14
One patient, 6 2-7 weeks' board, at $6	37 71	6 59	44 30
One patient, 52 1-7 weeks' board, at $5	260 70	.....	260 70
One patient, 52 1-7 weeks' board, at $6	312 85	29 21	342 06
One patient, 38 weeks' board, at $6	227 99	20 03	248 02
One patient, 52 1-7 weeks' board, at $6	312 85	30 46	343 31
One patient, 14 4-7 weeks' board, at $6	87 43	4 93	92 36
One patient, 52 1-7 weeks' board, at $6	312 85	18 45	331 30
One patient, 6 weeks' board, at $9	54 00	1 00	55 00
One patient, 52 1-7 weeks' board, at $6	312 85	26 19	339 04
One patient, 52 1-7 weeks' board, at $7	365 00	5 29	370 29
One patient, 52 1-7 weeks' board, at $6	312 85	23 97	336 82
One patient, 71 weeks' board, at $8	568 00	13 81	581 81
One patient, 104 2-7 weeks' board, at $6	625 70	34 78	660 48
One patient, 13 weeks' board, at $6	78 00	4 95	82 95
One patient, 1 6-7 weeks' board, at $6	11 14	28	11 42
One patient, 52 1-7 weeks' board, at $10	521 43	27 79	549 22
One patient, 52 1-7 weeks' board, at $6	312 85	10 54	323 39
Cash advanced	.....	20 00	20 00
One patient, 8 weeks' board, at $6	48 00	1 22	49 22
One patient, 6 weeks' board, at $6	36 00	1 55	37 55
One patient, 52 3-7 weeks' board, at $6	314 56	11 09	325 65
One patient, 52 1-7 weeks' board, at $6	312 85	11 03	323 88
One patient, 43 5-7 weeks' board, at $6	257 99	49 29	307 28
One patient, 52 1-7 weeks' board, at $6	312 85	1 39	314 24
One patient, 68 2-7 weeks' board, at $6	409 71	14 79	424 50

Table No. 11—(*Continued*).

	Board.	Extras.	Total.
One patient, 56 1-7 weeks' board, at $7	$393 00	$7 02	$400 02
One patient, 19 2-7 weeks' board, at $6	115 71	7 05	122 76
One patient, 52 1-7 weeks' board, at $6	312 85	2 85	315 70
One patient, 61 weeks' board, at $8	488 01	7 89	495 90
One patient, 26 weeks' board, at $6	156 00	20 65	176 65
One patient, 52 1-7 weeks' board, at $6	312 85	2 00	314 85
One patient, 3 5-7 weeks' board, at $8	29 71	.....	29 71
One patient, 9 1-7 weeks' board, at $6	54 86	22	55 08
One patient, 26 weeks' board, at $6	156 00	5 09	161 09
One patient, 52 1-7 weeks' board, at $6	312 85	27 15	340 00
One patient, 15 weeks' board, at $6	90 00	50	90 50
One patient, 52 1-7 weeks' board, at $6	312 85	.....	312 85
One patient, 52 1-7 weeks' board, at $5 50	286 99	03	287 02
One patient, 52 1-7 weeks' board, at $6	312 85	17 56	330 41
One patient, 48 4-7 weeks' board, at $6	291 42	13 34	304 76
One patient, 52 1-7 weeks' board, at $15	782 15	91 17	873 32
One patient, 52 1-7 weeks' board, at $6	312 85	5 69	318 54
One patient, 11 5-7 weeks' board, at $6	70 28	2 46	72 74
One patient, 52 1-7 weeks' board, at $6	312 85	7 89	320 74
One patient, 25 6-7 weeks' board, at $6	155 14	5 40	423 40
One patient, 25 6-7 weeks' board, at $10	262 86		
One patient, 21 1-7 weeks' board, at $6	126 86	1 02	127 88
One patient, 52 1-7 weeks' board, at $6	312 85	76 45	389 30
One patient, 19 1-7 weeks' board, at $6	114 86	38 26	153 12
One patient, 52 1-7 weeks' board, at $6	312 85	1 29	314 14
One patient, 67 3-7 weeks' board, at $6	404 56	8 45	413 01
One patient, 52 1-7 weeks' board, at $6	312 85	15 77	328 62
One patient, 15 2-7 weeks' board, at $6	91 72	5 66	97 38
One patient, 52 1-7 weeks' board, at $6	312 85	13 33	326 18
One patient, 12 4-7 weeks' board, at $6	75 42	8 33	83 75
One patient, 52 1-7 weeks' board, at $6	312 85	26 25	339 10
Seven patients, Sailor's Snug Harbor, 365 w'ks' b'd, at $6,	2,190 95	108 02	2,298 97
One patient, 20 1-7 weeks' board, at $6	120 86	15 23	136 09
One patient, 9 6-7 weeks' board, at $6	59 14	70	59 84
One patient, 33 weeks' board, at $6	198 00	71	198 71
One patient, 52 1-7 weeks' board, at $5	260 71	15 65	276 36
One patient, 52 1-7 weeks' board, at $8	417 15	15 07	432 22
One patient, 30 1-7 weeks' board, at $6	180 86	27 77	208 63
One patient, 46 weeks' board, at $6	275 99	29 13	305 12
One patient, 52 1-7 weeks' board, at $7	365 00	7 56	372 56
One patient, 52 1-7 weeks' board, at $4	208 57	18 11	226 68
One patient, 5 5-7 weeks' board, at $6	34 28	3 33	37 61
One patient, 10 6-7 weeks' board, at $8	86 86	26 46	113 32
One patient, 2-7 week's board, at $17 50	5 00	.....	5 00
One patient, 16 1-7 weeks' board, at $6	96 86	80	97 66
One patient, 11 2-7 weeks' board, at $6	67 71	84	68 55
One patient, 71 2-7 weeks' board, at $10	712 86	37 39	750 25
One patient, 52 1-7 weeks' board, at $10	521 43	7 90	529 33
One patient, 63 1-7 weeks' board, at $6	378 85	15 51	394 36
One patient, 3 5-7 weeks' board, at $6	22 28	31	22 59
One patient, 39 4-7 weeks' board, at $6	239 99	15 45	255 44
One patient, 52 1-7 weeks' board, at $6	312 85	9 42	322 27
One patient, 26 2-7 weeks' board, at $6	157 71	23 87	181 58
One patient, 25 6-7 weeks' board, at $7	181 00	18 94	199 94
One patient, 7 weeks' board, at $6	42 00	36 00	78 00
One patient, 26 5-7 weeks' board, at $6	160 28	8 06	168 34
One patient, 19 4-7 weeks' board, at $6	117 42	4 22	121 64
One patient, 58 3-7 weeks' board, at $6	350 56	56 02	406 58
One patient, 52 1-7 weeks' board, at $6	312 85	5 47	318 32
One patient, 16 1-7 weeks' board, at $6	96 86	11 37	108 23
One patient, 15 2-7 weeks' board, at $6	91 71	2 48	94 19
One patient, 8 2-7 weeks' board, at $6	49 71	30	50 01
One patient, 2 2-7 weeks' board, at $6	13 71	3 62	17 33
One patient, 4 2-7 weeks' board, at $6	25 71	5 75	31 46
One patient, 8 weeks' board, at $6	48 00	6 71	54 71
One patient, 3 5-7 weeks' board, at $6	22 28	2 48	24 76
One patient, 35 1-7 weeks' board, at $6	210 85	15 12	225 97
Totals	$51,181 54	$3,624 03	$54,805 57

Number of private patients	219
Number of weeks' board	7,531 2-7
Average price of board per week, excluding clothing and extras	$6 80

TABLE No. 12.

Detailed Statement of Expenditures of the Willard Asylum for the Insane, Willard, N. Y., for the years 1870 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
1870	216	$18,077 15	$83 69	$12,795 16	$59 23	$2,897 57	$13 42	$675 78	$3 13
1871	436	29,142 85	66 84	35,394 60	81 18	3,181 06	7 29	536 83	1 23
1872	564	*32,177 64	57 05	38,542 85	68 33	7,326 60	12 99	.....	.....
1873	727	*42,553 52	58 53	48,038 15	66 07	10,938 60	15 05	.....	.....
1874	827	*46,975 26	56 80	57,188 33	69 15	11,831 95	14 31	1,021 91	1 23
1875	938	*49,787 08	53 07	57,722 86	61 54	9,535 84	10 17	1,283 73	1 37
1876	1,076	*53,401 10	49 63	66,273 75	61 59	11,362 60	10 56	1,774 30	1 65
1877	1,227	60,722 11	49 49	82,137 25	66 94	13,264 28	10 81	2,190 30	1 78
1878	1,340	66,164 10	49 38	72,769 93	54 31	17,280 16	12 89	2,008 30	1 49

TABLE No. 12—(*Continued*).

YEARS.	FUEL AND LIGHT.				ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.
	Fuel.	Light.	Total.	Cost per capita.	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita	
1870	....	.....	$4,362 28	$20 19	$1,057 23	$4 90	$39,865 17	$184 56	.....	.....	.....
1871	.....	.....	9,813 75	22 51	1,910 15	4 38	79,979 24	183 43	.....	.....	.....
1872	†$18,431 17	$1,033 97	19,465 14	34 51	10,028 94	17 79	107,541 17	190 67	.....	.....	.....
1873	16,152 88	1,275 31	17,428 19	23 97	17,657 71	24 29	136,616 17	187 92	$1,736 41	$2 38	$190 30
1874	17,685 50	910 58	18,596 08	22 48	18,047 05	21 82	153,660 58	185 80	422 94	51	186 31
1875	19,775 72	1,231 38	21,007 10	22 39	24,019 23	25 61	163,365 84	174 16	1,167 29	1 24	175 40
1876	19,664 80	1,597 76	21,262 56	19 76	22,606 31	21 01	176,680 62	164 20	4,046 97	3 76	167 96
1877	18,946 51	2,228 32	21,174 83	17 26	22,819 85	18 59	202,308 62	164 87	4,764 74	3 88	168 75
1878	20,105 14	1,180 18	21,285 32	15 88	19,501 05	14 55	199,008 86	148 51	‡17,907 59	13 37	161 88

*Does not include farm wages. †Includes fuel for eighteen months. ‡Includes $7,646.81 ordinary repairs and $10,260.78 improvements.

Table No. 13.

Detailed Statement of Expenditures of the Hudson River State Hospital, Poughkeepsie, N. Y., for the years 1873 *to* 1878, *inclusive, made up from the annual reports to the Legislature and to the State Board of Charities.*

YEARS.	Average number of inmates.	Salaries and Wages.		Provisions and Supplies.		Clothing.		Medical Stores.		Fuel and Light.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost p'r Capita.
1873	171	$34,870 68	$203 92	$22,808 38	$133 32	$4,227 53	$24 72	$2,538 87	$14 85	$13,653 75	$789 04	$14,442 79	$84 46
1874	203	41,362 41	203 75	32,269 23	158 96	3,804 91	18 74	3,094 57	15 24	11,995 56	362 41	12,357 97	60 87
1875	207	31,908 62	154 15	21,590 24	104 30	2,502 16	12 09	960 54	4 64	9,038 80	369 33	9,408 13	45 45
1876	197	29,714 32	150 83	23,657 32	120 09	2,310 29	11 73	1,926 63	9 78	10,417 07	305 08	10,722 15	54 43
1877	219	29,894 69	136 50	25,814 60	117 87	3,736 54	17 06	1,987 91	9 08	6,133 93	255 09	6,389 02	29 17
1878	236	30,139 50	127 71	25,809 22	109 36	3,299 88	13 98	1,869 84	7 93	8,950 64	2,155 82	11,106 46	47 06

Table No. 13—(*Continued*).

YEARS.	All other Ordinary Expenses.		Total ordinary expenses.	Annual cost per capita excluding repairs.	Repairs and Improvements.		Annual cost per capita including repairs.	Construction.	Hospital equipment, furniture, etc.	Interest.	Moneys refunded and advanced to patients.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.							
1873	$4,876 95	$28 52	$83,765 20	$489 85	.....	.....	.....	$51,586 08	.....	.....	$136 37	*$42,688 39	$178,176 04
1874	9,942 76	48 98	102,831 85	506 56	.....	.....	.....	21,631 56	$13,992 16	.....	.....	.....	138,455 57
1875	10,762 71	51 99	77,133 40	372 62	.....	.....	.....	3,724 34	.....	$5,275 48	.....	†2,810 13	88,945 75
1876	10,967 63	55 67	79,298 34	402 53	$3,236 83	$16 43	$418 96	143,977 50	.....	870 63	46 50	.....	227,429 80
1877	11,948 29	54 56	79,771 05	364 24	5,138 77	23 46	387 70	126,060 44	.....	.....	292 07	.....	211,262 33
1878	10,372 77	43 95	82,597 67	349 99	4,455 19	18 88	368 87	65,418 05	.....	1,813 59	300 89	.....	154,585 39

* Amount paid to J. H. Weeks, treasurer, balance due him for payments made prior to November 30, 1872, as per detailed statement rendered to comptroller.
† Amount paid treasurer, balance due him for payments made prior to November 30, 1874, as per detailed statement rendered to comptroller.

TABLE No. 13—(*Continued*).

Detailed Statement of Cost of Maintenance of the Hudson River State Hospital, for the years 1873 *to* 1878, *inclusive, furnished by the Superintendent as the actual expenditure and indebtedness incurred chargeable to each year.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
1873	171	*$48,192 03	$281 82	$28,758 18	$168 18	$3,624 51	$21 19	.....	.....
1874	203	42,909 58	211 38	32,723 54	161 19	3,780 50	18 62	.....	.....
1875	207	26,985 15	130 36	26,398 85	127 53	3,640 78	17 59	.....	.....
1876	197	32,149 73	163 19	28,035 97	142 32	3,409 70	17 31	.....	.....
1877	219	34,181 06	156 08	30,831 00	140 78	3,253 47	14 86	.....	.....
1878	236	31,944 26	135 36	29,285 87	124 09	3,686 30	15 62	.....	.....

TABLE No. 13—(*Continued*).

YEARS.	FUEL AND LIGHT.				ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita exclud'g repairs.	ORDINARY REPAIRS.		Annual cost per capita includ'g ordinary repairs.	Construction.	All other extraordinary expenditures.	Total expenditures.
	Fuel.	Light.	Total.	Cost per capita.	Aggregate cost.	Cost per capita			Aggregate cost.	Cost per capita.				
1873	$13,056 33	$575 78	$13,632 11	$79 72	$2,420 69	$14 16	$96,627 52	$565 07	$1,435 96	$8 39	$573 46	$1,131 64	$16,422 19	$115,617 31
1874	11,776 64	684 50	12,461 14	61 39	2,404 34	11 84	94,279 10	464 42	2,808 34	13 83	478 25	557 47	6,026 99	103,671 90
1875	9,208 53	913 38	10,121 91	48 90	3,132 43	15 13	70,279 12	339 51	1,909 35	9 22	348 73	1,041 11	3,709 67	76,939 25
1876	10,489 47	502 19	10,991 66	55 79	4,152 84	21 18	78,739 90	399 69	1,460 91	7 42	407 11	178,756 56	1,972 46	260,929 83
1877	5,411 58	805 99	6,217 57	28 39	2,868 88	13 09	77,351 98	353 20	2,713 71	12 39	365 59	126,087 60	11,263 80	217,417 09
1878	8,956 79	2,369 97	11,326 76	47 99	2,675 84	11 34	78,919 03	344 40	1,723 57	7 30	351 70	14,099 29	13,072 41	107,814 30

* Includes $12,173.76 wages paid on construction.

Table No. 14.

Detailed Statement of Expenditures of the State Homœopathic Asylum for the Insane, Middletown, N. Y., for the years 1875 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	Salaries and Wages.		Provisions and Supplies.		Clothing.		Medical Stores.		Fuel and Light.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
1875	66	*$16,347 12	$247 68	$13,412 16	$203 21	$678 14	$10 28	$403 32	$6 11	$5,911 41	$89 57
1876	82	*15,916 86	191 11	19,081 09	232 69	1,946 61	22 76	1,203 27	14 67	6,336 34	77 27
1877	109	*16,020 88	146 98	17,137 19	157 22	1,183 92	10 86	‖1,755 70	16 11	6,249 60	57 33
1878	130	18,562 41	142 79	18,118 71	139 37	1,376 46	10 59	‖958 25	7 37	7,146 62	54 97

Table No. 14—(*Continued*).

YEARS	All other Ordinary Expenses.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	Ordinary Repairs.		Annual cost per capita, including ordinary repairs.	Baildings, extraordinary repairs and improvements.	Farm equipment, farm tools, etc.	House furnishing.	Money refunded to patients.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.							
1875	$6,808 82	$103 16	†$43,560 97	$660 01	$122 46	$1 85	$661 86	$108,727 44	$1,4[illegible]4 30	$4,790 58	$216 98	.....	$158,8 2 73
1876	5,359 18	65 34	†49,843 35	607 84	1,869 88	22 80	630 64	70,900 93	1,089 60	14,670 78	481 38	§$1,392 95	140,248 87
1877	3,405 39	31 25	†45,752 68	419 75	1,241 83	11 39	431 14	26,87[illegible] 11	587 50	3,590 50	412 03	§1,197 38	79,657 08
1878	5,088 26	39 14	†51,250 71	394 23	1,055 55	8 12	402 35	15,3[illegible].6 71	.....	2,982 31	.....	466 50	71,071 78

* Does not include farm labor. ‖ Includes books for medical library. † Does not include amount paid for house furnishing. § For legal services.

TABLE No. 15.

Detailed Statement of Expenditures of the Asylum for Insane Criminals, Auburn, N. Y., for the years 1859 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING AND BEDDING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
1859†	27	$4,168 58	$154 39	$3,639 70	$134 80	$1,291 38	$47 83	$587 10	$21 75	$974 49	$36 09
1860	49	5,595 53	114 19	3,990 37	81 43	787 74	16 08	168 53	3 44	1,410 51	28 79
1861	62	5,085 80	82 03	3,442 62	55 52	1,048 27	16 90	44 50	71	1,272 61	19 56
1862	79	4,625 34	58 55	3,459 74	43 79	829,04	10 50	26 12	33	1,493 87	18 91
1863	80	4,302 82	53 78	3,350 21	41 88	1,175 52	14 69	53 68	67	1,794 96	22 43
1864	79	4,424 76	56 01	4,535 01	57 40	‡	‡	56 49	71	1,989 49	25 18
1865	73	4,519 17	61 90	4,791 80	65 64	‡	‡	61 00	83	3,437 64	47 09
1866	70	4,504 05	64 34	4,502 58	64 32	1,240 93	17 73	72 89	1 04	3,176 54	45 38
1867	74	4,850 46	65 54	5,410 30	73 11	1,295 68	17 51	53 70	73	2,356 22	31 84
1868	78	5,109 15	65 50	4,937 94	63 31	1,300 89	16 68	62 24	79	3,375 93	43 28
1869	80	5,107 52	63 84	4,537 60	56 72	1,539 91	19 25	83 10	1 04	814 61	10 18
1870	78	5,704 02	73 13	5,025 36	64 42	1,660 47	21 29	102 75	1 32	3,699 18	47 42
1871	67	6,434 77	96 04	5,239 09	78 19	1,798 36	26 84	107 36	1 60	1,709 29	25 51
1872	84	7,095 15	84 46	5,669 43	67 49	2,365 74	28 16	214 87	2 56	1,933 29	23 02
1873	90	7,143 04	79 37	6,163 48	68 48	1,628 30	18 09	204 42	2 27	2,090 95	23 23
1874	94	7,544 00	80 25	6,440 60	68 51	2,453 89	26 11	171 67	1 83	2,017 56	21 46
1875	108	8,259 75	76 48	9,339 78	86 48	3,137 48	29 05	360 65	3 34	1,505 62	13 94
1876	101	8,223 37	81 42	8,719 02	86 33	2,908 69	28 79	580 28	5 74	4,368 93	43 26
1877	98	9,137 72	93 24	8,555 30	87 29	1,413 79	14 43	393 89	4 02	1,212 42	12 37
1878	114	8,894 75	78 02	7,563 02	66 34	1,421 72	12 48	308 65	2 70	1,890 64	16 58

† Eleven months only. The high scale of expenditure is partly accounted for by the newness of the institution.
‡ Included in "all other ordinary expenses."

Table No. 15—(*Continued*).

Year.	All other Ordinary Expenses.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	Ordinary Repairs.		Total expenditures.	Annual cost per capita, including repairs.	Total expenditures, including amount received from "Utica Account." *	Annual cost per capita including "Utica Account."
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
1859†	$2,835 23	$105 01	$13,496 48	$499 87	$2,890 59	$107 06	$16,387 07	$606 93	.....	.....
1860	2,269 27	46 31	14,221 95	290 24	3,269 63	66 73	17,491 58	356 97	.....	.....
1861	1,598 13	25 77	12,491 93	201 49	1,681 92	27 12	14,173 85	228 61	.....	.....
1862	1,431 14	18 11	11,865 25	150 19	808 76	10 24	12,674 01	160 43	.....	.....
1863	1,066 57	13 33	11,743 76	146 79	292 04	3 65	12,035 80	150 44	.....	.....
1864	2,709 65	34 30	13,715 40	173 61	227 67	2 88	13,943 07	176 49	.....	.....
1865	3,284 57	44 99	16,094 18	220 47	605 00	8 28	16,699 18	228 75	.....	.....
1866	1,589 37	22 71	15,086 36	215 52	850 79	12 15	15,937 15	227 67	.....	.....
1867	1,547 27	20 91	15,513 63	209 64	1,420 31	19 19	16,933 94	228 83	.....	.....
1868	2,031 72	26 05	16,817 87	215 61	1,058 74	13 57	17,876 61	229 18	.....	.....
1869	1,632 11	20 40	13,714 85	171 43	240 07	3 00	13,954 92	174 43	.....	.....
1870	1,984 78	25 45	18,176 36	233 03	900 01	11 54	19,076 37	244 57	$19,879 39	$254 86
1871	1,827 48	29 28	17,116 35	255 47	212 54	3 17	17,328 89	258 64	19,332 66	288 55
1872	1,627 95	19 38	18,906 43	225 07	65 22	78	18,971 65	225 85	21,979 01	261 65
1873	1,421 26	15 79	18,651 45	207 23	262 97	2 93	18,914 42	210 16	21,822 78	242 47
1874	1,532 38	16 30	20,160 10	214 47	17 00	18	20,177 10	214 65	23,140 17	246 17
1875	1,718 68	15 91	24,321 96	225 20	395 62	3 66	24,717 58	228 86	.....	.....
1876	3,504 90	34 70	28,305 19	280 24	1,206 04	11 94	29,511 23	292 18	.....	.....
1877	2,636 75	26 91	23,349 87	238 26	629 50	6 43	23,979 37	244 69	.....	.....
1878	2,620 26	22 99	22,699 04	199 11	328 26	2 88	23,027 30	201 99	.....	.....

* The actual expenditures for the years 1870 to 1874, inclusive, and the per capita based upon them, are placed in additional columns and include the amounts received from the so-called "Utica Account." The amounts paid out of the "Utica Account" were not included in the annual reports made by Dr. Wilkie, Superintendent, though forming a part of the current expenditures.

Table No. 16.

Detailed Statement of Expenditures of the State Lunatic Hospital, Northampton, Mass., for the years 1860 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	Salaries and Wages		Provisions and Supplies.		Clothing.		Medical Stores.		Fuel and Light.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1860*	259	$9,303 57	$35 92	$27,247 10	$105 20	.....	.....	.....	.....	.....	.....	.....	.....
1861	314	11,250 41	35 83	14,850 00	47 28	$1,333 84	$4 25	.....	.....	$5,513 85	$2,087 34	$7,602 19	$24 21
1862	319	13,589 55	42 60	17,233 32	54 02	3,293 18	10 32	.....	.....	7,615 38	2,740 20	10,355 58	32 46
1863	359	12,003 57	33 43	19,056 36	53 08	3,278 29	9 13	.....	.....	4,480 25	2,083 65	6,563 90	18 29
1864	358	12,049 14	33 66	24,948 22	69 69	5,928 33	16 56	.....	.....	8,153 85	2,198 42	10,352 27	28 92
1865	342	13,783 07	40 30	23,894 68	69 87	3,545 83	10 37	.....	.....	†17,493 08	1,784 25	19,277 33	56 36
1866	376	14,495 59	38 54	26,987 15	71 77	3,545 65	9 43	.....	.....	9,283 26	1,134 31	10,417 57	27 71
1867	401	15,273 85	38 09	34,005 91	84 81	4,435 74	11 06	.....	.....	11,559 92	1,124 85	12,684 77	31 63
1868	413	15,184 17	36 76	35,602 03	86 20	5,417 73	13 12	.....	.....	10,000 18	1,085 51	11,085 69	26 84
1869	405	16,879 18	41 68	29,432 76	72 67	4,186 29	10 34	.....	.....	8,460 99	1,169 22	9,630 21	23 78
1870	409	18,479 26	45 18	28,502 80	69 69	3,949 41	9 66	.....	.....	9,024 48	840 10	9,864 58	24 12
1871	422	19,083 37	45 22	29,031 98	68 79	3,962 23	9 39	.....	.....	8,661 77	1,080 45	9,742 22	23 09
1872	429	21,024 06	49 01	28,295 48	65 96	3,619 20	8 43	.....	.....	6,694 34	999 52	7,693 86	17 93
1873	437	23,318 59	53 36	30,279 29	69 28	4,993 56	11 43	.....	.....	9,397 49	1,071 43	10,468 92	23 95
1874	469	24,714 59	52 71	28,848 83	61 51	5,344 12	11 39	.....	.....	8,325 80	1,222 37	9,548 17	20 36
1875	475	24,425 95	51 42	29,973 69	63 10	4,365 98	9 19	$1,636 78	$3 44	8,335 53	1,157 82	9,493 35	19 99
1876	474	25,862 72	54 56	29,033 82	61 25	4,385 81	9 25	1,618 70	3 41	4,774 65	1,182 46	5,957 11	12 57
1877	476	25,880 77	54 37	28,262 80	59 37	3,564 52	7 49	1,858 42	3 90	7,936 34	1,112 61	9,048 95	19 01
1878	442	25,857 03	58 50	25,493 40	57 68	3,910 24	8 85	1,283 71	2 90	2,281 31	1,124 34	3,405 65	7 71

* This being the second year the expenditures were necessarily larger than for subsequent similar periods.
† Includes about $5,000 for fuel consumed previous year.

TABLE No. 16—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	REPAIRS AND IMPROVEMENTS.		Annual cost per capita excluding repairs.	Buildings and extraordinary repairs.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
1860*	$8,734 92	$33 72	$45,285 59	$174 84	$1,105 13	$4 27	$179 11	.....	.....	$46,390 72
1861	8,465 64	26 97	43,502 08	138 54	1,219 51	3 88	142 42	$3,694 67	$534 39	49,950 65
1862	9,670 71	30 32	54,142 34	169 72	2,543 97	7 97	177 69	.....	2,370 88	59,057 19
1863	9,463 22	26 36	50,365 34	140 29	2,554 32	7 11	147 40	.....	2,038 97	54,958 63
1864	9,840 68	27 48	63,118 64	176 31	3,544 17	9 90	186 21	.....	6,384 25	73,047 06
1865	10,643 11	31 12	71,144 02	208 02	2,846 63	8 32	216 34	.....	6,529 46	80,520 11
1866	11,488 23	30 55	66,934 19	178 02	3,677 44	9 78	187 80	.....	.....	70,611 33
1867	12,616 53	31 46	79,016 80	197 05	6,632 69	16 54	213 59	.....	.....	85,649 76
1868	16,754 61	40 57	84,044 23	203 49	8,096 30	19 60	223 09	.....	.....	92,140 53
1869	13,365 61	33 00	73,494 05	181 47	13,694 99	33 81	215 28	.....	†3,200 00	90,389 04
1870	12,185 49	29 79	72,981 54	178 44	11,794 68	28 84	207 28	.....	.....	84,776 22
1871	14,620 38	34 65	76,440 18	181 14	10,579 46	25 07	206 21	.....	.....	87,019 64
1872	16,824 29	39 22	77,456 89	180 55	18,144 09	42 29	222 84	.....	.....	95,600 98
1873	16,712 16	38 25	85,772 52	196 27	11,979 16	27 41	223 68	....	.....	97,751 68
1874	16,178 69	34 49	84,634 40	180 46	10,720 13	22 85	203 31	.....	†2,704 00	98,058 53
1875	12,366 87	26 03	82,262 62	173 18	8,214 59	17 29	190 47	5,579 00	†5,202 32	101,258 53
1876	12,340 84	26 04	79,199 00	167 08	10,250 67	21 62	188 70	.....	†6,000 00	95,449 67
1877	10,562 04	22 19	79,177 50	166 34	8,277 33	17 39	183 73	6,203 62	†3,915 00	97,573 45
1878	10,740 29	24 29	70,690 32	159 93	5,306 56	12 01	171 94	7,550 63	†1,400 00	84,947 51

* This being the second year the expenditures were necessarily larger than for subsequent similar periods.
† For real estate.

NOTE.—Prior to 1875 medical stores were included in "provisions and supplies," and for the year 1860 clothing and fuel and light were also included under the same head.

TABLE No. 17.

Detailed Statement of Expenditures of Hospitals for the Insane in the United States for the year 1860.

NAME OF INSTITUTION.	Average numb'r of inmates	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
Verm't Asylum for the Insane, Brattleboro	†463	$12,396 22	$28 63	$31,519 64	$72 79	.....	.....	$692 11	$1 59	.....	.....
State Lunatic Hospital, Taunton, Mass....	365	10,248 59	28 08	22,453 02	61 52	.....	.....	.....	.....	$4,665 88	$12 78
Maine Insane Hospital, Augusta..	236	6,798 72	28 80	15,704 47	66 55	$2,054 76	$8 71	372 26	1 58	3,530 89	14 96
Central Ohio Lunatic Asylum, Columbus	247	12,681 84	51 34	12,454 47	50 42	.....	.....	697 14	2 82	7,110 50	28 79
Southern Ohio Lunatic Asylum, Dayton..	†157	8,616 69	54 89	8,811 60	56 12	.....	.....	193 51	1 23	2,588 95	16 49
Illinois Cen. Hos. for Insane, Jacksonv'lle*	230	24,300 47	52 82	26,809 27	58 28	8,696 86	18 91	749 30	1 63	6,375 21	13 86
State Lunatic Hospt'l, Northampton, Mass	259	9,303 57	35 92	27,247 10	105 20	....	.....	.....	.....	.....	.....
State Lunatic Asylum, Utica, N. Y.....	516	26,798 45	51 93	38,782 93	75 16	8,519 45	16 51	2,096 59	4 06	6,010 07	11 65
Northern Ohio Lunatic Asylum, Newb'rgh	†136	9,861 98	72 51	9,537 61	70 13	....	.....	369 69	2 72	4,156 38	30 56
Gov't Hospital for the Insane, Washington	150	11,515 33	76 77	13,022 45	86 82	490 31	3 27	302 18	2 01	2,257 10	15 05
Asylum for Insane Criminals, Auburn....	49	5,595 53	114 19	3,990 37	81 43	787 74	16 08	168 53	3 44	1,410 51	28 79

No. 17—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excludi'g repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenses.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita				
Verm't Asylum for the Insane, Brattleboro	$6,828 96	$15 77	$51,436 93	$118 79	$6,372 75	$14 71	$133 50	.....	.....	$57,809 68
State Lunatic Hospital, Taunton, Mass ...	10,286 40	28 18	47,653 89	130 56	5,114 41	14 01	144 57	.....	.....	52,768 30
Maine Insane Hospital, Augusta	2,745 11	11 63	31,206 21	132 23	3,578 85	15 16	147 39	.....	.....	34,785 06
Central Ohio Lunatic Asylum, Columbus..	4,950 03	20 04	37,893 98	153 41	1,437 34	5 82	159 23	.....	$103 11	39,434 43
Southern Ohio Lunatic Asylum, Dayton...	3,959 87	25 22	24,170 62	153 95	2,076 82	13 23	167 18	.....	84 02	26,331 46
Illinois Cen. Hos. for Insane, Jacksonville*	9,993 26	21 73	76,929 37	167 24	13,238 06	28 79	196 03	.....	.....	90,167 43
State Lunatic Hospital, Northampton, Mass	8,734 92	33 72	45,285 59	174 84	1,105 13	4 27	179 11	.....	.....	46,390 72
State Lunatic Asylum, Utica, N. Y.....	13,745 66	26 64	95,953 15	185 95	6,588 55	12 77	198 72	$268 58	3,323 74	106,134 02
Northern Ohio Lunatic Asylum, Newburgh	3,820 90	28 09	27,746 56	204 01	2,058 38	15 14	219 15	.....	224 30	30,029 24
Gov't Hospital for the Insane, Washington	4,521 88	30 14	32,109 25	214 06	466 91	3 11	217 17	.....	185 00	32,761 16
Asylum for Insane Criminals, Auburn.....	2,269 27	46 31	14,221 95	290,24	3,269 63	66 73	356 97	.....	.....	17,491 58

*Biennial report: the aggregates given are for two years.

† Average number estimated from tables given in reports.

NOTE.—Where the items of clothing, medical stores or fuel and light are omitted in the table, they are included under the head of "supplies," or "all other ordinary expenses."

TABLE No. 18.

Detailed Statement of Expenditures of Hospitals for the Insane in the United States for the year 1865.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
Vt. Asylum for the Insane, Brattleboro.	†468	$13,833 30	$29 56	$40,734 21	$87 04	.....	.....	$644 56	$1 38	.....	.....
New York City Lunatic Asylum.....	695	13,313 00	19 15	50,229 72	72 27	‡$13,077 40	$18 82	1,698 26	2 44	$3,417 43	$4 96
Asylum for the Insane, Stockton, Cal..	616	30,798 74	49 99	39,248 64	63 72	5,261 74	8 54	1,703 43	2 77	4,194 83	6 80
State Lunatic Hospital, Taunton, Mass	353	12,360 08	35 01	30,341 14	85 95	4,486 28	12 71	814 54	2 31	8,055 25	22 82
Maine Insane Asylum, Augusta	272	8,582 74	31 55	28,195 60	103 66	3,449 17	12 69	618 05	2 27	6,819 39	25 07
State Lun. Hos., Northampton, Mass. ..	342	13,783 07	40 30	23,894 68	69 87	3,545 83	10 37	.....	.....	§19,277 33	56 36
State Lunatic Hospital, Worcester, Mass.	350	15,306 89	43 73	31,896 11	91 13	1,683 19	4 81	684 30	1 95	12,412 55	35 47
Asylum for Insane Crim's, Auburn, N.Y.	73	4,519 17	61 90	4,791 80	65 64	.....	.....	61 00	83	3,437 64	47 09
State Lunatic Asylum, Harrisburgh, Pa.	†293	14,505 18	49 49	26,426 42	90 19	2,405 54	8 21	670 31	2 29	10,563 55	36 05
Lunatic Asylum, Boston, Massachusetts	177	7,971 74	45 04	17,992 99	101 65	‡5,273 81	29 79	1,452 74	8 21	3,872 24	21 87
Central Ohio Lunatic Asylum, Columbus	271	17,458 82	64 42	26,877 21	99 18	.....	.....	1,463 33	5 40	8,561 11	31 59
State Lunatic Asylum, Utica, New York.	591	33,075 50	55 96	64,022 24	108 33	10,792 80	18 26	4,267 76	7 23	15,039 01	25 45
Wis. State Hos. for the Insane, Mendota.	†173	12,297 41	71 08	10,550 87	60 99	1,567 59	9 06	370 33	2 14	12,773 87	73 84
Southern Ohio Lunatic Asylum, Dayton.	165	10,870 15	65 88	19,933 13	120 81	.....	.....	485 34	2 94	10,003 75	60 63
Northern Ohio Lun. Asylum, Newburgh.	†136	11,517 63	84 69	17,113 45	125 84	.....	.....	941 62	6 92	9,234 83	67 90

† Average number estimated from tables given in reports. ‡ Includes bedding. § Includes about $5,000 for fuel consumed previous year.

NOTE.—Where the items of clothing, medical stores or fuel and light are omitted, they are either included under the head of "supplies," or "all other ordinary expenses.

TABLE No. 18—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annal cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
Vt. Asylum for the Insane, Brattleboro...	$7,439 84	$15 89	$62,651 91	$133 87	$4,706 46	$10 05	$143 92	.....	.....	$67,358 37
New York City Lunatic Asylum.....	11,915 88	17 15	93,681 68	134 79	11,685 53	16 81	151 60	$4,702 28	.....	110,069 49
Asylum for the Insane, Stockton, Cal. ...	8,348 69	29 79	99,556 07	161 61	3,652 01	5 93	167 54	....	.....	103,208 08
State Lunatic Hospital, Taunton, Mass...	6,722 27	19 04	62,779 56	177 84	4,654 62	13 18	191 02	....	.....	67,434 18
Maine Insane Asylum, Augusta.....	2,538 50	9 33	50,203 45	184 57	1,328 29	4 90	189 47	.....	.....	51,531 74
State Lunatic Hos., Northampton, Mass..	10,643 11	31 12	71,144 02	208 02	2,846 63	8 32	216 34	.....	$6,529 46	80,520 11
State Lunatic Hospital, Worcester, Mass.	13,818 66	39 48	75,801 70	216 57	1,367 96	3 91	220 48	.....	.....	77,169 66
Asylum for Insane Crim's, Auburn, N. Y.	3,284 57	44 99	16,094 18	220 47	605 00	8 28	228 75	.....	.....	16,699 18
State Lunatic Asylum, Harrisburgh, Pa...	10,972 21	37 45	65,543 21	223 69	1,661 13	5 67	229 36	636 26	275 33	68,115 93
Lunatic Asylum, Boston, Massachusetts ..	5,905 37	33 37	42,468 89	239 93	1,411 39	7 97	247 90	.....	.....	43,880 28
Central Ohio Lunatic Asylum, Columbus..	13,109 40	48 37	67,469 87	248 96	4,703 18	17 35	266 31	.....	.....	72,173 05
State Lunatic Asylum, Utica, New York.	20,521 80	34 72	147 719 11	249 94	10,021 13	16 96	266 96	.....	187 51	157,927 75
Wis. State Hos. for the Insane, Mendota..	8,203 23	47 42	45,763 30	264 53	2,784 71	16 09	280 62	.....	.....	48,548 01
Southern Ohio Lunatic Asylum, Dayton..	7,208 62	43 69	48,500 99	293 95	3,222 18	19 53	313 48	.....	.....	51,723 17
Northern Ohio Lun. Asylum, Newburgh..	12,358 62	90 87	51,166 15	376 22	4,859 76	35 73	411 95	.....	.....	56,025 91

TABLE No. 19.

Detailed Statement of Expenditures of Hospitals for the Insane in the United States and elsewhere for the year 1875.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
New York City Lunatic Asylum (females)	1,355	$17,159 37	$12 66	$51,912 68	$38 31	*$11,246 20	$8 30	$1,456 18	$1 08	$8,767 36	$6 47
New York City Asylum for the Insane (males)	638	15,194 91	23 82	33,070 35	51 83	*5,509 56	8 43	1,101 75	1 73	15,716 54	24 63
West Virginia Hospital for the Insane, Weston	350	14,645 56	41 84	21,802 04	62 29	2,744 62	7 84	941 95	2 69	.....	.....
Asylum for the Insane, Toronto, Province of Ontario,	650	22,276 64	34 27	31,675 12	48 73	*4,541 89	6 99	2,155 85	3 32	15,996 66	24 61
Asylum for the Insane, London, Province of Ontario,	624	20,806 25	33 35	31,457 49	50 41	*7,162 73	11 48	2,266 96	3 63	10,115 00	16 21
Hospital for the Insane, Dayton, Ohio	578	24,489 57	42 37	39,854 92	68 96	6,350 26	10 99	808 13	1 39	7,706 61	13 33
Minnesota Hospital for the Insane, St. Peters	413	27,049 81	65 49	18,857 50	45 66	5,059 56	12 25	548 79	1 33	10,486 71	25 39
State Lunatic Hospital, Northampton, Mass	475	24,425 95	51 42	29,973 69	63 10	4,365 98	9 19	1,636 78	3 44	9,493 35	19 99
Willard Asylum for the Insane, Willard, N. Y.	938	†49,787 08	53 07	57,722 86	61 54	9,535 84	10 17	1,283 73	1 37	21,007 10	22 39
State Lunatic Hospital, Taunton, Mass	557	23,766 95	42 67	46,360 91	83 23	7,048 03	12 65	1,435 13	2 58	9,813 19	17 62
Northern Ohio Hospital for the Insane, Newburgh	376	22,058 75	58 67	26,643 22	70 86	949 24	2 52	1,098 62	2 92	10,181 76	27 08
Eastern Kentucky Lunatic Asylum, Lexington	546	25,033 33	45 85	53,402 28	97 81	7,033 15	12 88	2,133 26	3 90	8,346 40	15 29
Maine Insane Hospital, Augusta	398	14,140 72	35 52	38,295 02	96 22	4,880 01	12 26	1,210 48	3 04	9,337 46	23 46
North Western Hospital for the Insane, Toledo, Ohio,	100	7,007 03	70 07	7,598 04	75 98	1,292 89	12 93	321 98	3 22	2,468 32	24 68
State Lunatic Hospital, Worcester, Mass	487	40,841 59	83 86	33,533 41	68 86	5,923 93	12 17	1,147 88	2 36	10,007 51	20 55
Asylum for Insane Criminals, Auburn, N. Y.	108	8,259 75	76 48	9,339 78	86 48	*3,137 48	29 05	360 65	3 34	1,505 62	13 94
State Hospital for the Insane, Danville, Pa	246	15,372 21	62 49	17,738 18	72 11	3,124 84	12 70	849 36	3 45	6,524 11	26 52
Western Penn. Hospital for the Insane, Dixmont,	482	37,684 25	78 19	37,531 57	77 86	10,422 67	21 62	2,750 62	5 71	11,226 32	23 29
Connecticut Hospital for the Insane, Middletown	426	30,109 51	70 68	35,223 66	82 68	6,783 56	15 92	1,273 65	2 99	14,448 40	33 92
Wisconsin State Hospital for the Insane, Mendota	364	25,413 19	69 81	27,231 88	74 81	5,409 07	14 86	1,493 97	4 11	14,464 55	39 74
State Lunatic Asylum, Harrisburg, Pa	398	58,122 76	70 66	41,326 35	103 83	5,450 84	13 69	728 09	1 83	10,607 00	26 65
New Hampshire Asylum for the Insane, Concord	275	22,176 56	80 64	26,948 66	97 99	.....	.....	777 83	2 83	11,018 37	40 07
Michigan Asylum for the Insane, Kalamazoo	539	49,118 90	91 15	40,106 30	74 40	12,533 41	23 25	2,815 02	5 22	31,310 49	58 09
Lunatic Asylum, Boston, Mass	204	15,843 82	77 66	22,051 37	108 09	*1,527 51	7 49	2,178 38	10 67	6,016 68	29 49
State Lunatic Asylum, Utica, N. Y.	595	57,471 87	96 59	70,302 18	118 15	8,646 20	14 53	6,353 43	10 67	17,749 06	29 83
Northern Hospital for the Insane, Oshkosh, Wis.	257	23,743 44	92 39	29,052 39	113 05	4,323 04	16 82	1,666 49	6 48	16,493 25	64 18
Hudson River Hospital, Poughkeepsie, N. Y.	207	31,908 62	154 15	21,590 24	104 30	2,502 16	12 09	960 54	3 64	9,408 13	45 45
State Homœopathic Asylum for the Insane, Middletown, N. Y.	66	†16,347 12	247 68	13,412 16	203 21	678 14	10 28	403 32	6 11	5,911 41	89 59

* Includes bedding.

† Does not include farm wages.

TABLE No. 19—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita				
New York City Lunatic Asylum (females)	$8,568 05	$6 32	$99,109 84	$73 14	.....	.....	.....	$17,577 96	.....	$116,687 80
New York City Asylum for the Insane (males)	7,443 19	11 67	78,036 30	122 31	.....	.....	.....	.....	.....	78,036 30
West Virginia Hospital for the Insane, Weston	3,064 31	8 76	43,198 48	123 42	$386 19	$1 10	$124 52	.....	$45 11	43,629 78
Asylum for the Insane, Toronto, Province of Ontario	4,727 29	7 27	81,373 45	125 19	2,752 28	4 24	129 43	.....	.....	84,125 73
Asylum for the Insane, London, Province of Ontario	8,178 45	13 10	79,986 88	128 18	2,233 74	3 58	131 76	.....	.....	82,220 62
Hospital for the Insane, Dayton, Ohio	11,203 90	19 38	90,413 39	156 42	4,789 91	8 29	164 71	4,811 61	.....	100,014 81
Minnesota Hospital for the Insane, St. Peters	9,410 96	22 79	71,413 33	172 91	2,757 42	6 68	179 59	2,472 74	169 03	76,812 52
State Lunatic Hospital, Northampton, Mass	12,366 87	26 03	82,262 62	173 18	8,214 59	17 29	190 47	5,579 00	5,202 32	101,258 53
Willard Asylum for the Insane, Willard, N. Y	24,019 23	25 61	163,365 84	174 16	1,167 29	1 24	175 40	113,351 72	.....	277,884 85
State Lunatic Hospital, Taunton, Mass	11,645 88	20 91	100,070 09	179 66	6,438 23	11 56	191 22	.....	.....	106,508 32
Northern Ohio Hospital for the Insane, Newburgh	9,656 04	25 68	70,587 63	187 73	6,083 82	16 18	203 91	.....	.....	76,671 45
Eastern Kentucky Lunatic Asylum, Lexington	14,435 85	26 44	110,384 27	202 17	8,586 95	15 73	217 90	.....	3,186 11	122,157 33
Maine Insane Hospital, Augusta	12,832 10	32 24	80,695 79	202 73	10,575 90	26 57	229 30	.....	143 12	91,414 81
North Western Hospital for the Insane, Toledo, Ohio	1,867 03	18 67	20,555 29	205 55	5,189 98	51 89	257 44	.....	600 00	26,345 27
State Lunatic Hospital, Worcester, Mass	11,847 92	24 32	103,302 24	212 12	3,761 13	7 72	219 84	.....	882 51	107,945 88
Asylum for Insane Criminals, Auburn, N. Y	1,718 68	15 91	24,321 96	225 20	395 62	3 66	228 86	.....	.....	24,717 58
State Hospital for the Insane, Danville, Pa	13,562 24	55 13	57,170 94	232 40	193 43	78	233 18	.....	.....	57,364 37
Western Pennsylvania Hospital for the Insane, Dixmont	13,525 92	28 06	113,141 35	234 73	2,203 76	4 57	239 30	.....	.....	115,345 11
Connecticut Hospital for the Insane, Middletown	13,443 48	31 56	101,282 26	237 75	.....	.....	.....	16,410 40	940 67	118,633 33
Wisconsin State Hospital for the Insane, Mendota	14,720 30	40 44	88,732 96	243 77	11,848 92	32 55	276 32	31,382 57	921 30	132,885 75
State Lunatic Asylum, Harrisburg, Pa	12,175 65	30 59	98,410 69	247 26	10,131 77	25 46	272 72	.....	.....	108,542 46
New Hampshire Asylum for the Insane, Concord	12,911 05	46 95	73,832 47	268 48	8,215 83	29 87	298 35	.....	708 01	82,756 31
Michigan Asylum for the Insane, Kalamazoo	14,196 18	26 33	150,080 30	278 44	4,612 38	8 56	287 00	.....	665 94	155,358 62
Lunatic Asylum, Boston, Mass	9,895 56	48 51	57,513 32	281 91	7,113 39	34 87	316 78	.....	.....	64,626 71
State Lunatic Asylum, Utica, N. Y	27,775 75	46 68	188,298 49	316 47	*27,108 77	45 56	362 03	.....	.....	215,407 26
Northern Hospital for the Insane, Oshkosh, Wis	7,516 32	29 24	82,794 93	322 16	6,327 05	24 62	346 78	15,701 93	.....	104,823 91
Hudson River State Hospital, Poughkeepsie, N. Y	10,762 71	51 99	77,133 40	372 62	.....	.....	.....	3,724 34	8,085 61	88,943 75
State Homœopathic Asylum for the Insane, Middletown, N. Y	6,808 82	103 16	43,560 97	660 01	122 46	1 85	661 86	114,952 32	216 98	158,852 73

* For additions, alterations and repairs.

TABLE No. 20.

Detailed Statement of Expenditures of Hospitals for the Insane in the United States and elsewhere for the year 1876.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per captta.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
New York City Lunatic Asylum (females)	1,320	$18,154 82	$13 75	$61,445 69	$46 55	§$12,312 26	$9 33	$1,355 33	$1 03	‖$9,670 35	$7 33
New York City Asylum for the Insane (males)	654	17,325 99	26 49	38,535 00	58 92	§6,622 30	10 13	698 64	1 07	‖7,729 86	11 82
West Virginia Hospital for the Insane, Weston	385	15,378 49	39 94	25,740 97	66 86	2,003 70	5 21	868 85	2 25	.....	.....
Asylum for the Insane, Toronto, Province of Ontario	617	22,346 75	36 21	30,616 48	49 62	§6,215 68	10 07	1,758 65	2 85	10,915 16	17 69
Asylum for the Insane, London, Province of Ontario	627	21,497 31	34 28	30,960 53	49 38	§7,495 78	11 95	2,607 10	4 16	12,914 73	20 59
Asylum for the Insane, Stockton, California	1,306	72,906 38	55 82	62,742 43	48 04	11,725 08	8 98	3,692 01	2 83	21,029 43	16 10
Nova Scotia Hospital for the Insane, Halifax	331	13,727 58	41 47	19,343 61	58 44	.....	.....	265 33	80	6,316 38	19 17
Alabama Insane Hospital, Tuscaloosa	36	12,789 21	35 23	21,199 16	58 39	9,000 36	24 79	356 67	98	1,426 00	3 93
Vermont Asylum for the Insane, Brattleboro*	477	35,938 00	37 67	95,608 12	100 22	.....	.....	1,955 82	2 05	.....	.....
Hospital for the Insane, Dayton, Ohio	596	24,957 32	41 88	49,605 65	83 23	4,856 27	8 15	1,487 90	2 49	9,090 50	15 25
Minnesota Hospital for the Insane, St. Peters	486	21,519 63	44 28	30,511 12	62 78	5,475 72	11 26	631 97	1 30	9,943 53	20 46
State Lunatic Hospital, Taunton, Mass	664	27,716 31	41 74	47,649 40	71 76	7,571 25	11 40	1,328 56	2 00	7,879 11	11 86
Willard Asylum for the Insane, Willard, New York	1,076	‡53,401 10	49 63	66,273 75	61 59	11,362 60	10 56	1,774 30	1 65	21,262 56	19 76
Northern Ohio Lunatic Asylum, Newburgh	540	26,536 36	49 14	38,587 16	71 46	1,538 77	2 85	1,998 74	3 70	9,636 70	17 85
State Lunatic Hospital, Northampton, Mass.	474	25,862 72	54 56	29,033 82	61 25	4,385 81	9 25	1,618 70	3 41	5,957 11	12 57
County Insane Asylum, St. Louis, Mo.	325	20,805 34	64 01	24,111 37	74 19	1,996 43	6 14	1,878 84	5 78	4,442 73	13 67
Virginia Western Lunatic Asylum, Staunton	†358	19,667 41	54 94	25,150 83	70 25	1,893 07	5 29	982 85	2 75	5,066 13	14 15
Tennessee Hospital for the Insane, Nashville*	386	44,913 53	58 17	57,494 80	74 47	16,645 17	21 55	1,963 31	2 55	15,043 79	19 48
Iowa Hospital for the Insane, Mt. Pleasant	581	38,428 09	66 14	32,425 82	55 81	6,078 49	10 47	2,833 34	4 88	13,589 92	23 38
State Lunatic Hospital, Worcester, Mass	500	34,810 62	69 62	35,428 24	70 86	5,595 29	11 19	848 62	1 69	9,780 34	19 56
Maine Insane Hospital, Augusta	398	19,437 75	48 84	32,572 73	81 84	4,919 33	12 36	598 10	1 50	9,298 21	23 36
Kansas State Insane Asylum, Osawatomie	170	13,796 58	81 16	9,727 20	57 22	2,612 97	11 84	659 78	3 88	4,278 58	25 17

* Biennial report, the aggregates given are for two years. †Average number estimated from tables given in report. ‡ Does not include farm wages.
§ Includes bedding. ‖ For fuel only.

TABLE No. 20—(*Continued*).

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
Illinois Central Hospital for the Insane, Jacksonville	467	$30,625 57	$65 58	$30,138 88	$64 54	†$12,608 08	$26 99	$1,921 26	$4 11	$7,166 35	$15 35
Northern Hospital for the Insane, Oshkosh, Wis.	399	26,790 50	67 14	29,435 31	73 77	3,493 41	8 76	1,787 93	4 48	9,743 52	24 42
North Western Hospital for the Insane, Toledo, Ohio	100	7,745 75	77 46	7,937 05	79 37	.....	.....	543 01	5 43	1,845 62	18 46
Connecticut Hospital for the Insane, Middletown	453	31,497 57	69 55	40,312 41	88 99	4,609 21	10 17	1,677 07	3 70	16,306 76	35 99
Western Pennsylvania Hospital for the Insane, Dixmont	500	30,057 75	60 11	40,668 37	81 34	9,354 97	18 71	2,141 25	4 28	9,424 47	18 85
Illinois Northern Hospital for the Insane, Elgin	460	33,540 00	72 91	27,447 84	59 67	†10,645 07	23 14	3,563 92	7 75	16,527 19	35 93
State Lunatic Asylum, Harrisburg, Pa.	417	27,362 59	65 62	37,456 61	89 82	6,122 22	14 68	1,556 57	3 73	9,800 12	23 50
State Hospital for the Insane, Danville, Pa.	277	17,444 55	62 98	20,711 24	74 77	2,514 37	9 08	910 21	3 28	12,085 63	43 63
Michigan Asylum for the Insane, Kalamazoo	594	55,410 12	93 28	39,351 20	66 25	7,974 05	13 43	3,166 55	5 33	29,904 30	50 33
Asylum for the Insane, Hamilton, Province of Ontario	83	6,212 64	74 85	4,785 37	57 66	†2,782 20	33 52	431 13	5 19	1,755 66	21 15
Illinois Southern Hospital for the Insane, Anna	204	17,264 14	84 62	16,358 95	80 19	†2,284 84	11 20	1,363 06	6 68	3,554 67	17 43
Lunatic Hospital, Boston, Mass.	207	15,908 95	76 85	20,721 57	100 10	†1,694 14	8 19	2,481 80	11 99	5,772 67	27 89
New Hampshire Asylum for the Insane, Concord	260	23,075 22	88 75	22,148 08	85 19	.....	.....	1,023 91	3 94	11,177 64	42 99
Asylum for Insane Criminals, Auburn, N.Y.	101	8,223 37	81 42	8,719 02	86 33	†2,908 69	28 79	580 28	5 74	4,368 93	43 26
Wisconsin State Hospital for the Insane, Mendota	334	31,301 88	93 72	25,228 93	75 53	6,905 92	20 68	1,064 40	3 19	15,318 29	45 86
State Lunatic Asylum, Utica, N. Y.	615	58,535 96	95 18	70,621 33	114 83	9,544 39	15 52	7,183 42	11 68	16,119 96	26 21
Hudson River State Hospital, Poughkeepsie, N. Y.	197	29,714 32	150 83	23,657 32	120 09	2,310 29	11 73	1,926 63	9 78	10,722 15	54 43
State Homœpathic Asylum for the Insane, Middletown, N. Y.	82	*15,916 86	194 11	19,081 09	232 69	1,946 61	22 76	1,203 27	14 67	6,336 34	77 27

* Does not include farm wages.

† Includes bedding.

TABLE No. 20—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
New York City Lunatic Asylum (females)	$9,443 49	$7 15	$112,381 94	$85 14	....	.....	.....	.....	.....	$112,381 94
New York City Asylum for the Insane (males)	8,121 01	12 42	79,032 80	120 85	.....	.....	.....	.....	.....	79,032 80
West Virginia Hospital for the Insane, Weston	3,733 77	9 69	47,725 78	123 96	$72 60	$0 19	$124 15	.....	....	47,798 38
Asylum for the Insane, Toronto, Province of Ontario	7,361 01	11 93	79,213 73	128 38	3,168 51	5 13	133 51	.....	.....	82,382 24
Asylum for the Insane, London, Province of Ontario	8,132 82	12 97	83,608 27	133 34	2,246 50	3 58	136 92	.....	.....	85,854 77
Asylum for the Insane, Stockton, California	21,623 23	16 56	193,718 56	148 33	7,198 39	5 51	153 84	.....	.....	200,916 95
Nova Scotia Hospital for the Insane, Halifax	9,611 31	29 04	49,294 21	148 93	5,600 89	16 92	165 85	.....	$871 00	55,766 10
Alabama Insane Hospital, Tuscaloosa	10,551 47	29 07	55,322 87	152 40	8,887 84	24 48	176 88	.....	.....	64,210 71
Vermont Asylum for the Insane, Brattleboro*	13,895 29	14 56	147,397 23	154 50	10,004 89	10 49	164 99	$17,313 54	5,868 40	180,584 06
Hospital for the Insane, Dayton, Ohio	5,341 02	8 96	95,338 06	159 96	4,937 28	8 28	168 24	10,504 18	.....	110,780 12
Minnesota Hospital for the Insane, St Peters	10,386 62	21 37	78,468 59	161 45	740 51	1 52	162 97	16,281 82	211 40	95,702 32
State Lunatic Hospital, Taunton, Mass	15,639 82	23 56	107,784 45	162 32	†21,567 01	32 48	194 80	.....	.....	129,351 46
Willard Asylum for the Insane, Willard, N. Y	22,606 31	21 01	176,680 62	164 20	4,046 97	3 76	167 96	94,365 45	.....	275,093 04
Northern Ohio Lunatic Asylum, Newburgh	10,932 94	20 24	89,230 67	165 24	3,416 18	6 69	171 93	.....	.....	92,646 85
State Lunatic Hospital, Northampton, Mass	12,340 84	26 04	79,199 00	167 08	10,250 67	21 62	188 70	.....	6,000 00	95,419 67
County Insane Asylum, St. Louis, Mo	1,405 09	4 33	54,639 80	168 12	1,012 52	3 12	171 24	.....	.....	55,652 32
Virginia Western Lunatic Asylum, Staunton	9,234 09	25 79	61,994 38	173 17	2,417 38	6 75	179 92	.....	.....	64,411 76
Tennessee Hospital for the Insane, Nashville*	11,560 31	14 98	147,620 91	191 21	6,327 31	16 39	207 60	.....	5,414 99	159,363 21
Iowa Hospital for the Insane, Mt. Pleasant	18,327 78	31 54	111,683 42	192 22	12,025 26	20 69	212 91	.....	.....	123,708 70
State Lunatic Hospital, Worcester, Mass	11,084 04	22 17	97,547 25	195 09	3,428 78	6 86	201 15	.....	506 97	101,482 90
Maine Insane Hospital, Augusta	11,965 97	30 07	78,792 00	197 97	5,112 32	12 84	210 81	12,399 55	323 64	96,627 60
Kansas State Insane Asylum, Osawatomie	3,531 41	20 77	34,006 52	200 04	930 11	5 47	205 51	4,565 21	....	39,501 84
Illinois Central Hospital for the Insane, Jacksonville	13,934 43	29 84	96,394 57	206 41	11,750 92	25 16	231 57	.....	1,103 41	109,248 90
Northern Hospital for the Insane, Oshkosh, Wis	13,425 94	33 65	84,676 61	212 22	8,762 81	21 96	234 18	4,184 03	.....	97,623 45
North Western Hospital for the Insane, Toledo, O.	3,426 97	34 27	21,498 40	214 99	3,371 94	33 72	248 71	.....	.....	24,870 34
Connecticut Hospital for the Insane, Middletown	5,076 19	11 20	99,479 21	219 60	.....	.....	.....	24,082 22	1,198 25	124,759 68
Western Pennsylvania Hospital for the Insane, Dixmont	20,816 13	41 63	112,462 94	224 92	2,805 37	5 61	230 53	6,010 36	.....	121,278 67
Illinois Northern Hospital for the Insane, Elgin	15,471 90	33 63	107,195 92	233 03	4,553 41	9 89	242 92	578 07	.....	112,327 40
State Lunatic Asylum, Harrisburg, Pa	16,081 80	38 57	98,380 01	235 92	3,108 48	7 45	243 37	11,178 14	.....	112,666 63
State Hospital for the Insane, Danville, Pa	13,881 79	50 11	67,547 79	243 85	518 90	1 87	245 72	.....	.....	68,066 69
Michigan Asylum for the Insane, Kalamazoo	9,794 68	16 49	145,600 90	245 12	4,159 16	7 00	252 12	.....	729 32	150,489 38
Asylum for the Insane, Hamilton, Province of Ontario	4,444 09	53 54	20,411 09	245 91	537 47	6 47	252 38	.....	.....	20,948 56

* Biennial report, the aggregates given are for two years.

† For construction and repairs.

TABLE No. 20—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita			Aggregate cost.	Cost per capita.				
Illinois Southern Hospital for the Insane, Anna ..	$9,503 27	$46 59	$50,328 93	$246 71	$682 75	$3 34	$250 05	.....	.....	$51,011 68
Lunatic Hospital, Boston, Mass.....	6,995 36	33 79	53,574 49	258 81	5,816 61	28 09	286 90	.....	.....	59,391 10
New Hampshire Asylum for the Insane, Concord.	12,926 81	49 71	70,351 66	270 58	7,677 60	29 53	300 11	.....	$4,619 49	82,648 75
Asylum for Insane Criminals, Auburn, N. Y.....	3,504 90	34 70	28,305 19	280 24	1,206 04	11 94	292 18	.....	.....	29,511 23
Wisconsin State Hospital for the Insane, Mendota	19,959 45	59 76	99,778 87	298 74	6,919 62	20 72	319 46	$23,735 74	.....	130,434 23
State Lunatic Asylum, Utica, N. Y.....	29,793 35	48 44	191,798 41	311 87	*37,422 44	60 85	372 72	....	222 18	229,443 03
Hudson River State Hospital, Poughkeepsie, N.Y.	10,967 63	55 67	79,298 34	402 53	3,236 83	16 43	418 96	143,977 50	917 13	227,429 80
State Homœopathic Asylum for the Insane, Middletown, N. Y.....	5,359 18	65 34	49,843 35	607 84	1,869 88	22 80	630 64	86,661 31	1,874 33	140,248 87

* For additions, alterations and repairs.

TABLE NO. 21.

Detailed Statement of Expenditures of 44 *Hospitals for the Insane, in the United States and elsewhere, for the year* 1877.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita	Aggregate cost	Cost per capita.
New York City Lunatic Asylum (females)....	1,400	$18,393 30	$13 14	$63,261 84	$45 18	†$11,017 08	$7 87	$1,421 13	$1 01	$7,289 99	$5 21
New York City Asylum for the Insane (males),	702	16,284 71	23 19	41,945 18	59 75	†7,817 74	11 14	1,153 22	1 64	8,836 89	12 59
Insane Asylum of Louisiana, Jackson	189	9,276 16	49 08	10,724 30	56 74	2,276 45	12 05	605 96	3 20	.....	.....
Asylum for the Insane, Toronto, Province of Ontario	651	22,897 13	35 17	34,592 75	53 14	†3,889 67	5 98	1,287 42	1 98	15,132 30	23 24
Asylum for the Insane, London, Province of Ontario	604	22,314 50	36 94	32,928 35	54 52	†7,919 27	13 11	1,667 80	2 76	10,143 25	16 79
Nova Scotia Hospital for the Insane, Halifax,	347	14,003 42	40 35	20,341 78	58 62	4,702 93	13 55	384 45	1 11	5,268 09	15 18
Asylum for the Insane, Stockton, California..	1,203	71,402 97	59 35	55,878 77	46 45	9,501 75	7 89	2,936 94	2 44	19,049 97	15 84
Alabama Insane Asylum, Tuscaloosa.....	371	12,980 92	34 99	20,049 07	54 04	10,571 31	28 49	341 41	92	1,575 00	4 24
Virginia Western Lunatic Asylum, Staunton,	*360	19,779 02	54 94	19,905 42	55 29	1,711 07	4 75	1,204 88	3 34	4,511 87	12 53
Asylum for the Insane, Hamilton, Province of Ontario	199	10,176 07	51 14	12,088 03	60 74	†1,181 95	5 94	413 97	2 08	4,295 92	21 59
State Lunatic Asylum, Jackson, Mississippi..	350	16,191 57	46 26	19,739 68	56 39	3,752 16	10 72	811 84	2 32	3,919 11	11 19
Longview Asylum, Carthage, Ohio.....	625	33,045 13	52 87	42,521 57	68 03	3,202 55	5 12	1,469 65	2 35	7,989 25	12 62
Hospital for the Insane, Dayton Ohio.....	571	25,610 73	44 85	43,875 09	76 84	1,316 71	2 31	1,393 27	2 44	8,926 23	15 63
State Lunatic Hospital, Taunton, Mass.....	727	28,215 16	38 81	52,127 06	71 70	7,915 73	10 89	2,062 51	2 83	14,640 26	20 14
Willard Asylum for the Insane, Willard, N. Y.,	1,227	60,722 11	49 49	82,137 25	66 94	13,264 28	10 81	2,190 30	1 78	21,174 83	17 26
State Lunatic Hospital, Northampton, Mass.,	476	25,880 77	54 37	28,262 80	59 37	3,564 52	7 49	1,858 42	3 90	9,048 95	19 01
Cleveland Hospital for the Insane, Newburgh, Ohio...	577	27,982 64	48 49	32,122 14	55 67	978 95	1 70	1,876 90	3 25	11,467 08	19 87
Western Kentucky Lunatic Asylum, Hopkinsville	*340	18,932 71	55 68	25,382 64	74 65	4,633 77	13 63	709 81	2 08	5,226 73	15 37
Minnesota Hospital for the Insane, St. P. ters,	563	24,935 07	44 29	36,093 01	64 10	7,330 63	13 02	629 35	1 12	18,982 73	33 72
Hospital for the Insane, Athens, Ohio	661	30,080 81	45 51	53,902 69	81 54	5,096 18	7 71	.....	.....	11,795 54	17 84
Eastern Kentucky Lunatic Asylum, Lexingt'n,	559	24,342 60	43 55	43,278 22	77 42	8,947 13	16 01	2,598 21	4 65	12,412 43	22 20
Central Insane Hospital, Jacksonville, Ill....	487	30,604 69	62 84	30,962 67	63 58	†8,464 74	17 38	1,741 72	3 57	6,182 17	12 69
State Lunatic Hospital, Worcester, Mass	506	35,424 20	70 00	33,639 82	66 48	5,358 41	10 59	832 36	1 64	11,499 41	22 73
Government Hospital for the Insane, Washington.....	770	47,883 39	62 19	78,344 58	101 74	10,013 48	13 01	1,162 36	1 51	8,119 90	10 55
Northern Hosptl. for the Insane, Oshkosh, Wis.	542	32,266 29	59 53	39,028 27	72 00	4,768 10	8 79	3,511 89	6 48	14,342 14	26 46
Maine Insane Hospital, Augusta.....	411	20,494 74	49 86	33,649 24	81 87	4,135 41	10 06	642 62	1 56	8,659 31	21 07
State Hospital for the Insane, Danville, Pa...	312	19,206 56	61 56	22,997 66	73 71	3,516 00	11 27	1,034 60	3 31	4,932 29	15 81

* Average number estimated from tables given in reports.

† Includes bedding.

TABLE NO. 21—(*Continued*).

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
State Lunatic Asylum, Harrisburg, Pa	434	$27,653 02	$63 71	$32,278 82	$74 38	$6,200 25	$14 29	$1,398 08	$3 22	$8,171 84	$18 83
North Western Hospital for the Insane, Toledo, Ohio	105	7,719 84	73 52	9,056 36	86 25	396 90	3 78	563 07	5 36	1,917 94	18 26
Northern Insane Hospital, Elgin, Ill	464	31,447 04	67 77	31,076 21	66 97	†7,346 67	15 84	2,361 39	5 09	13,403 02	28 88
Western Pennsylvania Hospital, Dixmont	512	29,748 43	58 10	49,600 23	96 87	12,425 71	24 27	2,220 86	4 34	7,624 58	14 89
Connecticut Hospital for the Insane, Middletown	463	34,986 17	75 56	37,013 82	79 95	7,012 12	15 15	1,418 90	3 06	8,108 75	17 51
Texas State Lunatic Asylum, Austin	*214	15,280 14	71 40	26,569 19	124 15	1,176 29	5 49	500 00	2 34	2,256 37	10 55
Southern Insane Asylum, Anna, Ill	247	18,523 20	74 95	20,174 51	81 69	†4,136 46	16 75	1,895 18	7 68	4,701 70	19 04
Maryland Hospital for the Insane, Catonsville,	215	18,687 54	76 28	18,967 77	77 42	1,119 36	4 57	1,365 56	5 57	8,974 84	36 63
Asylum for Insane Criminals, Auburn, N Y.,	98	9,137 72	93 24	8,555 30	87 29	†1,413 79	14 43	393 89	4 02	1,212 42	12 37
Wisconsin State Hospital for the Insane, Mendota	370	28,628 52	77 38	24,610 54	66 52	5,810 51	15 70	1,106 33	2 99	16,733 54	45 22
Hospital for the Insane, Lincoln, Nebraska	93	10,906 35	117 27	7,999 51	86 01	998 29	10 73	597 15	6 42	2,999 22	32 25
Lunatic Asylum, Boston, Mass	197	14,983 82	76 06	20,950 86	106 35	†2,875 97	14 59	1,978 80	10 04	5,527 48	28 06
New Jersey State Lunatic Asylum, Trenton	*491	38,355 16	78 12	44,235 49	90 09	5,571 44	11 35	1,673 74	3 41	12,410 95	25 27
New Hampshire Hospital for the Insane, Concord	274	22,029 41	80 39	21,059 31	76 87	6,702 94	24 46	914 18	3 33	15,155 37	55 32
State Lunatic Asylum, Utica, N. Y	608	56,918 92	93 62	64,377 81	105 88	9,476 47	15 59	4,711 91	7 75	13,397 24	22 03
Hudson River State Hospital, Poughkeepsie, N. Y	219	29,894 69	136 50	25,814 60	117 87	3,736 54	17 06	1,987 91	9 08	6,389 02	29 17
State Homœopathic Asylum, Middletown, N. Y.	109	16,020 88	146 98	17,137 19	157 22	1,183 92	10 86	1,755 70	16 11	6,249 60	57 33

* Average number estimated from tables given in reports.

† Includes bedding.

TABLE No. 21—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
New York City Lunatic Asylum (females)	$7,931 19	$5 67	$109,314 53	$78 08	.....	.....	.....	.....	.....	$109,314 53
New York City Asylum for the Insane (males)	8,542 04	12 17	84,579 78	120 48	....	.....	.....	.....	.....	84,579 78
Insane Asylum of Louisiana, Jackson	1,116 62	5 91	23,999 49	126 98	....	.....	... .	.....	.....	23,999 49
Asylum for the Insane, Toronto, Province of Ontario	5,727 09	8 79	83,526 36	128 30	$3,315 29	$5 09	$133 39	.....	.....	86,841 65
Asylum for the Insane, London, Province of Ontario	7,704 42	12 72	82,677 59	136 84	2,031 06	3 36	140 20	.....	.....	85,708 65
Nova Scotia Hospital for the Insane, Halifax	4,039 25	11 65	48,739 92	140 46	4,792 51	13 81	154 27	.....	$649 99	54,182 42
Asylum for the Insane, Stockton, California	17,055 20	14 18	175,825 60	146 15	5,102 05	4 24	150 39	.....	268 50	181,196 15
Alabama Insane Asylum, Tuscaloosa	10,383 13	27 30	55,900 84	150 68	*7,686 32	20 72	171 40	$6,000 00	.....	69,587 16
Virginia Western Lunatic Asylum, Staunton	7,714 42	21 43	54,826 68	152 29	2,476 65	6 88	159 17	.....	.....	57,303 33
Asylum for the Insane, Hamilton, Province of Ontario	3,859 43	19 39	32,015 37	160 88	824 69	4 14	165 02	.....	.....	32,840 06
State Lunatic Asylum, Jackson, Mississippi	12,057 85	34 45	56,472 21	161 34	2,185 74	6 24	167 58	250 00	.....	58,907 95
Longview Asylum, Carthage, Ohio	12,623 28	20 19	100,851 43	161 37	1,878 66	3 00	164 37	.....	1,142 25	103,872 34
Hospital for the Insane, Dayton, Ohio	11,309 19	19 81	92,431 22	161 88	2,350 20	4 12	166 00	16,826 89	.....	111,608 31
State Lunatic Hospital, Taunton, Mass	13,401 61	18 44	118,362 33	162 81	†23,332 54	32 09	194 90	... .	.....	141,694 87
Willard Asylum for the Insane, Willard, N. Y	22,819 85	18 59	202,308 62	164 87	4,764 74	3 88	168 75	124,138 63	.....	331,211 99
State Lunatic Hospital, Northampton, Mass	10,562 04	22 19	79,177 50	166 34	8,277 33	17 39	183 72	6,203 62	3,915 00	97,573 45
Cleveland Hospital for the Insane, Newburgh, Ohio	23,869 78	41 37	98,297 49	170 35	3,949 98	6 84	177 19	.....	471 06	102,718 53
Western Kentucky Lunatic Asylum, Hopkinsville,	5,114 11	15 05	59,999 77	176 46	2,326 38	6 84	183 30	.....	.....	62,326 15
Minnesota Hospital for the Insane, St. Peters	12,117 36	44 29	100,088 15	177 77	1,593 79	2 83	180 60	7,934 49	518 98	110,135 41
Hospital for the Insane, Athens, Ohio	16,798 05	25 41	117,633 27	178 01	1,508 84	2 28	180 29	15,917 12	329 95	135,419 18
Eastern Kentucky Lunatic Asylum, Lexington	9,186 31	16 43	100,764 90	180 26	5,373 44	9 61	189 87	.....	5,146 61	111,284 95
Central Insane Hospital, Jacksonville, Ill	12,393 00	25 45	90,348 99	185 52	15,724 43	32 29	217 81	18,270 70	.....	124,344 12
State Lunatic Hospital, Worcester, Mass.	11,596 71	22 92	98,350 94	194 37	3,196 69	6 31	200 68	.....	986 35	102,533 98
Government Hospital for the Insane, Washington,	10,547 36	13 69	156,071 07	202 69	8,430 71	10 95	213 64	.....	1,773 20	166,274 98
Northern Hospital for the Insane, Oshkosh, Wis	17,812 80	32 86	111,708 49	206 11	5,862 58	10 81	216 92	4,988 05	....	112,559 12
Maine Insane Hospital, Augusta	18,108 96	44 06	85,690 28	208 49	4,503 33	10 96	319 45	6,926 05	228 95	97,348 61
State Hospital for the Insane, Danville, Pa	13,885 57	44 51	65,572 68	210 17	2,514 36	8 06	218 23	2,262 18	2,307 61	72,656 83
State Lunatic Asylum, Harrisburg, Pa	17,143 07	39 50	92,845 08	213 93	7,654 20	17 66	231 59	18,664 02	479 27	119,652 57
North Western Hospital for the Insane, Toledo, Ohio	3,109 10	29 61	22,763 21	216 79	1,074 04	10 23	227 02	.....	.....	23,837 25
Northern Insane Hospital, Elgin, Ill	16,036 70	34 57	101,671 03	219 12	13,593 66	29 29	248 41	19,491 58	.....	134,756 27
Western Pennsylvania Hospital, Dixmont	11,165 79	21 81	112,785 60	220 28	1,905 55	43 91	264 19	25,637 55	3,361 00	143,689 70

* For building and repairing.

† For construction and repairs.

TABLE No. 21—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
Connecticut Hospital for the Insane, Middletown,	$16,210 10	$35 01	$104,749 86	$226 24	$6.528 34	$14 10	$240 34	$3,653 59	$1,089 59	$116,021 38
Texas State Lunatic Asylum, Austin	2,727 98	12 75	48,509 97	226 68	3,434 84	16 05	242 73	1,556 00	406 60	53,907 41
Southern Insane Asylum, Anna, Ill	8,513 72	34 47	57,944 77	234 59	5,494 40	22 24	256 83	3,318 57	.....	66,757 74
Maryland Hospital for the Insane, Catonsville	8,497 06	34 68	57,612 13	235 15	2,661 31	10 86	246 01	.....	493 44	60,766 88
Asylum for Insane Criminals, Auburn, N. Y	2,636 75	26 91	23,349 87	238 26	629 50	6 43	244 69	.....	.....	23,979 37
Wisconsin State Hospital for the Insane, Mendota,	13,683 52	36 98	90,572 96	244 79	4,180 91	11 29	256 08	.....	.....	94,753 87
Hospital for the Insane, Lincoln, Nebraska	749 85	8 07	24,250 39	260 75	249 91	2 68	263 43	.....	.....	24,500 30
Lunatic Asylum, Boston, Mass	5,561 69	28 23	51,878 62	263 33	5,269 67	26 75	290 08	.....	.....	57,148 29
New Jersey State Lunatic Asylum, Trenton	27,507 37	56 02	129,754 15	264 26	9,071 39	18 47	282 73	4,895 92	728 76	144,450 22
New Hampshire Hospital for the Insane, Concord,	7,001 25	25 55	72,862 46	265 92	8,796 82	32 10	298 02	.....	2,070 38	83,729 66
State Lunatic Asylum, Utica, N. Y	23,768 98	39 09	172,651 33	283 96	*47,771 81	78 57	362 53	.....	154 36	220,577 50
Hudson River State Hospital, Poughkeepsie, N. Y.,	11,948 29	54 56	79,771 05	364 24	5,138 77	23 46	387 70	126,060 44	292 07	211,262 33
State Homœopathic Asylum, Middletown, N. Y	3,405 39	31 25	45,752 68	419 75	1,241 88	11 39	431 14	26,875 11	5,787 41	79,657 08

* For additions, alterations and repairs.

Average number of patients under treatment in the 34 State hospitals in above table		15,273
Total ordinary expenses, excluding repairs, incurred in maintaining said 34 hospitals		$3,002,872 78
Average annual cost per capita for maintaining each patient, excluding repairs		196 61
Average number of patients under treatment in the Government Hospital at Washington, and the nine county, municipal and foreign hospitals in above table		5,600
Total ordinary expenses, excluding repairs, incurred in maintaining said 10 hospitals		772,417 88
Average annual cost per capita for maintaining each patient, excluding repairs		137 93

TABLE No. 22.

Detailed Statement of Expenditures of Hospitals for the Insane in the United States and elsewhere, for the different years named.

LOCATION.	Names.	Years.	Aver'ge number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
				Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggr'te cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.
Connecticut, Middletown,	Hospital for the Insane	1875	426	$30,109 51	$70 68	$35,223 66	$82 68	$6,783 56	$15 92	$1,273 65	$2 99	$14,448 40	$33 92
Connecticut, Middletown,	Hospital for the Insane	1876	453	31,497 57	69 55	40,312 41	88 99	4,669 21	10 17	1,677 07	3 70	16,306 76	35 99
Connecticut, Middletown,	Hospital for the Insane	1877	463	34,986 17	75 56	37,013 82	79 95	7,012 12	15 15	1,418 90	3 06	8,108 75	17 51
Illinois, Jacksonville	Central Insane Hospital	*1860	230	24,300 47	52 82	26,809 27	58 28	8,696 86	18 91	749 30	1 63	6,375 21	13 86
Illinois, Jacksonville	Central Insane Hospital	1876	467	30,625 57	65 58	30,138 88	64 54	†12,608 08	26 99	1,921 26	4 11	7,166 35	15 35
Illinois, Jacksonville	Central Insane Hospital	1877	487	30,604 69	62 84	30,962 67	63 58	†8,464 74	17 38	1,741 72	3 57	6,182 17	12 69
Illinois, Jacksonville	Central Insane Hospital	1878	496	32,212 59	64 94	31,200 93	62 91	†9,792 07	19 74	2,356 97	4 75	6,675 47	13 46
Illinois, Elgin	Northern Insane Hospital	1876	460	33,540 00	72 91	27,447 84	59 67	†10,645 07	23 14	3,563 92	7 75	16,527 19	35 93
Illinois, Elgin	Northern Insane Hospital	1877	464	31,447 04	67 77	31,076 21	66 97	†7,346 67	15 84	2,361 39	5 09	13,403 02	28 88
Illinois, Elgin	Northern Insane Hospital	1878	498	34,095 04	68 46	30,153 18	60 55	†6,405 60	12 86	1,560 40	3 14	10,553 16	21 19
Illinois, Anna	Southern Insane Hospital	1876	204	17,264 14	84 62	16,358 95	80 19	†2,284 84	11 20	1,363 06	6 68	3,554 07	17 43
Illinois, Anna	Southern Insane Hospital	1877	247	18,523 20	74 95	20,174 51	81 69	†4,136 46	16 75	1,895 18	7 68	4,701 70	19 04
Illinois, Anna	Southern Insane Hospital	1878	394	27,206 75	69 05	26,802 13	68 03	†8,081 42	20 51	2,930 24	7 44	4,149 20	10 53
Massach'ts, Northampton,	State Lunatic Hospital	1860	259	9,303 57	35 92	27,247 10	105 20	.....	.....	.....	.....	.....	.....
Massach'ts, Northampton,	State Lunatic Hospital	1865	342	13,783 07	40 30	23,894 68	69 87	3,545 83	10 37	.....	.....	‡19,277 33	56 36
Massach'ts, Northampton,	State Lunatic Hospital	1875	475	24,425 95	51 42	29,973 69	63 10	4,365 98	9 19	1,636 78	3 44	9,493 35	19 99
Massach'ts, Northampton,	State Lunatic Hospital	1876	474	25,862 72	54 56	29,033 82	61 25	4,385 81	9 25	1,618 70	3 41	5,957 11	12 57
Massach'ts, Northampton,	State Lunatic Hospital	1877	476	25,880 77	54 37	28,262 80	59 37	3,564 52	7 49	1,858 42	3 90	9,048 95	19 01
Massach'ts, Northampton,	State Lunatic Hospital	1878	442	25,857 03	58 50	25,493 40	57 68	3,910 24	8 85	1,283 71	2 90	3,405 65	7 71
Massachusetts, Taunton	State Lunatic Hospital	1860	365	10,248 59	28 08	22,453 02	61 52	.....	.....	.....	.....	4,665 88	12 78
Massachusetts, Taunton	State Lunatic Hospital	1865	353	12,360 08	35 01	30,341 14	85 95	4,486 28	12 71	814 54	2 31	8,055 25	22 82
Massachusetts, Taunton	State Lunatic Hospital	1875	557	23,766 95	42 67	46,360 91	83 23	7,048 03	12 65	1,435 13	2 58	9,813 19	17 62
Massachusetts, Taunton	State Lunatic Hospital	1876	664	27,716 31	41 74	47,649 40	71 76	7,571 25	11 40	1,328 56	2 00	7,879 11	11 86
Massachusetts, Taunton	State Lunatic Hospital	1877	727	28,215 16	38 81	52,127 06	71 70	7,915 73	10 89	2,062 51	2 83	14,640 26	20 14
Massachusetts, Taunton	State Lunatic Hospital	1878	613	29,692 59	48 44	49,409 77	80 60	8,559 12	13 96	2,137 33	3 49	8,087 92	13 19
Massachusetts, Worcester,	State Lunatic Hospital	1865	350	15,306 89	43 73	31,896 11	91 13	1,683 19	4 81	684 30	1 95	12,412 55	35 47
Massachusetts, Worcester,	State Lunatic Hospital	1875	487	40,841 59	83 86	33,533 41	68 86	5,923 93	12 17	1,147 88	2 36	10,007 51	20 55
Massachusetts, Worcester,	State Lunatic Hospital	1876	500	34,810 62	69 62	35,428 24	70 86	5,595 29	11 19	848 62	1 69	9,780 34	19 56
Massachusetts, Worcester,	State Lunatic Hospital	1877	506	35,424 20	70 00	33,639 82	66 48	5,358 44	10 59	832 36	1 64	11,499 41	22 73
Massachusetts, Worcester,	State Lunatic Hospital	1878	496	33,762 01	68 07	35,948 46	72 48	5,616 14	11 32	962 74	1 94	11,401 12	22 98
Massachusetts, Boston	Lunatic Asylum	1865	177	7,971 74	45 04	17,992 99	101 65	†5,273 81	29 79	1,452 74	8 21	3,872 24	21 87
Massachusetts, Boston	Lunatic Asylum	1875	204	15,843 82	77 66	22,051 37	108 09	†1,527 51	7 49	2,178 38	10 67	6,016 68	29 49
Massachusetts, Boston	Lunatic Asylum	1876	207	15,908 95	76 85	20,721 57	100 10	†1,694 14	8 19	2,481 80	11 99	5,772 67	27 89
Massachusetts, Boston	Lunatic Asylum	1877	197	14,983 82	76 06	20,950 86	106 35	2,875 97	14 59	1,978 80	10 04	5,527 48	28 0

* Biennial report; the aggregates given are for two years.

† Includes bedding.

‡ Includes about $5,000 for fuel consumed previous year.

TABLE No. 22—(*Continued*).

LOCATION.	Names.	Years.	Aver'ge number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
				Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggr'te cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.
Maine, Augusta	Maine Insane Hospital	1860	236	$6,798 72	$28 80	$15,704 47	$66 55	$2,054 76	$8 71	$372 26	$1 58	$3,530 89	$14 96
Maine, Augusta	Maine Insane Hospital	1865	272	8,582 74	31 55	28,195 60	103 66	3,449 17	12 69	618 05	2 27	6,819 39	25 07
Maine, Augusta	Maine Insane Hospital	1875	398	14,140 72	35 52	38,295 02	96 22	4,880 01	12 26	1,210 48	3 04	9,337 46	23 46
Maine, Augusta	Maine Insane Hospital	1876	398	19,437 75	48 84	32,572 73	81 84	4,919 33	12 36	598 10	1 50	9,298 21	23 36
Maine, Augusta	Maine Insane Hospital	1877	411	20,494 74	49 86	33,649 24	81 87	4,135 41	10 06	642 62	1 56	8,659 31	21 07
Minnesota, St. Peters	Hospital for the Insane	1875	413	27,049 81	65 49	18,857 50	45 66	5,059 56	12 25	548 79	1 33	10,486 71	25 39
Minnesota, St. Peters	Hospital for the Insane	1876	486	21,519 63	44 28	30,511 12	62 78	5,475 72	11 26	631 97	1 30	9,943 53	20 46
Minnesota, St. Peters	Hospital for the Insane	1877	563	24,935 07	44 29	36,093 01	64 10	7,330 63	13 02	629 35	1 12	18,982 73	33 72
Ohio, Newburgh	Cleveland Hosp. for the Insane,	1860	†136	9,861 98	72 51	9,537 61	70 13	.....	.....	369 69	2 72	4,156 38	30 56
Ohio, Newburgh	Cleveland Hosp. for the Insane,	1865	†136	11,517 63	84 69	17,113 45	125 84	.....	.....	941 62	6 92	9,234 83	67 90
Ohio, Newburgh	Cleveland Hosp. for the Insane,	1875	376	22,058 75	58 67	26,643 22	70 86	949 24	2 52	1,098 62	2 92	10,181 76	27 08
Ohio, Newburgh	Cleveland Hosp. for the Insane,	1876	540	26,536 36	49 14	38,587 16	71 46	1,538 77	2 85	1,998 74	3 70	9,636 70	17 85
Ohio, Newburgh	Cleveland Hosp. for the Insane,	1877	577	27,982 64	48 49	32,122 14	55 67	978 95	1 70	1,876 90	3 25	11,467 08	19 87
Ohio, Dayton	Hospital for the Insane	1860	†157	8,616 69	54 89	8,811 60	56 12	.....	.....	193 51	1 23	2,588 95	16 49
Ohio, Dayton	Hospital for the Insane	1865	165	10,870 15	65 88	19,933 13	120 81	.....	.....	485 34	2 94	10,003 75	60 63
Ohio, Dayton	Hospital for the Insane	1875	578	24,489 57	42 37	39,854 92	68 96	6,350 26	10 99	808 13	1 39	7,706 61	13 33
Ohio, Dayton	Hospital for the Insane	1876	596	24,957 32	41 88	49,605 65	83 23	4,856 27	8 15	1,487 90	2 49	9,090 50	15 25
Ohio, Dayton	Hospital for the Insane	1877	571	25,610 73	44 85	43,875 09	76 84	1,316 71	2 31	1,393 27	2 44	8,926 23	15 63
Ohio, Toledo	Hospital for the Insane	1875	100	7,007 03	70 07	7,598 04	75 98	1,292 89	12 93	321 98	3 22	2,468 32	24 68
Ohio, Toledo	Hospital for the Insane	1876	100	7,745 75	77 46	7,937 05	79 37	.....	.....	543 01	5 43	1,845 62	18 46
Ohio, Toledo	Hospital for the Insane	1877	105	7,719 84	73 52	9,056 36	86 25	396 90	3 78	563 07	5 36	1,917 94	18 26
Pennsylvania, Harrisburg,	State Lunatic Asylum	1865	†293	14,505 18	49 49	26,426 42	90 19	2,405 54	8 21	670 31	2 29	10,563 55	36 05
Pennsylvania, Harrisburg,	State Lunatic Asylum	1875	398	28,122 76	70 66	41,326 35	103 83	5,450 84	13 69	728 09	1 83	10,607 00	26 65
Pennsylvania, Harrisburg,	State Lunatic Asylum	1876	417	27,362 59	65 62	37,456 61	89 82	6,122 22	14 68	1,556 57	3 73	9,800 12	23 50
Pennsylvania, Harrisburg,	State Lunatic Asylum	1877	434	27,653 02	63 71	32,278 82	74 38	6,200 25	14 29	1,398 08	3 22	8,171 84	18 83
Pennsylvania, Danville	State Hospital for the Insane	1875	246	15,372 21	62 49	17,738 18	72 11	3,124 84	12 70	849 36	3 45	6,524 11	26 52
Pennsylvania, Danville	State Hospital for the Insane	1876	277	17,445 55	62 98	20,711 24	74 77	2,514 37	9 08	910 21	3 28	12,085 63	43 63
Pennsylvania, Danville	State Hospital for the Insane	1877	312	19,206 56	61 56	22,997 66	73 71	3,516 00	11 27	1,034 60	3 31	4,932 29	15 81
Prov. of Ontario, Toronto,	Asylum for the Insane	1875	650	22,276 64	34 27	31,675 12	48 73	$4,541 89	6 99	2,155 85	3 32	15,996 66	24 61
Prov. of Ontario, Toronto,	Asylum for the Insane	1876	617	22,346 75	36 21	30,616 48	49 62	$6,215 68	10 07	1,758 65	2 85	10,915 16	17 69
Prov. of Ontario, Toronto,	Asylum for the Insane	1877	651	22,897 13	35 17	34,592 75	53 14	$3,889 67	5 98	1,287 42	1 98	15,132 30	23 24
Prov. of Ontario, Toronto,	Asylum for the Insane	1878	666	23,367 77	35 09	31,987 95	48 03	$5,105 00	7 66	1,576 05	2 36	8,600 76	12 92
Prov. of Ontario, London,	Asylum for the Insane	1875	624	20,806 25	33 35	31,457 49	50 41	$7,162 73	11 48	2,266 96	3 63	10,115 00	16 21
Prov. of Ontario, London,	Asylum for the Insane	1876	627	21,497 31	34 28	30,960 33	49 38	$7,495 78	11 95	2,607 10	4 16	12,914 73	20 59
Prov. of Ontario, London,	Asylum for the Insane	1877	604	22,314 50	36 94	32,928 35	54 52	$7,919 27	13 11	1,667 80	2 76	10,143 25	16 79
Prov. of Ontario, London,	Asylum for the Insane	1878	652	23,759 56	36 44	31,960 37	49 02	$6,992 92	10 72	2,006 11	3 08	13,038 16	19 99
Wisconsin, Mendota	State Hospital for the Insane	1865	†173	12,297 41	71 08	10,550 87	60 99	1,567 59	9 06	370 32	2 14	12,773 87	73 84
Wisconsin, Mendota	State Hospital for the Insane	1875	364	25,413 19	69 81	27,231 88	74 81	5,409 07	14 86	1,493 97	4 11	14,464 55	39 74

Wisconsin, Mendota	State Hospital for the Insane	1876	334	31,301	88	93	72	25,228	93	75	53	6,905	92	20	68	1,064	40	3	19	15,318 29	45 86
Wisconsin, Mendota	State Hospital for the Insane	1877	370	28,628	52	77	38	24,610	54	66	52	5,810	51	15	70	1,106	33	2	99	16,733 54	45 22
Wisconsin, Oshkosh	Northern Hosp. for the Insane,	1875	257	23,743	44	92	39	29,052	39	113	05	4,323	04	16	82	1,666	49	6	48	16,493 25	64 18
Wisconsin, Oshkosh	Northern Hosp. for the Insane,	1876	399	26,790	50	67	14	29,435	31	73	77	3,493	41	8	76	1,787	93	4	48	9,743 52	24 42
Wisconsin, Oshkosh	Northern Hosp. for the Insane,	1877	542	32,266	29	59	53	39,028	27	72	00	4,768	10	8	79	3,511	89	6	48	14,342 14	26 46
Vermont, Brattleboro	Asylum for the Insane	1860	433	12,396	22	28	63	31,519	64	72	79	.....		.....		692	11	1	59	.....	.....
Vermont, Brattleboro	Asylum for the Insane	1865	†468	13,833	30	29	56	40,734	21	87	04	.....		.....		644	56	1	38	.....	.....
Vermont, Brattleboro	Asylum for the Insane	*1876	477	35,938	00	37	67	95,608	12	100	22	.....		.....		1,955	82	2	05	.....	.....
Vermont, Brattleboro	Asylum for the Insane	*1878	472	35,634	36	37	75	68,586	81	72	65	.....		.....		1,915	82	2	03	5,177 10	5 48
New York, Utica	State Lunatic Asylum	1860	516	26,798	45	51	93	38,782	93	75	16	8,519	45	16	51	2,096	59	4	06	6,010 07	11 65
New York, Utica	State Lunatic Asylum	1865	591	33,075	50	55	96	64,022	24	108	33	10,792	80	18	26	4,267	76	7	23	15,039 01	25 45
New York, Utica	State Lunatic Asylum	1875	595	57,471	87	96	59	70,302	18	118	15	8,646	20	14	53	6,353	43	10	67	17,749 06	29 83
New York, Utica	State Lunatic Asylum	1876	615	58,535	96	95	18	70,621	33	114	83	9,544	39	15	52	7,183	42	11	68	16,119 96	26 21
New York, Utica	State Lunatic Asylum	1877	608	56,918	92	93	62	64,377	81	105	88	9,476	47	15	59	4,711	91	7	75	13,397 24	22 03
New York, Utica	State Lunatic Asylum	1878	600	56,227	97	93	71	60,085	58	100	14	9,109	04	15	18	4,212	62	7	02	12,280 70	20 47
New York, Willard	Asylum for the Insane	1875	938	‡49,787	08	53	07	57,722	86	61	54	9,535	84	10	17	1,283	73	1	37	21,007 10	22 39
New York, Willard	Asylum for the Insane	1876	1,076	‡53,401	10	49	63	66,273	75	61	59	11,362	60	10	56	1,774	30	1	65	21,262 56	19 76
New York, Willard	Asylum for the Insane	1877	1,227	60,722	11	49	49	82,137	25	66	94	13,264	28	10	81	2,190	30	1	78	21,174 83	17 26
New York, Willard	Asylum for the Insane	1878	1,340	66,164	10	49	38	72,769	93	54	31	17,280	16	12	89	2,008	30	1	49	21,285 32	15 88
New York, Poughkeepsie,	Hudson River State Hospital	1875	207	31,908	62	154	15	21,590	24	104	30	2,502	16	12	09	960	54	4	64	9,408 13	45 45
New York, Poughkeepsie,	Hudson River State Hospital	1876	197	29,714	32	150	83	23,657	32	120	09	2,310	29	11	73	1,926	63	9	78	10,722 15	54 43
New York, Poughkeepsie,	Hudson River State Hospital	1877	219	29,894	69	136	50	25,814	60	117	87	3,736	54	17	06	1,987	91	9	08	6,389 02	29 17
New York, Poughkeepsie,	Hudson River State Hospital	1878	236	30,139	50	127	71	25,809	22	109	36	3,299	78	13	98	1,869	84	7	93	11,106 46	47 06
New York, Middletown	State Homœopathic Asylum	1875	66	‡16,347	12	247	68	13,412	16	203	21	678	14	10	28	403	32	6	11	5,911 41	89 57
New York, Middletown	State Homœopathic Asylum	1876	82	‡15,916	86	194	11	19,081	09	232	69	1,946	61	22	76	1,203	27	14	67	6,336 34	77 27
New York, Middletown	State Homœopathic Asylum	1877	109	‡16,020	88	146	98	17,137	19	157	22	1,183	92	10	86	1,755	70	16	11	6,249 60	57 33
New York, Middletown	State Homœopathic Asylum	1878	130	18,562	41	142	79	18,118	71	139	37	1,376	46	10	59	958	25	7	37	7,146 62	54 97
New York, Auburn	Asylum for Insane Criminals	1860	49	5,595	53	114	19	3,990	37	81	43	787	74	16	08	168	53	3	44	1,410 51	28 78
New York, Auburn	Asylum for Insane Criminals	1865	73	4,519	17	61	90	4,791	80	65	64	.....		.....		61	00		83	3,437 64	47 09
New York, Auburn	Asylum for Insane Criminals	1875	108	8,259	75	76	48	9,339	78	86	48	§3,137	48	29	05	360	65	3	34	1,505 62	13 94
New York, Auburn	Asylum for Insane Criminals	1876	101	8,223	37	81	42	8,719	02	86	33	§2,908	69	28	79	580	28	5	74	4,368 93	43 26
New York, Auburn	Asylum for Insane Criminals	1877	98	9,137	72	93	24	8,555	30	87	29	§1,413	79	14	43	393	89	4	02	1,212 42	12 37
New York, Auburn	Asylum for Insane Criminals	1878	114	8,894	75	78	02	7,563	02	66	34	§1,421	72	12	48	308	65	2	70	1,890 64	16 58
New York, New York city,	Lunatic Asylum (females)	1865	695	13,313	00	19	15	50,229	72	72	27	§13,077	40	18	82	1,698	26	2	44	3,447 43	4 96
New York, New York city,	Lunatic Asylum (females)	1875	1,355	17,159	37	12	66	51,912	68	38	31	§11,246	20	8	30	1,456	18	1	08	8,767 36	6 47
New York, New York city,	Lunatic Asylum (females)	1876	1,320	18,154	82	13	75	61,445	69	46	55	§12,312	26	9	33	1,355	33	1	03	9,670 35	7 33
New York, New York city,	Lunatic Asylum (females)	1877	1,400	18,393	30	13	14	63,261	84	45	18	§11,017	08	7	87	1,421	13	1	01	7,289 99	5 21
New York, New York city,	Asylum for the Insane (males)	1875	638	15,194	91	23	82	33,070	35	51	83	‡5,509	56	8	43	1,101	75	1	73	15,716 54	24 63
New York, New York city,	Asylum for the Insane (males)	1876	654	17,325	99	26	49	38,535	00	58	92	‡6,622	30	10	13	698	64	1	07	7,729 86	11 82
New York, New York city,	Asylum for the Insane (males)	1877	702	16,284	71	23	19	41,945	18	59	75	‡7,817	74	11	14	1,153	22	1	64	8,836 89	12 59

* Biennial report, the aggregates given are for two years.

‡ Does not include farm wages.

† Average number estimated from tables given in reports.

§ Includes bedding.

TABLE No. 22—(*Continued*).

LOCATION.	Names.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvem'ts.	All other extraordinary expenditures.	Total expenditures.
		Aggregate cost.	Cost per capita			Aggregate cost.	Cost per capita.				
Connecticut, Middletown ...	Hospital for the Insane	$13,443 48	$31 56	$101,282 26	$237 75	....	....	.....	$16,410 40	$940 67	$118,633 33
Connecticut, Middletown....	Hospital for the Insane	5,076 19	11 20	99,479 21	219 60	.....	.....	.....	24,082 22	1,198 25	124,759 68
Connecticut, Middletown....	Hospital for the Insane	16,210 10	35 01	104,749 86	226 24	$6,528 34	$14 10	$240 34	3,653 59	1,089 59	116,021 38
Illinois, Jacksonville.....	Central Insane Hospital.....	9,998 26	21 73	76,929 37	167 24	13,238 06	28 79	196 03	.....	.....	90,167 43
Illinois, Jacksonville.....	Central Insane Hospital.....	13,934 43	29 84	96,394 57	206 41	11,750 92	25 16	231 57	.....	1,103 41	109,248 90
Illinois, Jacksonville.....	Central Insane Hospital.....	12,393 00	25 45	90,348 99	185 52	15,724 43	32 29	217 81	18,270 70	.....	124,344 12
Illinois, Jacksonville.....	Central Insane Hospital.....	15,944 75	32 14	98,182 78	197 94	8,722 95	17 58	215 52	....	.....	106,905 73
Illinois, Elgin.....	Northern Insane Hospital.....	15,471 90	33 63	107,195 92	233 03	4,553 41	9 89	242 92	578 07	.....	112,327 40
Illinois, Elgin.....	Northern Insane Hospital.....	16,036 70	34 57	101,671 03	219 12	13,593 66	29 29	248 41	19,491 58	.....	134,756 27
Illinois, Elgin.....	Northern Insane Hospital.....	12,779 18	25 66	95,546 56	191 86	8,533 53	17 13	208 99	.....	.....	104,080 09
Illinois, Anna.....	Southern Insane Hospital.....	9,503 27	46 59	50,328 93	246 71	682 75	3 34	250 05	....	.....	51,011 68
Illinois, Anna.....	Southern Insane Hospital.....	8,513 72	34 47	57,944 77	234 59	5,494 40	22 24	256 83	3,318 57	.....	66,757 74
Illinois, Anna.....	Southern Insane Hospital.....	10,425 96	26 46	79,595 70	202 02	444 71	1 13	203 15	....	.....	80,040 41
Massachus'ts, Northampton.	State Lunatic Hospital.....	8,734 92	33 72	45,285 59	174 84	1,105 13	4 27	179 11	.....	.....	46,390 72
Massachus'ts, Northampton.	State Lunatic Hospital.....	10,643 11	31 12	71,144 02	208 02	2,846 63	8 32	216 34	.....	6,529 46	80,520 11
Massachus'ts, Northampton.	State Lunatic Hospital.....	12,366 87	26 03	82,262 62	173 18	8,214 59	17 29	190 47	5,579 00	5,202 32	101,258 53
Massachus'ts, Northampton.	State Lunatic Hospital.....	12,340 84	26 04	79,199 00	167 08	10,250 67	21 62	188 70	6,000 00	.....	95,449 67
Massachus'ts, Northampton.	State Lunatic Hospital.....	10,562 04	22 19	79,177 50	165 34	8,277 33	17 39	183 73	6,203 62	3,915 00	97,573 45
Massachus'ts, Northampton.	State Lunatic Hospital	10,740 29	24 29	70,690 32	159 93	5,306 56	12 01	171 94	7,550 63	1,400 00	84,947 51
Massachusetts, Taunton	State Lunatic Hospital.....	10,286 40	28 18	47,653 89	130 56	5,114 41	14 01	144 57	.....	.....	52,768 30
Massachusetts, Taunton	State Lunatic Hospital.....	6,722 27	19 04	62,779 56	177 84	4,654 62	13 18	191 02	.....	.....	67,434 18
Massachusetts, Taunton	State Lunatic Hospital.....	11,645 88	20 91	100,070 09	179 66	6,438 23	11 56	191 22	.....	.....	106,508 32
Massachusetts, Taunton	State Lunatic Hospital.....	15,639 82	23 56	107,784 45	162 32	*21,567 01	32 48	194 80	.....	.....	129,351 46
Massachusetts, Taunton	State Lunatic Hospital.....	13,401 61	18 44	118,362 33	162 81	*23,332 54	32 09	194 90	.....	.....	141,694 87
Massachusetts, Taunton	State Lunatic Hospital.....	14,925 27	24 35	112,812 00	184 03	9,493 71	15 48	199 51	9,570 50	.....	131,876 21
Massachusetts, Worcester ...	State Lunatic Hospital.....	13,818 66	39 48	75,801 70	216 57	1,367 96	3 91	220 48	.....	.....	77,169 66
Massachusetts, Worcester ...	State Lunatic Hospital.....	11,847 92	24 32	103,302 24	212 12	3,761 13	7 72	219 84	.....	882 51	107,945 88
Massachusetts, Worcester ...	State Lunatic Hospital.....	11,084 04	22 17	97,547 25	195 09	3,428 78	6 86	201 15	.....	506 97	101,482 90
Massachusetts, Worcester ...	State Lunatic Hospital.....	11,596 71	22 92	98,350 94	194 37	3,196 69	6 31	200 68	.....	986 35	102,533 98
Massachusetts, Worcester ...	State Lunatic Hospital.....	10,785 38	21 74	98,475 85	198 53	2,431 40	4 90	203 42	112,290 72	1,950 30	215,148 27
Massachusetts, Boston.....	Lunatic Asy.um.....	5,905 37	33 37	42,468 89	239 93	1,411 39	7 97	247 90	.....	.....	43,880 28
Massachusetts, Boston.....	Lunatic Asylum.....	9,895 56	48 51	57,513 32	281 91	7,113 39	34 87	316 78	.....	.....	64,626 71
Massachusetts, Boston	Lunatic Asylum.....	6,995 36	33 79	53,574 49	258 81	5,816 61	28 09	286 90	.....	.....	59,391 10
Massachusetts, Boston.....	Lunatic Asylum.....	5,561 69	28 23	51,878 62	263 33	5,269 67	26 75	290 08	.....	.....	57,148 29
Maine, Augusta.....	Maine Insane Hospital.....	2,745 11	11 63	31,206 21	132 23	3,578 85	15 16	147 39	.....	.....	34,785 06
Maine, Augusta.....	Maine Insane Hospital.....	2,538 50	9 33	50,203 45	184 57	1,328 29	4 90	189 47	.....	.....	51,531 74
Maine, Augusta.....	Maine Insane Hospital.....	12,832 10	32 24	80,695 79	202 73	10,575 90	26 57	229 30	.....	143 12	91,414 81

Maine, Augusta	Maine Insane Hospital	11,965 97	30 07	78,792 09	197 97	5,112 32	12 84	210 81	12,399 55	323 64	96,627 60
Maine, Augusta	Maine Insane Hospital	18,108 96	44 06	85,690 28	208 49	4,503 33	10 96	219 45	6,926 05	228 95	97,348 61
Minnesota, St. Peters	Hospital for the Insane	9,416 96	22 79	71,413 33	172 91	2,757 42	6 68	179 59	2,472 74	169 03	76,812 52
Minnesota, St. Peters	Hospital for the Insane	10,386 62	21 37	78,468 59	161 45	740 51	1 52	162 97	16,281 82	211 40	95,702 32
Minnesota, St. Peters	Hospital for the Insane	12,117 36	44 29	100,088 15	177 77	1,593 79	2 83	180 60	7,934 49	518 98	110,135 41
Ohio, Newburgh	Cleveland Hosp. for the Insane	3,820 90	28 09	27,746 56	204 01	2,058 38	15 14	219 15	.....	224 30	30,029 24
Ohio, Newburgh	Cleveland Hosp. for the Insane	12,358 62	90 87	51,166 15	376 22	4,859 76	35 73	411 95	.....	.....	56,025 91
Ohio, Newburgh	Cleveland Hosp. for the Insane	9,656 04	25 68	70,587 63	187 73	6,083 82	16 18	203 91	.....	.....	76,671 45
Ohio, Newburgh	Cleveland Hosp. for the Insane	10,932 94	20 24	89,230 67	165 24	3,416 18	6 69	171 93	.....	.....	92,646 85
Ohio, Newburgh	Cleveland Hosp. for the Insane	23,869 78	41 37	98,297 49	170 35	3,949 98	6 84	177 19	.....	471 06	102,718 53
Ohio, Dayton	Hospital for the Insane	3,959 87	25 22	24,170 62	153 95	2,076 82	13 23	167 18	.....	84 02	26,331 46
Ohio, Dayton	Hospital for the Insane	7,208 62	43 69	48,500 99	293 95	3,222 18	19 53	313 48	.....	.....	51,723 17
Ohio, Dayton	Hospital for the Insane	11,203 90	19 38	90,413 39	156 42	4,789 91	8 29	164 71	4,811 61	.....	100,014 81
Ohio, Dayton	Hospital for the Insane	5,341 02	8 96	95,338 66	159 96	4,937 28	8 28	168 24	10,504 18	.....	110,780 12
Ohio, Dayton	Hospital for the Insane	11,309 19	19 81	92,431 22	161 88	2,350 20	4 12	166 00	16,826 89	.....	111,608 31
Ohio, Toledo	Hospital for the Insane	1,867 03	18 67	20,555 29	205 55	5,189 98	51 89	257 44	.....	600 00	26,345 27
Ohio, Toledo	Hospital for the Insane	3,426 97	34 27	21,498 40	214 99	3,371 94	33 72	248 71	.....	.....	24,870 34
Ohio, Toledo	Hospital for the Insane	3,109 10	29 61	22,763 21	216 79	1,074 04	10 23	227 02	.....	.....	23,837 25
Pennsylvania, Harrisburgh	State Lunatic Asylum	10,972 21	37 45	65,543 21	223 69	1,661 13	5 67	229 36	636 26	275 33	68,115 93
Pennsylvania, Harrisburgh	State Lunatic Asylum	12,175 65	30 59	98,410 69	247 26	10,131 77	25 46	272 72	.....	.....	108,542 46
Pennsylvania, Harrisburgh	State Lunatic Asylum	16,081 80	38 57	98,380 01	235 92	3,108 48	7 45	243 37	11,178 14	.....	112,666 63
Pennsylvania, Harrisburgh	State Lunatic Asylum	17,143 07	39 50	92,845 08	213 93	7,664 20	17 66	231 59	18,664 02	479 27	119,652 57
Pennsylvania, Danville	State Hospital for the Insane	13,562 24	55 13	57,170 94	232 40	193 43	78	233 18	.....	.....	57,364 37
Pennsylvania, Danville	State Hospital for the Insane	13,881 79	50 11	67,547 79	243 85	518 90	1 87	245 72	.....	.....	68,066 69
Pennsylvania, Danville	State Hospital for the Insane	13,885 57	44 51	65,572 68	210 17	2,514 36	8 06	218 23	2,262 18	2,307 61	72,656 83
Prov. of Ontario, Toronto	Asylum for the Insane	4,727 29	7 27	81,373 45	125 19	2,752 28	4 24	129 43	.....	.....	84,125 73
Prov. of Ontario, Toronto	Asylum for the Insane	7,361 01	11 93	79,213 73	128 38	3,168 51	5 13	133 51	.....	.....	82,382 24
Prov. of Ontario, Toronto	Asylum for the Insane	5,727 09	8 79	83,526 36	128 30	3,315 29	5 09	133 39	.....	.....	86,841 65
Prov. of Ontario, Toronto	Asylum for the Insane	7,241 09	10 87	77,878 62	116 93	3,801 34	5 71	122 64	.....	.....	81,679 96
Prov. of Ontario, London	Asylum for the Insane	8,178 45	13 10	79,986 88	128 18	2,233 74	3 58	131 76	.....	.....	82,220 62
Prov. of Ontario, London	Asylum for the Insane	8,132 82	12 97	83,608 27	133 34	2,246 50	3 58	136 92	.....	.....	85,854 77
Prov. of Ontario, London	Asylum for the Insane	7,704 42	12 72	82,677 59	136 84	2,031 06	3 36	140 20	.....	.....	85,708 65
Prov. of Ontario, London	Asylum for the Insane	7,457 93	11 44	85,215 05	130 69	2,179 79	3 34	134 03	.....	.....	87,394 84
Wisconsin, Mendota	State Hospital for the Insane	8,203 23	47 42	45,763 30	264 53	2,784 71	16 09	280 62	.....	.....	48,548 01
Wisconsin, Mendota	State Hospital for the Insane	14,720 30	40 44	88,732 96	243 77	11,848 92	32 55	276 32	31,382 57	921 30	132,885 75
Wisconsin, Mendota	State Hospital for the Insane	19,959 45	59 76	99,778 87	298 74	6,919 62	20 72	319 46	23,735 74	.....	130,434 23
Wisconsin, Mendota	State Hospital for the Insane	13,683 52	36 98	90,572 96	244 79	4,180 91	11 29	256 08	.....	.....	94,753 87
Wisconsin, Oshkosh	Northern Hospital for the Insane,	7,516 32	29 24	82,794 93	322 16	6,327 05	24 62	346 78	15,701 93	.....	104,823 91
Wisconsin, Oshkosh	Northern Hospital for th Insane,	13,425 94	33 65	84,676 61	212 22	8,762 81	21 96	234 18	4,184 03	.....	97,623 45
Wisconsin, Oshkosh	Northern Hospital for the Insane,	17,812 80	32 86	111,708 49	206 11	5,862 58	10 81	216 92	4,988 05	.....	112,559 12
Vermont, Brattleboro	Asylum for the Insane	6,828 96	15 77	51,436 93	118 79	6,372 75	14 71	133 50	.....	.....	57,809 68
Vermont, Brattleboro	Asylum for the Insane	7,439 84	15 89	62,651 91	133 87	4,706 46	10 05	143 92	.....	.....	67,358 37
Vermont, Brattleboro	Asylum for the Insane	13,895 29	14 56	147,397 23	154 50	10,004 89	10 49	164 99	17,313 54	5,868 40	180,584 06
Vermont, Brattleboro	Asylum for the Insane	17,138 47	18 16	128,452 56	136 07	13,880 84	14 70	150 77	33,112 50	11,590 26	187,036 16
New York, Utica	State Lunatic Asylum	13,745 66	26 64	95,953 15	185 95	6,588 55	12 77	198 72	268 58	3,323 74	106,134 02
New York, Utica	State Lunatic Asylum	20,521 80	34 72	147,719 11	249 94	10,021 13	16 96	266 90	.....	187 51	157,927 75
New York, Utica	State Lunatic Asylum	27,775 75	46 68	188,298 49	316 47	†27,108 77	45 56	362 03	.....	.....	215,407 26
New York, Utica	State Lunatic Asylum	29,793 35	48 44	191,798 41	311 87	†37,422 44	60 85	372 72	.....	222 18	229,443 03
New York, Utica	State Lunatic Asylum	23,768 98	39 09	172,651 33	283 96	†47,771 81	78 57	362 53	.....	154 36	220,577 50

*For "construction and repairs."

†"Additions, alterations and repairs."

TABLE No. 22—(*Continued*).

LOCATION.	Names.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvem'ts.	All other extraordinary expenditures.	Total expenditures.
		Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
New York, Utica	State Lunatic Asylum	$24,658 44	$41 01	$166,574 35	$277 62	*$41,380 24	$68 97	$346 59	.....	$1,369 70	$209,324 29
New York, Willard	Asylum for the Insane	24,019 23	25 61	163,365 84	174 16	1,167 29	1 24	175 40	$113,351 72	.....	277,884 85
New York, Willard	Asylum for the Insane	22,606 31	21 01	176,680 62	164 20	4,046 97	3 76	167 96	94,365 45	.....	275,093 04
New York, Willard	Asylum for the Insane	22,819 85	18 59	202,308 62	164 87	4,764 74	3 88	168 75	124,138 63	.....	331,211 99
New York, Willard	Asylum for the Insane	19,501 05	14 55	199,008 86	148 51	†17,907 59	13 37	161 88	62,553 55	.....	279,470 00
New York, Poughkeepsie	Hudson River State Hospital	10,762 71	51 99	77,133 40	372 62	.....	.....	.....	3,724 34	8,085 61	88,943 75
New York, Poughkeepsie	Hudson River State Hospital	10,967 63	55 67	79,298 34	402 53	3,236 83	16 43	418 96	143,977 50	917 13	227,429 80
New York, Poughkeepsie	Hudson River State Hospital	11,948 29	54 56	79,771 05	364 24	5,138 77	23 46	387 70	126,060 44	292 07	211,262 33
New York, Poughkeepsie	Hudson River State Hospital	10,372 77	43 95	82,597 67	349 99	4,455 19	18 88	368 87	.....	2,114 48	89,167 34
New York, Middletown	State Homœopathic Asylum	6,808 82	103 16	43,560 97	660 01	122 46	1 85	661 86	108,727 44	6,441 86	158,852 73
New York, Middletown	State Homœopathic Asylum	5,359 18	65 34	49,843 35	607 84	1,869 88	22 80	630 64	70,900 93	17,634 71	140,248 87
New York, Middletown	State Homœopathic Asylum	3,405 39	31 25	45,752 68	419 75	1,241 88	11 39	431 14	26,875 11	5,787 41	79,657 08
New York, Middletown	State Homœopathic Asylum	5,088 26	39 14	51,250 71	394 23	1,055 55	8 12	402 35	15,316 71	3,448 81	71,071 78
New York, Auburn	Asylum for Insane Criminals	2,269 27	46 31	14,221 95	290 24	3,269 63	66 73	356 97	.....	.....	17,491 58
New York, Auburn	Asylum for Insane Criminals	3,284 57	44 99	16,094 18	220 47	605 00	8 28	228 75	.....	.....	16,999 18
New York, Auburn	Asylum for Insane Criminals	1,718 68	15 91	24,321 96	225 20	395 62	3 66	228 86	.....	.....	24,717 58
New York, Auburn	Asylum for Insane Criminals	3,504 90	34 70	28,305 19	280 24	1,206 04	11 94	292 18	.....	.....	29,511 23
New York, Auburn	Asylum for Insane Criminals	2,636 75	26 91	23,349 87	238 26	629 50	6 43	244 69	.....	.....	23,979 37
New York, Auburn	Asylum for Insane Criminals	2,620 26	22 99	22,699 04	199 11	328 26	2 88	201 99	.....	.....	23,027 30
New York, New York city	Lunatic Asylum (females)	11,915 88	17 15	93,681 68	134 79	11,685 53	16 81	151 60	4,702 28	.....	110,069 49
New York, New York city	Lunatic Asylum (females)	8,568 05	6 32	99,109 84	73 14	.....	.....	.....	17,577 96	.....	116,687 80
New York, New York city	Lunatic Asylum (females)	9,443 49	7 15	112,381 94	85 14	.....	.....	.....	.....	.....	112,381 94
New York, New York city	Lunatic Asylum (females)	7,931 19	5 67	109,314 53	78 08	.....	.....	.....	.....	.....	109,314 53
New York, New York city	Asylum for the Insane (males)	7,443 19	11 67	78,036 30	122 31	.....	.....	.....	.....	.....	78,036 30
New York, New York city	Asylum for the Insane (males)	8,121 01	12 42	79,032 80	120 85	.....	.....	.....	.....	.....	79,032 80
New York, New York city	Asylum for the Insane (males)	8,542 04	12 17	84,579 78	120 48	.....	.....	.....	.....	.....	84,579 78

* "Additions, alterations and repairs."

† Includes improvements.

TABLE No. 23.

Detailed Statement of Expenditures of the New York House of Refuge, Randall's Island, for the years 1860 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.				ALL OTHER ORDINARY EXPENSES.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.	Aggregate cost.	Cost per capita.
1860..	574	$12,636 46	$22 02	$20,197 67	$35 18	$8,666 07	$15 10	$388 71	$0 67	.....	.....	$4,784 67	$8 34	$7,863 08	$13 70
1861..	511	14,052 94	27 50	17,316 43	33 88	7,752 29	15 17	287 63	56	$2,594 04	$606 49	3,200 53	6 26	4,903 60	9 59
1862..	494	13,335 24	26 99	16,604 87	33 61	6,292 25	12 74	416 23	84	2,506 00	1,689 02	4,195 02	8 49	4,557 89	9 23
1863..	537	13,768 49	25 64	20,036 32	37 31	11,824 14	22 02	448 43	83	5,155 32	564 23	5,719 55	10 65	6,366 66	11 86
1864..	638	15,879 40	24 89	29,609 80	46 41	12,694 76	19 89	359 61	56	7,490 49	1,111 07	8,601 56	13 48	6,659 43	10 44
1865.	820	16,323 71	19 91	39,486 04	48 15	19,793 62	24 14	535 99	65	5,282 11	2,251 01	7,533 12	9 19	14,414 92	17 58
1866..	922	18,201 32	19 74	48,822 13	52 95	23,673 47	25 67	690 36	75	4,590 90	2,080 04	6,670 94	7 23	12,283 96	13 32
1867..	990	22,282 46	22 51	55,418 51	55 98	17,496 02	17 67	551 76	55	4,783 52	2,375 91	7,159 43	7 23	9,392 11	9 49
1868..	931	25,918 15	27 84	53,069 26	57 00	12,557 44	13 49	574 77	61	5,765 40	1,948 65	7,714 05	8 28	6,623 22	7 12
1869..	848	26,829 68	31 63	48,584 58	57 29	14,672 59	17 30	501 96	59	4,847 90	2,061 97	6,909 87	8 15	8,856 94	10 44
1870..	671	27,712 35	41 30	39,885 57	59 44	7,115 30	10 60	159 28	24	4,198 80	363 91	4,562 71	6 80	6,404 88	9 54
1871.	764	28,272 10	37 01	41,657 08	54 52	10,759 79	14 08	200 95	26	2,852 93	1,591 50	4,444 43	5 81	8,415 56	11 02
1872..	691	34,099 88	49 34	41,516 17	60 08	12,609 84	18 25	536 40	77	3,578 77	1,750 85	5,329 62	7 71	9,652 73	13 97
1873..	555	33,238 12	59 89	38,329 56	69 06	5,612 24	10 11	242 96	43	5,223 85	1,958 12	7,181 97	12 94	8,849 08	15 94
1874..	740	34,880 52	47 14	44,521 62	60 16	9,854 90	13 32	325 35	44	4,712 17	1,829 83	6,542 00	8 84	7,517 97	10 16
1875..	820	36,061 79	43 97	45,516 21	55 51	12,846 57	15 67	166 14	20	5,695 68	717 19	6,412 87	7 82	11,018 45	13 44
1876..	924	37,521 93	40 61	50,492 18	54 64	14,793 60	16 01	255 09	28	6,115 50	1,524 39	7,639 89	8 26	12,674 48	13 72
1877..	917	37,014 45	40 36	52,469 75	57 22	16,258 20	17 73	378 62	41	4,861 82	1,484 88	6,346 70	6 92	9,583 33	10 45
1878..	930	37,454 09	40 27	43,414 23	46 68	11,462 79	12 33	329 91	36	....	.....	7,097 31	7 63	8,110 56	8 72

TABLE No. 23—(*Continued*).

YEARS.	Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita includ'g ordinary repairs.	EARNINGS AND SALES.		Net expense per capita.	Buildings, extraordinary repairs and improvements.	Insurance.	Interest.	Rent.	All other extraordinary expenditures.	Total expenditures
			Aggregate cost.	Cost per capita.		Aggregate receipts.	Receipts per capita.							
1860.....	$54,536 66	$95 01	$3,564 73	$6 21	$101 22	$18,910 27	$32 94	$68 28	$10,425 19	$1,510 63	.....	$363 06	.....	$70,400 27
1861.....	47,513 42	92 98	3,576 36	6 99	99 97	13,728 62	26 86	73 11	379 00	1,718 75	$100 40	428 42	.....	53,716 35
1862.....	45,401 50	91 90	2,651 72	5 37	97 27	14,509 82	29 37	67 90	18,076 30	1,813 84	.....	413 80	$16,107 60	84,464 76
1863.....	58,163 59	108 31	3,506 94	6 53	114 84	17,027 69	31 89	82 95	.....	1,793 75	.....	397 19	.....	63,861 47
1864.....	73,804 56	115 68	.....	.....	122 77	25,964 00	40 69	81 58	21,193 69	1,896 38	435 02	451 41	.....	97,781 06
1865.....	98,087 40	119 62	3,479 49	4 24	123 86	36,394 22	44 38	79 48	.....	1,855 66	933 55	476 70	3,743 07	108,575 87
1866.....	110,342 18	119 67	4,280 20	4 64	124 31	45,763 60	49 63	74 68	.....	3,057 16	1,292 04	620 06	11,322 40	130,914 04
1867.....	112,300 29	113 43	2,977 12	3 01	116 44	55,090 69	55 64	60 80	19,002 99	3,160 75	215 74	746 29	3,736 87	142,140 05
1868.....	106,456 89	114 34	2,353 61	2 53	116 87	52,667 18	56 57	60 30	9,281 08	3,276 87	.....	649 28	1,989 23	124,006 96
1869.....	106,355 62	125 42	2,679 42	3 16	128 58	51,268 54	60 46	68 12	12,597 13	2,862 78	.....	349 56	461 00	125,305 51
1870.....	85,840 09	127 93	1,784 03	2 65	130 58	40,458 20	60 20	70 38	17,580 65	2,329 08	.....	458 91	660 17	108,652 93
1871.....	93,749 91	122 70	2,018 61	2 64	125 34	48,789 63	63 86	61 48	6,655 44	2,639 85	293 81	509 93	7,634 69	113,502 24
1872.....	103,744 64	150 13	1,997 35	2 89	153 02	46,690 15	67 56	85 46	6,811 78	2,654 16	693 37	539 37	20,897 85	137,338 52
1873.....	93,453 93	168 38	820 47	1 47	169 85	33,506 56	60 37	109 48	.....	2,565 65	255 67	513 54	.....	97,609 26
1874.....	103,642 36	140 06	1,288 30	1 74	141 80	42,066 29	56 85	84 95	8,661 60	2,590 75	.....	465 34	.....	116,648 35
1875.....	112,022 03	136 61	1,412 42	1 72	138 33	22,511 64	27 45	110 98	895 27	2,590 75	445 90	393 38	821 72	118,581 47
1876.....	123,377 17	133 52	1,929 43	2 08	135 60	36,140 34	39 11	96 49	1,230 95	2,590 75	294 38	373 07	76 00	129,871 75
1877.....	122,051 05	133 09	2,454 18	2 67	135 76	33,752 97	36 80	98 96	18,251 72	2,426 25	414 72	492 17	.....	146,090 09
1878.....	107,868 89	115 99	2,324 78	2 49	118 48	31,257 87	33 61	84 87	14,591 38	2,426 00	918 08	325 60	7,963 63	136,418 36

TABLE NO. 24.

Detailed Statement of Receipts of the New York House of Refuge, Randall's Island, for the years 1860 *to* 1878, *inclusive.*

YEARS.	Cash on hand at commencement of fiscal year.	APPROPRIATIONS FROM THE STATE.					FROM NEW YORK CITY.			From labor of inmates.	From articles sold, barrels, rags, iron, etc.	From all other sources.	Total receipts.
		From special appropriations.	From deficiency appropriations.	From unexpended appropriations of former years.	From ordinary appropriations for calendar year.	Total from the State.	From Comptroller.	From board of education.	From theater and circus licenses.				
1860	$7,177 09	.....	.....	.....	$24,000 00	$24,000 00	$8,000 00	$5,188 13	$8,659 08	$18,695 48	$214 79	.....	$71,934 57
1861	1,534 30	.....	.....	.....	24,000 00	24,000 00	8,000 00	5,199 60	8,081 80	13,399 82	328 80	.....	60,544 32
1862	6,827 97	$25,000 00	.....	.....	24,000 00	49,000 00	8,000 00	4,810 00	9,501 28	13,846 18	663 64	.....	92,649 07
1863	503 51	.....	.....	.....	24,000 00	24,000 00	8,000 00	3,790 50	8,134 50	16,383 03	644 66	.....	61,456 20
1864	.....	10,000 00	.....	.....	24,000 00	34,000 00	8,000 00	4,199 12	8,949 00	25,143 67	820 33	$17,600 00	98,712 12
1865	.....	.....	.....	.....	43,000 00	43,000 00	10,000 00	5,166 94	9,422 60	35,718 15	676 07	.....	103,983 76
1866	.....	.....	$19,922 36	.....	35,000 00	54,922 36	11,000 00	6,105 70	9,709 23	45,790 70	1,242 06	935 31	129,705 36
1867	.....	20,000 00	10,000 00	.....	35,000 00	65,000 00	8,000 00	7,512 84	9,448 00	53,939 13	1,945 69	1,125 00	146,970 66
1868	.....	.....	.....	.....	40,000 00	40,000 00	8,000 00	8,919 54	9,419 00	53,386 94	1,425 72	7,147 52	128,298 72
1869	1,847 27	.....	.....	.....	40,000 00	40,000 00	8,000 00	10,603 94	10,479 00	51,644 00	1,834 99	98 33	124,507 53
1870	.....	.....	.....	.....	40,000 00	40,000 00	8,000 00	9,095 74	10,959 50	39,21 53	659 07	1,344 40	109,277 24
1871	.....	.....	.....	.....	40,000 00	40,000 00	.....	3,777 48	561 09	47,789 99	1,007 86	16,920 48	110,056 90
1872	.....	4,500 00	12,690 98	.....	40,000 00	57,190 98	.....	12,110 96	1,365 08	45,382 79	1,101 75	30,780 53	147,932 09
1873	.....	.....	12,525 44	.....	39,000 00	51,525 44	2,500 00	9,905 68	13,050 00	29,968 96	962 29	174 64	108,087 01
1874	4,412 87	10,000 00	.....	$10,500 00	40,000 00	60,500 00	.....	7,468 61	7,000 00	41,594 48	900 00	64 53	121,940 49
1875	677 10	30,000 00	.....	8,000 00	40,000 00	78,000 00	.....	9,185 42	15,383 66	11,729 67	800 00	121 66	115,897 51
1876	.....	22,000 00	.....	5,000 00	40,000 00	67,000 00	.....	10,216 30	15,500 00	38,253 51	925 00	5,000 00	136,894 81
1877	4,339 10	27,567 05	.....	4,600 00	40,000 00	72,167 05	.....	11,100 88	19,451 32	35,339 63	461 48	5,022 75	147,882 21
1878	1,792 12	20,000 00	.....	8,500 00	40,000 00	68,500 00	.....	11,843 48	22,457 56	31,257 87	484 19	419 50	136,754 72
	$29,111 33	$169,067 05	$55,138 78	$36,600 00	$672,000 00	$932,805 83	$95,500 00	$146,200 86	$197,531 70	$648,482 53	$17,098 39	$86,754 65	$2,153,485 29

TABLE NO. 25.

Detailed Statement of Expenditures of the Western House of Refuge, Rochester, N. Y., for the years 1860 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1860	425	$8,999 69	$21 18	$12,268 17	$28 87	$6,374 38	$15 00	$84 98	$0 20	$1,611 17	$666 20	$2,277 37	$5 36
1861	*406	9,084 71	22 37	11,973 60	29 49	6,211 13	15 29	87 00	21	1,697 28	646 36	2,343 64	5 77
1862	395	9,468 65	23 97	10,185 69	25 78	6,796 17	17 21	124 07	32	1,970 24	723 39	2,693 63	6 82
1863	430	9,782 52	22 75	13,259 25	30 83	7,032 74	16 36	221 67	51	2,762 98	725 38	3,488 36	8 11
1864	460	10,174 49	22 12	16,225 46	35 27	11,150 68	24 24	373 29	81	3,761 49	843 21	4,604 70	10 01
1865	475	11,770 58	24 78	20,451 63	43 05	10,968 96	23 10	259 61	55	3,390 82	1,338 92	4,729 74	9 95
1866	496	11,743 59	23 67	20,386 56	41 10	11,844 81	23 88	430 34	86	5,049 05	1,632 35	6,681 40	13 47
1867	490	11,932 40	24 35	24,732 01	50 47	11,299 33	23 06	504 89	1 03	2,422 03	1,361 51	3,783 54	7 72
1868	*413	13,153 80	31 85	22,277 62	53 94	9,608 73	23 27	364 57	88	.....	.....	3,753 53	9 08
1869	370	15,217 49	41 12	20,818 23	56 26	7,753 13	20 96	299 20	81	....	.....	3,917 29	10 59
1870	352	17,270 72	49 06	19,870 16	56 45	6,354 08	18 05	354 22	1 01	.....	.....	4,827 29	13 71
1871	385	19,524 79	50 71	19,015 70	49 39	7,291 78	18 94	483 83	1 25	.....	.....	2,334 77	6 06
1872	406	18,380 38	45 27	21,062 76	51 87	9,169 92	22 59	405 22	99	.....	.....	5,414 41	13 33
1873	382	17,304 13	45 29	18,600 87	48 69	7,144 75	18 70	231 28	61	5,814 73	1,911 35	7,726 08	20 22
1874	367	19,295 65	52 58	16,241 30	44 25	7,920 92	21 59	211 38	57	.....	.....	6,601 65	17 99
1875	404	19,522 58	48 32	18,427 63	45 61	7,183 59	17 73	434 02	1 08	.....	.....	7,287 27	18 14
1876	457	18,717 76	40 95	19,234 69	42 09	6,476 23	14 18	410 22	89	.....	.....	6,988 23	15 29
1877	492	20,839 15	42 35	23,621 92	48 01	7,130 64	14 49	278 09	57	.....	.....	8,285 18	16 84
1878	588	22,148 92	37 67	23,722 26	40 34	9,026 90	15 35	348 20	59	.....	.....	7,413 17	12 61

* Average number estimated from tables given in reports.

TABLE No. 25—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita exclud'g repairs.	ORDINARY REPAIRS.		Annual cost per capita includ'g ordinary repairs.	EARNINGS AND SALES.		Net expense per capita.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.*	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.		Aggregate receipts.	Receipts per capita.				
1860	$4,725 24	$11 11	$34,729 83	$81 72	$873 49	$2 05	$83 77	$17,071 43	$40 16	$43 61	$6,484 28	$160 00	$42,247 60
1861	4,967 13	12 23	34,667 21	85 38	1,736 86	4 28	89 66	15,785 94	38 88	50 78	8,202 24	.....	44,606 31
1862	3,985 63	10 08	33,253 84	84 18	2,536 82	6 42	90 60	14,160 04	35 84	54 76	7,011 82	513 65	43,316 13
1863	5,769 94	13 42	39,554 48	91 98	1,632 91	3 79	95 77	20,838 79	48 46	47 31	2,730 09	602 41	44,575 37
1864	5,578 18	12 13	48,106 80	104 58	1,321 03	2 87	107 45	22,381 36	48 65	58 80	3,967 01	375 00	53,669 84
1865	7,398 13	15 58	55,578 65	117 01	1,825 94	3 84	120 85	15,797 11	33 25	87 60	16,883 89	569 75	74,858 23
1866	7,873 37	15 88	58,960 07	118 87	3,217 81	6 48	125 35	24,163 20	48 71	76 64	6,532 26	340 02	69,050 16
1867	5,885 55	12 01	58,137 72	118 65	1,994 29	4 07	122 72	24,872 27	50 76	71 96	.....	773 58	60,905 59
1868	8,553 28	20 71	57,711 53	139 73	1,351 70	3 27	143 00	20,105 19	48 68	94 32	.....	.....	59,063 23
1869	6,525 36	17 64	54,530 70	147 38	878 57	2 37	149 75	18,048 16	48 78	100 97	.....	.....	55,409 27
1870	3,880 69	11 02	52,557 16	149 31	2,211 55	6 28	155 59	13,707 19	38 94	116 65	13,197 48	.....	67,966 19
1871	6,553 60	17 02	55,204 47	143 38	4,019 33	10 44	153 82	13,946 64	36 22	117 60	13,203 61	1,400 00	73,827 41
1872	7,220 63	17 79	61,653 32	151 85	2,554 16	6 29	158 14	12,943 95	31 88	126 26	13,248 39	720 02	78,175 89
1873	7,685 19	20 12	58,692 30	153 64	2,697 33	7 06	160 70	16,815 52	44 02	116 68	4,140 09	551 25	66,080 97
1874	7,134 46	19 44	57,405 36	156 42	3,323 47	9 05	165 47	13,890 15	37 84	127 63	799 22	843 80	62,371 85
1875	8,264 91	22 88	62,120 00	153 76	2,676 37	6 62	160 38	13,285 13	32 88	127 50	13,125 08	909 24	78,830 69
1876	8,332 81	18 24	60,159 94	131 64	3,153 89	6 90	138 54	11,136 89	24 37	114 17	84,856 09	307 44	148,477 36
1877	10,262 88	20 86	70,417 86	143 12	2,314 09	4 70	147 82	11,187 34	22 74	125 08	35,971 93	105 28	108,809 16
1878	15,864 54	26 98	78,523 99	133 54	3,938 81	6 69	140 23	14,128 77	24 03	116 20	4,873 81	.....	87,336 61

* Includes expenditures for interest, rent, etc.

TABLE No. 26.

Detailed Statement of Expenditures of Houses of Refuge and Reform Schools in the United States for the year 1860.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
House of Refuge, Philadel., Pa (col'd dept.)	141	$3,799 27	$26 94	$3,725 24	$26 42	$1,600 40	$11 35	$165 41	$1 17	$972 95	$6 90
Western House of Refuge, Rochester, N. Y.	425	8,999 69	21 18	12,268 17	28 87	6,374 38	15 00	84 98	20	2,277 37	5 36
House of Refuge, Philadel., Pa (white d'pt.)	301	7,547 73	25 07	8,059 42	26 77	4,065 50	13 51	148 08	49	2,874 45	9 55
State Reform School, Elizabeth, Maine...	177	3,883 81	21 94	4,788 79	27 05	2,465 07	13 93	.....	.....	1,224 04	6 91
House of Refuge, New York City	574	12,636 46	22 02	20,197 67	35 18	8,666 07	15 10	388 71	67	4,784 67	8 34
Reform School, Providence, R. I.....	168	3,909 15	23 27	6,422 53	38 23	*2,721 50	16 20	59 04	35	1,043 37	6 21
State Reform School, Westborough, Mass	443	10,068 51	22 73	15,595 55	35 20	5,583 84	12 61	146 21	33	3,866 36	8 73
House of Refuge, Cincinnati, Ohio.....	248	8,140 56	32 82	8,556 48	34 50	4,654 29	18 76	442 08	1 79	3,086 85	12 44
State Reform School, Manchester, N. H. .	36	1,792 24	49 79	1,261 15	35 03	464 98	12 92	32 49	90	39 41	1 09
State Reform School, Lansing, Mich.....	103	3,586 66	34 82	3,556 66	34 53	1,464 22	14 21	223 82	2 17	1,088 98	10 58

No. 26—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excludi'g repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita			Aggregate cost.	Cost per capita.				
House of Refuge, Philadel., Pa. (col'd dept.)	$800 66	$5 68	$11,063 93	$78 46	$951 32	$6 74	$85 20	.....	$909 17	$12,924 42
Western House of Refuge, Rochester, N. Y.	4,725 24	11 11	34,729 83	81 72	873 49	2 05	83 77	6,484 28	160 00	42,247 60
House of Refuge, Philadel., Pa. (white d'pt.)	3,304 35	10 98	25,999 53	86 37	864 60	2 87	89 24	5,564 90	1,027 33	33,456 36
State Reform School, Elizabeth, Maine...	4,206 19	23 75	16,564 90	93 58	2,669 14	15 08	108 66	.....	793 41	20,027 45
House of Refuge, New York City.....	7,863 08	13 70	54,536 66	95 01	3,564 73	6 21	101 22	10,425 19	1,873 69	70,400 27
Reform School, Providence, R. I.....	2,062 21	12 27	16,217 80	96 53	1,536 90	9 15	107 68	1,292 48	.....	19,047 18
State Reform School, Westborough, Mass.	9,912 82	22 37	45,173 29	101 97	2,461 43	5 55	107 52	.....	.....	47,634 72
House of Refuge, Cincinnati, Ohio.....	3,391 61	13 68	28,271 87	113 99	5,500 93	22 14	136 13	.....	188 37	33,961 17
State Reform School, Manchester, N. H..	667 53	18 54	4,257 80	118 27	62 00	1 72	119 99	369 90	1,350 65	6,040 35
State Reform School, Lansing, Mich.....	3,776 27	36 66	13,696 61	132 97	2,303 39	22 36	155 33	.....	.. ..	16,000 00

*Includes bedding.

TABLE No. 27.

Detailed Statement of Expenditures of Houses of Refuge and Reform Schools in the United States, for the year 1865.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
House of Refuge, Philadelphia, Pa. (white dept.)	466	$7,874 94	$16 89	$18,013 03	$38 65	$10,450 06	$22 43	$635 28	$1 37	$5,264 48	$11 29
State Reform School, Manchester, N. H.	*116	2,259 25	19 47	4,782 18	41 23	1,106 47	9 54	129 18	1 11	1.069 59	9 22
House of Refuge, Philadelphia, Pa. (col'ed dept.)	150	4,195 60	27 97	5,933 45	39 56	3,471 61	23 14	173 19	1 16	1,879 18	12 53
Western House of Refuge, Rochester, N. Y.	475	11,770 58	24 78	20,451 63	43 05	10,968 96	23 10	259 61	55	4,729 74	9 95
House of Refuge, New York city	820	16,323 71	19 91	39,486 04	48 15	19,793 62	24 14	535 39	65	7,533 12	9 19
Reform School, Providence, R. I.	223	5,820 00	26 09	12,293 95	55 13	†4,757 37	21 33	120 56	54	1,688 00	7 57
State Industrial School, Lancaster, Mass.	140	8,191 02	58 51	4,765 39	34 04	1,180 05	8 43	41 96	29	393 19	2 81
State Reform School, Elizabeth, Maine	188	3,333 29	17 73	8,128 91	43 24	3,309 82	17 61	.....	.....	‡2,554 04	13 58
Catholic Protectory, New York city	417	4,763 00	11 42	23,175 44	55 57	.....	.....	253 73	61	1,228 35	2 95
State Reform School, Waukesha, Wis.	*146	4,137 74	28 34	5,671 97	38 85	†5,031 00	34 46	.....	.....	1,157 98	7 93
State Reform School, Lancaster, Ohio	*240	8,702 54	36 26	12,930 68	53 87	†7,409 33	30 87	.....	.....	266 14	1 11
State Reform School, Westborough, Mass.	325	11,864 81	36 51	18,643 63	57 37	7,106 83	21 87	82 05	25	6,141 90	18 89
House of Correction, Boston, Mass	211	9,475 19	44 90	16,060 65	76 12	†2,231 81	10 58	368 47	1 75	11,450 69	54 26

* Average number estimated from tables given in reports.

† Includes bedding.

‡ Includes furniture.

TABLE No. 27—(*Continued.*)

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
House of Refuge, Philadelphia, Pa. (white dept.)	$2,314 65	$4 97	$44,552 44	$95 60	$3,223 60	$6 92	$102 52	$2,215 83	$204 44	$50,196 31
State Reform School, Manchester N. H.	2,660 75	22 94	12,007 42	103 51	825 82	7 12	110 63	1,094 32	50 00	13,977 56
House of Refuge, Philadelphia, Pa. (col'ed dept.)	1,503 92	10 02	17,156 95	114 38	2,091 36	13 94	128 32	.....	910 10	20,158 41
Western House of Refuge, Rochester, N. Y.	7,398 13	15 58	55,578 65	117 01	1,825 94	3 84	120 85	16,883 89	569 75	74,858 23
House of Refuge, New York city	14,414 92	17 58	98,087 40	119 62	†3,479 49	4 24	123 86	.....	7,008 98	108,575 87
Reform School, Providence, R. I	2,289 12	10 27	26,969 00	120 93	1,022 59	4 59	125 52	.....	.....	27,991 59
State Industrial School, Lancaster, Mass	2,424 14	17 31	16,995 75	121 39	382 26	2 73	124 12	.....	.....	17,378 01
State Reform School, Elizabeth, Maine	6,122 62	32 56	23,448 68	124 72	1,668 10	8 87	133 59	.....	1,419 29	26,536 07
Catholic Protectory, New York city	23,335 55	55 96	*52,756 07	126 51	.....	.....	.....	.....	.....	.....
State Reform School, Waukesha, Wis.	2,803 70	19 20	18,802 39	128 78	954 08	6 53	135 31	.....	.....	19,756 47
State Reform School, Lancaster, Ohio	7,969 25	33 21	37,277 94	155 32	1,697 85	7 07	162 39	.....	151 00	39,126 79
State Reform School, Westborough, Mass.	11,784 07	36 26	55,623 29	171 15	3,148 85	9 69	180 84	.....	.....	58,772 14
House of Correction, Boston, Mass.	6,148 39	29 14	45,735 20	216 75	7,606 44	36 05	252 80	.....	.....	53,341 64

* Includes all expenditures except for construction of buildings, purchase of ground and additions.

† Includes bedding.

TABLE No. 28.

Detailed Statement of Expenditures of Houses of Refuge and Reform Schools in the United States, for the year 1875.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
State Primary School, Monson, Mass	496	$13,763 98	$27 75	$12,291 86	$24 78	$4,639 72	$9 35	$114 58	$0 23	$3,911 19	$7 88
State Reform School, Lancaster, Ohio	462	14,862 23	32 17	25,519 80	55 24	†12,273 85	26 57	324 69	70	453 28	98
House of Refuge, New York city	820	36,061 79	43 97	45,516 21	55 51	12,846 57	15 67	166 14	20	6,412 87	7 82
State Reform School, Jamesburgh, N. J	186	5,856 76	31 49	8,010 96	43 07	4,659 49	25 05	329 83	1 77	1,780 18	9 57
Wisconsin Industrial School for Boys, Waukesha	295	15,175 53	51 44	9,321 03	31 59	5,119 29	17 35	493 20	1 67	4,146 67	14 05
State Reform School, Lansing, Michigan	*231	12,990 98	56 23	10 942 18	47 37	3,865 28	16 74	173 85	75	1,776 15	7 69
Western House of Refuge, Rochester, N. Y.	404	19,522 58	48 32	18 427 63	45 61	7,183 59	17 73	434 02	1 08	7,287 27	18 14
State Reform School, Westborough, Mass	335	18,775 40	56 05	14,688 94	43 85	4,379 07	13 07	81 60	24	5,898 12	17 61
State Reform School, Elizabeth, Maine	136	6,946 49	51 08	4,797 15	35 27	2,339 92	17 20	.....	.....	3,315 39	24 38
House of Correction, Boston, Mass	575	18,868 04	32 81	31,555 72	54 88	†7,575 72	13 18	1,587 21	2 76	14,833 68	25 79
House of Refuge, Plainfield, Indiana	*298	13,005 27	43 64	28,462 52	95 51	3,080 10	10 33	.....	.....	1,924 31	6 46
State Industrial School for Girls, Lancaster, Mass.	85	9,246 14	108 78	4,607 20	54 20	1,273 87	14 99	152 72	1 79	1,593 72	18 75

* Average number estimated from tables given in reports.

† Includes bedding.

TABLE No. 28—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
State Primary School, Monson, Mass	$7,067 73	$14 25	$41,789 06	$84 25	$1,714 52	$3 45	$87 70	$901 00	....	$44,404 58
State Reform School, Lancaster, Ohio	5,614 57	12 15	59,048 42	127 81	3,292 98	7 13	134 94	5,750 24	.....	58,135 42
House of Refuge, New York city	11,018 45	13 44	112,022 03	136 61	1,412 42	1 72	138 33	895 27	$4,251 75	118,581 47
State Reform School, Jamesburgh, N. J	5,959 85	32 04	26,597 07	142 99	542 28	2 91	145 90	.....	11,204 58	38,343 93
Wisconsin Industrial School for Boys, Waukesha	8,002 29	27 13	42,258 01	143 24	904 25	3 06	146 30	670 01	1,324 43	45,156 70
State Reform School, Lansing, Michigan	5,186 02	22 45	34,934 46	151 23	124 83	54	151 67	.....	....	35,059 29
Western House of Refuge, Rochester, N. Y	9,264 91	22 88	62,120 00	153 76	2,676 37	6 62	160 38	13,125 08	909 24	78,830 69
State Reform School, Westborough, Mass	8,326 00	24 85	52,149 13	155 67	663 21	1 98	157 65	855 00	.....	53,667 34
State Reform School, Elizabeth, Maine	4,620 32	33 97	22,019 27	161 90	1,568 32	11 53	173 43	.....	1,215 81	24,803 40
House of Correction, Boston, Mass	27,968 05	48 64	102,388 42	178 06	7,412 28	12 89	190 95	.....	.....	109,800 70
House of Refuge, Plainfield, Indiana	13,605 95	45 66	60,078 13	201 60	.....	.....	.....	6,512 38	.....	66,590 51
State Industrial School for Girls, Lancaster, Mass	3,213 18	37 80	20,086 83	236 31	1,480 24	17 41	253 72	4,884 76	.....	26,451 83

TABLE No. 29.

Detailed Statement of Expenditures of Houses of Refuge and Reform Schools in the United States, for the year 1876.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
State Primary School, Monson, Mass.....	515	$13,728 91	$26 66	$13,758 15	$26,72	$5,277 29	$10 25	$308 65	$0 60	$4,296 68	$8 34
Catholic Protectory, New York city.....	2,115½	35,659 31	16 85	80,695 98	38 14	.....	.....	2,309 81	1 09	11,072 33	5 23
State Reform School, Lancaster, Ohio....	507	16,557 34	32 66	24,189 33	47 71	†7,583 39	14 96	.....	.....	729 90	1 44
Western House of Ref., Rochester, N. Y..	457	18,717 76	40 95	19,234 69	42 09	6,476 23	14 18	410 22	89	6,988 23	15 29
House of Refuge, New York city.....	924	37,521 93	40 61	50,492 18	54 64	14,793 60	16 01	255 09	28	7,639 89	8 26
State Reform School, Jamesburgh, N. J..	198	5,626 46	28 42	10,930 34	55 20	3,756 56	18 97	289 20	1 46	1,921 37	9 70
Wis. Indust'l School for Boys, Waukesha.	299	16,454 32	55 03	9,218 76	30 83	3,522 52	11 78	281 38	94	4,164 29	13 92
House of Refuge, Baltimore, Md.....	261	10,262 83	39 32	13,286 33	50 91	4,309 72	16 52	47 98	18	2,933 22	11 23
State Reform School, Westborough, Mass.	348	19,259 63	55 34	15,317 83	44 02	5,609 90	16 12	91 69	26	5,563 10	15 99
House of Refuge, Plainfield, Indiana.....	*326	9,475 47	29 06	17,773 83	54 52	5,489 93	16 84	.....	.....	1,725 19	5 29
House of Correction, Boston, Mass..	587	19,960 06	34 01	28,650 76	48 81	†6,007 16	10 23	1,578 21	2 69	14,947 74	25 46
State Reform School, Lansing, Mich.....	231	11,533 43	49 93	10,503 85	45 47	3,796 37	16 43	325 14	1 41	1,692 00	7 32
House of Refuge, Louisville, Ky.....	*153	10,095 20	65 98	7,711 88	50 40	1,154 12	7 55	320 60	2 09	1,367 50	8 94
House of Ref., Phila., Pa.(colored depart.)	109	5,893 62	54 07	6,037 65	55 39	2,241 54	20 57	57 92	53	1,895 53	17 39
House of Ref., Phila., Pa. (white depart.)	329	27,248 40	82 82	18,817 37	57 19	5,147 20	15 65	190 66	58	7,440 81	22 61
State Ind'l Sch'l for Girls, Lancaster, Mass.	122	10,960 97	89 85	6,111 60	50 09	2,503 10	20 52	277 88	2 28	2,324 30	19 05

*Average number estimated from tables given in reports.

†Includes bedding.

TABLE No. 29—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
State Primary School, Monson, Mass	$8,176 53	$15 88	$45,546 21	$88 45	$1,034 42	$2 01	$90 46	.....	.....	$46,580 63
Catholic Protectory, New York city	59,196 82	27 99	*188,934 25	89 31	.....	.....	.....	.....	.....	.....
State Reform School, Lancaster, Ohio	7,845 68	15 47	56,905 64	112 24	5,479 37	10 81	133 05	.....	$9,242 50	71,627 51
Western House of Refuge, Rochester, N. Y	8,332 81	18 24	60,159 94	131 64	3,153 89	6 90	138 54	$84,856 09	307 44	148,477 36
House of Refuge, New York city	12,674 48	13 72	123,377 17	133 52	1,929 43	2 08	135 60	1,230 95	3,334 20	129,871 75
State Reform School, Jamesburgh, N. J	4,280 87	21 62	26,804 80	135 37	1,560 09	7 88	143 25	21,947 81	10,503 55	60,816 25
Wisconsin Industrial School for Boys, Waukesha,	7,526 36	25 17	41,164 63	137 67	779 81	2 61	140 28	1,332 90	4,871 15	48,148 49
House of Refuge, Baltimore, Md	7,419 10	28 43	38,259 18	146 58	1,202 58	4 61	151 19	3,557 76	853 40	43,872 92
State Reform School, Westborough, Mass	5,912 08	16 99	51,754 23	148 72	1,235 94	3 55	152 27	55,597 75	.....	108,587 92
House of Refuge, Plainfield, Indiana	15,623 96	47 93	50,088 38	153 64	2,869 67	8 8	162 44	.....	.....	52,958 05
House of Correction, Boston, Mass	19,668 14	33 51	90,812 07	154 71	6,806 09	11 59	166 30	.....	.....	97,618 16
State Reform School, Lansing, Mich	10,325 93	44 70	38,176 72	165 26	875 05	3 79	169 05	.....	.....	39,051 77
House of Refuge, Louisville, Ky	7,100 87	46 41	27,750 17	181 37	1,383 88	9 04	190 41	.....	452 38	29,586 43
House of Refuge, Phila., Pa. (colored depart.)	3,729 49	34 21	19,855 75	182 16	629 23	5 77	187 93	.....	.....	20,484 98
House of Refuge, Phila., Pa. (white depart.)	4,930 05	14 99	63,774 79	193 84	1,558 73	4 74	198 58	.....	2,000 00	67,332 22
State Indust'l School for Girls, Lancaster, Mass.	2,997 07	24 56	25,174 92	206 35	1,044 63	8 56	214 91	2,286 26	....	28,505 81

*Includes all expenditures except for construction and purchase of grounds.

TABLE No. 30.

Detailed Statement of Expenditures of Houses of Refuge and Reform Schools in the United States, for the year 1877.

NAME OF INSTITUTION.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
State Primary School, Monson, Mass.....	535	$14,565 69	$27 23	$14,295 45	$26 72	$1,543 11	$2 88	$906 84	$1 69	$3,880 77	$7 26
Catholic Protectory, New York City.....	2,284¾	45,949 11	20 11	99,198 87	43 42	.....	.....	1,156 94	51	12,421 07	5 43
State Reform School, Lancaster, Ohio	547	16,801 75	30 72	21,689 13	39 65	†10,359 50	18 94	263 44	48	800 95	1 46
State Reform School, West Meriden, Conn.	*262	10,507 47	40 10	8,557 31	32 66	3,342 01	12 76	134 13	51	2,203 21	8 41
State Reform School, Jamesburgh, N. J ..	230	6,618 22	28 78	8,745 98	38 02	3,731 92	16 23	255 86	1 11	1,108 79	4 82
Wisconsin Ind'l Sch'l for Boys, Waukesha	341	15,429 64	45 24	10,810 88	31 70	4,141 07	12 15	533 25	1 56	3,615 82	10 60
State Reform School, Elizabeth, Maine...	145	5,400 05	37 24	5,420 83	37 38	†2,431 69	16 77	102 18	70	1,184 13	8 16
State Reform School, Lansing Mich.....	252	9,919 12	39 36	9,172 04	36 39	4,089 48	16 23	283 12	1 12	2,149 33	8 53
House of Refuge, Louisville, Kentucky...	*197	9,606 52	48 76	7,293 99	37 02	823 89	4 19	296 00	1 50	1,359 13	6 90
House of Refuge, New York City.....	917	37,014 45	40 36	52,469 75	57 22	16,258 20	17 73	378 62	41	6,346 70	6 92
House of Refuge, Cincinnati, Ohio.....	234	12,001 70	51 29	10,537 81	45 03	2,821 38	12 06	196 87	84	2,171 83	9 28
House of Correction, Boston, Mass.....	566	20,645 79	36 47	26,577 00	46 95	†5,425 39	9 59	1,327 89	2 35	8,419 57	14 87
Western House of Refuge, Rochester, N.Y.	492	20,839 15	42 35	23,621 92	48 01	7,130 64	14 49	278 09	57	8,285 18	16 84
Reform School, Providence, R. I	*207	9,304 62	44 95	12,153 59	58 71	†3,640 46	17 59	157 83	76	1,985 70	9 59
House of Refuge, Phil'a, Pa. (white dept.)	344	25,182 78	73 21	19,068 54	55 43	2,061 59	5 99	82 75	24	4,714 27	13 71
House of Refuge, Phil'a, Pa. (color'd dept.)	124	6,258 85	50 47	5,774 99	46 57	2,383 14	19 22	51 49	41	1,487 78	11 99
State Reform School, Westborough, Mass.	327	21,546 07	65 89	17,189 59	52 57	2,834 18	8 67	96 98	29	4,588 22	14 03
State Reform School, Pontiac, Illinois....	164	9,885 89	60 28	8,517 86	51 94	2,631 22	16 04	205 11	1 25	2,971 80	18 12
State Indus Sc'l for Girls, Lancaster, Mass	121	10,768 56	88 99	6,043 74	49 95	1,564 69	12 93	160 55	1 33	1,775 67	14 68
Pennsylvania Reform Sc'l, Morganza Sta'n	220	16,207 43	73 67	13,423 85	61 02	4,444 37	20 20	453 90	2 06	3,648 10	16 59

* Average number estimated from tables given in reports.

† Includes bedding.

TABLE No. 30—(*Continued*).

NAME OF INSTITUTION.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excludi'g repairs.	ORDINARY REPAIRS.		Annu'l cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
State Primary School, Monson, Mass.....	$9,776 09	$18 27	$44,967 95	$84 05	$2,380 92	$4 45	$88 50	$1,524 40	.....	$48,873 27
Catholic Protectory, New York City.	61,342 03	26 85	*220,068 02	96 32	.....	.....	.....	.....	.....	.....
State Reform School, Lancaster, Ohio	6,032 34	11 03	55,947 11	102 28	879 05	1 61	103 89	5,569 04	$9,120 52	71,515 72
State Reform School, West Meriden, Conn.	4,199 58	16 03	28,943 71	110 47	1,728 83	6 59	117 06	2,134 06	1,475 67	34,282 27
State Reform School, Jamesburgh, N. J..	5,404 05	23 49	25,864 82	112 45	2,559 91	11 13	123 58	3,035 33	13,066 42	44,526 48
Wisconsin Ind'l Sch'l for Boys, Waukesha	7,711 36	22 62	42,242 02	123 87	672 89	1 97	125 84	899 34	2,507 06	46,321 31
State Reform School, Elizabeth, Maine...	8,820 27	26 34	18,359 15	126 61	884 70	6 10	132 71	2,000 44	1,831 26	23,075 55
State Reform School, Lansing, Mich.....	6,927 38	27 49	32,540 47	129 12	2,701 40	10 72	139 84	.....	.....	35,241 87
House of Refuge, Louisville, Kentucky....	6,552 05	33 26	25,931 58	131 63	1,680 05	8 53	140 16	.....	4,457 52	32,069 15
House of Refuge, New York City.....	9,583 33	10 45	122,051 05	133 09	2,454 18	2 67	135 76	18,251 72	3,333 14	146,090 09
House of Refuge, Cincinnati, Ohio.....	5,216 88	22 29	32,946 47	140 79	3,020 94	12 91	153 70	3,889 01	15,411 10	55,267 52
House of Correction, Boston, Mass.....	18,564 71	32 80	80,960 35	143 03	3,503 53	6 17	149 23	.....	.....	84,463 88
Western House of Refuge, Rochester, N.Y.	10,262 88	20 86	70,417 86	143 12	2,314 09	4 70	147 82	35,971 93	105 28	108,809 16
Reform School, Providence, R. I.....	4,023 03	19 44	31,265 23	151 04	2,954 92	14 27	165 31	.....	.....	34,220 15
House of Refuge, Phil'a, Pa. (white dept.)	4,864 41	14 15	55,974 34	162 74	5,981 02	17 38	180 12	.....	2,000 00	63,955 36
House of Refuge, Phil'a, Pa.(color'd dept.)	4,722 74	38 09	20,678 99	166 76	2,068 79	16 68	183 44	.....	.....	22,747 78
State Reform School, Westborough, Mass.	11,476 22	35 10	57,731 26	176 55	2,756 52	8 43	184 98	.....	823 87	61,311 65
State Reform School, Pontiac, Illinois....	5,259 08	32 07	29,470 96	179 70	5,477 66	33 33	213 03	6,367 66	.....	41,315 28
State Indus. Sc'l for Girls, Lancaster, Mass	2,703 04	22 34	23,016 25	190 22	1,618 68	13 38	203 60	1,310 00	.....	25,944 93
Pennsylvania Reform Sc'l, Morganza Sta'n	7,115 55	32 34	45,293 20	205 88	222 40	1 01	206 89	46,082 28	23,511 72	115,109 60

*Includes all expenditures except for construction of buildings and purchase of grounds.

TABLE No. 31.

Detailed Statement of Expenditures of Houses of Refuge and Reform Schools in the United States, for the different years named.

LOCATION.	Name.	Years.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
				Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.
Mass., Westborough.....	State Reform School	1860	443	$10,068 51	$22 73	$15,595 55	$35 20	$5,583 84	$12 61	$146 21	$0 33	$3,866 36	$8 73
Mass., Westborough.....	State Reform School.....	1865	325	11,864 81	36 51	18,643 63	57 37	7,106 83	21 87	82 05	25	6,141 90	18 89
Mass., Westborough.....	State Reform School.....	1875	335	18,775 40	56 05	14,688 94	43 85	4,379 07	13 07	81 60	24	5,898 12	17 61
Mass., Westborough.....	State Reform School.....	1876	348	19,259 63	55 34	15,317 83	44 02	5,609 90	16 12	91 69	26	5,563 10	15 99
Mass., Westborough.....	State Reform School.....	1877	327	21,546 07	65 89	17,189 59	52 57	2,834 18	8 67	96 98	29	4,588 22	14 03
Mass., Westborough.....	State Reform School.....	1878	316	23,820 75	75 38	14,210 66	44 97	4,705 42	14 89	128 54	41	5,409 94	17 12
Massachusetts, Lancaster.	State Indus'al School for girls	1875	85	9,246 14	108 78	4,607 20	54 20	1,273 87	14 99	152 72	1 79	1,593 72	18 75
Massachusetts, Lancaster.	State Indus'al School for girls	1876	122	10,960 97	89 85	6,111 60	50 09	2,503 10	20 52	277 88	2 28	2,324 30	19 05
Massachusetts, Lancaster.	State Indus'al School for girls	1877	121	10,768 56	88 99	6,043 74	49 95	1,564 69	12 93	160 55	1 33	1,775 67	14 68
Massachusetts, Lancaster	State Indus'al School for girls	1878	99	10,048 20	101 49	4,474 41	45 19	1,485 88	15 00	274 60	2 78	1,470 13	14 85
Massachusetts, Monson...	State Primary School.....	1875	496	13,763 98	27 75	12,291 86	24 78	4,639 72	9 35	114 58	23	3,911 19	7 88
Massachusetts, Monson...	State Primary School.....	1876	515	13,728 91	26 66	13,758 15	26 72	5,277 29	10 25	308 65	60	4,296 68	8 34
Massachusetts, Monson ..	State Primary School.....	1877	535	14,565 69	27 23	14,295 45	26 72	1,543 11	2 88	906 84	1 69	3,880 77	7 26
Massachusetts, Monson...	State Primary School.....	1878	537	15,309 33	28 51	13,745 78	25 59	5,145 59	9 58	166 34	31	3,909 61	7 28
Massachusetts, Boston....	House of Correction.....	1865	211	9,475 19	44 90	16,060 65	76 12	*2,231 81	10 58	368 47	1 75	11,450 69	54 26
Massachusetts, Boston....	House of Correction.....	1875	575	18,868 04	32 81	31,555 72	54 88	*7,575 72	13 18	1,587 21	2 76	14,833 68	25 79
Massachusetts, Boston ...	House of Correction.....	1876	587	19,960 06	34 01	28,650 76	48 81	*6,007 16	10 23	1,578 21	2 69	14,947 74	25 46
Massachusetts, Boston....	House of Correction.....	1877	566	20,645 79	36 47	26,577 00	46 95	*5,425 39	9 59	1,327 89	2 35	8,419 57	14 87
Maine, Elizabeth.....	State Reform School.....	1860	177	3,883 81	21 94	4,788 79	27 05	2,465 07	13 93	.....	.....	1,224 04	6 91
Maine, Elizabeth.....	State Reform School.....	1865	188	3,333 29	17 73	8,128 91	43 24	3,309 82	17 61	.....	.....	†2,554 04	13 58
Maine, Elizabeth.....	State Reform School.....	1875	136	6,946 49	51 08	4,797 15	35 27	2,339 92	17 20	.....	.....	3,315 39	24 38
Maine, Elizabeth.....	State Reform School.....	1877	145	5,400 05	37 24	5,420 83	37 38	*2,431 69	16 77	102 18	70	1,184 13	8 16
Michigan, Lansing.....	State Reform School.....	1860	103	3,586 66	34 82	3,556 66	34 53	1,464 22	14 21	223 82	2 17	1,088 98	10 58
Michigan, Lansing.....	State Reform School.....	1875	‡231	12,990 98	56 23	10,942 18	47 37	3,865 28	16 74	173 85	75	1,776 15	7 69
Michigan, Lansing.....	State Reform School.....	1876	231	11,533 43	49 93	10,503 85	45 47	3,796 37	16 43	325 14	1 41	1,692 00	7 32
Michigan, Lansing.....	State Reform School.....	1877	252	9,919 12	39 36	9,172 04	36 39	4,089 48	16 23	283 12	1 12	2,149 33	8 53
New Jersey, Jamesburgh	State Reform School.....	1875	186	5,856 76	31 49	8,010 96	43 07	4,659 49	25 05	329 83	1 77	1,780 18	9 57
New Jersey, Jamesburgh.	State Reform School.....	1876	198	5,626 46	28 42	10,930 34	55 20	3,756 56	18 97	289 20	1 46	1,921 37	9 70
New Jersey, Jamesburgh.	State Reform School.....	1877	230	6,618 22	28 78	8,745 98	38 02	3,731 92	16 23	255 86	1 11	1,108 79	4 82
Ohio, Lancaster.....	State Reform School.....	1865	‡240	8,702 54	36 26	12,930 68	53 87	*7,409 33	30 87	.....	.....	266 14	1 11
Ohio, Lancaster.....	State Reform School.....	1875	462	14,862 23	32 17	25,519 80	55 24	*12,273 85	26 57	324 69	70	453 28	98
Ohio, Lancaster.....	State Reform School....	1876	507	16,557 34	32 66	24,189 33	47 71	*7,583 39	14 96	.....	.....	729 90	1 44

‡ Average number estimated from tables given in reports.

* Includes bedding.

† Includes furniture.

TABLE No. 31—(*Continued*).

LOCATION.	Nam .	Years.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
				Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.	Aggregate cost.	Cost per cap'a.
Ohio, Lancaster.....	State Reform School.....	1877	547	$16,801 75	$30 72	$21,689 13	$39 65	*$10,359 50	$18 94	$263 44	$0 48	$800 95	$1 46
Penn., Philadelphia.	House of Refuge (white dept)	1860	301	7,547 73	25 07	8,059 42	26 77	4,065 50	13 51	148 08	49	2,874 45	9 55
Penn , Philadelphia.....	House of Refuge (white dept)	1865	466	7,874 94	16 89	18,013 03	38 65	10,450 06	22 43	635 28	1 37	5,264 48	11 29
Penn., Philadelphia	House of Refuge (white dept)	1876	329	27,248 40	82 82	18,817 37	57 19	5,147 20	15 65	190 66	58	7,440 81	22 61
Penn., Philadelphia.....	House of Refuge (white dept)	1877	344	25,182 78	73 21	19,068 54	55 43	2,061 59	5 99	82 75	24	4,714 27	13 71
Penn., Philadelphia.....	House of Refuge (col. dept)...	1860	141	3,799 27	26 94	3,725 24	26 42	1,600 40	11 35	165 41	1 17	972 95	6 90
Penn., Philadelphia.....	House of Refuge (col. dept)...	1865	150	4,195 60	27 97	5,933 45	39 56	3,471 61	23 14	173 19	1 16	1,879 18	12 53
Penn., Philadelphia	House of Refuge (col. dept)...	1876	109	5,893 62	54 07	6,037 65	55 39	2,241 54	20 57	57 92	53	1,895 53	17 39
Penn., Philadelphia.....	House of Refuge (col. dept)...	1877	124	6,258 85	50 47	5,774 99	46 57	2,383 14	19 22	51 49	41	1,487 78	11 99
Rhode Island, Providence	Reform School.....	1860	168	3,909 15	23 27	6,422 53	38 23	*2,721 50	16 20	59 04	35	1,043 37	6 21
Rhode Island, Providence	Reform School	1865	223	5,820 00	26 09	12,293 95	55 13	*4,757 37	21 33	120 56	54	1,688 00	7 57
Rhode Island, Providence	Reform School.....	1877	‡207	9,304 62	44 95	12,153 59	58 71	*3,640 46	17 59	157 83	76	1,985 70	9 59
Wisconsin, Waukesha....	Industrial School for Boys....	1865	‡146	4,137 74	28 34	5,671 97	38 85	*5,031 00	34 46	.....	....	1,157 98	7 93
Wisconsin, Waukesha...	Industrial School for Boys....	1875	295	15,175 53	51 44	9,321 03	31 59	5,119 29	17 35	493 20	1 67	4,146 67	14 05
Wisconsin, Waukesha....	Industrial School for Boys....	1876	299	16.454 32	55 03	9,218 76	30 83	3,522 52	11 78	281 38	94	4,161 29	13 92
Wisconsin, Waukesha....	Industrial School for Boys....	1877	341	15,429 64	45 24	10,810 88	31 70	4,141 07	12 15	533 25	1 56	3,615 82	10 60
New York, New York city	House of Refuge	1860	574	12,636 46	22 02	20,197 67	35 18	8,666 07	15 10	388 71	67	4,784 67	8 34
New York, New York city	House of Refuge.....	1865	820	16,323 71	19 91	39,486 04	48 15	19,793 62	24 14	535 99	65	7,533 12	9 19
New York, New York city	House of Refuge.....	1875	820	36,061 79	43 97	45,516 21	55 51	12,846 57	15 67	166 14	20	6,412 87	7 82
New York, New York city	House of Refuge.....	1876	924	37,521 93	40 61	50,492 18	54 64	14,793 60	16 01	255 09	28	7,639 89	8 26
New York, New York city	House of Refuge.....	1877	917	37,014 45	40 36	52,469 75	57 22	16,258 20	17 73	378 62	41	6,346 70	6 92
New York, New York city	House of Refuge.....	1878	930	37,454 09	40 27	43,414 23	46 68	11,462 79	12 33	329 91	36	7,097 31	7 63
New York, Rochester....	Western House of Refuge....	1860	425	8,999 69	21 18	12,268 17	28 87	6,374 38	15 00	84 98	20	2,277 37	5 36
New York, Rochester....	Western House of Refuge....	1865	475	11,770 58	24 78	20,451 63	43 05	10,968 96	23 10	259 61	55	4,729 74	9 95
New York, Rochester....	Western House of Refuge....	1875	404	19,522 58	48 32	18,427 63	45 61	7,183 59	17 73	434 02	1 08	7,287 27	18 14
New York, Rochester....	Western House of Refuge....	1876	457	18,717 76	40 95	19,234 69	42 09	6,476 23	14 18	410 22	89	6,988 23	15 29
New York, Rochester...	Western House of Refuge....	1877	492	20,839 15	42 35	23,621 92	48 01	7,130 64	14 49	278 09	57	8,285 18	16 84
New York, Rochester....	Western House of Refuge....	1878	588	22,148 92	37 67	23,722 26	40 34	9,026 90	15 35	348 20	59	7,413 17	12 61
New York, New York city	Catholic Protectory.....	1865	417	4,763 00	11 42	23,175 44	55 57	.....	.....	253 73	61	1,228 35	2 95
New York, New York city	Catholic Protectory.....	1876	2,115½	35,659 31	16 85	80,695 98	38 14	.....	.....	2,309 81	1 09	11,072 33	5 23
New York, New York city	Catholic Protectory	1877	2,284½	45,949 11	20 11	99,198 87	43 42	.....	.....	1,156 94	51	12,421 07	5 43
New York, Elmira.....	New York State Reformatory	1878	231	8,979 52	38 87	10,953 98	47 42	*5,195 16	22 49	256 79	1 11	5,462 80	23 65

* Includes bedding.

‡ Average number estimated from tables given in reports.

TABLE No. 31—(*Continued*).

LOCATION.	Name.	Years.	ALL OTHER ORDINARY EXPENSES		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraord'ry repairs and improvem's.	All other extraordinary expenditures.	Total expenditures.
			Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
Mass., Westborough.....	State Reform School.....	1860	$9,912 82	$22 37	$45,173 29	$101 97	$2,461 43	$5 55	$107 52	.....	.....	$47,634 72
Mass., Westborough.....	State Reform School.....	1865	11,784 07	36 26	55,623 29	171 15	3,148 85	9 69	180 84	.....	.....	58,772 14
Mass., Westborough.....	State Reform School.....	1875	8,326 00	24 85	52,149 13	155 67	663 21	1 98	157 65	$855 00	.....	53,667 34
Mass., Westborough.....	State Reform School.....	1876	5,912 08	16 99	51,754 23	148 72	1,235 94	3 55	152 27	55,597 75	.....	108,587 92
Mass., Westborough.....	State Reform School.....	1877	11,476 22	35 10	57,731 26	176 55	2,756 52	8 43	184 98	.....	$823 87	61,311 65
Mass., Westborough	State Reform School	1878	4,779 31	15 12	53,054 62	167 89	2,625 21	8 31	176 20	.....	14,764 13	70,443 96
Massachusetts, Lancaster.	State Indus'al School for girls	1875	3,213 18	37 80	20,086 83	236 31	1,480 24	17 41	253 72	4,884 76	.....	26,451 83
Massachusetts, Lancaster.	State Indus'al School for girls	1876	2,997 07	24 56	25,174 92	206 35	1,044 63	8 56	214 91	2,286 26	.....	28,505 81
Massachusetts, Lancaster.	State Indus'al School for girls	1877	2,703 04	22 34	23,016 25	190 22	1,618 68	13 38	203 60	1,310 00	.....	25,944 93
Massachusetts, Lancaster.	State Indus'al School for girls	1878	2,780 49	28 09	20,533 71	207 41	1,245 40	12 58	219 99	2,443 24	1,500 00	25,722 35
Massachusetts, Monson...	State Primary School.....	1875	7,067 73	14 25	41,789 06	84 25	1,714 52	3 45	87 70	901 00	.....	44,404 58
Massachusetts, Monson...	State Primary School.....	1876	8,176 53	15 88	45,546 21	88 45	1,034 42	2 01	90 46	.....	.....	46,580 63
Massachusetts, Monson...	State Primary School.....	1877	9,776 09	18 27	44,967 95	84 05	2,380 92	4 45	88 50	1,524 40	.....	48,873 27
Massachusetts, Monson...	State Primary School	1878	12,641 71	23 55	50,918 36	94 82	2,649 18	4 93	99 75	7,034 39	191 89	60,793 82
Massachusetts, Boston....	House of Correction.....	1865	6,148 39	29 14	45,735 20	216 75	7,606 44	36 05	252 80	.....	.....	53,341 64
Massachusetts, Boston....	House of Correction.....	1875	27,968 05	48 64	102,388 42	178 06	7,412 28	12 89	190 95	.....	.....	109,800 70
Massachusetts, Boston....	House of Correction.....	1876	19,668 14	33 51	90,812 07	154 71	6,806 09	11 59	166 30	.....	.....	97,618 16
Massachusetts, Boston....	House of Correction.....	1877	18,564 71	32 80	80,960 35	143 03	3,503 53	6 17	149 23	.....	.....	84,463 88
Maine, Elizabeth.....	State Reform School.....	1860	4,203 19	23 75	16,564 90	93 58	2,669 14	15 08	108 66	....	793 41	20,027 45
Maine, Elizabeth.....	State Reform School.....	1865	6,122 62	32 56	23,448 68	124 72	1,668 10	8 87	133 59	....	1,419 29	26,536 07
Maine, Elizabeth.....	State Reform School.....	1875	4,620 32	33 97	22,019 27	161 90	1,568 32	11 53	173 43	.....	1,215 81	24,803 40
Maine, Elizabeth.....	State Reform School.....	1877	3,820 27	26 34	18,359 15	126 61	884 70	6 10	132 71	2,000 44	1,831 26	23,075 55
Michigan, Lansing.....	State Reform School.....	1860	3,776 27	36 66	13,696 61	132 97	2,303 39	22 36	155 33	.....	.....	16,000 00
Michigan, Lansing.....	State Reform School.....	1875	5,186 02	22 45	34,934 46	151 23	124 83	54	151 67	.....	.....	35,059 29
Michigan, Lansing.....	State Reform School.....	1876	10,325 93	44 70	38,176 72	165 26	875 05	3 79	169 05	.....	.....	39,051 77
Michigan, Lansing.....	State Reform School.....	1877	6,927 38	27 49	32,540 47	129 12	2,701 40	10 72	139 84	.....	.....	35,241 87
New Jersey, Jamesburgh	State Reform School.....	1875	5,959 85	32 04	26,597 07	142 99	542 28	2 91	145 90	.....	11,204 58	38,343 93
New Jersey, Jamesburgh.	State Reform School.....	1876	4,280 87	21 62	26,804 80	135 37	1,560 09	7 88	143 25	21,947 81	10,503 55	60,816 25
New Jersey, Jamesburgh.	State Reform School.....	1877	5,404 05	23 49	25,864 82	112 45	2,559 91	11 13	123 58	3,035 33	13,066 42	44,526 48
Ohio, Lancaster.....	State Reform School.....	1865	7,969 25	33 21	37,277 94	155 32	1,697 85	7 07	162 39	..... .	151 00	39,126 79
Ohio, Lancaster.....	State Reform School.....	1875	5,614 57	12 15	59,048 42	127 81	3,292 98	7 13	134 94	5,750 24	.....	58,135 42
Ohio, Lancaster.....	State Reform School.....	1876	7,845 68	15 47	56,905 64	112 24	5,479 37	10 81	123 05	.....	9,242 50	71,627 51

TABLE No. 31—(*Continued*).

LOCATION.	Name.	Years.	ALL OTHER ORDINARY EXPENSES		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings extraord'ry repairs and improvem's.	All other extraordinary expenditures.	Total expenditures.
			Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
Ohio, Lancaster	State Reform School	1877	$6,032 34	$11 03	$55,947 11	$102 28	$879 05	$1 61	$103 89	$5,569 04	$9,120 52	$71,515 72
Penn., Philadelphia	House of Refuge (white dept)	1860	3,304 35	10 98	25,999 53	86 37	864 60	2 87	89 24	5,564 90	1,027 33	33,456 36
Penn., Philadelphia	House of Refuge (white dept)	1865	2,314 65	4 97	44,552 44	95 60	3,223 60	6 92	102 52	2,215 83	204 44	50,196 31
Penn., Philadelphia	House of Refuge (white dept)	1876	4,930 05	14 99	63,774 79	193 84	1,558 73	4 74	198 58	.....	2,000 00	67,332 22
Penn., Philadelphia	House of Refuge (white dept)	1877	4,864 41	14 15	55,974 34	162 74	5,981 02	17 38	180 12	.....	2,000 00	63,955 36
Penn , Philadelphia	House of Refuge (col. dept)	1860	800 66	5 68	11,063 93	78 46	951 32	6 74	85 20	.....	909 17	12,924 42
Penn., Philadelphia	House of Refuge (col. dept)	1865	1,503 92	10 02	17,156 95	114 38	2,091 36	13 94	128 32	.....	910 10	20,158 41
Penn., Philadelphia	House of Refuge (col. dept)	1876	3,729 49	34 21	19,855 75	182 16	629 23	5 77	187 93	.....	.....	20,484 98
Penn., Philadelphia	House of Refuge (col. dept)	1877	4,722 74	38 09	20,678 99	166 76	2,068 79	16 68	183 44	.....	.....	22,747 78
Rhode Island, Providence	Reform School	1860	2,062 21	12 27	16,217 80	96 53	1,536 90	9 15	107 68	1,292 48	.....	19,047 18
Rhode Island, Providence	Reform School	1865	2,289 12	10 27	26,969 00	120 93	1,022 59	4 59	125 52	.....	.....	27,991 59
Rhode Island, Providence	Reform School	1877	4,023 03	19 44	31,265 23	151 04	2,954 92	14 27	165 31	.....	.....	34,220 15
Wisconsin, Waukesha	Industrial School for Boys	1865	2,803 70	19 20	18,802 39	128 78	954 08	6 53	135 31	.....	.....	19,756 47
Wisconsin, Waukesha	Industrial School for Boys	1875	8,002 29	27 13	42,258 01	143 24	904 25	3 06	146 30	670 01	1,324 43	45,156 70
Wisconsin, Waukesha	Industrial School for Boys	1876	7,526 36	25 17	41,164 63	137 67	779 81	2 61	140 28	1,332 90	4,871 15	48,148 49
Wisconsin, Waukesha	Industrial School for Boys	1877	7,711 36	22 62	42,242 02	123 87	672 89	1 97	125 84	899 34	2,507 06	46,321 31
New York, New York city	House of Refuge	1860	7,863 08	13 70	54,536 66	95 01	3,564 73	6 21	101 22	10,425 19	1,873 69	70,400 27
New York, New York city	House of Refuge	1865	14,414 92	17 58	98,087 40	119 62	3,479 49	4 24	123 86	.....	7,008 98	108,575 87
New York, New York city	House of Refuge	1875	11,018 45	13 44	112,022 03	136 61	1,412 42	1 72	138 33	895 27	4,251 75	118,581 47
New York, New York city	House of Refuge	1876	12,674 48	13 72	123,377 17	133 52	1,929 43	2 08	135 60	1,230 95	3,334 20	129,871 75
New York, New York city	House of Refuge	1877	9,583 33	10 45	122,051 05	133 09	2,454 18	2 67	135 76	18,251 72	3,333 14	146,090 09
New York, New York city	House of Refuge	1878	8,110 56	8 72	107,868 89	115 99	2,324 78	2 49	118 48	14,591 38	11,633 31	136,418 36
New York, Rochester	Western House of Refuge	1860	4,725 24	11 11	34,7.9 83	81 72	873 49	2 05	83 77	6,484 28	160 00	42,247 60
New York, Rochester	Western House of Refuge	1865	7,398 13	15 58	55,578 65	117 01	1,825 94	3 84	120 85	16,883 89	569 75	74,858 23
New York, Rochester	Western House of Refuge	1875	9,264 91	22 88	62,120 00	153 76	2,676 37	6 62	160 38	13,125 08	909 24	78,830 69
New York, Rochester	Western House of Refuge	1876	8,332 81	18 24	60,159 94	131 64	3,153 89	6 90	138 54	84,856 09	307 44	148,477 36
New York, Rochester	Western House of Refuge	1877	10,262 88	20 86	70,417 86	143 12	2,314 09	4 70	147 82	35,971 93	105 28	108,809 16
New York, Rochester	Western House of Refuge	1878	15,864 54	26 98	78,523 99	133 54	3,938 81	6 69	140 23	4,873 81	.....	87,336 61
New York, New York city	Catholic Protectory	1865	23,335 55	55 96	§52,756 07	126 51	.....	.....	.....	.....	.....	.....
New York, New York city	Catholic Protectory	1876	59,196 82	27 99	§188,934 25	89 31	.....	.....	.....	.....	.....	.....
New York, New York city	Catholic Protectory	1877	61,342 03	26 85	§220,063 02	96 32	.....	.....	.....	.....	.....	.....
New York, Elmira	New York State Reformatory	1878	6,544 59	28 33	37,392 84	161 87	.....	.....	.....	48,584 16	2,076 51	88,053 51

§ Includes all expenditures except for construction of buildings, purchase of ground and additions.

Table No. 32.

Detailed Statement of Expenditures of the New York Institution for the Instruction of the Deaf and Dumb, New York city, for the years 1860 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	Salaries and Wages.§		Provisions and Supplies.		Clothing.		Medical Stores.		Fuel and Light.	
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
1860	‡300	$14,967 01	$49 89	$16,160 33	$53 87	$4,703 25	$15 68	$354 37	$1 18	$5,026 36	$16 75
1861	‡305	17,368 15	56 94	15,247 15	49 99	2,665 36	8 74	454 56	1 49	4,353 40	14 27
1862	‡315	15,091 36	47 91	16,130 46	51 21	3,053 95	9 69	359 34	1 14	5,404 96	17 16
1863	‡328	16,297 48	49 68	20,289 56	61 86	4,108 32	12 53	560 58	1 70	4,967 56	15 14
1864	‡348	17,816 68	51 19	28,922 65	83 11	4,179 73	12 01	791 01	2 27	8,970 49	25 78
1865	363	15,994 89	44 06	34,328 88	94 57	7,082 80	19 51	891 57	2 45	7,682 99	21 16
1866	‡420	18,072 20	43 03	49,889 01	97 35	8,498 18	20 24	1,582 93	3 77	10,885 35	25 92
1867	‡437	21,965 07	50 26	42,634 17	97 56	10,904 85	24 95	‖1,297 27	2 96	7,444 82	17 03
1868	‡464	24,970 34	53 82	54,908 97	118 33	13,394 77	28 87	1,128 75	2 43	7,307 21	15 75
1869	‡513	31,527 23	61 45	54,674 56	106 58	14,215 80	27 71	1,276 74	2 49	10,967 96	21 38
1870*	512	27,384 73	53 48	30,509 62	59 59	9,981 81	19 49	1,069 66	2 09	7,870 24	15 37
1871	510	46,149 08	90 49	42,206 36	82 76	14,006 37	27 46	3,134 74	6 14	11,120 27	21 80
1872	‡522	54,839 82	105 06	43,238 97	82 83	12,278 03	23 52	702 49	1 34	8,424 92	16 14
1873	501	61,127 23	122 01	48,710 50	97 23	11,625 62	23 21	835 81	1 67	7,843 33	15 65
1874	512	61,352 54	119 82	49,437 75	96 56	11,068 37	21 61	871 65	1 70	10,514 67	20 53
1875†	515	51,512 62	100 02	42,501 17	82 52	11,391 60	22 12	1,193 47	2 32	4,628 46	8 98
1876	519	58,366 26	112 46	45,103 92	86 90	10,070 68	19 41	2,129 19	4 10	¶18,063 77	34 80
1878	479	55,861 57	116 62	47,222 89	98 59	11,720 48	24 47	1,205 96	2 52	8,291 74	17 31
1878	494	52,597 55	106 47	44,184 99	89 44	11,563 74	23 41	1,492 14	3 02	8,356 78	16 92

* Annual report for 1870 embraces only nine months, owing to change in the fiscal year.
† Annual report for 1875 embraces only eleven months, owing to change in the fiscal year.
‡ Average number estimated from tables given in reports.
§ Salaries and wages of all kinds, including salaries of officers and assistants, and wages of tailor, shoemaker, fuel, house, laundry, stable and garden.
‖ Does not include $740 expended for professional services during epidemic.
¶ This includes a payment of $6,465 04 for coal chargeable to previous year.

TABLE No. 32—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	BUILDINGS AND REPAIRS.		Annual cost per capita including buildings and repairs.	Insurance.	Interest.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita			Aggregate cost.	Cost per capita.					
1860	$6,931 80	$23 10	$48,143 12	$160 47	$4,189 32	$13 96	$174 43	$625 00	$14,300 98	$1,269 00	$68,527 42
1861	6,884 67	22 58	46,973 29	154 01	2,965 43	9 72	163 73	625 00	13,557 81	10 20	64,131 73
1862	6,774 35	21 51	46,814 42	148 62	2,171 50	6 89	155 51	625 50	12,985 60	44 66	62,641 68
1863	8,493 90	25 89	54,717 40	166 82	5,882 00	17 93	184 75	602 50	13,103 48	5 17	74,310 55
1864	10,787 37	30 99	71,467 93	205 37	8,996 79	25 85	231 22	594 50	11,845 33	6 10	92,910 65
1865	16,516 01	45 49	82,497 14	227 26	4,261 61	11 74	239 00	547 00	12,783 35	342 32	100,431 42
1866	16,030 62	38 17	95,958 29	228 47	12,759 22	30 38	258 85	1,523 89	11,996 43	215 23	122,453 06
1867	14,350 94	32 84	98,597 12	225 62	26,197 04	59 95	285 57	1,517 00	14,178 82	187 80	140,677 78
1868	14,823 10	31 95	116,533 14	251 15	20,507 26	44 19	295 34	1,517 00	13,249 20	2 60	151,809 20
1869	17,289 27	33 70	129,951 56	253 31	19,541 94	38 09	291 40	2,511 29	12,715 89	8 93	164,729 61
1870*	7,135 19	13 94	*83,951 25	*163 96	9,763 55	19 07	183 03	1,963 15	....	506 75	*96,184 70
1871	14,623 22	28 68	131,240 04	257 33	28,908 28	56 68	314 01	2,039 52	....	400 00	162,587 84
1872	13,764 54	26 37	133,248 77	255 26	23,078 93	44 21	299 47	2,325 23	.....	1,054 04	159,706 97
1873	17,344 88	34 62	147,487 40	294 38	22,799 27	45 50	339 88	2,638 97	.....	500 00	173,425 64
1874	14,040 29	27 42	147,285 27	287 66	11,894 77	23 23	310 89	2,364 87	.....	249 50	161,794 41
1875†	12,281 35	23 85	†123,508 67	†239 82	14,482 46	28 12	267 94	2,212 48	.....	45 00	†140,248 61
1876	15,775 80	30 39	119,509 62	288 07	19,506 65	37 58	325 65	2,069 09	1,455 16	1,121 85	173,662 37
1877	15,184 67	31 70	139,487 31	291 21	18,105 68	37 79	329 00	1,826 36	108 00	1,154 77	160,682 12
1878	15,572 86	31 52	133,768 06	270 78	11,108 83	22 49	293 27	1,657 65	.....	968 81	147,503 35

* Annual report for 1870 embraces only nine months, owing to change in the fiscal year.
† Annual report for 1875 embraces only eleven months, owing to change in the fiscal year.

TABLE NO. 32—(*Continued*).

Detailed Statement of Receipts of the New York Institution for the Deaf and Dumb, New York city, for the years 1860 *to* 1878, *inclusive.*

YEARS.	Cash on hand at commencement of fiscal year.	APPROPRIATIONS FROM THE STATE.				From the State of New Jersey.	From the county of New York for support and clothing.	From county treasurers for support and clothing.	From individuals for support and clothing.	From all other sources.	Total receipts.
		For deficiency.	For interest	For support and tuition.	Total from the State.						
1860	.....	.....	$13,355 98	$34,687 50	$48,043 48	$2,530 00	$680 00	$3,080 68	$5,170 35	$8,536 05	$68,040 56
1861	.....	.....	13,355 98	37,319 75	50,675 73	2,203 60	1,060 00	2,860 00	5,741 40	4,994 62	67,535 35
1862	$296 90	.....	13,355 98	38,200 00	51,555 98	2,341 65	.....	4,219 70	4,617 32	4,502 75	67,534 30
1863	.....	.....	13,355 98	41,065 67	54,421 65	2,228 61	1,453 32	3,083 98	5,314 58	10,677 61	77,179 65
1864	.....	.....	12,065 00	46,474 50	58,539 50	2,795 00	3,046 68	5,800 90	7,286 10	6,112 82	83,581 00
1865	.....	$15,000 00	12,065 00	46,445 00	73,510 00	3,125 00	4,872 29	9,286 24	7,424 01	11,543 53	109,761 07
1866	.....	22,500 00	12,065 00	49,630 00	84,195 00	4,612 69	8,463 91	12,191 71	6,533 46	16,849 98	132,846 75
1867	.....	44,900 00	12,065 00	47,518 75	104,483 75	5,761 56	8,093 51	15,443 08	6,604 54	15,806 54	156,192 98
1868	.....	31,629 78	6,050 00	55,789 75	93,469 53	6,714 47	10,235 48	15,765 54	7,713 31	31,540 65	165,438 98
1869	....	50,000 00	6,015 00	71,250 00	127,265 00	7,922 65	13,092 60	19,848 48	6,699 74	709 10	175,537 57
1870	.....	.....	.....	78,750 00	78,750 00	6,634 63	14,983 58	23,011 07	2,791 48	868 60	127,039 36
1871	.....	.....	....	99,875 24	99,875 24	10,086 33	.....	23,957 28	5,649 86	14,103 46	153,672 17
1872	.....	.....	.....	105,000 00	105,000 00	9,443 57	29,973 54	22,507 51	5,450 90	1,587 72	173,963 24
1873	.....	.....	.....	101,009 99	101,009 99	10,052 58	13,693 45	21,172 41	4,094 60	23,402 61	173,425 64
1874	.....	.....	.....	103,910 92	103,910 92	11,205 81	12,671 59	20,758 69	4,644 94	66,312 79	219,504 74
1875	400 62	.....	.....	95,761 63	95,761 63	17,656 38	13,304 01	21,585 48	1,540 88	47,391 54	197,640 54
1876	391 93	.....	.....	96,714 15	96,714 15	17,814 09	19,792 82	23,892 60	1,971 48	178,320 69	338,897 76
1877	.....	....	.....	88,645 84	88,645 84	16,738 75	20,791 67	22,944 90	1,808 72	97,660 57	248,590 45
1878	.....	.....	.....	90,035 01	90,035 01	18,343 67	20,384 70	21,216 98	1,450 93	118,882 48	270,313 77
	$1,089 45	$164,029 78	$113,748 92	$1,328,083 70	$1,605,862 40	$158,210 94	$196,593 15	$292,627 23	$92,508 60	$659,804 11	$3,006,695 88

TABLE NO. 33.

Detailed Statement of Expenditures of the Institution for the Improved Instruction of Deaf Mutes, New York city, for the years 1871 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1871	*57	$5,939 94	$104 21	$4,279 03	$75 07	.....	.....	.....	.....	.....	.....	$1,389 62	$24 38
1872†	*66	5,055 67	76 60	3,035 34	45 99	.....	.....	$56 03	$0 85	$656 25	$308 77	965 02	14 62
1873	75	6,828 01	91 04	5,027 50	67 03	.....	.....	94 65	1 26	537 50	556 65	1,094 15	14 59
1874	*86	7,019 30	81 62	5,919 32	68 83	$902 40	$10 49	96 83	1 12	884 75	619 31	1,504 06	17 49
1875	92	8,028 40	87 26	6,639 16	72 18	342 16	3 72	‡209 83	2 28	683 87	552 51	1,236 38	13 44
1876	96	9,331 89	97 21	6,631 76	69 08	706 45	7 36	‡250 76	2 61	697 62	534 49	1,232 11	12 83
1877	100	9,318 47	93 18	6,444 50	64 45	1,092 18	10 92	‡220 12	2 20	647 30	457 41	1,104 71	11 05
1878	107	10,078 17	94 19	6,526 60	60 99	940 97	8 79	‡246 32	2 30	447 00	329 54	776 54	7 26

TABLE NO. 33—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total expenditures.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Rent.	All other extraordinary expenses.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
1871	$4,001 42	$70 20	$15,610 01	$273 86	$900 60	$15 80	$289 66	$8,011 25	.....	$24,521 86
1872	1,970 78	29 86	†11,082 84	167 92	53 78	81	168 73	5,625 00	.....	†16,761 62
1873	2,362 57	31 50	15,406 88	205 42	711 22	9 48	214 90	7,500 00	.....	23,618 10
1874	2,175 38	25 29	17,617 29	204 85	400 44	4 66	209 51	7,575 00	.....	25,592 73
1875	1,576 85	17 14	18,032 78	196 01	447 50	4 86	200 87	7,800 00	$730 22	27,010 50
1876	1,459 91	15 21	19,612 88	204 30	1,115 08	11 61	215 91	7,863 80	28 00	28,619 76
1877	1,538 23	15 68	19,748 21	197 48	27 00	27	197 75	7,583 99	28 00	27,387 20
1878	1,942 74	18 16	20,511 34	191 69	951 62	8 89	200 58	7,329 50	25 75	28,818 21

* Average number estimated from tables given in reports.

† Includes expenditures for nine months only, owing to change of fiscal year.

‡ Includes medical attendance.

TABLE No. 34.

Detailed Statement of Expenditures of the Le Couteulx St. Mary's Institution for the Instruction of Deaf Mutes, Buffalo, N. Y., for the years 1873 to 1878, inclusive.

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.		ALL OTHER ORDINARY EXPENSES.	
		Aggregate cost.	Cost per capita	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
1873	*65	$3,500 00	$53 85	$4,878 00	$75 05	$360 00	$5 54	‡$254 00	$3 90	$760 00	$11 69	$1,011 00	$15 55
1874	83	4,052 00	48 82	6,957 00	83 82	†1,403 00	16 91	‡236 00	2 84	1,119 00	13 48	2,805 00	33 79
1875	80	917 80	11 47	5,955 00	74 44	1,126 00	13 95	‡129 00	1 61	1,326 00	16 57	1,848 00	23 10
1876	*83	2,630 00	31 68	7,800 00	93 97	1,478 00	17 81	‡220 00	2 65	1,350 00	16 26	1,240 48	14 95
1877	*94	5,000 00	53 19	8,915 00	94 83	1,193 00	12 69	‡395 00	4 20	1,526 83	16 24	980 00	10 43
1878	115	6,408 00	55 72	8,750 00	76 09	1,831 00	15 92	‡672 00	5 84	827 00	7 19	1,209 00	10 51

* Average number estimated from tables given in reports. † Includes bedding. ‡ Includes medical attendance.

TABLE No. 34—(*Continued*).

YEARS.	Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Buildings, extraordinary repairs and improvements.	Indebtedness upon real estate, principal and interest.	Indebtedness existing for support, etc.	All other extraordinary expenditures.	Total expenditures.
			Aggregate cost.	Cost per capita.						
1873	$10,763 00	$165 58	$140 00	$2 15	$167 73	$1,700 00	$763 34	$2,739 00	$597 00	$16,702 34
1874	16,5 2 00	199 66	213 00	2 56	202 22	1,958 00	563 00	3,147 00	379 00	22,832 00
1875	11,291 80	141 15	113 00	1 41	142 56	2,825 00	610 00	3,375 00	.....	18,214 80
1876	14,718 48	177 33	269 09	3 24	180 57	560 00	580 00	2,687 00	.....	18,814 57
1877	18,009 83	191 59	169 00	1 79	193 38	4,163 35	1,735 00	1,879 00	.....	25,956 18
1878	19,697 00	171 28	311 00	2 70	173 98	3,796 60	1,617 00	5,200 00	.....	30,621 60

The above table loses much of its value from the fact that the treasurer's reports of this institution have been so made as to render impossible a correct analysis of the expenditures. In each year there have appeared in the expenditures such items as these: "Paid other indebtedness existing Oct.————, for support," etc. These items have varied in amount from two thousand to over five thousand dollars. There was nothing in the report to show how much of this indebtedness had been incurred on account of salaries and wages, how much on account of provisions and supplies, or how much for any other item of expenditure. As will be seen, the report for 1875 puts salaries and wages at $917.80, while for the preceding year this item was $4,052, and for the succeeding year $2,630. It is apparent that the amount stated for the year 1875 does not represent the cost to the institution of salaries and wages for that year, and that a considerable portion of the amount included in the next year's report, under the head of indebtedness incurred, etc., ought to be charged to the account of salaries and wages for 1875, in order to make a fair comparison possible.

TABLE NO. 35.

Detailed Statement of Expenditures of Institutions for the Deaf and Dumb in the United States and elsewhere, for the different years named.

LOCATION.	Name of Institution.	Years.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES		FUEL AND LIGHT.	
				Aggregate cost.	Cost per capita	Aggregate cost.	Cost per capita.	Aggregate cost	Cost per capita	Aggregate cost.	Cost per capita	Aggregate cost.	Cost per capita.
Connecticut, Hartford....	American Asylum...	1860	222	$17,38- 00	$78 32	$20,000 00	$90 09	.....	.....	.....	.....	.....	.....
Connecticut, Hartford....	American Asylum.....	1865	215	19,767 36	91 94	16,139 90	75 07	.....	.....	$47 00	$0 22	$3,674 63	$17 09
Connecticut, Hartford....	American Asylum.....	1875	222	33,026 74	148 77	13,316 86	59 99	.....	.....	116 07	52	5,101 88	22 98
Connecticut, Hartford....	American Asylum.....	1876	218	32,915 69	150 99	12,633 42	57 95	.....	.....	148 22	68	4,165 79	19 11
Connecticut, Hartford....	American Asylum.....	1877	231	31,442 05	136 11	12,423 95	53 78	.....	.....	152 42	66	4,092 65	17 72
Illinois, Jacksonville	Illinois Institution	*1865	187	32,285 40	86 32	37,359 85	99 89	$3,462 40	$9 26	232 85	62	10,098 26	27 00
Illinois, Jacksonville	Illinois Institution	1876	330	34,174 24	103 56	14,941 12	45 28	4,068 70	14 15	406 81	1 23	7,008 98	21 24
Illinois, Jacksonville	Illinois Institution	1877	263	36,310 78	138 06	15,350 78	58 37	†3,583 79	13 62	345 79	1 32	5,646 32	21 47
Illinois, Jacksonville	Illinois Institution	1878	304	38,667 58	127 19	16,890 85	55 56	†4,274 91	14 06	405 32	1 34	5,897 86	19 40
Pennsylvania, Phila.....	Pennsylvania Institution	1875	227	26,886 42	118 44	17,244 31	75 97	3,884 84	17 11	192 56	85	260 00	1 14
Pennsylvania, Phila	Pennsylvania Institution	1876	295	31,017 89	105 15	33,010 66	111 90	‡15,310 00	51 89	.....	.....	.....	.....
Pennsylvania, Phila.....	Pennsylvania Institution	1877	314	34,258 25	109 10	31,030 24	108 38	‡9,664 45	30 78	.....	.....	.....	.....
Penn., Turtle Creek	Western Pennsylvania Instit'n,	1877	40	2,167 57	54 19	3,568 73	89 22	.....	.....	.....	.....	.....	.....
Prov. of Ont., Belleville	Ontario Institution.....	1875	203	14,296 69	70 4-	9,959 24	49 06	†506 06	2 49	82 37	40	3,911 88	19 27
Pro . of Ont., Belleville..	Ontario Institution.....	1876	216	14,836 60	68 69	10,457 87	48 42	†356 89	1 65	90 20	42	3,942 10	18 25
Prov. of Ont., Belleville..	Ontario Institution.....	1877	225	15,583 66	69 26	11,595 88	51 54	†437 84	1 94	104 57	46	6,691 98	29 75
Prov. of Ont., Belleville..	Ontario Institution.....	1878	225	15,806 90	70 25	10,677 57	47 46	†475 79	2 12	146 79	65	4,293 28	19 07
Tennessee, Knoxville ...	Tennessee School	*1876	122	22,251 25	91 19	12,124 96	49 69	2,735 41	11 21	809 32	3 32	1,711 19	7 01
Wisconsin, Delavan	Wisconsin Institute	1875	132	11,884 13	112 76	7,749 33	58 71	698 07	5 29	99 42	75	2,204 08	16 69
Wisconsin, Delavan	Wisconsin Institute	1876	145	15,831 02	109 18	8,641 96	59 59	745 50	5 14	65 45	45	3,596 53	24 80
Wisconsin, Delavan	Wisconsin Institute	1877	155	13,962 29	90 08	8,114 25	52 35	541 57	3 49	73 40	48	2,883 10	18 60
New York, New York city,	New York Institution....	1860	300	14,967 01	49 89	16,160 33	53 87	4,703 25	15 68	354 37	1 18	5,026 36	16 75
New York, New York city,	New York Institution.....	1865	363	15,994 89	44 06	34,3-8 88	94 57	7,082 80	19 51	891 57	2 45	7,682 99	21 16
New York, New York city,	New York Institution.....	1876	519	58,366 26	112 46	45,103 92	86 90	10,070 68	19 41	2,129 19	4 10	§18,063 77	34 80
New York, New York city,	New York Institution.....	1877	479	55,861 57	116 62	47,222 89	98 59	11,720 48	24 47	1,205 96	2 52	8,291 74	17 31
New York, New York city,	New York Institution.....	1878	494	52,597 55	106 47	44,184 99	89 44	11,563 74	23 41	1,492 14	3 02	8,356 78	16 92
New York, New York city,	Inst. for Improved Instruction,	1875	92	8,028 40	87 26	6,639 16	72 18	342 16	3 72	‖209 83	2 28	1,236 38	13 44
New York, New York city,	Inst. for Improved Instruction,	1876	96	9,331 89	97 21	6,631 76	69 08	706 45	7 36	‖250 76	2 61	1,232 11	12 83
New York, New York city,	Inst. for Improved Instruction,	1877	100	9,318 47	93 18	6,444 50	64 45	1,092 18	10 92	‖220 12	2 20	1,104 71	11 05
New York, New York city,	Inst. for Improved Instruction,	1878	107	10,078 17	94 19	6,526 60	60 99	940 97	8 79	‖246 32	2 30	776 54	7 26

* Biennial report. The aggregates given are for two years.

† Includes bedding.

‡ Includes furniture.

§ Includes a payment of $6,465.04 for coal chargeable to previous year.

‖ Includes medical attendance.

TABLE No. 35—(*Continued*).

LOCATION.	Name of Institution.	Years.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
				Aggregate cost.	Cost per capita.	Aggregate cost	Cost per capita.	Aggregate cost.	Cost per capita	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
New York, Buffalo.....	Le Couteulx St. Mary's Inst'n..	1875	80	$917 80	$11 47	$5,955 00	$74 44	$1,116 00	$13 95	†$129 00	$1 61	$1,326 00	$16 57
New York, Buffalo.....	Le Couteulx St. Mary's Inst'n..	1876	*83	2,630 00	31 68	7,800 00	93 97	1,478 00	17 81	†220 00	2 65	1,350 00	16 26
New York, Buffalo.....	Le Couteulx St. Mary's Inst'n..	1877	*94	5,000 00	53 19	8,915 00	94 83	1,193 00	12 69	†395 00	4 20	1,526 83	16 24
New York, Buffalo.....	Le Couteulx St. Mary's Inst'n..	1878	115	6,408 00	55 72	8,750 00	76 09	1,831 00	15 92	†672 00	5 84	827 00	7 19
New York, Rome	Central New York Institution,	1877	90	8,354 32	92 82	7,004 48	77 82	975 16	10 84	170 69	1 89	673 02	7 48
New York, Rome	Central New York Institution,	1878	105	9,451 28	90 01	8,372 42	79 74	1,169 65	11 13	530 18	5 05	967 75	9 22
New York, Rochester	Western New York Institut'n..	1877	56	5,889 66	105 17	3,112 10	55 57	466 70	8 33	164 07	2 93	747 90	13 35
New York, Rochester	Western New York Institut'n..	1878	93	8,784 76	94 46	5,267 95	56 64	823 93	8 86	167 80	1 81	1,053 23	11 33
New York, Fordham	St. Joseph's Institution	1877	100	.....	.....	5,273 81	52 74	1,224 01	12 24	250 76	2 51	1,246 46	12 46
New York, Fordham	St. Joseph's Institution	1878	167	658 38	3 94	7,150 72	42 82	2,763 48	16 55	247 37	1 49	708 90	4 24

* Average number estimated from tables given in reports.

† Includes medical attendance.

TABLE No. 35—(*Continued*).

LOCATION.	Name of Institution.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
		Aggregate cost	Cost per capita			Aggregate cost.	Cost per capita.				
Connecticut, Hartford	American Asylum	$776 37	$3 49	$38,164 37	$171 91	$987 07	$4 74	$176 65	$2,171 00	$9,291 67	$50,614 11
Connecticut, Hartford	American Asylum	13,185 11	61 33	52,814 00	245 65	2,553 55	11 87	257 52	.....	.....	55,167 55
Connecticut, Hartford	American Asylum	10,039 00	45 22	61,600 55	277 48	3,756 08	16 92	294 40	.....	.....	65,356 63
Connecticut, Hartford	American Asylum	9,210 31	42 25	59,073 43	270 98	1,745 17	8 01	278 99	.....	.....	60,818 60
Connecticut, Hartford	American Asylum	8,359 54	36 19	56,470 61	244 46	1,928 27	8 35	252 81	.....	.....	58,398 88
Illinois, Jacksonville	Illinois Institution	17,844 79	47 72	101,283 55	270 81	17,644 74	47 18	317 99	.....	994 50	119,922 79
Illinois, Jacksonville	Illinois Institution	17,606 98	53 35	78,806 84	238 81	998 69	3 03	199 45	1,354 51	.....	81,160 04
Illinois, Jacksonville	Illinois Institution	16,122 13	61 30	77,359 59	294 14	12,337 00	46 91	341 05	.....	.....	89,696 59
Illinois, Jacksonville	Illinois Institution	16,179 42	53 22	82,315 94	270 77	2,172 09	7 14	277 91	.....	3,286 30	87,774 33
Pennsylvania, Philadelphia	Pennsylvania Institution	6,369 25	28 06	54,837 38	241 57	226 67	99	242 56	121,862 88	9,700 00	186,626 93
Pennsylvania, Philadelphia	Pennsylvania Institution	741 89	2 52	80,080 44	271 46	.....	.....	.....	37,481 12	4,491 66	122,053 22
Pennsylvania, Philadelphia	Pennsylvania Institution	447 14	1 42	78,400 08	249 68	5,057 25	16 11	265 79	.....	64,812 17	148,269 50
Pennsylvania, Turtle Creek	Western Pennsylvania Institution,	3,000 59	75 01	8,736 89	218 42	.....	.....	.....	.....	.....	8,736 89
Prov. of Ontario, Belleville	Ontario Institution	2,900 03	14 29	31,656 27	155 94	391 32	1 92	157 86	.....	.....	32,047 59
Prov. of Ontario, Belleville	Ontario Institution	3,435 51	15 90	33,119 17	153 33	398 18	1 84	155 17	.....	.....	33,517 35
Prov. of Ontario, Belleville	Ontario Institution	3,436 64	15 27	*37,850 57	168 22	481 93	2 14	170 36	.....	.....	38,332 50
Prov. of Ontario, Belleville	Ontario Institution	4,071 38	18 10	35,471 71	157 65	954 68	4 24	161 89	.....	.....	36,426 39
Tennessee, Knoxville	Tennessee School	9,471 09	38 82	49,103 22	201 24	3,171 37	12 99	214 23	.....	496 50	52,771 09
Wisconsin, Delavan	Wisconsin Institute	5,172 68	39 19	30,807 71	233 39	1,462 27	11 08	244 47	1,499 47	.....	33,769 25
Wisconsin, Delavan	Wisconsin Institute	5,131 32	35 39	34,011 78	234 56	1,320 36	9 11	243 67	7,197 00	.....	42,529 14
Wisconsin, Delavan	Wisconsin Institute	4,853 55	31 31	30,428 16	196 31	998 09	6 44	202 75	3,593 65	.....	35,019 90
New York, New York city	New York Institution	6,931 80	23 10	48,143 12	160 47	4,189 32	13 96	174 43	.....	16,194 98	68,527 42
New York, New York city	New York Institution	16,516 01	45 49	82,497 14	227 26	†4,261 61	11 74	239 00	.....	13,672 67	100,431 42
New York, New York city	New York Institution	15,775 80	30 39	149,509 62	288 07	†19,506 65	37 58	325 65	.....	4,646 10	173,662 37
New York, New York city	New York Institution	15,184 67	31 70	139,487 31	291 21	†18,165 68	37 79	329 00	.....	3,089 13	160,682 12
New York, New York city	New York Institution	15,572 86	31 52	133,768 06	270 78	†11,108 83	22 49	293 27	.....	2,626 46	147,563 35
New York, New York city	Institution for Improved Instruc'n,	1,576 85	17 14	18,032 78	196 01	447 50	4 86	200 87	.....	8,530 22	27,010 50
New York, New York city	Institution for Improved Instruc'n,	1,459 91	15 21	19,612 88	204 30	1,115 08	11 61	215 91	.....	7,891 80	28,619 76
New York, New York city	Institution for Improved Instruc'n,	1,568 23	15 68	19,748 21	197 48	27 00	27	197 75	.....	7,611 99	27,387 20
New York, New York city	Institution for Improved Instruc'n,	1,942 74	18 16	20,511 34	191 69	951 62	8 89	200 58	.....	7,355 25	28,818 21

* Includes $3,333.96 warrant to cover expenditures of preceding year.

† For buildings and repairs.

TABLE No. 35—(*Continued*).

LOCATION.	Name of Institution.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
		Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
New York, Buffalo	Le Couteulx St. Mary's Institution,	$1,848 00	$23 10	*$11,291 80	$141 15	$113 00	$1 41	$142 56	$2,825 00	$3,985 00	$18,214 80
New York, Buffalo	Le Couteulx St. Mary's Institution,	1,240 48	14 95	*14,715 48	177 33	269 09	3 24	180 57	560 00	3,267 00	18,814 57
New York, Buffalo	Le Couteulx St. Mary's Institution,	980 00	10 43	*18,009 83	191 59	169 00	1 79	193 38	4,163 35	3,614 00	25,956 18
New York, Buffalo	Le Couteulx St. Mary's Institution,	1,209 00	10 51	*19,697 00	171 28	311 00	2 70	173 98	3,796 60	6,817 00	30,621 60
New York, Rome	Central New York Institution	1,609 85	17 89	18,787 42	208 75	.....	.....	.....	.....	5,694 36	24,481 78
New York, Rome	Central New York Institution	1,975 87	18 82	22,466 55	213 97	.....	.....	.....	.....	6,849 18	29,315 73
New York, Rochester	Western New York Institution	739 32	13 20	11,119 75	198 55	246 44	4 40	202 95	.....	6,041 26	17,407 45
New York, Rochester	Western New York Institution	940 35	10 11	17,038 02	183 21	.....	.....	.....	6,815 32	13,423 89	37,277 23
New York, Fordham	St. Joseph's Institution	3,426 52	34 26	*11 421 56	114 22	.....	.....	.....	1,351 60	6,850 00	19,623 16
New York, Fordham	St. Joseph's Institution	5,281 00	31 62	*16,809 85	100 66	1,957 27	.....	.....	1,017 75	†22,483 77	42,268 64

* An incomplete statement for comparison. See note to table No. 34.

† Includes $12,597.27 for indebtedness existing October 1, 1877.

Table No. 36.

Detailed Statement of Expenditures of the New York Institution for the Blind, New York city, furnished by the Superintendent, for the years 1860 *to* 1878, *inclusive.*

YEARS.	Average number of pupils.	Salaries and Wages.		Provisions and Supplies.		Clothing.		Medical Stores.		Fuel and Light.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1860	140	$5,350 91	$38 82	$19,022 39	$135 87	$3,475 01	$24 83	.....	....	$1,290 88	.....	.....	$9 22
1861	165	6,045 65	36 64	9,259 66	56 12	3,459 70	20 97	.....	.....	1,165 01	.....	.....	7 06
1862	141	9,432 04	66 89	14,938 24	105 96	3,751 75	26 60	.....	.....	2,225 89	$420 75	$2,646 64	18 77
1863	148	9,738 55	65 80	17,313 78	116 99	5,962 85	40 29	.....	.....	1,465 97	744 25	2,210 22	14 93
1864	125	10,240 75	81 93	17,241 61	137 93	5,205 27	41 64	.....	.....	2,488 52	903 05	3,391 57	27 13
1865	118	9,924 20	84 10	15,715 92	133 19	3,819 88	32 37	.....	.....	1,328 11	668 23	1,996 34	16 92
1866	124	17,006 27	137 12	25,369 60	204 59	5,997 61	48 37	.....	.....	2,325 25	1,257 11	3,582 36	28 89
1867	124	14,364 12	115 84	20,745 47	167 30	4,987 00	40 21	.....	.....	1,580 11	1,031 66	2,611 77	21 06
1868	135	14,039 00	103 99	19,915 26	147 52	4,793 36	35 50	.....	.....	1,466 25	898 46	2,364 71	17 52
1869	133	15,306 40	115 09	18,367 23	138 09	4,569 52	34 36	.....	.....	2,173 58	836 10	3,009 68	22 63
1870	136	16,138 87	118 67	13,418 57	98 67	4,178 37	30 72	.....	.....	834 03	537 50	1,371 53	10 08
1871	141	13,419 17	95 17	13,079 50	92 76	3,874 55	27 48	.....	.....	4,535 82	388 50	4,924 32	34 92
1872	164	19,650 85	119 82	18,319 85	111 71	5,947 78	36 26	.....	.....	3,544 27	1,254 22	4,798 49	29 26
1873	165	21,150 31	128 18	18,329 45	111 09	6,041 62	36 62	.....	.....	5,593 98	1,291 10	6,885 08	41 73
1874	168	21,412 14	127 45	17,912 22	106 62	6,555 48	39 02	.....	.....	4,605 90	1,218 22	5,824 12	34 67
1875	173	21,396 64	123 68	16,410 00	94 85	6,342 49	36 66	.....	.....	3,718 33	1,192 65	4,910 98	28 39
1876	177	21,999 89	124 29	17,457 01	98 63	6,876 07	38 85	.....	.....	2,101 40	1,269 34	3,370 74	19 04
1877	194	22,362 95	115 27	18,064 83	93 12	5,692 75	29 34	.....	.....	4,571 54	1,197 75	5,769 29	29 74
1878	200	22,573 27	112 86	16,987 48	84 94	5,485 83	27 42	.....	.....	2,705 80	1,347 50	4,053 30	20 27

TABLE No. 36—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenses.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
1860	$30,601 11	[$218 58	$59,740 30	$426 72	$2,150 41	$15 36	$442 08	.....	$78,252 80	$140,143 51
1861	18,247 38	110 59	38,177 40	231 38	1,827 42	11 07	244 45	.....	41,494 66	81,499 48
1862	10,424 37	73 93	41,193 04	292 15	2,082 34	14 77	306 92	.....	24,900 14	68,175 52
1863	14,543 09	98 26	49,768 49	336 28	655 60	4 43	340 71	.....	178,198 93	228,623 02
1864	9,969 43	79 75	46,048 63	368 38	4,390 13	35 12	403 50	.....	7,524 16	57,962 92
1865	5,544 40	46 98	37,000 74	313 56	1,877 08	15 90	329 46	.....	28,202 70	67,080 52
1866	13,879 15	111 93	65,834 99	530 92	1,716 87	13 85	544 77	.....	100,467 82	168,019 68
1867	10,735 34	86 57	53,443 70	430 99	1,116 63	9 01	440 00	.....	8,839 37	63,399 70
1868	11,962 64	88 61	53,074 97	393 15	1,052 69	7 79	400 94	.....	23,089 79	77,217 45
1869	9,767 29	73 44	51,020 12	383 61	731 88	5 50	389 11	.....	400 50	52,152 50
1870	8,854 52	65 10	43,961 86	323 25	162 72	1 19	324 44	$67,507 72	.....	111,632 10
1871	9,758 86	69 21	45,056 40	319 55	6,191 16	43 91	363 46	37,488 04	.....	88,735 60
1872	14,246 65	86 87	62,963 62	383 92	4,850 23	29 57	413 49	.....	4,250 00	72,063 85
1873	13,632 91	82 62	66,039 37	400 24	2,904 00	17 60	417 84	2,522 76	10,000 00	81,466 13
1874	12,806 43	76 23	64,510 39	383 99	1,552 56	9 24	393 23	729 69	58,348 49	125,141 13
1875	11,158 37	64 49	60,218 48	348 08	3,430 43	19 83	367 91	.....	17,640 00	81,288 91
1876	13,673 51	77 25	63,377 22	358 06	3,192 06	18 03	376 09	2,650 00	131,398 21	200,617 49
1877	11,911 09	61 39	63,800 91	328 86	10,136 06	52 25	$81 11	.....	121,692 79	195,629 76
1878	10,665 97	53 33	59,765 85	298 82	3,763 30	18 82	317 64	576 50	52,222 29	116,327 94

TABLE No. 37.

Detailed Statement of Expenditures of the New York State Institution for the Blind, Batavia, N. Y., for the years 1870 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1870	85	$9,373 76	$110 28	* $10,250 62	$120 59	.....	.....	* $98 50	$1 16	.....	.....	* $3,453 58	$40 63
1871	105	10,072 10	95 92	10,889 89	103 71	$1,513 81	$14 42	†400 00	3 81	$3,317 99	$687 73	4,005 72	38 15
1872	122	12,693 49	104 04	10,717 84	87 85	1,961 14	16 08	†622 00	5 09	3,265 14	768 00	4,033 14	33 06
1873	140	12,708 34	90 77	13,270 04	94 79	2,707 47	19 34	183 87	1 31	3,290 02	831 77	4,121 79	29 44
1874	150	13,095 39	87 30	12,854 84	85 69	3,885 13	25 90	86 01	57	3,334 49	825 95	4,160 44	27 73
1875	155	13,770 88	88 84	12,015 62	77 52	3,109 50	20 06	†482 78	3 11	3,597 50	875 15	4,472 65	28 85
1876	156	13,110 49	84 04	11,502 36	73 73	3,760 92	24 11	†518 98	3 33	2,804 31	856 45	3,660 76	23 46
1877	162	14,691 24	90 69	11,465 76	70 77	3,087 90	19 06	236 54	1 46	3,601 11	802 50	4,403 61	27 18
1878	162	16,085 35	99 29	8,788 69	54 25	4,357 57	26 89	285 04	1 76	.....	.....	3,623 29	22 36

TABLE No. 37—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Buildings, extraordinary repairs and improvements.	Manufacturing material, broomcorn, etc.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.					
1870	$7,791 54	$91 67	$30,968 00	$364 33	* $250 00	$2 94	$367 27	§ $5,052 59	.....	.....	$36,270 59
1871	5,141 25	48 96	32,022 77	304 98	3,550 00	33 81	338 79	§2,909 87	.....	.....	38,482 64
1872	3,587 99	29 41	33,615 60	275 54	8,697 65	71 29	346 83	§3,791 26	$1,088 39	.....	47,192 90
1873	3,679 43	26 28	36,670 94	261 93	*4,079 79	29 14	291 07	§6,057 97	1,980 42	.....	48,789 12
1874	3,750 02	25 00	37,831 83	252 21	*2,447 82	16 32	268 53	3,779 61	4,329 83	.....	48,389 09
1875	1,393 70	8 99	35,245 13	227 39	*2,000 00	12 90	240 29	7,508 97	706 11	‖ $2,412 15	47,872 36
1876	3,058 42	19 60	35,610 93	228 27	*2,000 00	12 82	241 09	21,009 57	3,345 87	.....	61,966 37
1877	2,708 56	16 72	36,593 61	225 88	1,214 04	7 49	233 37	15,803 09	1,518 05	.....	55,128 79
1878	‡12,380 02	76 42	45,519 96	280 99	2,146 47	13 25	294 24	.....	1,650 30	.....	49,316 73

* Reported to State Board of Charities.
‡ Includes $7,152 bills paid, contracted prior to September 30, 1877.
† Includes medical attendance.
§ For labor and improvement of grounds.
‖ Churchman judgment.

TABLE No. 38.

Detailed Statement of Expenditures of Institutions for the Blind in the United States and elsewhere, for the different years named.

LOCATION.	Name of Institution.	Years.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
				Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
Illinois, Jacksonville	Illinois Institution	1877	57	$12,207 42	$214 16	$4,627 32	$81 18	$642 13	$11 26	$183 00	$3 21	$1,572 00	$27 58
Illinois, Jacksonville	Illinois Institution	1878	72	13,195 56	183 27	5,877 67	81 63	978 74	13 59	242 50	3 37	1,316 04	18 28
Massachusetts, Boston	Perkins Institution	1865	*121	9,464 95	78 22	8,593 22	71 01	.....	.....	22 79	19	2,200 44	18 19
Massachusetts, Boston	Perkins Institution	1875	*179	17,475 21	97 63	11,281 12	63 02	37 83	21	26 21	15	3,184 23	17 79
Massachusetts, Boston	Perkins Institution	1876	*165	19,251 91	116 62	8,753 57	53 11	8 91	5	9 15	6	3,135 52	19 00
Massachusetts, Boston	Perkins Institution	1877	*158	17,783 09	112 55	9,630 20	60 95	.....	.....	17 70	11	2,149 34	13 60
Ohio, Columbus	Ohio Institution	1860	109	7,886 34	72 35	4,361 24	40 01	.....	.....	116 82	1 07	243 23	2 23
Ohio, Columbus	Ohio Institution	1865	*123	8,653 93	70 36	8,778 34	71 36	.....	.....	207 65	1 69	1,550 00	12 60
Ohio, Columbus	Ohio Institution	1875	143	18,774 81	131 29	11,489 52	80 34	248 70	1 74	129 99	91	2,615 03	18 29
Ohio, Columbus	Ohio Institution	1876	151	19,765 82	130 89	12,070 99	79 94	370 01	2 45	134 02	89	3,784 38	25 06
Ohio, Columbus	Ohio Institution	1877	149	19,601 04	131 55	11,894 48	79 83	407 78	2 74	145 53	98	3,546 22	23 80
Pennsylvania, Philadelphia	Institution for the Blind	1875	201	†10,132 57	50 41	‡41,394 93	205 94	.....	.....	.....	.....	.....	.....
Pennsylvania, Philadelphia	Institution for the Blind	1876	201	†10,692 68	53 19	‡49,033 95	243 95	.....	.....	.....	.....	.....	.....
Pennsylvania, Philadelphia	Institution for the Blind	1877	197	†10,151 50	51 54	‡40,678 61	206 49	.....	.....	.....	.....	.....	.....
Province of Ont, Brantford	Ontario Institution	1875	*102	10,552 93	103 46	5,602 53	54 93	227 34	2 23	74 51	73	3,142 12	30 80
Province of Ont., Brantford	Ontario Institution	1876	115	11,140 00	96 86	5,465 42	47 53	94 79	82	77 06	67	3,898 14	33 89
Province of Ont., Brantford	Ontario Institution	1877	128	11,641 06	90 95	6,555 76	51 22	153 34	1 19	32 95	25	4,206 75	32 86
Wisconsin, Janesville	Wisconsin Institution	1875	59	5,885 29	99 75	3,671 57	62 23	223 59	3 79	177 52	3 01	2,657 96	45 05
Wisconsin, Janesville	Wisconsin Institution	1876	60	5,978 53	99 64	4,221 59	70 36	195 40	3 26	115 67	1 93	3,227 98	53 79
Wisconsin, Janesville	Wisconsin Institution	1877	67	6,017 82	89 82	3,952 32	58 98	131 73	1 97	233 82	3 49	2,274 13	33 94
Wisconsin, Janesville	Wisconsin Institution	1878	77	6,565 33	85 26	4,040 02	52 47	157 54	2 04	151 65	1 97	2,436 05	31 64
New York, New York City	New York Institution	1860	140	5,350 91	38 82	19,022 39	135 87	3,475 01	24 83	.....	.....	1,290 88	9 22
New York, New York City	New York Institution	1865	118	9,924 20	84 10	15,715 92	133 19	3,819 88	32 37	.....	.....	1,996 34	16 92
New York, New York City	New York Institution	1875	173	21,396 64	123 68	16,410 00	94 85	6,342 49	36 66	.....	.....	4,910 98	28 39
New York, New York City	New York Institution	1876	177	21,999 89	124 29	17,457 01	98 63	6,876 07	38 85	.....	.....	3,370 74	19 04
New York, New York City	New York Institution	1877	194	22,362 95	115 27	18,064 83	93 12	5,692 75	29 34	.....	.....	5,769 29	29 74
New York, New York City	New York Institution	1878	200	22,573 27	112 86	16,987 48	84 94	5,485 83	27 42	.....	.....	4,053 30	20 27
New York, Batavia	New York St. Institution	1875	155	13,770 88	88 84	12,015 62	77 52	3,109 50	20 06	§482 78	3 11	4,472 65	28 85
New York, Batavia	New York St. Institution	1876	156	13,110 49	84 04	11,502 36	73 73	3,760 92	24 11	§518 78	3 33	3,660 76	23 46
New York, Batavia	New York St. Institution	1877	162	14,691 24	90 69	11,465 76	70 77	3,087 90	19 06	236 54	1 46	4,403 61	27 18
New York, Batavia	New York St. Institution	1878	162	16,085 35	99 29	8,788 69	54 25	4,357 57	26 89	285 04	1 76	3,623 29	22 36

*Average number estimated from tables given in report.
‡ For "household expenses."
† For "instruction."
§ Includes medical attendance.

TABLE No. 38—(*Continued*).

LOCATION.	Name of Institution.	Years.	ALL OTHER ORDINARY EXPENSES. Aggregate cost.	ALL OTHER ORDINARY EXPENSES. Cost per capita.	Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS. Aggregate cost.	ORDINARY REPAIRS. Cost per capita.	Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
Illinois, Jacksonville	Illinois Institution	1877	$6,097 08	$106 97	$25,328 94	$444 36	$1,671 99	$29 33	$473 69	$377 52	.....	$27,378 45
Illinois, Jacksonville	Illinois Institution	1878	4,459 56	61 94	26,070 07	362 08	1,709 24	23 74	385 82	.....	.....	27,779 31
Massachusetts, Boston	Perkins Institution	1865	6,795 58	56 16	27,076 98	223 77	.....	.....	.....	20,394 54	$8,338 24	55,809 76
Massachusetts, Boston	Perkins Institution	1875	6,616 98	36 96	38,621 58	215 76	4,351 94	24 31	240 07	950 37	¶ 20,036 82	63,960 71
Massachusetts, Boston	Perkins Institution	1876	4,669 83	28 30	35,828 89	217 13	3,271 71	19 83	236 96	3,242 83	**18,423 89	60,767 32
Massachusetts, Boston	Perkins Institution	1877	6,189 27	39 18	35,769 60	226 39	1,406 16	8 89	235 28	4,986 30	††16,000 53	58,162 59
Ohio, Columbus	Ohio Institution	1860	1,018 32	9 34	13,625 95	125 00	1,836 70	16 85	141 85	.....	‡‡ 1,345 97	16,808 62
Ohio, Columbus	Ohio Institution	1865	1,888 73	15 36	21,078 65	171 37	6,165 43	50 12	221 49	.....	‡‡ 3,161 78	30,405 86
Ohio, Columbus	Ohio Institution	1875	5,971 34	41 76	39,229 39	274 33	.....	.....	.....	12,216 78	.....	51,446 17
Ohio, Columbus	Ohio Institution	1876	6,411 35	42 46	42,536 57	281 69	946 80	6 27	287 96	5,084 81	.....	48,568 18
Ohio, Columbus	Ohio Institution	1877	6,349 84	42 62	41,914 89	281 51	1,553 20	10 42	291 93	10,044 17	.....	53,542 26
Pennsylvania, Philadelphia	Institution for the Blind	1875	1,992 00	9 91	53,519 50	266 26	.....	.....	.....	116 70	§§29,674 20	83,310 40
Pennsylvania, Philadelphia	Institution for the Blind	1876	1,592 00	7 92	61,318 63	305 06	.....	.....	.....	500 00	‖‖33,187 34	95,005 97
Pennsylvania, Philadelphia	Institution for the Blind	1877	1,522 39	7 72	52,352 50	265 75	.....	.....	.....	.....	¶¶20,798 65	73,151 15
Province of Ont., Brantford	Ontario Institution	1875	3,010 02	29 51	22,609 45	221 66	451 76	4 43	226 09	.....	.....	23,061 21
Province of Ont., Brantford	Ontario Institution	1876	2,745 48	23 87	23,420 89	203 66	612 66	5 32	208 98	.....	.....	24,033 55
Province of Ont., Brantford	Ontario Institution	1877	3,190 88	24 93	25,780 74	201 41	1,132 45	8 84	210 25	.....	.....	26,913 19
Wisconsin, Janesville	Wisconsin Institution	1875	5,936 82	100 62	18,552 75	314 45	412 20	6 99	321 44	430 08	.....	19,395 03
Wisconsin, Janesville	Wisconsin Institution	1876	6,741 92	112 37	20,481 09	341 35	443 57	7 39	348 74	1,785 93	.....	22,710 59
Wisconsin, Janesville	Wisconsin Institution	1877	3,417 03	51 00	16,026 85	239 20	409 92	6 12	245 32	710 14	153 78	17,300 69
Wisconsin, Janesville	Wisconsin Institution	1878	3,033 95	39 40	16,384 54	212 78	566 52	7 36	220 14	1,107 84	.....	18,058 90
New York, New York City	New York Institution	1860	30,601 11	218 58	59,740 30	426 72	2,150 41	15 36	442 08	.....	78,252 80	140,143 51
New York, New York City	New York Institution	1865	5,544 40	46 98	37,000 74	313 56	1,877 08	15 90	329 46	.....	28,202 70	67,080 52
New York, New York City	New York Institution	1875	11,158 37	64 49	60,218 48	348 08	3,430 43	19 83	367 91	.....	17,640 00	81,288 91
New York, New York City	New York Institution	1876	13,673 51	77 25	63,377 22	358 06	3,192 06	18 03	376 09	2,650 00	131,398 21	200,617 49
New York, New York City	New York Institution	1877	11,911 09	61 39	63,800 91	328 86	10,136 06	52 25	381 11	.....	121,692 79	195,629 76
New York, New York City	New York Institution	1878	10,665 97	53 33	59,765 85	298 82	3,763 30	18 82	317 61	576 50	52,222 29	116,327 94
New York, Batavia	New York St Institution	1875	1,393 70	8 99	35,245 13	227 39	2,000 00	12 90	240 29	7,508 97	3,118 26	47,872 36
New York, Batavia	New York St. Institution	1876	3,058 42	19 60	35,610 93	228 27	2,000 00	12 82	241 09	21,009 57	3,345 87	61,966 37
New York, Batavia	New York St. Institution	1877	2,708 56	16 72	36,593 61	225 88	1,214 04	7 49	233 37	15,803 09	1,518 05	55,128 79
New York, Batavia	New York St. Institution	1878	‖12,380 02	76 42	45,519 96	280 99	2,146 47	13 25	294 24	.....	1,650 30	49,316 73

‖ Includes $7,152 bills paid, contracted prior to September 30, 1877. ** Includes expense of work department, $17,195 41.
¶ Includes expense of work department, $18,067.34 †† Includes expense of work department, $15,118 96. ‡‡ Expended for manufacturing material.
§§ Includes $24,674 20 expended for manufacturing. ‖‖ Includes $23,150.67 expended for manufacturing. ¶¶ Includes $20,638.45 expended for manufacturing.

NOTE.—In all cases, either in blind or deaf and dumb asylums or in houses of refuge, where the articles manufactured by the inmates are used in the institution, the expenses of the manufacturing department are classified as ordinary expenses. On the other hand, where the articles made are sold the cost of material used and the expense of manufacturing are placed under the head of extraordinary expenditures.

TABLE No. 39.

Detailed Statement of Expenditures of the New York Asylum for Idiots, Syracuse, N. Y., for the years 1861 *to* 1878 *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1861	135	$8,144 86	$60 33	$6,096 85	$45 16	$1,442 22	$10 68	.....	.....	$756 37	$601 00	$1,357 37	$10 05
1862	140	9,784 02	69 88	5,187 96	37 05	1,114 86	7 96	.....	.....	.....	.....	1,604 70	11 46
1863	138	6,885 68	49 89	6,539 29	47 38	1,425 21	10 33	.....	.....	872 20	689 09	1,561 29	11 31
1864	139	8,669 61	62 37	8,064 45	58 02	1,334 63	9 60	.....	.....	1,856 23	823 57	2,679 80	19 28
1865	144	9,115 82	63 30	12,049 58	83 67	1,421 49	9 87	.....	.....	2,298 07	1,202 22	3,500 29	24 31
1866	141	9,378 89	66 51	11,400 84	80 85	2,764 75	19 61	$169 44	$1 20	2,168 56	758 08	2,926 64	20 75
1867	143	9,705 52	67 87	11,891 65	83 15	2,621 00	18 33	231 06	1 61	1,595 53	972 83	2,568 36	17 96
1868	149	10,142 25	68 07	12,153 46	81 56	2,038 39	13 68	.....	.....	1,562 15	789 51	2,351 66	15 78
1869	140	9,825 33	70 19	12,449 69	88 92	2,871 94	20 51	130 83	93	1,380 26	672 28	2,052 54	14 66
1870	140	10,825 44	77 32	9,393 91	67 10	1,834 65	13 09	76 72	55	*2,119 97	831 25	2,951 22	21 08
1871	145	11,198 09	77 23	10,452 65	72 09	2,435 46	16 79	146 98	1 01	696 51	809 20	1,505 71	10 38
1872	149	11,463 12	76 93	9,138 28	61 33	2,311 57	15 51	156 96	1 05	1,610 47	914 90	2,525 37	16 95
1873	178	12,542 16	70 46	12,192 04	68 49	2,695 51	15 14	159 07	89	3,164 25	979 71	4,143 96	23 28
1874	183	12,890 62	70 44	12,008 65	65 62	3,638 80	19 89	170 25	93	813 39	922 38	1,735 77	9 48
1875	210	13,801 61	65 72	11,519 62	54 85	2,892 53	13 77	315 91	1 50	3,871 87	1,180 82	5,052 69	24 06
1876	215	14,049 34	65 34	13,160 19	61 21	4,302 56	20 01	432 33	2 01	663 78	876 17	1,539 95	7 17
1877	230	14,182 19	61 66	14,940 28	64 96	2,406 41	10 46	218 95	95	2,528 76	1,057 86	3,586 62	15 59
1878	265	15,670 00	59 13	14,380 05	54 26	3,306 21	12 48	338 25	1 28	2,481 21	1,404 29	3,885 50	14 66

* Includes cost of fuel for nearly two winters.

TABLE No. 39—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita, excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita, including ordinary repairs.	Insurance.	Interest and discount.	Rent and taxes.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita						
1861	$2,670 32	$19 78	$19,711 62	$146 01	$1,535 35	$11 37	$157 38	$150 00	$52 66	$396 21	.....	$21,845 84
1862	2,712 40	19 38	20,403 94	145 74	2,644 50	18 89	164 63	.....	149 69	*299 69	.....	23,497 82
1863	2,170 65	15 73	18,582 12	134 65	1,696 01	12 29	145 94	150 25	105 30	246 71	.....	20,780 39
1864	3,258 05	23 44	24,006 54	172 71	1,720 55	12 38	185 09	.....	.....	235 00	.....	25,962 09
1865	3,827 60	26 58	29,914 78	207 74	2,240 59	15 56	223 30	.....	.....	.....	$178 79	32,334 16
1866	4,148 40	29 42	30,788 96	218 36	2,725 86	19 33	237 69	157 50	71 29	130 00	....	33,873 61
1867	3,722 81	26 04	30,740 40	214 96	2,743 13	19 18	234 14	120 00	.....	108 67	1,772 45	35,484 65
1868	4,682 88	31 43	31,368 64	210 53	2,138 74	14 35	224 88	202 90	149 71	235 00	64 54	34,159 53
1869	3,947 58	28 19	31,277 91	223 41	3,684 85	26 32	249 73	161 50	55 91	.....	.....	35,180 17
1870	4,690 36	33 50	29,772 30	212 66	1,814 04	12 95	225 61	.....	34 92	220 39	65 83	31,907 48
1871	4,348 87	29 99	30,087 76	207 50	2,463 15	16 98	224 48	.....	54 58	.....	46 76	32,652 25
1872	4,609 95	30 94	30,205 25	202 72	1,638 62	10 99	213 71	.....	57 61	.....	110 94	32,012 42
1873	3,982 31	22 37	35,715 05	200 65	1,343 12	7 55	208 20	.....	82 11	460 36	19,078 74	46,679 38
1874	5,409 19	29 56	35,853 28	195 92	4,069 13	22 23	218 15	.....	22 46	.....	.....	39,944 87
1875	6,637 07	31 61	40,219 43	191 52	5,216 55	24 84	216 36	.....	71 22	.....	.....	45,507 20
1876	6,562 78	30 52	40,047 15	186 26	4,213 56	18 32	204 58	.....	.....	.....	.....	44,260 71
1877	7,791 23	33 88	43,125 68	187 50	4,841 39	21 05	208 55	.....	.....	.....	.....	47,967 07
1878	5,981 83	22 57	43,561 84	164 38	3,485 37	13 15	177 53	.....	.....	.....	‡7,100 00	54,147 21

* Includes insurance. † Includes $8,187.11 for construction. ‡ Includes $4,000 for construction.

NOTE.—In addition to the $12,187 expended for construction, and accounted for in the above statement, there has been expended about $100,000 for buildings and improvements since 1860.

TABLE NO. 40.

Detailed Statement of Expenditures of Asylums for Idiots and Feeble-Minded Children in the United States and elsewhere, for the different years named.

LOCATION.	Name of Institution.	Years.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.	
				Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.
Illinois, Lincoln	Asylum for Feeble-Minded Children*	1877	77	$9,973 06	$129 52	$5,605 91	$72 80	‡$3,491 15	$45 34	$171 36	$2 23	$1,535 24	$19 94
Illinois, Lincoln	Asylum for Feeble-Minded Children*	1878	168	15,466 61	92 06	11,851 72	70 55	‡3,065 03	18 24	601 13	3 58	3,510 12	20 89
Massachusetts, Boston	Mass. School for Idiotic	1875	90	6,478 49	71 98	6,867 44	76 30	157 08	1 75	131 38	1 46	1,904 82	21 16
Massachusetts, Boston	Mass School for Idiotic	1876	80	6,952 05	86 90	6,498 42	81 23	30 80	38	75 95	95	1,611 15	20 14
Massachusetts, Boston	Mass School for Idiotic	1877	81	6,634 90	81 91	6,271 17	77 42	41 41	51	131 45	1 62	1,614 86	19 94
Pennsylvania, Media	Training School for Feeble Minded Children	1875	222	17,135 54	77 19	17,457 04	78 63	.....	.....	.....	.....	.....	.....
Pennsylvania, Media	Training School for Feeble Minded Children	1876	224	15,837 00	70 70	†41,610 90	185 76	.....	.....	.....	.....	.....	.....
Pennsylvania, Media	Training School for Feeble-Minded Children	1877	239	15,715 76	65 76	†34,487 68	144 29	.....	.....	.....	.....	.....	.....
Prov'ce of Ontario, Orillia,	Asylum for Idiots*	1877	125	8,955 08	71 64	7,638 88	61 11	‡1,840 64	14 72	159 98	1 28	1,586 70	12 68
Prov'ce of Ontario, Orillia,	Asylum for Idiots*	1878	141	7,983 14	56 61	6,495 01	46 06	‡1,070 08	7 59	85 13	60	1,126 38	7 99
New York, Syracuse	Asylum for Idiots	1865	144	9,115 82	63 30	12,049 58	83 67	1,421 49	9 87	.....	.....	3,500 29	24 31
New York, Syracuse	Asylum for Idiots	1875	210	13,801 61	65 72	11,519 62	54 85	2,892 53	13 77	315 91	1 50	5,052 69	24 06
New York, Syracuse	Asylum for Idiots	1876	215	14,049 34	65 34	13,160 19	61 21	4,302 56	20 01	432 33	2 01	1,539 95	7 17
New York, Syracuse	Asylum for Idiots	1877	230	14,182 19	61 66	14,940 28	64 96	2,406 41	10 46	218 95	95	3,586 62	15 59
New York, Syracuse	Asylum for Idiots	1878	265	15,670 00	59 13	14,380 05	54 26	3,306 21	12 48	338 25	1 28	3,885 50	14 66

* Opened 1876.

† For "house expenses."

‡ Includes bedding.

TABLE No. 40—(*Continued*).

LOCATION.	Name of Institution.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capita excluding repairs.	ORDINARY REPAIRS.		Annual cost per capita includ'g ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
		Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
Illinois, Lincoln	Asylum for Feeble-Minded Children*	$11,604 26	$150 70	$32,380 98	$420 53	.....	.....	.....	$120,638 60	$1,684 31	$154,703 89
Illinois, Lincoln	Asylum for Feeble-Minded Children*	10,611 60	63 16	45,106 24	268 48	$7,956 64	$47 36	$315 84	.....	.....	53,062 88
Massachusetts, Boston	Mass. School for Idiotic	3,908 18	43 43	19,447 59	216 08	1,316 36	14 62	230 70	2,033 39	775 04	23,572 38
Massachusetts, Boston	Mass. School for Idiotic	1,949 95	24 37	17,118 32	213 97	328 68	4 11	218 08	2,326 23	505 12	20,278 35
Massachusetts, Boston	Mass. School for Idiotic	1,826 84	22 56	16,520 63	203 96	1,567 49	19 35	223 31	5,724 96	717 00	24,530 08
Pennsylvania, Media	Training School for Feeble-Minded Children	23,739 83	106 94	58,332 41	262 76	.....	.....	.....	.....	53,137 50	111,469 91
Pennsylvania, Media	Training School for Feeble-Minded Children	325 00	1 45	57,772 90	257 91	.....	.....	.....	.....	9,529 82	67,302 72
Pennsylvania, Media	Training School for Feeble-Minded Children	519 54	2 18	50,722 98	212 23	.....	.....	.....	20,554 31	17,257 31	88,534 60
Prov'ce of Ontario, Orillia,	Asylum for Idiots*	4,139 57	33 12	24,320 85	194 56	937 54	7 50	202 06	.....	.....	25,258 39
Prov'ce of Ontario, Orillia,	Asylum for Idiots*	2,028 72	14 39	18,791 46	133 27	531 09	3 77	137 04	.....	.....	19,322 55
New York, Syracuse	Asylum for Idiots	3,827 60	26 58	29,914 78	207 74	2,240 59	15 56	223 30	.....	178 79	32,334 16
New York, Syracuse	Asylum for Idiots	6,637 07	31 61	40,219 43	191 52	5,216 55	24 84	216 36	.....	71 22	45,507 20
New York, Syracuse	Asylum for Idiots	6,562 78	30 52	40,047 15	186 26	4,213 56	18 32	204 58	.....	.....	44,260 71
New York, Syracuse	Asylum for Idiots	7,791 23	33 88	43,125 68	187 50	4,841 39	21 05	208 55	.....	.....	47,967 07
New York, Syracuse	Asylum for Idiots	5,981 83	22 57	43,561 84	164 38	3,485 37	13 15	177 53	4,000 00	3,100 00	54,147 21

* Opened 1876.

TABLE NO. 41.

Detailed Statement of Expenditures of the New York State Inebriate Asylum, Binghamton, for the years 1870 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	SALARIES AND WAGES.		PROVISIONS AND SUPPLIES.		CLOTHING.		MEDICAL STORES.		FUEL AND LIGHT.			
		Aggregate cost.	Cost per capita.	Aggregate cost	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1870	66	$12,435 12	$188 41	$16,800 85	$254 56	.....	.....	.....	.....	$2,593 23	$1,140 00	$3,733 23	$56 56
1871	84	11,517 20	137 11	14,588 67	173 67	.....	.....	.....	.....	4,000 00	768 30	4,768 30	56 77
1872	*83	12,458 54	150 10	14,840 34	178 79	.....	.....	$529 30	$6 38	1,336 13	1,454 29	2,790 42	33 62
1873	82	19,516 57	116 05	15,478 73	188 76	.....	.....	651 20	7 94	1,861 37	1,443 64	3,305 01	40 30
1874	73	13,169 62	184 51	13,033 05	178 53	.....	.....	416 78	5 71	2,012 99	1,560 07	3,573 06	48 94
1875	75	11,436 74	152 49	13,898 24	185 31	.....	.....	522 84	6 97	2,433 53	1,476 49	3,910 02	52 13
1876	68	10,979 27	161 46	12,448 11	183 06	.....	.....	566 34	8 33	2,673 54	1,162 18	3,835 72	56 41
1877	61	11,600 11	190 16	14,259 85	233 77	$16 75	$0 27	537 73	8 82	2,031 62	877 41	2,909 03	47 69
1878	46	11,083 25	240 94	9,706 25	211 01	521 90	11 35	304 57	6 62	2,893 34	950 34	3,843 68	83 55

* Average number estimated from tables given in report.

† This includes salaries of officers for six months only.

TABLE NO. 41—(*Continued*).

YEARS.	ALL OTHER ORDINARY EXPENSES.		Total ordinary expenses.	Annual cost per capitaexcluding repairs.	ORDINARY REPAIRS.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita.				
1870*	$5,670 85	$85 92	$38,640 05	$585 46	.....	.....	.....	$75,881 98	.....	$114,522 03
1871	6,137 16	73 06	37,011 33	440 61	*$1,918 50	$22 84	$463 45	*3,725 00	.....	42,654 83
1872	9,410 20	113 38	40,028 80	482 27	.....	.....	.....	4,773 31	$1,688 12	46,490 23
1873	8,456 16	103 12	37,407 67	456 19	.....	.....	.....	7,277 60	533 35	45,217 62
1874	5,713 36	78 27	36,205 87	495 96	.....	.....	.....	3,890 77	1,772 41	41,868 05
1875	6,533 08	87 11	36,300 92	484 01	.....	.....	.....	3,102 17	909 77	40,312 86
1876	6,855 06	100 80	31,684 50	510 06	178 50	2 62	512 68	8,546 26	892 84	44,302 10
1877	7,151 54	117 24	36,475 01	597 95	1,190 31	19 51	617 46	3,881 64	599 77	42,146 73
1878	5,065 27	110 11	30,524 92	663 58	1,013 23	22 03	685 61	10 00	1,132 03	32,680 18

* Taken from report made to State Board of Charities.

Table No. 42.

Detailed Statement of Expenditures of the State Emigrant Refuge and Hospital, Ward's Island, N. Y., for the years 1868 *and* 1875 *to* 1878, *inclusive.*

YEARS.	Average number of inmates.	Salaries and Wages.		Provisions and Supplies.		Clothing.		Medical Stores.		Fuel and Light.			
		Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Aggregate cost.	Cost per capita.	Fuel.	Light.	Total.	Cost per capita.
1868	1,689	$28,225 09	$16 71	$141,205 87	$83 60	$4,835 07	$2 86	$2,592 80	$1 53	$18,952 12	$1,803 00	$20,755 12	$12 29
1875	782	32,833 93	41 98	48,388 86	61 88	2,245 12	2 87	5,609 93	7 17	13,419 13	1,834 84	15,253 97	19 50
1876	655	27,811 76	42 46	37,783 43	57 68	2,157 01	3 29	4,113 79	6 28	14,206 46	3,372 09	17,578 55	26 84
1877	574	26,452 76	46 08	36,683 51	63 91	3,014 23	5 25	3,615 06	6 29	3,211 65	1,340 93	4,552 58	7 93
1878	483	26,028 31	53 88	31,112 28	64 42	902 03	1 87	4,458 70	9 23	10,062 79	.....	10,062 79	20 83

Table No. 42—(*Continued*).

YEARS.	All other Ordinary Expenses.		Total ordinary expenses.	Annual cost per capita excluding repairs.	Ordinary Repairs.		Annual cost per capita including ordinary repairs.	Buildings, extraordinary repairs and improvements.	All other extraordinary expenditures.	Total expenditures.
	Aggregate cost.	Cost per capita.			Aggregate cost.	Cost per capita				
1868	$33,326 72	$19 73	$230,940 67	$136 73	.....	.....	....	$125,769 74	$4,144 79	$360,855 20
1875	3,024 38	3 87	107,356 19	137 28	$6,441 64	$8 23	$145 51	.....	4,170 02	117,967 85
1876	3,045 78	4 65	92,490 32	141 21	3,289 06	5 02	146 23	....	3,471 69	99,251 07
1877	6,345 25	11 06	80,663 39	140 52	4,339 69	7 56	148 08	.....	5,003 79	90,006 87
1878	4,886 62	10 12	77,450 73	160 35	6,770 44	14 02	174 37	.....	5,272 50	89,493 67

TABLE No. 43.

Showing quantity and cost of various articles used at the New York Institution for the Deaf and Dumb during the years named.

YEARS.	Average number of pupils.	FLOUR, BBLS.		BUTCHER'S MEAT, LBS.		BUTTER, LBS.		EGGS, DOZ.		TEA, LBS.		COFFEE, LBS.		SUGAR, LBS.		MOLASSES, GALS.		MILK, QTS.	
		Quantity.	Price.	Quantity.	Price.	Quantity.	Price.	Quantity.	Price.	Quantity.	Price	Quantity.	Price.	Quantity.	Price.	Quantity.	Price.	Quantity.	Price.
1861.....	305	408	$6 31	56,260	$0 08	15,958	$0 19½	.....	.....	584	$0 60¾	2,315	$0 20¼	14,824	$0 06½	635	$0 38	1,059	$0 6
1863.....	328	470	8 14	68,849	8½	17,186	27½	.....	.....	570	94½	1,598	39¾	10,461	13½	1,023	50	380	6¾
1864.....	348	514	10 05	71,713	12½	15,084	45¾	.....	.....	672	96¼	1,199	52½	11,922	11	1,229	89	333	6½
1865.....	363	530	11 02	72,940	14½	17,622	46¼	.....	.....	712	1 09	1,550	46	13,563	18	1,549	94	1,040	9⅞
1866.....	420	520	11 67	82,209	17	16,448	47¾	.....	.....	972	1 10	1,902	42	18,812	15	1,832	89	6,164	10¼
1867.....	437	529	13 99	95,814	14¾	18,691	41	597	$0 38	1,117	1 09	2,638	39½	14,486	15½	1,543	77	12,800	10
1868.....	464	640	12 37	108,115	14¼	22,900	55¾	1,034	35	1,673	1 08	2,945	35½	21,457	15	1,425	78	*4,360	39½
1869.....	513	668	8 63	114,368	14	27,377	47½	919	37	1,518	93¼	3,654	32½	26,096	14¾	1,454	78	*9,960	34½
1870.....	512	455	7 53	77,112	14	15,214	36¼	505	35	1,155	79¾	3,026	30½	19,362	12	957	76	*6,520	30¾
1871.....	510	553	7 95	99,385	13½	19,627	40¾	1,178	32	1,449	75⅓	3,158	26¾	21,301	12	1,402	76	*8,635 5,480	32¼ 6¼
1872.....	522	640	9 49	99,951	11¾	20,767	34¾	679	30	1,508	72¾	2,895	28¾	23,335	11½	2,543	72	59,060	6¼
1873.....	501	623	5 95	110,417	11½	22,973	37½	1,673	28	1,519	66½	2,847	29	27,112	11½	1,791	72	61,880	6¼
1874.....	512	653	9 14	123,079	11	22,238	38½	1,499	25½	1,555	54¾	3,070	35	28,391	10½	1,704	74	71,459	6½
1875.....	515	556	7 56	118,636	11	20,637	33½	1,398	32	1,471	49	2,636	26½	24,510	10½	1,777	69	63,827	6¾
1876.....	519	581	8 27	131,854	11	19,624	32½	2,073	24	1,468	47	3,232	31	25,058	9¾	2,036	63	77,324	6½
1877.....	479	664	9 00	139,814	10½	21,107	28½	2,098	25	1,5-6	45	3,459	26¾	25,531	10½	1,958	62	84,180	6½
1878.....	494	641	7 75	147,314	10	17,788	24½	1,906	14 1-5	1,392	37	3,474	25½	28,883	9	2,165	56	107,575	6

*Condensed milk. In 1871 both the condensed and the ordinary milk were used; 8,635 quarts of the former and 5,480 quarts of the latter.

TABLE No. 43—(*Continued*).

YEARS.	CHEESE, LBS.		APPLES, BBLS.		POTATOES, BBLS.		RICE, LBS.		LARD, LBS.		CRACKERS, LBS.		ICE, CWT.		COAL, TONS.		GAS, 1,000 FT.	
	Quantity.	Price.	Quantity.	Price.	Quantity.	Price.	Quantity.	Price.	Quantity.	Price.	Quantity.	Price.	Quantity in lbs.	Price.	Quantity.	Price.	Quantity, feet.	Price.
1861	1,164	$0 9¾	2[illegible]	$3 20	274	$2 50	7,885	$0 6	705	$0 12	335	$0 8½	17,350	$0 30	675	$4 55	.....	.....
1863	753	13½	43	2 91	295	2 53	4,445	8½	938	12½	264	9	15,190	74	403	8 13	.....	.....
1864	780	19¾	13	5 07	246	3 46	2,574	10¾	1,011	19¾	73	10	16,500	50	613	10 27	.....	.....
1865	791	20¼	14	6 00	330	3 29	4,545	11	1,093	27	130	9¾	22,050	60	620	10 56	.....	.....
1866	522	21	17	5 49	499	3 84	3,869	10½	2,026	22¾	240	10¼	34,715	60	850	8 40	.....	.....
1867	659	13¾	23	5 71	556	3 68	3,865	10½	1,695	16¾	128	20	36,285	60	976	6 18	.....	.....
1868	917	17½	31	5 07	626	4 49	4,539	10½	2,036	19½	375	11¾	18,225	60	849	5 29	.....	.....
1869	1,277	21	52	4 77	914	2 41	4,816	9¾	2,206	21½	1,09	11½	48,910	60	1,092	6 82	630,800	$3 50
1870	588	19	19	4 45	147	2 68	3,044	7¾	1,037	18	1.134	9 9 10	27,530	1 27	970	5 32	564,200	3 46
1871	769	16½	46	4 00	562	3 23	3,866	7¾	1,183	15½	1,748	9¼	27,996	92	1,186	5 97	869,500	3 50
1872	572	17	35	4 24	471	2 21	4,526	7¾	1,717	10¾	.....	.....	.....	.....	1,064	4 69	756,800	3 35
1873	559	18½	78	3 03	434	3 61	5,473	7½	1,324	10	1,925	10¼	53,224	38	799	6 03	763,900	3 00
1874	903	15½	70	4 16	622	2 91	5,402	7¾	1,350	11¼	1,602	10	89,860	43	1,181	6 01	765,100	3 00
1875	984	16	64	2 67	557	2 59	3,607	7	1,335	15¼	1,254	10¾	85,690	24	348	6 21	700,700	3 00
1876	1,055	13	35	4 01	578	1 98	4,334	6¾	1,193	14¾	1,557	10¾	98,965	36	2,396	5 46	969,700	3 00
1877	1,002	14½	70	2 40	587	3 56	4,771	6¾	1,091	12¼	1,412	10	109,940	30	1,303	3 29	982,500	2 75
1878	1,096	13	59	3 16	529	2 01	6,118	7⅛	1,861	7½	1,370	9½	136,535	32	1,177	3 70	1,090,700	2 75

NOTE.—The prices given are the average prices for the year, and are obtained by dividing the total amount expended for each article named by the quantity used

TABLE No. 44.

Showing the average cost of principal articles used at various institutions in the State, during the years named.

ARTICLES.	NEW YORK INSTITUTION FOR THE BLIND.						NEW YORK INSTITUTION FOR THE DEAF AND DUMB.					NEW YORK CATHOLIC PROTECTORY.				
	1860.	1865.	1868.	1876.	1877.	1878.*	1865.	1868.	1876.	1877.	1878.	1865.	1868.	1876.	1877	1878.†
Flour, barrel	$6 00	$10 33	$13 23	$7 31	$7 96	$7 40	$11 02	$12 37	$8 27	$9 00	$7 75	$10 69	$10 41	$6 45	$7 41	$5 75
Butcher's meat, pound,	8	18½	16	12½	11½	11½	14½	14⅜	11	10½	10	14½	11½	9½	9	8¾
Butter, pound	25	43	48¾	35¾	32	33½	46⅓	55¼	32½	28⅓	24½	37	39	25½	22½	13
Tea, pound	42	1 20	1 03	32½	27	29	1 09	1 08	47	45	37	97⅜	88¼	36	38¾	25
Coffee, pound	14	32¾	34¾	31⅓	26¾	22½	46	35½	31	26⅜	25½	27½	24	22	22	21
Sugar, pound	8	19	15	9¾	10½	8¼	18	15	9¾	10½	9	16⅛	13⅜	9½	10	7⅜
Molasses, gallon	40	75½	72½	62½	64½	44	94	78	63	62	56	1 01	71¼	45¼	43	34
Milk, gallon	16	24	25	26	24	23	39½	.....	26	26	24	24	24	14½	18¾	16
Cheese, pound	12	21¾	18	14½	15	14	20¼	17½	13	14½	13	21	15¾	12½	13	9
Crackers, pound	.....	.....	.....	.....	.....	.....	9¾	11½	10½	10	9½	13⅜	13½	9½	11	8
Rice, pound	.....	.....	.....	.....	.....	.....	11	10½	6¾	6¾	7¼	13½	10	6½	6	7
Eggs, dozen	.....	.....	.....	.....	.....	.....	.....	35	24	25	14 1-5	24¼	18¾	14½	13¾	9
Potatoes, barrel	1 60	3 00	4 85	1 82	3 56	1 88	3 29	4 49	1 98	3 56	2 01	3 25	2 82½	1 10	2 10	2 00
Soap, pound	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	13	6½	7¼	8	7
Coal, ton	.....	8 85	6 50	6 23	4 21	4 26	10 56	5 29	5 46	3 29	3 69	9 83	6 78	5 49	3 57	3 97

* Average prices January to May, 1878.
† Average prices during September, 1878. In regard to the supplies of meat, the cattle are purchased alive and slaughtered and dressed at the institution.

TABLE No. 44—(*Continued*).

ARTICLES.	WESTERN HOUSE OF REFUGE.					STATE EMIGRANT REFUGE AND HOSPITAL.					DEPARTMENT OF PUBLIC CHARITIES AND CORRECTIONS.			NEW YORK ASYLUM FOR IDIOTS.	WILLARD ASYLUM FOR THE INSANE.
	1860.	1865.	1868.	1877.	1878.	1860.	1865.	1868.	1877.	1878 ‡	1865.	1868.	1877.	1878.	1878.§
Flour, barrel	$5 82	$8 57	$9 27	$7 09	$5 35	$5 41	$9 38	$10 75	$7 03	$5 32	$12 00	$8 50	$7 00	$6 95	$4 84
Butcher's meat, pound,	7	10	14	12	11⅜	7⅛	13¾	15	7⅓	.....	10	8	6	8½	5 to 6
Butter, pound	.....	.....	.....	25	11½	21	40½	43½	20½	17½	43	44	20	22½	12 to 16
Tea, pound	45	1 05	91	42	33½	41	90	97	31⅔	32	75	73	26	41	30
Coffee, pound	24	30	24	22	17	15	34½	22½	14⅔	15	42	25	18	26½	17
Sugar, pound	.....	.....	12½	10½	9½	8	15½	13½	9	8	19½	14⅔	9½	9½	7½
Molasses, gallon	33	56	50	38	33	36¾	80¾	75½	40	40	42	35	24	47	40
Milk, gallon	.....	.....	†28½	†27½	†23¼	16	16	32	.....	.....	.....	.....	.....	16	.....
Cheese, pound	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	13¼	.....
Crackers, pound	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Rice, pound	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Eggs, dozen	.....	.....	.....	.....	.....	4½	10½	11	4¾	5½	5	8½	6½	6¾	6
Potatoes, barrel	*60	*68	*87	*63	*63	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Soap, pound	7	15	9	6¾	6½	.....	.....	.....	.....	.....	4 50	2 50	1 60	*47	.....
Coal, ton	4 20	7 90	5 40	3 40	3 89	7⅛	14	8 3-5	5	.....	11	8½	5⅜	.....	.....
						3 91	12 22	6 94	3 04	.....	.....	.....	.....	3 56	3 75

* Price per bushel. † Condensed milk, price per quart. ‡ Average prices during July, 1878. § Average prices for December, 1878.

APPENDIX.

EXHIBIT No. 1.

RULES, REGULATIONS AND BY-LAWS OF THE NEW YORK STATE LUNATIC ASYLUM, UTICA.

Introduction.

This Asylum has been erected at great expense by the State, that the insane may have a safe retreat, in the care of those who have learned the best mode of managing them, and where they may have every chance of recovery. The first impulses of insanity are often met at home and amongst friends, by resistance and opposition. The apparent difference in the conduct and feelings of their friends excites collision, arouses the passions and awakens the prejudices of the victims of delusion. They now feel that those whom they loved have turned against them — that their friends purposely thwart all their plans, oppose all their desires, and resist what they conceive to be their own best efforts to promote the happiness of both.

For these reasons it becomes desirable that they should be removed to the care of strangers, whose efforts to make them comfortable they often acknowledge and appreciate more correctly. From strangers they will also submit to requirements without a murmur, which would excite the greatest hostility to friends.

In the various departments, all have daily much to do with the inmates of the Asylum, and some devote their whole time to their care. It becomes all seriously to consider how this duty shall be performed; what discipline of feeling, and what subjugation of temper there shall be that the "law of kindness" may be administered to its full extent and in its proper spirit.

Every person employed in the Asylum, in any capacity whatever, must perform the duties assigned conscientiously, and to the entire satisfaction of the managers, of the superintendent, and of those in immediate authority.

No individual is worthy of a place in such an institution who labors for wages only. Duty, a desire to improve the condition of all within the sphere of influence, to increase the happiness and lessen the sufferings of each and all the inmates, should be the governing motive of daily conduct. It must never be forgotten that we are dealing with fellow creatures, who, being deprived of reason, are

not responsible for their conduct. The regulating power of moral action is withheld from them; hence they are capricious, passionate, and often violent. They often also misjudge, and are led astray by perverted senses or by delusions of the understanding, which carry them far from the proprieties of rational conduct.

It is because they are unable to control themselves, and because they do not readily acquiesce in the directions of their friends, that many of these individuals are placed in the Asylum. Here they are to have every comfort and every reasonable indulgence which, individually or collectively, will promote their best good. Here they look for sympathy and counsel, for assistance in their various troubles and perplexities. We should enter into their feelings, and show our willingness to spend our time and strength to promote their happiness and recovery to health.

To withhold what may reasonably be required is to do them injustice, and disregard duty. To treat them with neglect, or with unkind and hasty language, or in any way to tantalize them, or to recriminate or to return violent or abusive words, is to do them injury.

Persuasion with a proper spirit will generally be followed by a quiet acquiescence in all reasonable requirements. Much depends upon the manner of intercourse with the insane. We should never be cold and insensible to their wants — never hasty and impatient in our intercourse — never turn a deaf ear to their representations — never treat them with neglect, nor with feelings of superiority; but mingle with them in kindness, address them with respect, and we shall secure their confidence, which is necessary to their best care.

I. Board of Managers.

1. The managers shall choose one of their number president, who shall continue in office until the annual meeting next after he is chosen.

2. An auditing committee of three members shall be appointed, who shall hold their places until the annual meeting next following their appointment.

3. The treasurer shall hold his office during the pleasure of the board.

4. The annual meeting shall be held on the second Tuesday of December in each year. Quarterly meetings shall be held on the Tuesdays next after the second Monday in each of the months of April, July and October. Special meetings may be called by the president, or by any two members.

5. The Asylum shall be visited by the whole board at the annual meetings, and by a majority at the quarterly meetings, and by individual members at other times.

6. One of the board shall be chosen secretary, and shall hold office until the next annual meeting. It shall be his duty to keep an accurate record of the proceedings of the board of managers, and to

cause notices of all meetings to be delivered to the members residing in Utica, at their places of residence or business, and to send notices by mail to members residing elsewhere, at such times previous to the meetings, as the president or the two members calling the meetings shall at the time direct.

7. No officer shall be directly or indirectly interested in any contract for the supply of any article for the use of the Asylum; nor shall he receive any present or gratuity from any person dealing with the Asylum, or from any patient or visitor, or from the friends of a patient.

II. Resident Officers.

The Superintendent.

1. The superintendent is the head of the establishment. He has the general superintendence of the buildings, grounds and farm, together with their furniture, fixtures and stock. To him are committed the charge of the patients, and the direction and control of all persons therein, subject to the regulations of the board of managers. It shall be his duty to determine, under the direction of the said board, what attendants and assistants are necessary to be employed, and to prescribe their respective places and duties; also to establish and enforce, in every department, systematic order and salutary discipline.

2. He shall visit the patients, or learn their condition, daily, and as much oftener as may be necessary, and shall direct such medical, moral and physical treatment as may be the best adapted to their relief.

3. He shall cause to be kept, in a suitable book, a record of the name, sex, age, place of nativity and residence, civil state and profession, of each patient; also, as far as can be ascertained, the dates and history of each patient's disease, the time when received, and when removed, and how, whether cured or relieved, and the medical and moral treatment; whether eloped, or dead; and if dead, the cause; together with all such other facts and circumstances in each case as are useful or usual in the statistical records of such an institution. Also, a record of the names and residence of all persons employed in the institution, with the times and terms of their respective engagements; also, the stipulated wages, and the nature of the services expected from each, and the times and causes of their dismission.

4. At any visit of the managers, and at all times when required, he shall exhibit to them all the records of the institution, and inform them minutely of its affairs. Every quarter he shall give a brief statement of its general condition; the names of persons removed and received during the three months last past, with such suggestions and remarks as he may deem useful. At each annual meeting of the board he shall present a tabular view of the institution for the year, with full and minute details from the records, and accom-

panying it with a condensed report of other interesting and useful facts and circumstances, experiments and opinions, illustrating its management, condition and prospects.

5. He shall, from time to time, give to all persons employed at the Asylum, or on the farm, such instructions as he shall judge best adapted to carry into full operation all its rules and regulations. He shall cause such rules and regulations to be strictly and faithfully executed; taking care that the steward and matron, and all others employed about the premises, perform satisfactorily and punctually all their respective duties.

Assistant Physicians.

1. The assistant physicians shall be well-educated physicians, and shall constantly reside at the Asylum. The first or second assistant shall have charge of the male division, and the other of the female division of the Asylum, and each shall exercise a general supervision of the one assigned to him, under the direction of the superintendent.

2. The said first and second assistant physicians shall visit all the patients in their respective divisions once each day, in the morning, and, if necessary, in the afternoon or evening, or oftener; carefully observe their condition, wants and treatment; and see that they have food, medicine, exercise, amusements, clothing and bedding suitable for them; exert what moral influence they can with them, and endeavor in every way to promote their comfort and recovery.

3. They shall see that the attendants and assistants are faithful and kind, attentive to the wants of the patients, and vigilant in the discharge of their duties; and they shall report immediately to the superintendent all instances of misconduct, unfaithfulness, neglect of duty observed by them, or of which they may receive information; and they shall also record the particulars of all accidents and escapes.

4. For the due performance of the duties enjoined in the foregoing sections, they shall spend much time in their respective divisions; shall be in constant communication with the supervisors, attendants and assistants, and shall carry out the plans and instructions of the superintendent in the best manner they are able.

5. They shall report in writing to the superintendent, daily, in books kept for that purpose, the general condition of their respective divisions, and the particular state of such patients as may be sick or greatly excited, and of those requiring restraint, removal or seclusion, or special attention.

6. They shall keep records of the cases of all the patients in their respective divisions, describing the symptoms, the changes that may occur from time to time, the mode of tretament, and all the peculiar circumstances connected therewith. They shall also see that the records of admission and discharges are accurately kept.

7. They shall attend to the warmth, cleanliness, ventilation, and good order of their respective divisions, and direct the use of the baths.

8. They shall attend the visitors when necessary, and shall always be ready to perform whatever services may be required of them by the superintendent, and, under his directions, shall assist in conducting the correspondence with the friends of patients.

9. When requested by the superintendent they shall visit the entire establishment, see all the patients, and learn their condition and treatment.

10. It shall be the duty of the third and fourth assistant physicians, when not on duty on the wards, to perform such office or other duties as the superintendent shall direct; to attend to visitors; and, in the absence of the first or second assistant physicians, to perform such of their duties as may be required of them by the superintendent; and also to perform such other duties out of the office, when directed or permitted to be absent therefrom, as the superintendent may prescribe.

The Steward.

1. The steward shall execute a bond, with two sufficient sureties, to be approved by the treasurer, in the penalty of $1,000, conditioned that he will faithfully discharge the duties of the office of steward, and pay over and account for all money that shall come to his hands belonging to the New York State Lunatic Asylum. Said bond shall be executed to the treasurer of the Asylum, and be filed in his office.

2. In all cases of purchases by the steward, he shall require duplicate bills, on one of which he shall indorse an order upon the treasurer to pay the amount of the bill, and on the other take a receipt for the order given by him on the treasurer.

3. No order of the steward shall be paid by the treasurer, unless it it is accompanied with the bill of items for the payment of which the order was given, nor unless the bill or order is countersigned or indorsed "approved" by the superintendent.

4. The steward shall keep one of the duplicate accounts, with a copy of the order on the treasurer, in every such case of purchase by him, and make the proper entries under the appropriate head of expenditure in his books.

5. The treasurer may, from time to time, advance to the steward, on his own order, and the indorsement of the superintendent, specifying that it is to pay petty current expenses, a sum not exceeding one hundred dollars. The steward shall keep an accurate account in detail, in a pass or other proper book, of all such expenses paid out of the sums so advanced to him by the treasurer, and shall settle the same with him monthly, or whenever required. Such account shall be examined and approved by the superintendent before it is settled by the treasurer, and a copy thereof, with vouchers for all sums exceeding one dollar, shall be filed with the treasurer. The steward shall account for each sum of one hundred dollars which he shall thus receive before a further advance shall be made to him.

6. The treasurer, on paying any bill or order of the steward, shall

take a voucher for such payment, and file the same in his office, and shall enter in his books, under the proper heads of expenditure, the sums paid by him out of the treasury.

7. The steward, under the superintendent's direction, shall purchase furniture, food, medicine, fuel, stores and all other necessary articles; and he shall be accountable for their safe-keeping, and for their economical use and expenditure.

8. He shall keep clear, methodical and exact accounts of all purchases, of all receipts and expenditures of money, and of all charges on account of any patients. He shall exhibit all his account books, and vouchers, to the managers, whenever required so to do; and he shall furnish a quarterly abstract of the same, both to the treasurer and managers, on the last days of March, June, September and December in each year. Copies of all accounts which become due to the institution shall be furnished to the treasurer, at his request.

9. All moneys advanced for pay patients, or otherwise collected or received by the steward, or by persons employed by him, shall be immediately paid over to the treasurer of the Asylum.

10. In the name of the superintendent, and by his directions in each case, and not otherwise, the steward shall hire attendants and assistants, and agree with them for their wages; and, by like direction, he shall dismiss them when unfaithful, negligent or incompetent; he shall keep and settle their accounts; and he shall perform such other duties, in relation to the internal management and government of the Asylum, as the superintendent shall require. He shall see that the attendants and assistants rise and begin business immediately after the ringing of the morning bell, and that they retire at proper season at night. He shall observe their conduct, see that in all respects they do their duty, and report to the superintendent, immediately, any instance of misconduct or negligence.

11. He shall receive visitors, give them all suitable information, and show them such parts of the buildings and grounds as are open for their examination.

12. He shall remain, as much as possible, in the division appropriated to the male patients, so as to be much in their presence, to see that they are kindly treated; that their beds are in good order; that their clothes are taken good care of; that their food is properly served and distributed, and that the rooms, halls, yards, shops and out-buildings, and other apartments under his care, are kept clean and in good order, and properly warmed and ventilated; and that the attendants observe his orders and directions, and in all respects do their duty; and that all articles made for the patients or the Asylum are carefully preserved.

13. In all his directions to subordinate agents, in executing the details of the superintendent's plans, and in enforcing the rules, the steward shall be considered as carrying the authority of the superintendent. It shall be his duty to preserve order in the house, and faithfulness among the assistants, and to see that the rules and regulations are fully put in practice.

The Matron.

1. It shall be the duty of the matron to look carefully to the female patients, and spend as much time with them as her other duties may allow; she shall see that they are kindly treated; that their nurses and attendants are well instructed and faithful; that their food is properly served and distributed; that their apartments are clean, warm and properly ventilated; and that their clothes and bedding are always clean, well aired, and in good order, and their apparel marked and preserved.

2. She shall also superintend the kitchen and laundry, and see that the cooking, washing and ironing are properly done; frequently inspect every department, and have an eye to the neat appearance of the whole house. It is expected that she will devote her whole time to the institution, and spare no efforts to promote the comfort and recovery of its inmates. She shall also superintend the sewing-rooms, and see that all new articles made for patients are correctly marked, properly disposed of and preserved.

3. It shall be her special duty to see to those that are sick, that they have constant and kind nurses, and proper care in all respects. She shall constantly notice the conduct of attendants and assistants, see that in all respects they do their duty, and report to the superintendent, immediately, any instance of misconduct or negligence.

Apothecaries.

1. The apothecaries shall be physicians, students of medicine or competent druggists, and shall constantly reside at the Asylum. Under the direction of the superintendent and assistant physicians, they shall prepare and put up the medicines prescribed, and keep such records as the superintendent may require. They shall also keep the apothecary shop in order; wait on visitors, if directed, and perform such other services as may be required of them by the superintendent or assistant physicians.

2. They shall not absent themselves from the apothecary shop, without permission, unless necessarily employed elsewhere. As their intercourse with the patients will be considerable they must exert what moral influence they can to promote their comfort and welfare.

Steward's Assistant.

1. It shall be his duty every morning to visit each kitchen, the bakery and wash-room, learn their condition and wants, and report to the steward immediately after breakfast. He shall also see that the various departments are supplied with such articles as have been directed by the superintendent or steward, taking care to charge in a book kept for that purpose, each article thus delivered.

2. He shall, at all times, be ready to execute all orders given him by the superintendent or steward. It shall be his special duty to see that faithfulness and good order prevail in all the departments of la-

bor, and to report immediately to the superintendent all instances of inefficiency, unfaithfulness or misconduct.

Matron's Assistant.

It shall be her duty to remain in the matron's office, to attend to the reception and discharge of female patients; when requested to do so, to wait upon friends that come to visit them, and to render the matron all the assistance she is able in the kitchens and other departments of labor and supervision.

Clerks.

1. There shall be a clerk, or extra attendant in the division for men, and another in that for women, whose duty it shall be to receive the clothing of patients, and see that each article is entered upon the clothes' book; that it is plainly marked with the name of the owner, and properly disposed of and preserved. In case a patient has jewelry, money or other articles not needed for use on the ward, they shall deliver the same to the steward for safe-keeping.

2. They shall also attend to the clothing of patients when discharged, and see that all articles belonging to them are carefully put up and brought into the hall of the center building. When not necessarily engaged elsewhere, they shall remain in wards number one of their respective divisions, and be ready at all times to attend to orders from the officers. When not otherwise engaged, they shall assist in the ordinary duties of attendants, and both shall do all they can to promote the comfort and welfare of patients, and to maintain good order and fidelity throughout the establishment.

Supervisors of Departments.

1. There are three departments for each sex. The first includes the wards numbered 1, 2, 3, 4, 5; the second, those numbered 6, 7, 8, 9; the third, those numbered 10, 11, 12.

2. Each of these departments shall have a supervisor, or first attendant, whose duty it shall be, in addition to the other duties of an attendant, to have a general charge of the whole department, to see to the administration of medicine, and to communicate with the physicians, steward and matron respecting the wants and condition of the patients in their respective departments, and to report to the steward all damages done by patients.

3. They shall attend specially to the sick, see that they are treated with great care and kindness; receive the orders of the physicians, and see that they are faithfully executed. It shall be their duty to instruct new attendants in their duties, and see that they are efficient, industrious and kind. They shall assist in the arrangements for the burial of the dead, and be ready at all times to attend to any extraordinary services that may be required of them by the superintendent.

4. They shall pay particular attention to new patients, see that they are properly introduced and informed about the establishment,

their fears quieted by kind attention and friendly assurances, and that the violent and suicidal are carefully watched.

5. They shall also see that the wards are properly supplied with furniture and articles for use, and shall often communicate with the physicians respecting the patients, and inform them of changes in their condition that require attention, and of those likely to be benefited or injured by exercise, labor, amusements or religious services.

6. They shall in all things endeavor to carry into successful operation the plans of the superintendent, and shall constantly study to promote the comfort, contentedness and welfare of the patients, and for these purposes they shall visit every part of their respective departments several times each day. They shall also see to the changes of patients from one ward to another, and walk out with patients that are feeble or timid, or with others when they have time.

Overseers of the Kitchens and Bakery.

1. The kitchens and bakery shall each have an overseer, whose duty it shall be to see to the safe-keeping and economical use of all the supplies furnished to those departments. They shall see that the food is well cooked and properly distributed, and that nothing is wasted — that no extra or unusual articles are cooked for those in the kitchens, nor sent into the wards, unless the persons calling for such present a written order of one of the physicians — that there is no unnecessary or improper conversation carried on with those in the wards — that there is no rude or improper behavior in the kitchens or bakery — no bad language or quarreling, but that all work faithfully. They shall see that these departments, including store-rooms, etc., are kept neat and in good order, and that no peddlers or idle company be suffered to visit the kitchens or bakery — nor the attendants and assistants in other departments, without special business or by permission of one of the officers. All violations of these rules, or instances of bad conduct on the part of those employed in their departments, are to be reported by the overseer to the superintendent immediately.

2. In such an establishment, where there are large quantities of provisions and many hands employed, constant vigilance will be necessary to guard against the feeling on the part of any, that it is of no consequence if some things are lost or squandered; that they belong to the State, and that there are enough left. Any remark of this kind, or conduct indicating such feelings, shall be made known at once to the superintendent. In short, the overseers are expected to know, from their own observation, that the articles and food intrusted to them are safely kept and economically used, and that good order and cleanliness prevail in all the departments under their care. It shall be their duty to see that those employed rise early, and are attentive and faithful throughout the day and hours of labor.

3. It shall be no excuse for the overseers that their departments are not in good order for want of sufficient help, furniture or proper

arrangements, as their application to the steward must be repeated until they are well furnished in these respects.

Overseers of the Washing and Ironing-Rooms.

1. The overseer of the washing department shall collect the clothing and other articles to be washed, as directed by the steward and matron, and see that they are properly and carefully washed, dried, and carried to the ironing-rooms. Especial care must be taken that none are lost. For this purpose he must see that he receives all the articles on the list given him, and that they are marked, and that he furnishes the same, with the lists, to the ironing-rooms.

2. The overseer of the ironing-rooms shall see that the clothes and other articles delivered from the washing-rooms are properly ironed, and correctly distributed, according to the lists furnished, as directed by the steward and matron.

3. The overseers of the washing and ironing-rooms shall not permit attendants or assistants, or any company, or visitor into their departments, except by the direction of one of the officers of the Asylum. Violations of this rule shall be reported to the superintendent immediately.

Engineer.

1. The engineer shall have charge of the engine and boiler-house, and general charge and oversight of all the shops, and of the boilers, and engines; of all machinery in the shops, wash-house, ironing-rooms, and in all other places about the institution; and of the apparatus for extinguishing fires, for warming and ventilation; of the pipe fitting, sewers, water and gas supply and distribution, of the steam cooking apparatus, dumb-waiters, etc., and of all the fixtures and appliances connected therewith. He shall have direction of the plumber, fireman, and of any other assistants under him in this department. He shall see to the economical use of fuel used in the steam boilers, and in the kitchens, etc., and guard against the waste of steam for cooking, washing, etc.

2. The fireman, and any person in charge of the engines and machinery, during the absence of the engineer from the engine-house, shall be diligent aud vigilant in keeping the fires under the boilers in proper condition, and the boilers supplied with water, and never leave their post of duty until relieved therefrom.

3. The doors of the attics shall always be kept locked, and no persons except the officers, engineer, carpenter and plumber shall enter them without the permission of the superintendent, or of one of the resident officers.

Overseers of Shops.

1. The carpenter, painter, plumber, tailor, and all who have special charge of shops, or particular branches of business, shall see that proper use is made of all materials and tools furnished them, that

none are lost, or taken from the shops without the direction of an officer, and that good order and faithfulness are maintained by all employed in the various branches of business, and that no articles are made, and no new business undertaken, but by the order of the superintendent.

2. When patients assist, they shall be carefully attended to, and not suffered to go away, or to carry from the shop any tools, or articles not belonging to them; and at all times, and under all circumstances, they shall be treated with respect and kindness, and particular pains be taken to promote their comfort, cheerfulness and recovery.

3. Every overseer of a shop shall interdict the visits of attendants and assistants, and all other company to the shop under his charge, unless accompanied by an officer, or by permission of an officer. Any violation of these rules shall be immediately reported to the superintendent.

The Gardener, Farmer and Carriage Driver.

1. To the gardener is assigned the special care of the gardens, green house and garden tools; to the farmer, the farm and stock, including cows, hogs and poultry, and the farm teams and implements; to the carriage driver, the horses not used on the farm, and the carriages.

2. It shall be the duty of each to have every thing committed to their charge, attended to in the best manner. They shall see that the tools, wagons, implements, carriages, harnesses, etc., are kept in good order and repair, and that nothing is lost; that a place is assigned for every thing under their care, and that every thing is kept in its place. They shall report to the steward any needs of their respective departments.

3. They shall follow the directions given to the overseers of shops as respects the care of the patients that assist them, and be careful that none work too hard, or in the rain, or in a way likely to injure them. This rule shall be observed by all in the employ of the Asylum, who have the care of patients when at work.

Night Watchers.

1. There shall be two night watchers for each division, two men and two women.

2. The night watchers shall visit the medical office every evening at nine o'clock to receive particular orders for the night. Their services shall commence at that hour and continue until the hour of six the following morning. During the night they must not fail to be faithful, never cease to be vigilant, make as little noise as possible, and enter into no loud conversation with any one.

3. They must be especially careful to guard against danger from fire, the least suspicion of which in any part of the establishment, or in buildings, lumber, or wood around it, should excite their imme-

diate attention and be at once reported to the superintendent. They must also be attentive to any unusual noise, and be careful that patients do not escape or injure themselves or do any damage. One of the night watchmen shall visit the different halls of the center building, and pass out to the rear and to the front of the Asylum frequently during the night, and shall attend to the various fires in the kitchens, etc., as directed by the superintendent or steward.

4. One of the night watchmen, designated by the superintendent, shall see to the proper closing of all the outer doors about the institution, and remain in and about the central building and office, until all attendants who are out on permission, for the evening, shall have returned, when the Asylum shall be closed. The night watchers on both sides of the house shall see that all gas-lights are turned off at the proper hour, and that all water faucets are properly closed. They will visit all the wards every hour, note any patients who are up, noisy or sick, and the hour, and in case of the sickness of any patient, report at once to the physician in charge.

5. It shall be their duty to guard, during the night, against any violations of the rules of the Asylum, and should such occur, or any circumstance requiring attention, they must report them immediately, or early in the morning, to the superintendent. One of the men will ring the bell in the morning, at such times as directed by the superintendent or steward.

III. Attendants and Assistants.

Duty of Officers.

1. All persons employed in the Asylum are expected to do all they can to promote the welfare of the institution ; treat the officers on all occasions with politeness and respect, and do, readily and cheerfully, every duty required of them.

2. All must expect an unceasing observation of the manner of performing their respective duties ; and suggestions, by an officer, of deficiencies or improvement therein are to be taken kindly and without offense, and efforts made to improve.

Duty to each Other and to Themselves.

1. In the first place, self-respect is enjoined on all. Each one shall be responsible in his or her department, and should be ambitious to do the duties of it to entire acceptance.

2. Patients will look to attendants for good examples; let attendants be careful in nothing to set a bad one.

3. Let your dress always be neat and clean. Avoid all ungentlemanly habits, such as wearing hats within doors, going in shirt sleeves, etc. Never indulge in loud talking or laughing. Use no profane, obscene or vulgar language. Never play at any game with one another, nor with patients, excepting at the direction of one of the physicians.

4. Treat each other with politeness; be civil, cordial and frank. A calm, quiet, cheerful deportment befits your employment. Cherish a high sense of moral obligation; cultivate an humble, self-denying spirit; seek to be useful, and maintain, at all hazards, your purity, truth, sobriety, economy, faithfulness and honesty.

5. No attendant or assistant, while connected with the Asylum, shall, at any time, at home or abroad, make use of distilled spirits, or intoxicating liquor of any kind, and it is desirable that they should not use tobacco, but discourage the use of it by patients.

Duty of Attendants to Patients.

1. The attendants are to treat the inmates with respect and attention; greet them cheerfully with "good morning," or "good evening," and show them such other marks of good-will and kindness as evince interest and sympathy. Under all circumstances, be kind and considerate; speak in a mild, persuasive tone of voice; never address a patient rudely, by a nickname, a christian name, or a surname, but always politely, as Mr., Mrs. or Miss.

2. A patient is ever to be soothed and calmed when irritated; encouraged and cheered when melancholy or depressed. They must never be pushed, collared, nor rudely handled. To induce them to move, gentle, persuasive measures will prevail in most cases; when these fail, report to the superintendent or one of the assistant physicians.

3. If the attendant receives insult and abusive language he must keep cool, forbear to recriminate, to scold, threaten or dictate in the language of authority. Violent hands are never to be laid on a patient, under any provocation. A blow is never to be returned, nor any other insult. Sufficient force to prevent the patient's injuring himself, or others, is always to be applied gently; and all struggling with a patient should, if possible, be avoided, by calling additional assistance, when a patient is highly excited or disposed to violence, before entering his room or attempting to dress or control him.

4. The attendants shall never apply any restraining apparatus unless by order of a medical officer, nor seclude a patient without giving immediate notice to one of the physicians.

5. On rising in the morning, it is the duty of the attendants to see that each patient confided to his or her care is thoroughly washed, hair combed, clothes brushed and cleaned, if necessary; collars, wristbands and suspenders buttoned, and all parts of the dress properly adjusted and secured; boots and shoes cleaned and tied; and in fact that the whole dress be neat and in good repair. All this should be re-looked to throughout the day, and especially before going to meals or religious services, or going to ride or walk. The patients' beds are then to be made, and the wards, day-rooms, bathing-rooms, passages and stairs to be swept, and the whole premises put in complete order as soon as it can be done, so that an inspection may be had of the house by the physicians, commencing at

nine o'clock. Previous to this time no patients are to leave the house to walk, labor or ride, without directions, special or general, of the medical officer. By ten o'clock the morning work should be completed, and the house in order in every part.

6. One attendant must always be in each ward with the patients, and must not leave under any circumstances until relieved. The attendants must not retire to their rooms while the patients are in the wards. This rule must be observed in all the wards.

7. At meals the attendants must always be present to carve, distribute food to those who are incompetent to do it for themselves, and to see that every one has a proper supply. One of them must be designated to see that no patient carry away a knife, fork or any other article from the table.

8. An attendant must never place in the hands of a patient, or leave where a patient can get, any razor, pen-knife, rope, cord, medicine, matches or any dangerous weapon or article. A constant watch of patients is to be kept in these respects; their beds frequently searched for such articles, and the knives and forks counted after each meal. An attendant must never deliver any letter or writing from or to a patient, without permission of the superintendent; nor even retain in his or her possession, without permission, any writing of a patient.

9. The attendants in each ward are responsible for the safe-keeping of the patients therein, and must not leave them, except in the care of some responsible person. There is an obvious impropriety in attendants sitting in their rooms, engaged in reading or writing during hours of duty; *i. e.*, from the time the patients get up in the morning, until they retire at night. During this time, they should be in their rooms only long enough to adjust their own dress. All these hours, with this sole exception, should be devoted to the patients; endeavoring to keep them tidy and comfortable, to prevent improper conduct, bad postures (such as lying on the floor or ground, etc)., and to instruct, interest and amuse them by talking with them, reading to them, and the like.

10. Suicides and elopements are most frequent about meal times, at dusk, and at the hour of religious services; therefore, the strictest watch is to be kept at these times. Attendants must always be stationed where they can see patients during meals or religious services, and see that no one passes out of the house, and that each one returns to his or her apartment. Attendants are to look not merely to those under their immediate charge, but with constant watchfulness, over all the patients, they must endeavor to prevent any from eloping or wandering. The clothes of suicidal patients, and every dangerous article should be removed from their rooms at night, and the windows secured. Each attendant should always know where every one is of those committed to their charge.

11. When patients ride out, it is the duty of the attendant to see that they do not leave the carriage, nor communicate with persons casually met, nor deliver letters, packages, or messages, nor procure

weapons, tobacco or other articles. He is not to stop to do errands for himself or others, without permission of the superintendent. When patients walk out with attendants, they shall keep them together, and observe the same prohibitions as in driving out; they shall also particularly avoid going near dangerous places, as railroads, canals, precipices, rivers, wells, machinery, etc., or into woods or other places favorable for elopement.

12. Supervisors will go to the medicine cupboard for medicines after each meal, and see that they are given at the time directed, and that all are taken. Each cup must be marked with the patient's name. Extreme care must be used to avoid mistakes, and to prevent patients helping themselves to medicine; therefore all cups, vials, boxes, etc., containing medicine, must be immediately returned, or if directed to be kept on the ward, shall be locked up. Within an hour from the time of taking them the cups shall be cleaned and returned to the medicine cupboard. In going for the cups, and returning them, the supervisor must not delay in the passage, nor hold any other conversation than to report to the medical officers, changes in the condition of the patients, which they are always to do immediately.

13. All damages by patients, and all their wants as to clothes and other articles necessary to put these rules in practice are to be reported by the supervisors, to the steward or matron. It willbe no excuse for attendants that their rooms, beds and patients are not in ample order, to say they have not what is necessary; for their application for such articles should be unceasing until they get them. Attendants must be particularly careful not to break their keys, and when any door locks or unlocks with difficulty, immediate notice should be given at the medical office.

14. The attendants must never ridicule the patients, nor mock or imitate them, nor do any thing to wound their feelings. If a patient engages in any controversy, or other improper or exciting topic of discourse, the attendant must, in the gentlest manner possible, interfere and check it; should such means fail, one of the medical officers should be informed immediately. The history, conduct and conversation of patients must never be spoken of to visitors, nor reported by attendants when abroad.

15. Attendants must look particularly to the comfort of patients in their special charge, both day and night, and see them early in the morning, on rising. In speaking to patients of the officers, attendants should inculcate respect and confidence in their management, and carry into operation all directions and prescriptions, in the most ready and faithful manner.

16. Every patient must be in the charge of some responsible individual at all times, unless permitted to be at large by the superintendent. The person who takes a patient from one of the wards shall be acountable for his or her safe-keeping until returned to the same, or intrusted by a resident officer to the care of another person.

17. No patient shall be permitted to go out of the ward in which his or her room is situated, without the consent of a resident medical officer; and no new patient without an order of the superintendent or assistant physician in charge.

18. Food is not to be carried to the rooms of patients; nor is any one to be absent from the regular meals, excepting in cases of sickness or high excitement, without permission of one of the physicians.

19. Attendants will notice the habits and conduct of patients, and inform the physician at his daily visit of all circumstances requiring attention, such as loss of appetite, or any indisposition, costiveness, tendency to suicide.

20. No conversation must ever be held with patients through the windows, either by officers, assistants or visitors; nor must any thing be thrown out through a window.

Duty to the Institution.

1. The attendants and assistants must never leave the Asylum without permission from the superintendent or an assistant physician. Application for leave of absence should be made several hours before leaving. Attendants, when thus leaving, must deposit the keys of their ward in the office, as directed, until their return.

2. The attendants must never give up a key, nor let any person into the wards without permission of a medical officer. No man attendant, without such permission, shall enter the division for women.

3. All persons who engage in employment at the Asylum shall be considered as engaged for one year, unless a special contract is made for a longer or shorter term. It is expected that all persons will fulfill their engagements scrupulously, as to time of service and duty to be performed, agreeably to their respective contracts; and no one shall discontinue service at the Asylum, or on the farm, without giving at least thirty days' notice, in writing, to the superintendant or steward.

4. Every person employed as an attendant, or in any capacity, shall sign the following

Agreement.

In consideration of being employed by the superintendent of the New York State Lunatic Asylum, for the said Asylum, I do hereby agree to work for the said State Lunatic Asylum for one year from date, at any work or service assigned me by the said superintendent, or other officer, on the terms specified, payable after the first month, so that one month's wages will remain unpaid until the end of the year; and I agree to observe and obey the rules and regulations of the Asylum, and the directions of the superintendent or other officer, from time to time; and in case I leave my employment before the expiration of one year from date, without the permission of the

superintendent, or am discharged for the violation of the rules or neglect of duty, I am to forfeit one month's wages ; and if I continue in the employment of the Asylum after the termination of this contract, I agree to its full continuance, with all the conditions above specified.

Dated this day of , 18 .

NAME. | RESIDENCE.

5. No company shall be admitted into the rooms or wards occupied by the patients at any time, except by the express permission of the superintendent; but all other parts of the Asylum and its grounds may be exhibited by the steward, assistant physician or matron. All persons employed by the institution are expected to show marked respect and attention to strangers and visitors.

6. An indispensable duty of the attendants and assistants is to secure the perfect and systematic cleanliness and neatness of the Asylum and its inmates. *No part of the house is to be considered clean, when it can be made cleaner.* The floors, windows, tables, beds and bedding, cellars, closets and butteries are to be scrupulously attended to *every day*, so as to preserve a pure atmosphere. Chamber vessels are always to be removed and thoroughly cleaned immediately after use, and spittoons every day. All soiled clothing and bedding shall be immediately taken to the wash-house. All dust shafts and receptacles shall be emptied daily, and all dressings or clothing saturated with oil shall, immediately after use, be taken to the boiler-house and there burned.

7. The attendants must look well to all doors and windows connected with the patients' rooms and wards ; and at bed time see that no attempts are made to get out, and that the patients' doors are all safely locked, unless otherwise direted by the superintendent, and the doors communicating with the center building. In locking doors, be careful always to hear the bolt slip ; this precaution will often prevent escapes. Visiting from ward to ward, and especially to the kitchen, bakery, laundry or shops, without special business, is a violation of duty.

8. The whole time of the attendants and assistants belongs to the Asylum. This rule applies equally to the clerks, supervisors, overseers, and all persons in the employ of the Asylum. This does not prohibit each one from attending to his or her own clothing ; but to no other service can they devote their time, nor can they receive any compensation, besides their regular wages, for any service or labor, excepting only by express permission of the superintendent in each case.

9. An attendant or assistant receiving a present or gratuity from any patient in the Asylum, or the friend of a patient ; or from a visitor ; or selling to, or buying any thing from, a patient ; or receiving any perquisite, of any kind whatever, shall be instantly dismissed.

10. No smoking shall be permitted in the wards, or about any of the out-buildings, kitchens, basements, or on the grounds.

11. On the occurrence of fire at any time in the buildings, the supervisor of each department will see that every patient is brought from the rooms into the wards, and all the room doors locked; the doors of the stairways leading out will be immediately unlocked, and an attendant placed on guard at each. No supervisor or attendant will leave their wards, unless under the direction of the superintendent.

Hours for Rising, Meals and Retiring.

1. The morning bell shall be rung for two or three minutes, at five o'clock, during the months of May, June, July and August; at five and one-half during April, September, October and November; and at six during December, January, February and March.

2. Breakfast is to be placed upon the table, in the summer, at half-past six o'clock, in the spring and fall at seven, and at half-past seven in the winter. Dinner will be served uniformly at half- past twelve M., and tea at six P. M., the year round.

3. The Asylum is to be closed at half-past nine o'clock every night; at which time the attendants and assistants must all retire to their apartments.

4. Sunday is to be a Sabbath, or day of rest and quiet, at the Asylum. The buildings and grounds are not to be exhibited to visitors on this day; nor shall any visitor be admitted into the wards or rooms of patients or attendants, except in cases of serious illness, and by special permission of the superintendent.

5. It is expected that all persons employed in the Asylum who are well, and can be spared from the duties of the house and wards, will, unless leave of absence be granted in each case, attend public worship in the chapel, on the Sabbath. In the chapel, the attendants and assistants will take special care to guard against any disturbance of the service by the patients, and see that none leave the chapel, unless accompanied by an officer or attendant.

Chaplain.

1. It shall be the duty of the chaplain to conduct the religious exercises of the Asylum on Sundays, unless another clergyman has been invited by the superintendent, and on every other occasion when his services may be needed; and to have such intercourse with the patients and other inmates, as the superintendent may deem desirable for their benefit.

2. He may, at suitable times, procure the services of other clergymen at the religious exercises of the institution, with the consent and approbation of the superintendent.

Visitors.

The managers of the Asylum are fully aware of the interest generally felt in its prosperity, and are desirous of affording suitable

opportunities for visiting it and inspecting its internal arrangements; but they are convinced that the welfare of the patients, and the proper performance of the duties of the officers and attendants, require that such visitations should be subject to proper regulations.

In order to secure to patients the quiet and seclusion necessary to treatment, and to shield them from the improper observation of strangers, the board of managers have adopted the following rules for the admission of visitors:

1. The Asylum will be open to visitors from 2 to 5 o'clock, P. M., except on Sundays, Saturday afternoons and holidays.

2. All visitors, except persons having business at the Asylum, will be required to provide themselves with tickets of admission from the managers, either of whom will grant the same, unless their knowledge of circumstances makes it, in their judgment, necessary to refuse.

3. No visitors will be permitted to enter the wards or the grounds in the rear of the buildings, unless accompanied by a manager, or one of the resident officers, or some one delegated by the superintendent.

4. Persons wishing to see patients or learn their condition will inquire for the superintendent or for one of the assistant physicians, and no information concerning patients will be given except to relatives or family friends, and to public officers; and such information will be given only by the medical officers.

5. The person or persons directed to accompany visitors through the wards will not be permitted to point out or mention the names or peculiarities or conduct of patients.

EXHIBIT No. 3.

Three Counties Asylum.

Patients. 312 men, 359 women; total, 671; 50 recoveries.

Attendants. 32 men, 25 women; 1 to 11¾.

Restraint. No restraint.

Seclusion. No seclusion.

Fracture of thigh and death.

Employment. Men, 53 work on the land, 38 in the shops, 34 as coal carriers, wood choppers, hair pickers, etc.; 94 help in the wards; women, 65 assist in the laundry, 82 sew and darn, 12 help in the kitchen, 40 on the wards; total employed, 219 men, 222 women; 70 per cent of men employed.

Amusements. No reference to amusements.

Exercise. "65 men and 165 women were confined to the airing courts."

Wages. Men, 26 lbs. 8s.; women, 15 lbs. 8s.; 1 lb. per annum rise.

Berks Asylum.

Patients. 149 men, 157 women; total, 306; 31 recoveries.

Attendants. No reference in the report to number of attendants.

Restraint. No reference to restraint.

Seclusion. No reference to seclusion.

Employment. Men, on the land, 30; in the wards, 41; shoemakers and tailors, 23; women, in the wards, 29; laundry, 33; kitchen, 14; needlework, 41; total, 100 men, 117 women; 67.11 per cent employed.

Amusements. Building a room with stage appliances for amusements.

Exercise. "187 are altogether confined to the airing courts."

Bucks Asylum.

Patients. 206 men, 264 women; total, 470; 42 discharged but their condition not stated.

Attendants. 14 men and 19 women; 1 to 14¼.

Restraint. No restraint since last inspection.

Seclusion. 55 occasions of seclusion; one woman burned to death.

Employment. Men, "many are employed on the land and a few in trades; women help in the wards and assist in needlework."

Amusements. No reference to amusements.

Exercise. No reference to exercise.

Cambridgeshire Asylum.

Patients. 149 men, 170 women; total, 319; 28 recoveries.

Attendants. Commissioners state the staff of attendants remains the same, without stating any number.

Restraint. No mechanical restraint.

Seclusion. 17 occasions of seclusion.

Employment. Men, 25 on the land, 20 in the workshops, 12 about the buildings and 47 in various ways; women, 22 in the laundry, 6 in the kitchen, 83 in other ways; total, 104 men, 116 women; 69.79 per cent of men employed.

Amusements. 36 men and 51 women meet at a weekly dance.

Exercise. "55 men and 49 women take walks outside of the grounds;" no assistant medical officer.

Carmarthen Asylum.

Patients. 192 men, 193 women; total, 385; 19 discharged but condition not stated.

Attendants. Commissioners say staff of attendants the same, without giving any number.

Restraint. No reference to restraint.

Seclusion. No reference to seclusion.

Employment. "The list of employed patients exhibit at least as much as that reported in April, 1877;" no particulars.

Amusements. Dances twice a week in winter, once in summer, with a band to play frequently out of doors.

Exercise. No reference to exercise; one death from patient being kicked in the bowels; men and women dine together in one room; only 47 acres of land.

Chester Asylum.

Patients. 249 men, 253 women; total, 502; condition of patients discharged not mentioned.

Attendants. Reference to previous deficiency of attendants and says that the number has been corrected, but does not give number.

Restraint. Case of restraint for surgical reasons.

Seclusion. Four occasions of seclusion.

One death from accidental choking.

Employment. Men, 24 work on the land, 25 at trades, 12 in other ways; women, 88 women work in the laundry, kitchen, wards, etc.; total, 61 men, 88 women; 24.49 per cent of men employed.

Amusements. "Outdoor games and periodical associated entertainments are given."

Exercise. No reference to exercise.

Suicide by patient taking knife from attendant's pocket and killing himself.

Cheshire Asylum.

Patients. 235 men, 315 women; total, 550; 31 recoveries.

Attendants. 20 men attendants, including all artisans, gardeners, etc.; 21 women attendants; 1 to $13\frac{3}{4}$.

Restraint. One girl wearing locked gloves to prevent picking face; one woman has worn a strait-jacket for 216 hours for maniacal excitement; another, locked gloves for 444 hours for mischievous and destructive habits; another woman had worn locked gloves for 328 hours for like reasons.

Seclusion. 30 occasions of seclusion.

One suicide of a patient who was put on trial; one died from choking whilst at dinner.

Employment. Men, 41 on the land, 18 in the shops, 29 on the wards; women, 41 in laundry and kitchen, 59 in work-room and 47 at household work; total, 88 men, 147 women; 37.44 per cent of men employed.

Amusements. Weekly dances and theater for dramatic entertainments in the winter.

Exercise. "130 men and 90 women walk daily beyond the airing courts, while about 70 men once a week extend their walk beyond the asylum estate."

Cornwall Asylum.

Patients. 258 men, 328 women; total, 586; 38 recoveries.

Attendants. No reference to attendants.

Restraint. One man restrained in bed by waistcoat for surgical reasons; one woman ditto; one man restrained by gloves for several weeks; four women ditto, to prevent attempts on life and for surgical reasons.

Seclusion. 16 occasions of seclusion.

One patient drowned while on a pic-nic to the coast.

Employment. Men, 53 on the land, 18 at trades and 77 assist in various ways; women, 45 work in the laundry, 16 in the kitchens, 70 in housework, 85 in needle-work and knitting; total, 148 men and 216 women; 57.3 per cent men employed.

Amusements. Out-door games in summer and pic nic parties; two billiard tables here, cards and draughts.

Exercise. No reference to exercise.

Cumberland and Westmoreland Asylum.

Patients. 227 men and 210 women; total, 437; 65 recoveries.

Attendants. 16 men, 13 women; 1 to 15.

Restraint. One man wearing jacket with sleeves; camisole; restraint had been resorted to on 63 occasions previously.

Seclusion. 40 occasions for 1,231 hours of seclusion for violence.

Employment. Men, on the land 108, and 163 men and women assist in various work; 27 in laundry; eight in kitchens; "a fair proportion elsewhere."

Amusements and exercise. "With regard to walking, exercise and associate entertainments, there is nothing new to report."

Only one medical assistant.

Denbigh Asylum.

Patients. 210 men and 210 women; total, 420; 4 recoveries.

Attendants. 15 men and 16 women; 1 to 13½.

Restraint. No restraint since last visit.

Seclusion. 44 occasions of seclusion.

One patient killed another by striking him on the head with a garden rake.

Employment. No reference to employment.

Amusements. Weekly dances and occasionally magic lantern. "Theatrical performances have never yet been tried."

Exercise. 70 men and 60 women walk once a week beyond the grounds; "the exercise of the majority is limited to the airing courts."

This asylum has only thirty-nine acres of land.

Derbyshire Asylum.

Patients. 205 men and 223 women; total, 428; 81 recoveries; 3 men and 5 women away on leave.

Attendants. 15 men and 19 women; 1 to 12⅝.

Restraint and seclusion. No mechanical restraint or seclusion since last visit.

One case of rib fracture by a patient throwing another against a table; one died from fractured ribs—injury inflicted by another patient.

Employment, amusements, etc. "Employment, amusements and exercise of the patients are by no means overlooked." No particulars.

The commissioners recommend "the gradual substitution of modern for antiquated crib-bedsteads."

Devon Asylum.

Patients. 285 men and 479 women; total, 764; 31 recoveries; 1 man and 1 woman absent on leave.

Attendants. No reference to attendants.

Restraints. No mechanical restraint since last visit of commissioners.

Seclusion. Seclusion had been resorted to on 40 occasions.

Employment. Men, 19 on the land; 24 with the gardener; 22 in trades; 60 on the wards; and 24 otherwise employed; women, 36 in the laundry; 15 in the kitchen; 90 in sewing; 127 about the wards; total, 149 men, and 268 women; 52.2 per cent men employed.

Exercise. "185 men and 320 women never go beyond the airing courts; 80 men, once a week, on Sunday, walk beyond the grounds; 50 women, once a week, on Sunday, walk beyond the grounds."

Only one assistant physician. Another recommended.

Large airing courts were being laid out.

Dorset Asylum.

Patients. 224 men and 269 women; total, 493; 31 recoveries.

Attendants. No reference to attendants.

Restraint. 4 occasions of mechanical restraint of the hands for violence and destructiveness.

Seclusion. Seclusion resorted to on 159 occasions.

Employment. Men, on the land, 41; shops, 21; on the wards, 33; women, in the laundry, 34; kitchens, etc., 34; needle-work and knitting, 49; total, 95 men and 117 women; 42.4 per cent men employed.

Amusements. 170 patients attend amusements in Recreation Hall, once a fortnight.

Exercise. The commissioners say that exercise beyond the grounds is not frequent. Public objection is alleged to be made to

taking patients on the roads. The commissioners recommend the construction of a walk around the boundary of the estate instead of having the patients strolling about the airing courts.

Durham Asylum.

Patients. 495 men and 275 women; total, 770; 38 recoveries; 3 of each sex absent on leave.

Attendants. 35 men and 24 women; 1 to 13.

Restraint and seclusion. No reference made.

Employment. Of employment the commissioners say "useful employment of the patients is as heretofore reported."

Amusements. Weekly entertainment in the hall.

Exercise. 152 men and 177 women walk one day in the week beyond the airing courts.

Essex Asylum.

Patients. 360 men, 442 women; total, 802; 123 recoveries.

Attendants. 30 men and 41 women; 1 to $11\frac{2}{7}$.

Restraint. 35 are in mechanical restraint by the vest on 35 occasions, one for surgical reasons and 34 for determined attempts at suicide.

Seclusion. 56 occasions of seclusion.

Employment. Men, on the land, 75; tradesmen, 37; kitchen, laundry and ward, 99; women, laundry, 31; kitchen, 14; ward, 71; knitting and needle-work, 96; total, 211 men and 212 women; 58.9 per cent men employed.

Amusements and exercise. No reference made.

Glamorgan Asylum.

Patients. 303 men and 280 women; total, 583; 31 recoveries.

Attendants. 24 men and 25 women; 1 to 12.

Restraint. No restraint on the records.

Seclusion. Two cases of seclusion for violence.

Employment. "The employment records show no diminution in the numbers last reported;" no particulars.

Amusements. Weekly entertainments in the hall; lawn tennis, pic-nics, school class twice a week and singing once a week.

Exercise. 96 men and 100 women go beyond the grounds once a week; complaint is made of strangers overlooking the patients in the airing courts; additional land recommended to keep them further off.

Gloucester Asylum.

Patients. 311 men and 358 women; 73 recovered.

Attendants. 24 men and 27 women; 1 to 13.

Restraint and seclusion. Of restraint and seclusion the commis-

sioners say. "These modes of treatment have been sparingly used since the last visit;" restraint in one case to prevent self-mutilation; seclusion on 31 occasions.

One man died from fractured ribs, from struggle with attendants; one man died from being gored by a boar.

Employment. Men, 57 on the land; 31 in the shops; 10 in the laundry; 58 in the house; women, 38 in the laundry; 65 in other work; total, 156 men and 103 women; 50 per cent of men employed.

Amusements. Weekly dancing.

Exercise. In the winter 75 and in the summer 85 of each sex walk beyond the grounds weekly or oftener in fine weather.

Hants Asylum.

Patients. 335 men and 381 women; total, 716; 44 recoveries.

Attendants. Report says: "Attendants are sufficient in number, being in increase since the last visit." Number not given.

Restraint. One woman in a straight jacket and in bed in a most excited condition, who some time ago bit off one of her fingers. Four cases of mechanical restraint for persistent attempts at self-injury.

Seclusion. 72 occasions of seclusion.

Case of suicide. Man out at large who placed himself before a railway train.

Employment. Men, 36 on the land; 26 in the shops; women, 57 in the laundry; 9 in the kitchen; 137 in needle-work, and others helping in the wards; total, 150 men and 272 women; 44.6 per cent of men employed.

Amusements. "The usual arrangements continue." They are not described.

Exercise. Nothing said about exercise.

Hereford Asylum.

Patients. 142 men and 177 women; total, 319; 38 recovered.

Attendants. 14 men and 14 women; 1 to 11⅛.

Restraint and seclusion. No reference made.

Employment. 117 men and 125 women are "employed in various ways;" 82.3 per cent of men employed.

Amusements. Entertainments as heretofore; no particulars.

Exercise. No reference made.

Barming Heath Asylum.

Patients. 531 men and 683 women; total, 1,214; 149 recoveries.

Attendants. 122 attendants—the number of each sex not given; 1 to 9.

Restraint. One person had been restrained to prevent self-mutilation.

Seclusion. 60 cases of seclusion. Dr. Davies adds: "Nearly all were secluded in the blue-room, from which he reports 'fair results.'" He has "no faith in the red-room seclusion." Mention is also made of a padded room.

One woman found in bed with her throat cut by a broken chamber utensil.

Employment. 221 men and 181 women are usefully employed, besides their acting as ward cleaners; 41.6 per cent of men employed.

Amusements. Eight theatrical performances in winter, with balls, concerts and weekly dances.

Exercise. Parties go out walking every day; no one is altogether confined to the airing courts, unless he or she be incapacitated for more extended exercise.

Chartham Asylum.

Patients. 216 men and 319 women; total, 535; 50 recoveries.

Attendants. No reference to attendants.

Restraint. "No mechanical restraint since last visit."

Seclusion. 29 occasions of seclusion.

Employment. Men, 51 on the farm; 26 in the shops; 51 in the house; women, 20 in the laundry; 10 in sewing-room; 80 at needlework and knitting, and 90 assist on the wards; total, 128 men and 200 women; 59.2 per cent of men employed.

Amusements. Weekly dances, concerts and dramatic entertainments.

Exercise. No reference to exercise.

Lancaster Moor Asylum.

Patients. 519 men and 479 women; total, 998; recoveries, 122.

Attendants. No reference made.

Restraint. No restraint within the year.

Seclusion. Occasions of seclusion, 936.

Employment. 315 men and 267 women employed; no details; 60.6 per cent of men employed.

Amusement. Weekly dance.

Exercise. 196 of both sexes do not go at all beyond the airing courts for exercise; the rest go walking; some bi-weekly and some daily.

Rain Hill Asylum.

Patients. 325 men and 364 women; total, 689; no recoveries stated.

Attendants. 25 men and 26 women; proportion, men 1 to 13; women, 1 to 14.

Restraint. No restraint.

Seclusion. 87 occasions of seclusion.

One death from struggle with an attendant; among the casualties are some fractures of limbs from falls.

Employment. 211 men and 244 women are reported as being employed in various ways; 64.9 per cent of men employed.

Amusements. Weekly balls during nine months of the year, theatrical performances and pic-nics.

Exercise. No reference to subject of exercise.

The commissioners say: "The shower bath has been very freely resorted to and we regret to say no reason has been given in each case;" "the occasions in which the men were placed in the shower bath appeared to have been 259; of women there are 118 entries of this treatment."

Prestwich Asylum.

Patients. 519 men and 655 women; total, 1,174; recoveries, 217.

Attendants. "An adequate staff of day attendants is maintained;" number not given.

Restraint. Five persons have been wet packed in acute mania.

Seclusion. 109 occasions of seclusion.

One death from pleuro-pneumonia from fractured ribs; one woman escaped and was found drowned in a pond.

Employment. 340 men and 500 women have been variously employed; no details; 65.5 per cent of men employed.

Amusements. Weekly dance, concerts and dramatic entertainments occasionally given.

Exercise. "The daily walks beyond the airing courts had not been resumed at this visit, March 14, and exercise was confined to the airing courts."

Whittingham Asylum.

Patients. 537 men and 719 women; total, 1,256; 129 recoveries.

Attendants. 55 men and 62 women employed, embracing attendants, artisans, laundry, etc.; 1 employee to $10\frac{5}{7}$ patients.

Restraint. Five persons were restrained for being destructive on 136 occasions; four were restrained for self-injury on 123 occasions.

Seclusion. Seclusion was resorted to for men on 472 occasions, and for women on 772 occasions.

One man died from choking while at dinner.

Suicides. One man dropped from a window; another strangled himself; another poisoned himself; and a woman was found hung from the window.

Employment. 320 men and 340 women were variously employed; no details; 59.5 per cent of men employed.

Amusements. No reference made.

Exercise. "The asylum airing courts, so far as they have been inclosed, are in proper order;" of the women "a large number frequently take exercise in walking beyond the asylum lands."

Leicestershire Asylum.

Patients. 224 men and 225 women; total, 449; 48 reported as discharged, but no recoveries mentioned.

One medical assistant.

Attendants. 13 men and 14 women; 1 to 16⅔.

Restraint. One man restrained for surgical reasons; one woman with gloves to prevent picking of face.

Seclusion. 15 occasions of seclusion.

One man died from broken ribs, not discovered till after death. Commissioners say: "We learn that the man suffered from acute mania and was secluded for violence."

Employment. "91 men and 81 women are engaged in useful work;" 40.6 per cent of men employed.

Amusements. Amusements consist of weekly entertainments.

Exercise. 120 take exercise beyond the airing courts.

Lincolnshire Asylum.

Patients. 303 men and 314 women; total, 617; 43 recoveries.

Attendants. 29 men and 29 women; 1 to 10⅔.

Restraint. One man restrained by gloves four weeks for surgical reasons.

Seclusion. 78 occasions of seclusion.

Employment. Men, on the land, 51; in the shops, 15; in the kitchen, 4; on the wards, 102; women, in the laundry, 44; in the kitchen, 15; in needle-work and ward cleaning, 200; total, 172 men and 259 women; 55.7 per cent of men employed.

Amusements. Weekly dance in which 70 men and 80 women are present. The commissioners say: "We saw in the gardens and airing courts some of the patients at croquet."

Exercise. A walk was being made around the boundary of the estate.

Colney Hatch.

Patients. 846 men and 1,223 women; total, 2,069; 317 recoveries.

Attendants. No reference to staff of attendants.

Restraint. Mechanical restraint had been resorted to in the men's department on forty occasions for surgical reasons and to check persistent destructiveness.

Seclusion. Seclusion resorted to on 45 occasions.

One suicide of woman by hanging. The commissioners say: "She should have been in a dormitory under supervision."

Employment. Men, 100 on the land; 72 at different trades; 14 in the kitchen; 11 in the laundry; 104 on the wards; others variously employed; women, 130 in the laundry; 20 in the mattress room; 38 in the kitchen; 17 in the sewing-room, and 128 on the wards. Altogether, 332 men and 537 women are more or less employed; 39.4 per cent of men employed.

Amusements. The commissioners say: "The usual routine appears to be maintained."

Exercise. The commissioners say: "So far as we can learn, the number of patients who take exercise beyond the airing courts is limited." 120 men are out daily for exercise and 60 have a weekly walk beyond the grounds. From 20 to 50 women take a weekly walk beyond the grounds. In summer and autumn all in turn are taken into the asylum fields. On Sunday evenings between 400 and 500 in fine weather are permitted to be out.

Hanwell Asylum.

Patients. 719 men and 1,091 women; total, 1,810; 217 recoveries.

Attendants. The commissioners say: "The staff of attendants do not srike us as adequate numerically." But they do not give number or proportion. They add: "The wages for general nurses, 12 pounds per annum, is too low, we are of the opinion, to attract suitable persons for charge of lunatics."

Restraint. No mechanical restraint. Two or three maniacal men were in padded rooms.

One suicide by hanging.

Employment. No detail of employment, but it is stated that book-binding had been added to the trades.

Amusements. There is a small hall holding 250 persons for theatrical performances, to which the commissioners propose to add the present chapel and erect a detached chapel to seat 1,000 persons.

Exercise. The grounds are surrounded by a wall.

Banstead Asylum.

Patients. 507 men and 1,008 women; total, 1,515; 28 recoveries.

Attendants. 26 men and 41 women; 1 to 22⅞.

Restraint. Mechanical restraint had been used in one case.

Seclusion. 66 occasions of seclusion.

Employment. Men, 19 men are employed on the land and 102 on the wards; women, 43 in the laundry; 122 men and 284 women are represented as employed in various ways; 24 per cent of men employed.

Amusements. Weekly dances in the winter months; in the summer cricket for the men and occasionally pic-nics for the women.

Exercise. "As a rule, with the exception of those few men who are employed on the land, the patients of both sexes are limited for exercise to the airing courts and the fields which immediately adjoin the courts."

Monmouth Asylum.

Patients. 270 men and 256 women; total, 526; 51 discharged, but their condition not stated.

One assistant medical officer.

Attendants. No reference to attendants.

Seclusion. 20 occasions of seclusion.

Employment. Men, 92 work on the grounds and 61 in shops and other ways; women, 118 women were variously employed; no details; 56.6 per cent of men employed.

Amusements and exercise. It is stated that there is no recreation hall and there is no account of amusements or exercise.

Norfolk Asylum.

Patients. 222 men and 329 women; total, 551; 55 recoveries.

Attendants. No reference to attendants.

Employment. 93 men and 192 women are usefully employed in various ways; 41.8 per cent of men employed.

Amusements. These are represented as continued with occasional private theatricals.

Exercise. No reference made to exercise.

Northamptonshire Asylum.

Patients. 175 men and 248 women; total, 523; 44 recoveries.

Attendants. Proportion of male attendants 1 to 13; women, 1 to 11.

Restraint. No occasions of restraint.

Seclusion. 31 occasions of seclusion.

Employment. Men, 75 on the grounds; 6 in the laundry; 10 in the shops; 44 in trades; 21 in domestic work; total, 190; 150 women employed in various ways; 69 per cent of men were employed.

Amusements. "Of the usual character and frequency;" "a lack of books and papers."

Exercise. No reference to exercise.

Northumberland Asylum.

Patients. 229 men and 190 women; total, 419; 66 recoveries.

Attendants. No reference to attendants.

Restraint. Three persons restrained with locked gloves; 31 had been "wet packed," the latter "not longer than two hours at a time."

Seclusion. No occasions of seclusion.

Employment. 41 men on the land; 18 in the shops; 48 upholstering; 51 in the wards in various ways; women, 40 in the laundry; 6 in the kitchen; 51 sewing and knitting, and 35 in the wards; 69 per cent of men employed.

Amusements. Weekly dance, cricket for the men three times a week, and occasionally concerts and theatrical performances.

Exercise. "A large number of the patients take exercise beyond the airing courts in the very pretty grounds which surround this asylum."

Nott's Asylum.

Patients. 186 men and 204 women; total, 290; 27 recoveries.
Attendants. 13 men and 12 women; 1 to $11\frac{3}{5}$.
Restraint. No occasions of mechanical restraint.
Seclusion. 150 occasions of seclusion since last visit.
Employment. Men, on the land, 22; in the workshops, 14; in the kitchens, 4; women, in the laundry, 30; in the kitchen, 11; needle-work and knitting, 19; total, 40 men and 60 women; 21.5 per cent of men employed.
Amusements. "The in-door associated amusements are still held only monthly in the ironing-room."
Exercise. Those not working on the land were limited for exercise to the airing courts, which are but small, and owing to the rapid slope, not very favorable for that purpose.

Oxford Asylum.

Patients. 206 men and 270 women; total, 476; 27 recoveries.
Attendants. Not given.
Restraint. One case of mechanical restraint.
Seclusion. 86 occasions of seclusion.
Employment. Men, on the land, 40; and at trades, 6; 7 in the kitchen and 63 on the wards; women, 39 in the laundry; 4 in the kitchen; 102 in needle-work, and 42 on the wards; 116 men and 187 women altogether employed; 56.3 per cent of men employed.
Amusements. Weekly dances, theatrical entertainments.
Exercise. Reference is made to the airing courts and to improvements in them. Nothing said about exercise.

Montgomery Asylum.

Patients. 246 men and 280 women; total, 526; 60 recoveries.
Attendants. 22 men and 21 women; 1 to $12\frac{1}{4}$.
Restraint. Five patients have been under mechanical restraint for surgical reasons and extreme violence.
Seclusion. 243 occasions of seclusion to prevent interfering with other patients, and maniacal excitement.
Employment. Men, 55 on the land; 24 in the various trades; 5 in the laundry; 19 at hair picking, etc., and 30 on the wards; women, 29 in the laundry; 12 in the kitchen; 80 sewing and knitting, and 47 on the wards; total, 140 men and 170 women; 56.9 per cent of men employed.
Amusements. Weekly dances, concerts, theatrical performances, and a Christmas tree.
Exercise. 45 men and 48 women are permitted to take exercise beyond the grounds.

Somerset and Bath Asylum.

Patients. 324 men and 419 women; total, 743; 99 recoveries.

Attendants. 35 men and 41 women; 1 to 9⅘.

Restraint. One patient restrained with locked gloves to prevent self-destruction.

Seclusion. 26 occasions of seclusion. The commissioners found a patient locked in a single room, which the authorities declared was not seclusion. They only put down seclusion when the shutter of the window was closed as well as the door. To this definition the commissioners did not agree.

Employment. Men, on the land, 44; as artisans, 53; and in domestic offices, 99; women, 44 in the laundry; 13 in the kitchen; 7 in the dining hall; 90 in dressmaking and needle-work, and 50 in assisting generally; total, 196 men and 200 women; 60.4 per cent of men employed.

Amusements. Dances and theatricals.

Exercise. "180 take exercise beyond the grounds of the asylum, while 144 do not go beyond their airing courts."

Stafford Asylum.

Patients. 267 men and 274 women; total, 538; number of recoveries not stated.

Attendants. No reference to attendants.

Restraint. Nine occasions of mechanical restraint to prevent self-mutilation and homicidal and suicidal efforts.

Seclusion. 88 occasions of seclusion of men for maniacal excitement, four for surgical reasons; 63 occasions of seclusion of women for excitement and 15 for the fury of epilepsy.

Employment. "There has been a slight decrease since the last visit in the number of patients employed." No numbers given.

Amusements and exercise. No reference made.

Burntwood Asylum.

Patients. 270 men and 256 women; total, 526; 24 recoveries.

Attendants. Number of attendants not given.

Restraint. No reference.

Seclusion. No reference.

Employment. No reference.

Amusements. Amusements are in-door games and occasionally a band hired.

Exercise. No reference.

Suffolk Asylum.

Patients. 186 men and 249 women; total, 435; 33 recoveries.

Attendants. 1 to 14 among the men; 1 to 16 among the women.

Restraint. No restraint recorded.

Seclusion. 36 occasions of seclusion.

Employment. "Much the same as at the last visit." No details.

Amusements. Theatrical entertainments, and a singing class for Sunday evening.

Exercise. "About 60 men and 65 women take a weekly walk outside of the grounds, but the remainder of both sexes, as a rule, take exercise only in the airing courts."

Wandsworth Asylum.

Patients. 439 men and 639 women; total, 1,078; 130 recoveries.

Attendants. An average of one attendant to every 10 patients.

Restraint. 14 persons have been restrained with locked gloves, altogether a period of 171 days and 196 nights for surgical reasons; 6 persons have worn locked gloves 458 nights to guard against suicide; 17 persons have worn locked gloves for 26 days and 382 nights to control destructive tendencies.

Seclusion. Seclusion on 46 occasions.

Employment. Men 228 and women 338, variously employed; no particulars; 51.9 per cent of men employed.

Amusements and exercise. No reference to amusements or exercise.

Brockwood Asylum.

Patients. 403 men and 621 women; total, 1,024; 114 recoveries.

Attendants. Average or proportion of attendants not given.

Restraint and seclusion. No record of restraint or seclusion; padded rooms are in course of construction on both sides; some crib bedsteads remain.

Employment. Men, 126 on the land; 54 in various shops and trades, basket making, rope and mat having been introduced; women, 40 in the laundry and 379 in various work; 44.6 per cent of men employed.

Amusements. Theatrical performances, various entertainments; books and newspapers freely supplied.

Exercise. About 50 men go out on parole for exercise, and a large number walk beyond the asylum estate as well as within its limits.

The commissioners say: "The question of having unlocked doors in the asylum appears to have been under discussion here; where so many lunatics, a large percentage being suicidal or dangerous to others, are congregated, we cannot approve of a project which appears to be attended by much risk without corresponding advantage."

Sussex Asylum.

Patients. 365 men and 428 women; total, 793; no account of recoveries.

Attendants. No number or proportion given.

Restraint. No record of restraint.

Seclusion. The record of seclusion shows that this method of treatment is sparingly employed here; 15 persons have been subjected to seclusion and 12 wet packed for medical reasons; excitement and restlessness.

Employment. Men, 84 on the land; 55 in various shops; 2 with the engineer; 3 with the baker; 100 in the house; women, 60 in the laundry; 16 in the kitchen; 14 in the dining room; 176 in needle-work; and 34 in house-work; total, 244 men and 300 women; 66.8 per cent of men employed.

Amusements. Weekly balls and dramatic entertainments once a fortnight; teaching 4 days in the week, about 60 of each sex, by the chaplain.

Exercise. No reference made.

Warwick Asylum.

Patients. 293 men and 362 women; total, 655; 55 recoveries.

Attendants. Number or proportion not given.

Restraint. One man in mechanical restraint for surgical reasons.

Seclusion. 156 occasions of seclusion.

Employment. Men, 49 on the land; 26 in various trades; women, 33 in the laundry and 236 in needle-work, knitting and house-work; 25.6 per cent of men employed.

Amusements. Weekly entertainments, theatricals, concerts, dancing and games.

Exercise. No reference to exercise.

Wilts Asylum.

Patients. 259 men and 298 women; total, 557; 81 recoveries.

Attendants. 20 men and 21 women; 1 to 13½.

Restraint. 9 persons have been restrained by the strong sleeves for surgical reasons and suicidal attempts.

Seclusion. 226 occasions of seclusion.

Employment. No reference to employment.

Amusements. It is said about 280 persons attend the associated amusements; no particulars.

Exercise. A large number do not go beyond their airing courts while "71 men and 90 women walk beyond the estate and 30 women within the asylum bounds."

Worcester Asylum.

Patients. 357 men and 422 women; total, 779; 59 recoveries.

Attendants. 25 men and 26 women; the commissioners remonstrate as there were only two attendants to a ward of 52 patients of the acute, suicidal classes; 1 to $15\frac{1}{5}$.

Restraint. 2 occasions of mechanical restraint for suicidal attempts.

Seclusion. 74 occasions of seclusion.

Employment. Men, 86 on the land; 50 helping the artisans; 5 clerks and others as ward cleaners; women, 67 in the laundry; 16 in the kitchen; 95 sewing, and 80 in the wards and cleaning; 39.5 per cent of men employed.

Amusements and exercise. No reference made.

Yorkshire Asylum.

Patients. 489; number of each sex not stated; percentage of recoveries 59.

Attendants. 29 men and 23 women; 1 to $9\frac{}{5}$.

Restraint. One person in mechanical restraint for suicidal propensities.

Seclusion. 109 occasions of seclusion.

Employment, amusements and exercise. No reference to employment or exercise, and amusements are merely referred to.

Wakefield Asylum.

Patients. 699 men and 708 women; total, 1,407; recoveries 225.

Attendants. 60 men and 58 women; 1 to 12.

Restraint. None recorded.

Seclusion. 10 occasions of seclusion; one described as very suicidal, "who succeeded in avoiding the watchfulness of the nurses and injured herself, from which she died."

Employment. Men, 247 on the land; tailoring, shoemaking and weaving, 65; engine and gas-house and blacksmith shop, 26; upholstering, 35; kitchen and laundry, 28; in the wards, 150; knitting, 12; women, 74 in the laundry; 67 in the kitchen; 8 in the work-room; 270 sewing and knitting; 8 in the wards; 66.2 per cent of men employed.

Amusements. Saturday evening dance, theatrical performances and concerts.

Exercise. 260 men and 100 women take one walk each week beyond the grounds; 160 men and 460 women take exercise weekly in the grounds outside of the airing courts.

Wadsley Asylum.

Patients. 397 men and 480 women; total, 877; 136 recoveries.

Attendants. 38 men and 42 women; 1 to 11.

Restraints. 19 persons were "wet-packed," to allay excitement and prevent exhaustion; one man was secured to his bed, and a woman had her hands tied for surgical reasons.

Seclusion. 19 occasions of seclusion.

Employment. Men, 79 on the land; 8 shoemakers; 10 tailors; 5 carpenters; 30 upholsterers; 9 in the kitchen; 4 in the wash-house; women; 35 in the laundry; 31 in the kitchen; 150 in knitting and needle-work; total men, 205; women, 302; 35.5 per cent of men employed.

Amusements. Weekly dances; musical boxes and a piano recommended.

Exercise. The commissioners state that it is difficult to give the patients exercise beyond the estate by reason of annoyance and the want of proper roads and paths in the asylum grounds; they suggest walks within the grounds.

Yorkshire East Riding Asylum.

Patients. 136 men and 131 women; total, 267; recoveries 26.

Attendants. No reference made.

Restraint. Wet-packing the only form of restraint used.

Seclusion. 18 occasions of seclusion.

Employment. Men, on the land 28; in the store-rooms and shops, 19; in the house, 16; women, 31 in the laundry; 8 in the kitchen; 41 in needle-work, and 24 in the house; total, 108 men and 104 women; 79.4 per cent of men employed.

Amusements. Entertainments same as last reported.

Exercise. Only 75 men and 80 women walk beyond the grounds.

Birmingham Asylum.

Patients. 312 men and 366 women; total, 678; 109 recoveries.

Attendants. 21 for each sex — declared to be numerically insufficent; 1 to $13\frac{7}{10}$.

Restraint. Two persons restrained by waistcoat and gloves for surgical reasons and suicidal propensities.

Seclusion. 31 occasions of seclusion.

The omcmissioners report a very large number of bruises and black eyes, five broken legs, one broken arm, two broken collar-bones, one broken rib and two dislocated shoulders, during thirteen months.

Employment, amusement, exercise. No reference, but said to be same as formerly.

Bristol Asylum.

Patients. 160 men and 195 women; total, 355; 43 recoveries.

Attendants. 12 men and 14 women; 1 to 13$\frac{3}{5}$.

Restraint. One instance of mechanical restraint for surgical reasons.

Seclusion. 220 occasions of seclusion.

Employment. Men, on the land, 29; at trades, 9; in the kitchen, 10; in the wards, 32; women, 23 in the laundry; 5 in the kitchen; 58 at needle-work; 24 in the wards; 50 per cent of men employed.

Amusements. Weekly entertainments.

Exercise. 40 to 50 take a weekly walk beyond the grounds.

One instance given of one patient killing another; the lunatic was tried for manslaughter, acquitted and returned to the asylum.

Hull Asylum.

Patients. 80 men and 59 women; total, 142; 31 recoveries.

Attendants. Number not given.

Restraint. One case of mechanical restraint by gloves for surgical reasons.

Seclusion. Three occasions of seclusion.

Employment. Men, 12 on the land; 4 in the shops, and 23 in the house; women, 11 in the laundry; 13 in the kitchen and wards, and 10 in other work; total, men, 39; women, 34; 48.7 per cent of men employed.

Amusements, Weekly dances and cricket among the men.

Exercise. No mention.

The commissioners say this asylum is to be abolished and therefore they do not desire to refer to its defects hoping that a building will replace it which will meet the requirements of the age and the proper treatment of the insane.

Ipswich Asylum.

Patients. 124 men and 144 women; total, 268; 17 recoveries.

Attendants. 10 men and 11 women; 1 to 12$\frac{4}{5}$.

Restraint. Dry packing had been used on 10 occasions as a means of mechanical restraint from three to ten hours "to allay excitement and keep the patient in bed;" one case of wet packing.

Seclusion. No reference.

Employment. Men, on the land, 19; in the shops, 5, and on the wards, 22; women, in the laundry and kitchen, 15, and in needle and household work, 39; total men, 46; women, 54; 37 per cen tof men employed.

Amusements. There is no amusement hall, but dances take place on the halls.

Exercise. Of exercise the commissioners say they should be glad if regular means of exercise would be found, especially for the women, beyond the airing courts, and some might take walks outside of their walls, remaining on the estate.

Leicesterborough Asylum.

Patients. 178 men and 205 women; total, 383; recoveries not given.

Attendants. 13 men and 15 women; 1 to $13\frac{3}{5}$.

Restraint and seclusion. No reference made.

Employment. 83 of each sex are employed; no details; 46.6 per cent of men employed.

Amusements. Theatrical and musical entertainments, and weekly dances.

Exercise. "Walking receives proper attention;" they contemplate "the extension of paths on the estate.

One suicide by strangulation, one death from choking, and another, fractured rib.

City of London Asylum.

Patients. 148 men and 201 women; total, 349; recoveries not given.

Attendants. No reference made.

Restraint. No mention of restraint.

Seclusion. Two occasions of seclusion.

Employment. They report 148 men and 128 women as engaged in occupations of all descriptions; 100 per cent of men employed.

Amusements. Said to be same as formerly; no details.

Exercise. The commissioners recommend a more secure fence between the grounds for men and women, and state that one of the men got over into the women's court and bit a nurse severely.

Newcastle-Upon-Tyne Asylum.

Patients. 132 men and 129 women; total, 261; 27 recoveries.

Attendants. 11 men and 11 women; 1 to $11\frac{4}{6}$.

Restraint. Locked gloves had been used on five persons on several occasions for surgical reasons or to prevent injury; camisole on 57 occasions for the same reasons as given for the use of the gloves.

Employment. 86 of each sex employed; 65.1 per cent of men employed.

EXHIBIT No. 12.

Itemized Statement of Kind, Amount and Cost of Articles used by the during the fiscal year ending September 30, 18 .

ITEM.	Measure.	Amount.	Price.	Cost
PROVISIONS.				
CLASS 1.				
Flour	Barrels.			
Flour, Graham	"			
Meal	Bush'ls.			
Oat-meal	"			
Bread	Pounds.			
Crackers	"			
Baking powder	"			
Soda	"			
Cream tartar	"			
Hops	"			
Yeast	"			
Farina	"			
Tapioca	"			
CLASS 2.				
Meats, etc.				
Fresh beef	Pounds			
Salt beef	"			
Mutton	"			
Fresh pork	"			
Salt pork	"			
Sausage	"			
Veal	"			
Ham	"			
Fresh fish	"			
Salt fish	"			
Oysters	Gall'ns.			
Sardines	Boxes.			
Poultry	Pounds.			
Tongues	"			
Lard	"			
CLASS 3.				
Canned vegetables	Cans.			
Canned fruit	"			
Dried apples	Pounds.			
Raisins	"			
Currants	"			
Dried beans	Barrels.			
Hominy	Pounds.			
Rice	"			

ITEM.	Measure.	Amount.	Price.	Cost.
CLASS 4.				
Fruit.				
Apples	Bush'ls.			
Oranges	Dozens.			
Lemons	"			
Peaches	Bush'ls.			
Cranberries	Quarts.			
Berries	"			
Plums	Bush'ls.			
Other fruits				
CLASS 5.				
Vegetables.				
Potatoes	Bush'ls.			
Sweet potatoes	"			
Other vegetables				
CLASS 6.				
Milk	Quarts.			
Butter	Pounds.			
Cheese	"			
Honey	"			
CLASS 7.				
Groceries.				
Coffee	Pounds.			
Cocoa	"			
Tea	"			
Sugar	"			
Spices	"			
Pepper	"			
Salt	"			
Mustard	"			
Vinegar	Barrels.			
Cider	"			
Pickles	Bottles.			
Sauces	"			
Other groceries				
LAUNDRY SUPPLIES.				
Soap	Pounds.			
Soft soap	Barrels.			
Potash	Boxes.			
Starch	"			
Blueing	Bottles.			

ITEM.	Measure.	Amount.	Price.	Cost.
HOUSEHOLD SUPPLIES.				
Matches	Gross.			
Blacking	Dozens.			
Baskets	Number			
Pails	"			
Brooms	Dozens.			
Brushes	"			
Mopsticks	"			
Slop jars	Number			
Tacks	Papers.			
Step-ladders	Number			
FUEL.				
Charcoal	Bushels.			
Hard coal	Tons.			
Wood	Cords.			
Kindlings	"			
LIGHT.				
Gas				
Oil	Gallons.			
Candles	Pounds.			
Water				
Ice				
REPAIRS AND IMPROVEMENTS.				
Bricks	M.			
Lumber	Feet.			
Mouldings	"			
Doors	Number			
Sash	"			
Blinds	"			
Lime	Barrels.			
Stone	Yards.			
Sand	Loads.			
Plaster of Paris	Barrels.			
Cement	"			
Paints	Pounds.			
Oil	Gallons.			
Glass	Boxes.			
Putty	Pounds.			
Varnish	Gallons.			
Nails	Pounds.			
Screws	Gross.			
Locks	Number			
Hinges	"			

ITEM.	Measure.	Amount.	Price.	Cost.
Miscellaneous Hardware.				
Sash cord	Feet.			
Wall paper	Rolls.			
Brushes	Number			
Roofing				
Belting	Feet.			
Plumbers.				
Iron pipe	Feet.			
Lead pipe	Pounds.			
Water-closets	Number			
Basins	"			
Bath-tubs	"			
Fittings	"			
Faucets	"			
Labor	Days.			
Gas Fitting.				
Fixtures	Number			
Pipe	Feet.			
Labor	Days.			
Labor.				
Carpenter	Days.			
Painter	"			
Mason	"			
Common laborers	"			
FURNITURE.				
Bureaus	Number			
Bedsteads	"			
Chairs	"			
Clocks	"			
Desks	"			
School-desks	"			
Lounges	"			
Looking-glasses	"			
Pictures	"			
Settees	"			
Sofas	"			
Stands	"			
Stoves	"			
Tables	"			
Wardrobes	"			
Washstands	"			
Repairs				

ITEM.	Measure.	Amount.	Price.	Cost.
Carpets	Yards			
Curtains	"			
Matting	"			
Oil cloth	"			
Linoleum	"			
Mattresses, hair	N'mber.			
Mattresses, husk	"			
Mattresses, cotton	"			
Mattresses, spring	"			
Pillows	"			
Crockery.				
Knives	N'mber.			
Forks	"			
Spoons	Dozens.			
Kitchen utensils	N'mber.			
Ranges	"			
Household linen.				
Blankets	Dozens.			
Comforters	"			
Napkins	"			
Towels	"			
Crash	Yards.			
Spreads	Dozens.			
Table-cloths				
Table-cloths	Yards.			
Ticking	"			
Sheeting	"			
Labor	Days.			
CLOTHING.				
Hats	Dozens.			
Caps	"			
Bonnets	"			
Hoods	"			
Tippets	"			
Collars	"			
Gloves	Pairs.			
Mittens	"			
Combs	Dozens.			
Hair-brushes	"			
Tooth-brushes	"			
Handkerchiefs	"			
Neckties	N'mber.			
Hose	Dozens.			
Overalls	N'mber.			

ITEM.	Measure	Amount.	Price.	Cost.
Shawls	N'mber.			
Shirts	"			
Suspenders	Dozens.			
Underwear	N'mber.			
Boots	Pairs.			
Shoes	"			
Rubbers	"			
Overcoats	N'mber.			
Coats	"			
Vests	"			
Pants	"			
Suits	"			
Ribbons	Yards.			
Yarn	Pounds.			
Thread	Spools.			
Buttons	Gross.			
Pins	Pack'es.			
Needles	M.			
Sundries.				
Cloth, cotton	Yards.			
Dress goods	"			
Cloth, woolen	"			
Leather, etc.				
Shoemaker				
Seamstress				
STABLE.				
Hay	Tons.			
Straw	Loads.			
Oats	Bushels.			
Meal	"			
Feed	"			
Horses	N'mber.			
Cows	"			
Pigs	"			
Harness	"			
Carriages	"			
Wagons	"			
Blankets	"			
Whips	"			
Robes	"			
Lanterns	"			
Sleighs	"			
Repairs to wagons and carriages				

ITEM.	Measure.	Amount.	Price.	Cost.
Blacksmith				
Curry-combs	N'mber.			
Farrier				
Sundries				
FARM AND GARDEN.				
Cultivators	N'mber.			
Plows	"			
Rakes	"			
Shovels	"			
Spades	"			
Hoes	"			
Forks	"			
Drills	"			
Seeds				
Trees, shrubs and plants				
Posts				
Phosphates				
Hot-bed sash				
Water-pots				
Sundries				
Labor (extra)				
BOOKS AND STATIONERY.				
Books	N'mber.			
Binding				
Printing				
Crayons	Gross.			
Rubbers	N'mber.			
Rubber bands	Boxes.			
Slates	N'mber.			
Paper	Quires.			
Envelopes	M.			
Maps	N'mber.			
Pencils, lead	Dozens.			
" slate	Boxes.			
School-cards	Bottles.			
Ink	N'mber.			
Inkstands				
Newspapers				
Periodicals				
School pictures				
Card-board				
Apparatus				

ITEM.	Measure	Amount.	Price	Cost.
SALARIES.....				
WAGES.....				
Freight.....				
Express.....				
Telegraph.....				
Postage.....				
Funeral expenses.....				
Interest.....				
Drugs, etc.....				
Money to pupils.....				
Amusement.....				
TRAVELING EXPENSES.				
Trustees.....				
Superintendent.....				
Steward.....				
Pupils.....				
MISCELLANEOUS EXPENDITURES.				

Classified summary of expenditures of the *for the fiscal year ending September* 30, 18 .

Provisions:

Class 1st.....	
" 2d.....	
" 3d.....	
" 4th.....	
" 5th.....	
" 6th.....	
" 7th.....	
Total provisions.....	
Laundry supplies.....	
Household supplies.....	
Fuel.....	
Lights.....	
Water.....	
Ice.....	
Repairs and improvements.....	
Furniture.....	
Clothing.....	
Stable.....	
Farm and garden.....	
Books, stationery and apparatus...	
Salaries.....	
Wages.....	
Freight, express and telegraph....	

ITEM.	Measure.	Amount.	Price.	Cost.
Postage.....				
Funeral expenses.....				
Interest.....				
Drugs and medicines.....				
Money to pupils.....				
Traveling expenses of trustees....				
Traveling expenses of superintendent.....				
Traveling expenses of steward....				
" " pupils.....				
Amusements.....				
Miscellaneous expenditures.....				
Total.....				

To the State Board of Charities, Albany, N. Y.:

The foregoing itemized statement of the kind, amount and cost of articles used in the State Lunatic Asylum during the fiscal year ending September 30, 1882, is respectfully submitted.

, *Superintendent.*

Dated .

EXHIBIT No. 13.

Proposed law for the management of Insane Asylums in the State of New York, by Clarissa C. Lathrop.

[See page 545, printed record.]

I. No person shall, against his will, be confined in a lunatic or insane asylum unless it is distinctly stated in the affidavit, now required by law, that such person cannot with safety to his own life or property, or the lives or property of others, be allowed to go at large.

II. The open door system (as practiced in Europe and some parts of New Jersey) shall exist as far as practicable throughout the State.

III. Rules governing the asylum shall be posted conspicuously in every ward of each asylum, where they may be seen by patients and attendants.

IV. Lady physicians shall be employed on female wards, and at least one trained nurse shall have the supervision of each ward of every asylum.

V. Every officer or attendant in an insane asylum shall treat patients with kindness, respect and consideration, and physical mal-

treatment by any person connected with an asylum shall be a misdemeanor.

VI. Patients shall not be compelled to perform menial labor unless approved by superintendent and board of managers, and punishment shall not be inflicted on patients for refusal to perform such labor.

VII. Every letter addressed by a patient in an asylum to any person shall not be destroyed or retained by the superintendent or other officer of an asylum, unless by direction of the board of managers. If so detained or destroyed without their approval, it shall be a misdemeanor.

VIII. Forms of mechanical restraint shall be uniform throughout the State. The Utica crib abolished It shall not be allowable for any but a medical officer of an insane asylum to order a patient under mechanical restraint or in seclusion, and a record of such instance must be kept in book provided for that purpose. The medical superintendent in charge shall be held responsible for any neglect of this rule, and such neglect shall be considered as a misdemeanor.

IX. Feeding of patients shall be done by medical officer of an asylum or in his presence. He shall be held responsible for any accident that may result from improper feeding.

X. Every insane asylum shall have a board of three managers elected by the people, whose term of office shall not exceed two years, to be paid per diem for actual work done. They shall be held responsible with superintendent of asylum for the fulfillment of laws governing the management of asylums.

XI. Every patient shall be discharged as soon as sanity is established, and no person shall be detained to be a burden upon the State or county from which he is sent, who is capable of self-support.

	1873.										1884.			
	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	January.	February.	March.	April.
From No. 12 to No. 3..	....	....	....	....	....	1	....	....	....	....	....	....	....	....
From No. 12 to No. 4..	....	....	1	1	...	2	....	1	1	1	....	....	....	....
From No. 12 to No. 5..	....	....	1	...	....	....	....	....	....	....	....	....	....	....
Number 6.....	....	....	....	....	....	...	....	....	....	....	....	....	....	....
Number 7.....	...	...	1	....	....	....	....	....	....	1	...	....	....	....
Number 8.....	1	1	....	....	....	2	...	2	2	2	....	....	....	1
Number 9.....	....	....	....	....	....	1	....	....	....	....	....	....	....	....
Number 10.....	2	....	1	4	2	2	2	3	2	3	2	4	1	....
Number 11..	....	....	...	2	2	....	....	....	....	2	....	....	1	...
Discharged.....	....	2	....	1	1	....	1	1	1	....	4	1	....	2
Died	*1	....	†1	‡1	§1	....	....	....	‖1	....	¶1	....	....	..
Total.....	4	3	5	9	6	8	3	7	7	9	7	5	2	3

*H. S. Benson, paresis. †A. McCan, erysipelas. ‡E. Sullivan, congestion of lungs. §J. G. Geib, peritonitis. ‖M. W. Heath, uræmia. ¶H. McCabe, paresis.

EXHIBIT No. 22.

DEATHS ON TENTH WARD FROM MARCH 3, 1873, TO JULY 14, 1876.

E. M. Anderson, January 15, 1874, paresis.
C. Mundion, June 19, 1874, cardiac disease.
S. A. Rogers, January 17, 1876, Bright's disease
A. Day, February 20, 1876, exhaustion.
D. Pringle, March 13, 1876, suicide.

EXHIBIT No. 25.

STATEMENT.

Sugar:

1881, 49,198 pounds; amount paid, $4,454.48; average, 9 cents.
1882, 48,423 pounds; amount paid, $4,426.44; average, 9⅛ cents.

Lambs:

1881, number, 426; amount paid, $2,264; average, $5.31.
1882, number, 411; amount paid, $2,323.50; average, $5.65.

Sheep:

1881, 21,755 pounds; amount paid, $1,425.40; average, 6⅓ cents.
1882, 41,915 pounds; amount paid, $3,129.10; average, 7½ cents.

Flour:

1881, 862½ barrels; amount paid, $5,509.61; average, $6.38.
1882, 862½ barrels; amount paid, $6,739.54; average, $7.81.

Butter:

1881, 36,208½ pounds; amount paid, $9,914.81; average, 27½ cents.
1882, 22,912¾ pounds; amount paid, $9,468.03; average, 28 cents.

Beef cattle:

1881, 306,555 pounds; amount paid, $16,313.68; average, 5⅓ cents.
1882, 297,840 pounds; amount paid, $19,205.70; average, 6½ cents.

[Copy.]

EXHIBIT No. 26.

The N. Y. State Lunatic Asylum, To J. G. Egert, Dr.

1883.		
March 3,	To 3 barrels oat-meal, at $7.75	$23 25
March 20,	2 barrels D oat-meal, at $7.75	15 50
March 20,	1 barrel common salt	1 00
March 31,	2 barrels D oat-meal, at $7.75	15 50
		$55 25

[Copy.]

EXHIBIT No. 27.

The N. Y. State Lunatic Asylum, To Head & Winston, Dr.

1883.	
June 1, 1 barrel Pillsbury's best flour, $8; 919 middlings, $1.15, $10.57	$18 57
June 13, 1 barrel pastry, $6.75; June 23, 3 barrels Pillsbury's flour, $8, $24	30 75
June 23, 1 barrel salt, $1; June 29, 1 barrel pastry, $6.75; 1 barrel oat-meal, $8	15 75
July 11, 3 bags, 25 cents, 75 cents; 7$\frac{11}{62}$ bushels beans, $2.50, $17.94	18 69
July 21, 1 barrel salt, 95 cents; 1 barrel Quaker oat-meal, $8	8 95
July 23, 2 boxes evap. apples, 84 pounds net, 12$\frac{1}{2}$ cents.	10 50
July 26, 2 barrels Y beans, 290-19 (each) 542 pounds, 8$\frac{42}{62}$ bushels, $2.75	24 54
July 26, 1 barrel salt, 95 cents; 27, 1 barrel solar salt, $1.20, 1 barrel common salt, 95 cents	3 10
July 27, 1 barrel pastry, $6.75; Aug. 7, 1 case apples, 50 pounds, 16 cents, $8	14 75
Aug. 14, 1 barrel pastry, $6.50; 24, 830 middlings, $1.15, $9.55	16 05
Aug. 27, 1 barrel pastry, $6.50; 1 barrel fine salt, $1	7 50
	$169 15

EXHIBIT No. 27*a*.

Drugs and Liquors for year ending September 30, 1883.

1882.	
Nov. 10, Caswell, Hazzard & Co., drugs	$8 25
1883.	
Jan. 3, A. L. Woodruff, whisky, etc	587 75
Jan. 9, E. R. Squibb, drugs, etc	225 73
Jan. 17, Chas. Killgore, drugs, etc	61 01
Jan. 22, Daniel Lawrence & Son, rum	82 00
Feb. 17, C. H. Williamson, drugs	27 36
Feb. 17, Butler & Hamilton, drugs	18 27
Feb. 19, W. Blaikie, drugs	25 51
April 5, Chas. Killgore, drugs	96 88
April 6, C. H. Williamson, drugs	61 30
April 6, Butler & Hamilton, drugs	12 00
April 6, Wm. Blaikie, drugs	30 97
April 7, McQuade, Bros., liquors	189 20
April 13, Caswell, Hazzard & Co., drugs	56 84
May 9, E. R. Squibb, drugs	290 86
June 14, Killgore's drug store, drugs	55 34
June 28, McQuade Bros., whisky, etc	840 65
July 10, Butler & Hamilton, drugs	15 33
July 10, C. H. Williamson, drugs	55 77
July 10, Wm. Blaikie, drugs	120 22
July 16, A. L. Woodruff, wine	690 26
Aug. 9, E. R. Squibb, drugs	99 54
Sept. 13, Killgore drug store, drugs	30 80
Sept. 14, McQuade Bros., whisky	402 50
Sept. 13, Butler & Hamilton, drugs	20 95
Sept. 18, C. H. Williamson, drugs	48 58
Sept. 26, Blaikie & Fitch, drugs	56 57

Groceries for the year ending September 30, 1883.

1883.	
Feb. 17, Job Parker's Sons, groceries	211 33
Feb. 17, Butler & Hamilton, sugar, tea, coffee, rice, etc.	2, 326 16
April 6, Job Parker's Sons, groceries	90 35
April 6, Butler & Hamilton, sugar, tea, coffee, rice, etc.	1, 851 56
July 10, Butler & Hamilton, sugar, tea, coffee, rice, etc.	1, 803 56
July 10, Job Parker's Sons, groceries	106 81
Sept. 13, Butler & Hamilton, sugar, tea, coffee, rice, etc.	1, 907 80
Sept. 29, Job Parker's Sons, groceries	140 37
	$8, 437 94

Stock on Farm and Grounds.

Seven horses on farm and grounds; 4 carriage horses; 1 steward's horse; 54 cows; 2 bulls; 6 heifers; 5 calves; 1 yoke of working oxen; 104 hogs; 5 bob sleighs; 5 lumber wagons; 2 ox carts; 1 horse cart; 3 low wagons.

EXHIBIT No. 28.

Case of Giles A. Penny.

Giles A. Penny, Plainfield, Otsego county; admitted February 21, 1880; number for year one hundred and eighty-two; order, private; sex, man; age, thirty-six; civil condition, married; number of children, four; occupation, farmer; education, common; religion, Baptist; habits, tobacco; nativity, New York; insane relations, father and brother; date of attack, February, 1880; duration, three weeks; number of attack, one; number of admission, one; age at first attack, thirty-six; eyes, blue; pupils, dilated; tongue, coated and fissured; pulse eighty-four; lungs, slight bronchitis; bag (meaning brought in a bag, see his testimony, J. H. M.); cause ill health from loss of sleep; form, acute mania; correspondent, William H. Brown, Bridgewater, Oneida county, New York; telegraph, same; papers, bond of Charles J. Wheeler, West Plainfield, and William H. Brown, Bridgewater, Otsego county; medical certificates, W. E. Ford and Edwin Hutchinson; brought by Wm. H. Brown, L. J. Wing, Unadilla, and two assistants. The patient states that during the past ten years he has used tobacco freely; some days he has used a ten cent plug. While using this amount he frequently suffered from nausea and palpitation of the heart. About the first of this month he commenced to attend a series of revival meetings which were being held in his neighborhood. He became very much interested and was soon in such a condition that he could not sleep. At night he would be walking about the house. During the day he was uneasy and discontented. Very soon he commenced to talk loudly and excitedly on religious subjects; he became boisterous in his behavior; he disregarded the wishes of his family and friends; opposed and resisted care; says that he remembers all that has happened, but has been unable to control his actions; says that he knows something is the matter with himself, and desires to remain here till he is cured; says he feels lame and sore from the confined position in which he has been restrained; he states that he has struggled so much with those who have attended him, that he feels exhausted and tired out. Mr. Brown states that the sack or bag in which the patient was brought was put on three days ago. The letter of Mr. Wheeler (see fly, marked "A" and appended) gives quite a history of the case. Sent to No. 7; ordered sol. of chloral

Hydrat. ℥ ii (gr. xx) nocte. February 23. Is quiet and well behaved; is eating and sleeping well; desires to remain till he is fully restored to health. 24. Is eating and sleeping well; says he knows he must have been crazy as he thought he could preach better than he could do farm work. 26. Is inclined to be industrious; employs himself in dining-room; chloral discontinued; removed to six, on account of improvement. March 11. Has continued to gain in physical and mental strength; has a very fair appreciation of his condition; moved to No. 3, on account of improvement. March 25. Moved to two, on account of continued favorable convalescence; has received several visits from friends. April 3. Visited by wife who complained to patient of how badly things were going at home in his absence; told wife that he had eaten when every thing tasted like a chip, and that he had appeared as well as possible so as to fool the doctors. 4. Emotional, cries, wrings his hands, moans and groans; asks to be sent home. 5. Sent to No. 8; was noisy last night; is excitable, noisy and maniacal; put on morph. bromid. gr. 1-4, milk punch ter die. 7. Is very emotional, crying and laughing; walks about the ward, pounds on the door, opposes and resists care; is quite maniacal; will not stay in bed; put on hyoscyamine gr. 1-8 and placed in covered bed; has been restrained to chair portion of past two days, on account of extreme restlessness. 9. Placed in camisole, on account of his violent and unprovoked attacks on patients and attendants; is destructive of clothing. 10. Is more quiet; camisole removed, restrained with belt; same maniacal conduct; pulse 116; tongue dry and coated; punch and morphia discontinued and hyoscyamine increased to gr. 1-6. 12. Is out of restraint to-day; is more quiet under the influence of medicine. 13. Is manifesting considerable self-control; hyoscyamine discontinued in morning; tonic ℥ ss. given ter die. 14. This morning had a paroxysm of extreme restlessness; placed in camisole which he wore most of the forenoon. 21. Has remained in much the same excitable, maniacal state; has a portion of the time required restraint by camisole, and a portion of the time by belt. May 1. Was brought a suit of clothing by Mr. Wheeler; after trying it on became very maniacal; attacked every one within reach. May 12. Still on eight; no mental change; is now taking hyoscyamine, ¼ grain, night and morning; attacked patient B+l under the delusion that he was working against him. June 2. Has become more quiet; hyoscyamine discontinued; chloral, grs. xx, and tr. hyoscy. ℥ ii, substituted at night. 5. Had a period of frenzy; requires restraint by camisole; has delusion that attendant Williams has stabbed his wife; is removed to four, as he makes violent attacks on attendant at every opportunity; hyoscyamine again employed in place of chloral and hyoscy. 8. Has been wearing wristlets for past three days to control his violence; is failing in flesh and strength; tonic discontinued, and punch substituted. 9. Very destructive, tears clothing and bedding; made a sudden and unprovoked attack on M., breaking his nose; pounded his own head and face against the chair, bit his cheeks and lips till

they bled.* 11. Is not eating well; says food is poisoned; put on extra diet; is failing in strength. 12. Takes food only as it is put to his mouth, and mostly liquid diet; pulse feeble, tongue coated, teeth covered by sordes, right cheek swollen and tender, the result of the pounding inflicted by self on 9th; is now wearing restraint (camisole) to prevent attempts at self-injury; resists all attempts to examine cheek. 16. Is quite weak; still requires to have food administered to him; all medicine but punch discontinued; placed on chloral, grs. xx, tr. hyos. ʒ ii, nocte. 17. Swelling decreased on face; as careful an examination of jaw as possible in patient's excitable state, fails to reveal any thing but swelling and ecchymosis. 18. Is kept in bed on account of prostration; is eating better; is wearing wristlets day and night to prevent self-injury and destructiveness. 20. Still sick in bed to-day; took food voluntarily for the first time; an examination of the jaw, which is for the first time permitted without resistance, reveals a fracture of the coronoid process of right side lower jaw; the swelling has almost wholly subsided; adhesive straps and bandage applied; on liquid diet, eggs, beef-tea, etc. 29. Small abscess at angle of injured jaw opened to-day; is gaining in strength; quiet, but incoherent and emotional. July 1. Abscess still discharging; no marked deformity of jaw. 4. Profuse discharge from abscess; swelling decreasing though extremely tender on pressure. July 6. Removed to No. 7; has been sleeping in open bed since June 26. July 9. Jaw again examined to-day; several roots of teeth removed; abscess still discharging; the coronoid process is drawn up and away from ramus; patient very emotional and easily excited. 15. Removed to No. 5; makes mysterious motions and signs, and when questioned says "you know." 16. Warns the doctor against Supervisor Jones, whom he thinks intends to injure him (the doctor). 21. Has a slight diarrhœa; extra diet, thickened milk and diarrhœa mixture; is anxious to employ himself, and is allowed to sweep ward, etc. 30. Milk punch discontinued; tonic, ʒ ss ter die. August 16. Was visited by Mr. Wheeler a few days ago; maintained good self-control during the brief visit, but for two days subsequent was emotional and excited; threw his slippers out of the window; was talkative and incoherent; is now quiet. August 18. Abscess on jaw opened and is discharging again. 31. Tonic discontinued. September 11. Works out; helps make roads, and in the garden. 18. Small pieces of bone had necrosed and discharged through abscess on cheek. 24. Chloral discontinued; is cheerful and contented. 26. Hyoscyamus discontinued. 30. Talkative and emotional; complaining of pain in head; on bromide of potash, grs. xx, fl. ext. ergot, ʒ ss, ter die. October 1. Much disturbed by a visit from a friend who came at wife's request; sleepless; chloral, grs. xx, tr. hyos. ʒ ii, resumed; has asthma. 5. Is now quiet again; asthma relieved; appears feeble minded. 13. Is becoming more quiet and less emotional, and assists in the care of the garden. 20. Sent to No. 6 for trial. 23. Tr. hyos. discontinued. November 16. Pot. brom. discontinued; sits in room for the most

part; has periods of crying; manifests no interest in himself or surroundings, and does not employ himself in any way. December 2. Has the delusion that Supervisor Jones is working against him, and Dr. Josselyn, and makes signs with hands and shakes his head when talking about the matter; sent to seven, and pot. brom. renewed. 11. Is more cheerful and happy; cries less; sent to five. January 18, 1881. Bromide of potash and ergot discontinued. February 3. Coherent; neat and tidy; eats and sleeps well; expresses no delusive ideas, but is somewhat emotional and laughs and cries easily; assists in the care of the ward; sent to three because of improvement. March 2. Convalescing favorably; all medicine discontinued; assists Mr. Brady in the wood-house. 9. Sent to one because of improvement; is less emotional and is gradually gaining in mental strength. April 1. Continues to employ himself regularly; eats and sleeps well, and is in good flesh and strength; realizes that he has been insane, and says he is very thankful for what has been done for him; says if he hurt any one when he was maniacal, he is sorry, and hopes no permanent injury will follow; says he will always remember the Asylum with gratitude. 20. Is fast becoming established in mental and physical health; Mrs. Penny is written that he may go home on the 30th. April 30, 1881. Discharged recovered and went home with Mrs. Penny and Mr. Wheeler.

Compared with records, correct.

E. N. BRUSH.

"A."

UNADILLA FORKS, OTSEGO COUNTY, N. Y.,
February 21, 1880.

Doctor JOHN P. GRAY:

Giles A. Penny, aged 36 years, married; has four children; occupation, farmer; education, fair; is a professor of religion; habits, good; uses tobacco; born in Plainfield, Otsego county; residence same place; predisposing and exciting causes use of tobacco; bad stomach and religious excitement; he is of nervous temperament, kind disposition; his own father was an inmate of your Asylum; he is troubled with asthma, and frequently has an attack at night and cannot lie in a reclining position; the first disturbance of his mind noticed was about the third of February inst. and at times since on the subject of religion, until 16th inst. and 19th inst., had a raving attack, which required several attendants; never was in the Asylum; he has made no attempts to destroy either himself or others; he ate pretty regular, sleeps some; is not noisy or boisterous, except when his attacks come on, which is sometimes once or twice in a day; he is cleanly and is attentive to the calls of nature; having been acquainted with him several years, I think that the condition of his stomach and the use of tobacco has much to do with his present condition, and as a friend and one of the family, I would request that especial care be exercised in reference to the attacks of asthma, especially when it occurs at night.

CHARLES J. WHEELER.

Memoranda showing the wards Giles A. Penny was on from the date of his admission, February 21, 1880, to his discharge, April 30, 1881, the persons who visited him and the occasions:

February 21, 1880, sent to the seventh ward; February 25, on seventh ward, received call from gentleman.

February 26, 1880, transferred to No. 6; March 2, on sixth ward, sister, daughter, and two gentlemen; March 10, on sixth ward, wife, child and gentleman.

March 11, 1880, transferred to No. 3; March 16, on 3, son, two brothers-in-law, nephew and gentleman; March 20, on 3, sister; March 22, on 3, gentleman; March 23, on 3, wife and daughter.

March 25, 1880, transferred to No. 2; March 27, on 2, two gentlemen; March 30, on 2, a gentleman; April 3, on 2, wife.

April 6, 1880, transferred to No. 8; May 1, on 8, Mr. Wheeler.

June 5, 1880, transferred to No. 4.

July 6, 1880, transferred to No. 7.

July 15, 1880, transferred to No. 5; August, 1880, visited by Mr. Wheeler, on fifth ward; September 29, 1880, fifth ward, Mr. Wheeler and daughter; October 14, 1880, on fifth ward, gentleman.

October 20, 1880, transferred to No. 6; November 6, 1880, sixth ward, brother and sister; November 12, 1880, sixth ward, gentleman.

December 2, 1880, transferred to No. 7.

December 11, 1880, transferred to No. 5; December 21, 1880, fifth ward, brother-in-law; January 18, 1881, fifth ward, sister.

February 3, 1881, transferred to No. 3; February 16, 1881, third ward, wife, brother-in-law, nephew; February 22, 1881, third ward, cousin, nephew and gentleman; March 1, 1881, third ward, brother-in-law; March 9, 1881, third ward, brother-in-law.

March 9, 1881, transferred to No. 1; March 12, 1881, first ward, gentleman; March 15, first ward, wife and two children; March 16, 1881, first ward, wife and two children; March 26, 1881, first ward, Mr. Noble; April 5, 1881, first ward, W. Dye; April 22, 1881, first ward, Mr. and Mrs. Brown and Mr. Lake.

Discharged April 30, 1881.

EXHIBIT No. 29.

Case of Miss Lathrop.

Clarissa C. Lathrop, Rochester, Monroe county. Admitted October 19, 1880; age thirty-three; spinster; school-teacher; academic education; Episcopalian; good habits; native of New York; no insane relations; date of attack, February, 1880; duration, nine months; first attack; first admission; neither suicidal or homicidal; eyes blue; tongue moist and clean; pulse ninety-six, weak and compressible; heart and lungs normal; menstruation regular; is in fair flesh; cause of insanity ill-health from overwork; form of insanity

sub-acute mania. Correspondent, Miss Nellie Lathrop (sister), Jones street, Rochester. Order of indigence issued by W. C. Rowley, county judge; medical certificates made by Drs. P. Neefus and J. G. Hunt; certified by W. C. Rowley, county judge of Monroe county; brought to the Asylum by Dr. P. Neefus; record of admission made by Dr. Blumer. "Although the history of this case given by the patient's sister in the annexed letter conveys the idea of recent insanity it seems more than probable that it dates from last February when she left off teaching school. Oppressive headache, numbness of the left arm, wakefulness and general uneasiness were complained of at this time, and there was also an inability to fix the attention, such that she was obliged to discontinue her study of languages." The assertion of Dr. P. Neefus that she had been "a little off" for several months supports this view; she has been treated by electricians, and has herself used a battery under their directions. On September 6 she resumed her duties at the school-room, but only for a week or ten days when she returned home, and expressed her conviction that teaching injured her circulation. About this time she conceived a strong dislike to a boarder in the family, imagining that she came between her and her lover, and accusing her of intercepting his letters; a suspicion for which there is no foundation in fact. On October 8 she began to lose appetite, took an electric bath, vomited and complained of feeling sticky; in the night she took a bottle of hypophosphites to her room and hid it away, and on the Monday morning following took this and some hop tea to a chemist to have them analyzed, asserting that she felt confident that she had been poisoned. Her next freak was to consult a lawyer, and write page after page descriptive of her many symptoms; suspicion of poisoning increased. Under the delusion that her clothing was saturated with something "of the nature of phosphorus," she removed it frequently and used ammonia, soap and other alkalies as "antidotes." The patient is naturally of a nervous, sensitive and excitable temperament. Her sister knows of no exciting cause, except that it be "an overdose of electricity, more than she could sustain." The patient is free to converse in the office, and reiterates her delusions in regard to poisoning by phosphorus, and the machinations of the lady boarder; other delusive ideas are also elicited; she scouts the idea of insanity; she is coherent and precise in language and ladylike in deportment.

Letter of Miss Nellie C. Lathrop to Dr. Gray: an account of case:

ROCHESTER, *October* 18.

DR. GRAY:

DEAR SIR — I trust you will find the inclosed history of my sister coherent and satisfactory; my nerves are unstrung and my heart wrung with sorrow at this calamity so suddenly fallen upon us, and I do so trust that you can assure us there is hope, after you have thoroughly examined her case; I don't know but I have

omitted, really, the most important information, and add, therefore, here, that she has complained of a pressure on her brain or a burning pain on the left side of her head a great deal ever since February and also complained of numbness in her left arm and hand, waking in the night to slap and rub her arm ; her sleep for a long time has been disturbed, wakeful and uneasy, though she has never gotten up to wander about the house; her life and health is very precious to us; there are but few of us and we have never been separated and so sad it is to be obliged to put her in confinement among uncongenial elements, for she has only been accustomed to refined and cultured society, and she is so winning and sane on every other topic; is it well for us to write to her and will she be encouraged to write to us; if you will give me her attendant's address I would like to know from her what more she needs besides the supplies we have sent; our father was General William E. Lathrop, a highly respected Free Mason standing at the head of all of the degrees in this State; he died three years last April; I mention this as you may have known of him, perhaps been personally acquainted with him. Please write as early as possible, especially if you can give us hope of her eventual recovery.

Respectfully yours,

Miss NELLIE C. LATHROP.

38 Jones st., Rochester, N. Y.

Dr. Gray : *History.*

Clara C. Lathrop, age 33, born in Rochester, N. Y., of American parents : no insanity developed in progenitors on either side of the family ; no tendency to intemperance or dissipation in any of the relatives; she inherits, however, a highly sensitive and nervous temperament ; she has a luxury-loving nature and life has been a disappointment to her in that she has been obliged to maintain herself and help toward supporting other members of the family through the failure in business of her father ; she has naturally a very bright, cheerful disposition, fond of society and amusements ; she was never married, although several times engaged ; the last gentleman to whom she was engaged died some eight years since and his death did not seem to affect her seriously ; she has received attentions since from other gentlemen ; she has always been perfectly correct in her deportment ; she had a good education ; graduate of the free academy, and later studied languages, German and French ; she has taught school since she was twenty years old ; seemed interested in her occupation and was really a very successful teacher, though at the same time feeling that it was very hard that she was obliged to do it ; she left school last February temporarily, but was never ready to return to her duties ; thought herself liable to have heart disease or threatened with paralysis, and placed herself under treatment of some lady electricians and supplied herself with a battery which she has used all these months under their direction ;

she went into school, September 6, 1880, and taught for a little over a week, seeming better and more like herself than usual; her judgment good and she appeared interested, but suddenly when all looked hopeful she received a letter sympathizing with her, and wishing she need not teach for a month or two longer, etc.; she left school immediately, and thought what she had already taught had injured her circulation and made her worse; about this time she took a dislike to a lady boarding in the family and wished to have her sent away, etc.; October 9, her appetite seemed to fail somewhat, and on taking an electric bath was sick at her stomach and threw off the contents, and complained of feeling sticky, her hands, etc.; the following day she seemed very quiet, remained at home (complained of great thirst and drank a considerable water) until about three P. M. she took a ride in street car and enjoyed it; in the night she came down, this seemed to be the first decided demonstration of mania, and took a bottle of hypophosphites of lime and soda (she had been taking for a strengthening tonic) up into her room and hid it away; Sunday she appeared sane enough, but early Monday morning she rushed off without her breakfast taking the aforesaid tonic and some hop tea to a chemist to have them examined as she felt sure they had been poisoned; she went to consult a lawyer and wrote hundreds of pages as to her symptoms, etc., took electric treatments from the afore-mentioned electricians, and spent the night with a friend who I am quite sure saw no signs of derangement; spent Tuesday in a similar manner consulting her medical adviser and her lawyer, and writing on the same topic; returned home Tuesday evening by their advice and then for the first time told us what she had done, and that she suspected the lady boarder as having poisoned her, giving her reasons therefor; Wednesday the same, only she took to washing her hair and head in strong ammonia, and rubbing herself with soda and soap as disinfectants, taking off her underclothing frequently and changing because they were saturated with poison; Friday morning after a wakeful night she decided that lock and key could not keep the evil influence out, and left again to go to the electrician's office where they gave her another bath which affected her stomach as before; she wrote nearly all day and toward evening she went to the house of a distinguished judge where she has since remained; she feels safe there, but is constantly working to disinfect herself; we had a regular physician see her on Tuesday and to-day, Sunday, October 17, but the medicines seemed to become infected in a short time; on every other topic she is perfectly sane and her memory of past events good; know of no immediate exciting cause of this sudden attack unless, as we think now, she had an overdose of electricity, more than she could sustain; we have tried to influence her medical advisers, but they constantly assured us that no harm could result, and that it was helping her; we could not influence her to keep away from them or omit her daily treatment; while her appetite held good it did not seem to injure her so much, but she scarcely ate any thing from middle of week before last (that is from October 7), the latter part

of the time while at home became fearful of poison; her appetite has been good and she has eaten freely, and slept some since she has been away from home; she has naturally a very lively, excitable imagination which we have always endeavored to keep in check; she is a member of the Protestant Episcopal church, and a regular attendant until last February when she ceased teaching, and since she has often attended a portion of the service, attending communion service as late as October 3; if there are any other points I will add them later.

Her sister, Nellie C. Lathrop.

One thing more, however, I will mention. She has had a book of anatomy and a pamphlet describing all manner of diseases and their symptoms, and comparing her sensations and taking on her own responsibility homœopathic remedies recommended so that her mind has for a long time been dwelling on herself almost exclusively connected with various diseases. Also she read a book this summer wherein a woman entering a family disguised as a servant, administered the poison, digitalis, to a number of the family. This she, it proves, has been taking for palpitation of the heart. This has occupied her mind nearly all summer, although at the same time she has called on friends and enjoyed visiting them, etc., but has inclined to talk to them a great deal about her feelings, etc. N. C. L.

After the patient had given her account of her own case and symptoms to Dr. Gray, he requested her to write them out, which she did, October 25, 1880. They are as follows:

"Symptoms of first attacks I have had at intervals during the past eight months, relieved instantly by vapor baths; stupor (perfectly conscious all the time); mottled complexion; fixed expression of eyes; set teeth; weakness and trembling of limbs; no appetite; extra nervousness; increased action of saliva; great activity of kidneys; looseness of bowels; some pain at base of brain; extreme sensitiveness of auditory nerve so that I have been unable to hear music during the greater part of time, although very fond of it; weak and uncertain utterance; indisposition to exertion; feeling of suffocation and desire for air; chilliness; falling sensation to left side; coldness of extremities; cold sweat; impossibility to read or write; these effects I believe due to slow poison; have no knowledge of the symptoms of poison; only know that digitalis, when used as slow poison, acts directly upon the brain and nervous system; was perfectly able to attend to my daily avocation until this person entered our house the Thursday previous to my leaving school; never had any thing similar in my life or required medical attendance until the ten days previous to my coming to this institution; while away from home at different times, recovered completely; one week after my return, these symptoms reappeared."

Will you be so kind as to compare these symptoms critically with those of slow poison?

"Symptoms of two violent attacks during the ten days previous to my coming here, which I believe due to active poison; clinching sensation at base of brain and root of nose; pain between shoulders and across end of spine; livid complexion and fixed expression; increased action of saliva; pain in hip bones running down the limbs; paralytic pain in joints with numbness of extremities, etc.; nausea; stickiness of body; weak, trembling limbs; great thirst."

Effect of the vapor bath — first attack produced running at the nose and vomiting in eight minutes, followed by great weakness and prostration. Effect of vapor bath, second attack, produced increased stickiness, running at eyes and nose, faintness, nausea, desire but impossibility to vomit; desire, but impossibility to urinate; intense thirst, constantly begging for water. My friends, the electricians, worked over me about one-half hour this first attack. The second time at least three-quarters of an hour, and I think longer. This they will testify, I am sure, before any tribunal in the land. They acknowledged to me since that they had saved my life.

Compared and correct.

T. E. McGARR.

History in the Asylum.

Sent to No. 2, October 20, 1880. Says the medicine (chloral) given at bedtime produced the same train of toxic symptoms; does not willingly comply with the rules of the house; speaks of her superior refinement and culture, and of the society to which she has been used, and expatiates on her many symptoms. 21. Communicative as before; not depressed; asks to be allowed to adopt her "neutralizing" treatment by means of ammonia. 22. Writes an exhaustive letter to one Mrs. Greenleaf, using a very stilted style of composition; compares herself to a tree stripped of its leafy mantle, and exposed to the rude and chilling blasts; "the special treatment," she writes, "seems to be a direct opposition to one's simplest desires; this, to one who has been accustomed to influencing or controlling others, is far from agreeable; * * * to be told that you are insane when realizing yourself in the full possession of all your faculties; what is the result? I go through the same processes that I have been subjected to for the past year and a half, in all its miserable details, only with additional pain; I recall, analyze, review; I question my own identity; is the sun that I see shining before me; do I hear? am I in full possession of all my senses? I sit down to the table with what, from their appearance, might be an army of servant girls; * * * all this, to a person of my fastidious tastes, is not enjoyable; immediately on my arrival I suffered from the same kind of an attack I was afflicted with at different times during the past eight months — stupor, chilliness, constant urination, etc.; at first, as usual, I did not realize my condition, but afterward I decided that either Dr. Neefus had given it to me to produce that condition in me, or the doctors here had given me digitalis or medicine as a test; * * * how I long for my battery to-day, for I well know

from past experience that in fifteen minutes I could relieve this burning in my head instantly; if I could only have it here, and relieve not only myself, but some of the poor unfortunates I see suffering around me, I would bless the day I entered these walls; I believe the day will yet come when electricity will be used as a curative agent in all brain and nervous affections; * * * if my departure was the signal for the explosion of the train that I have laid I am thankful; let justice do its perfect work; do, my dear friend, inform me if the test has been proved, as I have every reason to believe it has; I hope I may have an opportunity to inform the doctors of all the circumstances, then there may seem method in my madness; * * * write to E. S. Putnam, 326 Broadway, care Tifft, Griswold & Co.; tell him all the circumstances — that I am here suffering in his behalf; * * * I remember Dr. Russell's words, that I should remain here until cured (meaning until I give up the idea of poisoning); what is the inference; that these walls may be a living tomb to inclose the free and reasoning spirit; I am thankful to escape from all thought of this matter, but to have one's will and movements fettered, above all, one's reason questioned, this is unendurable." November 1, 1880. Patient exercises great self-control, and is gradually adapting herself to her surroundings; does not speak of delusions. December 1. Has improved in general health, and is somewhat more comfortable mentally; moved to 1. January 6, 1881. Importunes medical officers to obtain her release from confinement, alleging that she is wrongfully held; considers herself ill-used in many ways, and regards herself far superior, socially and otherwise, to her present surroundings; affects a stilted style in her letters, discussing somewhat abstruse themes in a would-be learned and philosophical manner. January 13. To-day, informed Dr. Blumer that a few weeks before admission her feet stuck to her shoes, and that the latter became of a brown color in consequence; that there was an oblong stain on her pillow cases; that granules fell from her hair into the wash-basin. February 13. Writes letters to her family full of reproach, and that notwithstanding theirs to her are couched in terms of affection; writes long letters to Dr. Gray, in which she clamors for freedom; when told that she is insane, and her suspicions of poisoning, etc., are pointed out to her as proof of her insanity, she is willing to give them up, albeit she not infrequently speaks of her "symptoms" and the persecutions of the lady above referred to. February 6, 1881. Emphatically declared that she would not remain another day, and that she would make preparations for leaving immediately after dinner. 7. Remains in "deference to Dr. Gray," who is absent. 10. Says she never believed that her clothes were poisoned; only thought that the lady tried to make her feel uncomfortable. 15. Handed letter to Mr. Corning, sergeant-at-arms of Senate committee. 18. Slipped a letter into the pocket of a visitor passing through ward, and, when detected by usher, snatched it out of visitor's hand and tore it up; has attempted to send out letters by patients; sent to 2 as a matter of expediency; to sleep in dormitory. Feb-

ruary 27. Now has a single room. March 9, 1881. Writes to brother: "A letter was forwarded to me from home, purporting to be from you, which had been returned from dead-letter office in consequence of not having stamp. This letter seemed unaccountable to me at the time, and from experience since being here am more fully persuaded that you *never wrote this letter*. It acknowledges the receipt of my three letters, but disclaims all knowledge of Mr. Putnam. It is written on ordinary letter paper, and I know you always use business paper with name of firm at top of sheet, and is without date of any kind The writing resembles Miss Hamlin's more than yours, and is written irregularly. You understand the correct use of the King's English; this is unlike you both in spirit and expression; viz., 'seek rest and consolation in religion, and learn to love your enemies and pray for them, though I know it is hard to do.' * * * * I feel that I need scarcely ask you if you wrote that nonsense." March 24, 1881. Frequently demands to be sent home, and apparently thinks there is no reason to prevent her going at any time she chooses to make the demand; considers herself justified in her attempts to get out letters clandestinely by the alleged fact of her being here by the machinations of supposed enemies. April 16, 1881. Is still influenced by the delusions enumerated above, and believes that had she not been removed from home the analysis which she thinks she has instituted would have proved attempts to poison her. May 21, 1881. Talks less freely of her delusions, but still asserts her belief in them when questioned; removed to No. 1. June 30, 1881. Still speaks much of her fancied superiority over other patients, and in this way makes herself annoying to some of them; is easily drawn into conversation upon her so-called "symptoms" before coming to the Asylum, and details them quite fully; refers to a peculiar color imparted to the water on one occasion when she was washing her hair, and declares that her braid was sticky and unfit to wear, the result, she believes, of some application made by Miss Hamlin. July 20, 1881. Is quiet, orderly, lady-like; occupies herself in painting, under the guidance of Mrs. N. H. Cooke, a fellow-patient. August 20, 1881. Has improved in flesh, and is in excellent health, "never having an ache or a pain;" apparently contented. October 6, 1881. Will not drink tea or coffee unless she sees it poured out; says it is drugged. October 31, 1881. Occupies herself quite industriously in painting, and has made considerable progress in the art. December 18, 1881. Reads regularly to other patients, and has thus been engaged for some time; does not ask to go home or refer to her mental condition; busily occupied in preparing Christmas cards of her own painting, to send to her friends. February 5, 1882. Continues to paint, and evinces a lively interest in the pictures which she has been permitted to see in the stores and art galleries of the city. April 15, 1882. Is averse to talking about her delusions; in her letters to her family is inclined to attribute her detention in the Asylum to a desire to gratify their sinister purposes, and makes fre-

quent use of harsh expressions. June 12, 1882. Is still suspicious, and will not drink the first cup of tea or coffee which the attendant pours out; declines to give any reason for this. August 31, 1882 Said to Dr. Spencer, and has also said the same to Dr. Blumer, that the more she thinks of her condition previously to coming here the more convinced is she that attempts were made to poison her. September 5, 1882. Was visited to-day and yesterday by her sister, Miss Nellie Lathrop, to whom she had intimated that unless she came to take her home she did not care to see her; received Miss Nellie quite coolly, and rehearsed her delusions of suspicion; Miss N. informed Dr. Blumer that when she last visited her sister, she (the patient) was unwilling to kiss her, and was quite irresponsive; has to-day, however, received her better than yesterday. November 7, 1882. Has recently got out a letter clandestinely, but will not say how. (See clipping from New York *Sun* in case of J. B. Silkman, case-book 58, p. 20, to whom letter was written.) To-day received a letter from Dr. Steven Smith, Commissioner in Lunacy. November 20, 1882. Declares that she did not say directly or indirectly that she was forced into companionship with the most repulsive and violent patients, as article in New York *Sun* states. November 27, 1882. Was visited to-day by Mr. James B. Silkman, who presented an order from Judge Barnard, granting him a private interview with Miss Lathrop as her attorney. Mr. Silkman said he could have obtained a writ of *habeas corpus* in the case of Miss Lathrop, but preferred to have an interview with her, to satisfy himself that it was proper to apply for one. He had an interview for nearly two hours but declined to state the conclusion to which he had arrived. Mr. Silkman, in talking with Dr. Brush, after the interview endeavored to gain some information upon the case. He asks if there had been any insinuations of indiscretion on the part of Miss Lathrop with any man, or if the charges against her in any way involved a compromise of character. Dr. Brush replied that he did not propose to talk with Mr. Silkman upon the case; that so far as he knew or had heard Miss Lathrop was as pure a woman as lived. Beyond this Dr. Brush declined to go. In the afternoon following this visit, Dr. Brush had a conversation with Miss Lathrop, most of it being in the presence of Miss McBride, in which she said she held the same ideas regarding attempts to poison her, etc., as when admitted to the Asylum, and that her friends had treated her shamefully in sending her away before a test could be made. November 30, 1882. A writ of *habeas corpus* was served on Dr. Gray, last night, by Mr. Silkman, returnable at Poughkeepsie before Judge Barnard, at 10:30, December 9, prox. Mr. Silkman to-day had an interview with Miss Lathrop, lasting from 11:30 A. M. to 4:30 P. M. On leaving, Mr. Silkman suggested a compromise, and wanted to know whether the case could not quietly be taken before Judge Barnard, and let him decide the case upon its merits, without calling witnesses, etc., to avoid publicity, newspaper notoriety, etc. December 1, 1882. Mr. Hoyt, a deputy of the superintendent of

the poor of Monroe county, and keeper of the alms-house, came to-day with a letter from Superintendent McConegal, requesting the transfer of Miss Lathrop, Mary R. Quinn and Margaret Connors to the Monroe County Asylum. Mr. Hoyt was told of the previous service of the writ, and Managers Mc Quade and Swan were called in to consult upon the matter. The latter said that the managers could not refuse to deliver the patient, but if removed the superintendent of the poor of Monroe county must take full responsibility in the matter, and answer the writ, and if left in the Asylum the county would be charged with the expense of answering the writ. Mr. Hoyt left Miss Lathrop and returned to Rochester for further deliberation. December 4, 1882. Writes to mother for clothing and money wherewith to make herself more presentable, and says: "If you have Charles Lathrop's and the Adams home address, I should like them, as I intend to visit them after I leave Poughkeepsie. It is very painful to me to be forced into such a public position, but as I am not and never have been insane, I am willing to submit to any thing that will free me from such an imputation." December 6, 1882. Said to Dr. Gray this morning, that she had not changed her mind or feelings in any respect since her admission, that she adhered to every thing she had heretofore said or written; that she had the same suspicions regarding attempts to poison her, which she had previously entertained and expressed; that her poor physical condition on admission was, as she then believed, due to the action of poisons. She showed some disinclination to talk and said: "I don't know that you have any right to ask me those questions and I shall be governed by the advice of my counsel." Dr. Gray replied: "I have not asked you about your counsel nor any questions about your condition which I have not a right to ask as having you under care." She said she had rich and influential friends who would look after her interests as she had always moved in the best society; she also said that the doctors had tried to defame her character; Dr. Gray replied: "I presume you refer to what appeared in the newspapers?" when Miss Lathrop answered: "No; I refer to my counsel." To which Dr. Gray said: "Dr. Brush gives a very different version of the conversation with Mr. Silkman; I don't think any physician has said a word against your character." Patient was shown letter from her brother, G. T. Lathrop, in which he acknowledges the authorship of the disputed letter to which reference has been made above. Said to Dr. Blumer: "It looks like his writing," but would not commit herself to a positive opinion upon the subject; she examined the letter very critically, noticing the printed names in the corner of the sheet as evidence of probable authenticity, but added: that those were not his l's and that she had so often been deceived in regard to letters, and that she could prove it; that it was no wonder she doubted now; when pressed for a definite opinion as to whether her brother actually wrote the questioned letter, her reply was: "Under some circumstances I believe it; under others I

might not believe it." Dec. 8. Leaves to-day for Poughkeepsie in charge of Dr. Brush and Mrs. Barker for hearing on writ of *habeas corpus* before Judge Barnard. For report of subsequent proceedings, etc., see newspaper clippings; was remanded to the Poughkeepsie asylum on the 9th till the 20th, and on that date discharged by him.

Discharged, December 8, 1882, unimproved.

Compared and correct.

T. E. McGARR.

EXHIBIT No. 30.

Case of Lucy M. Peck.

Lucy M. Peck, Kirkland, Oneida county, New York; admitted December 6, 1869; number for year five; indigent; woman; aged thirty; single; academic education; teacher; Congregationalist; good habits; native of New York; not hereditary. Patient was not strong until she arrived at the age of twelve; from that time until she was eighteen she enjoyed good health; at eighteen she had measles; was very sick, and has never been well since; in less than a year she had difficulty with her eyes, her mother says the doctors called it aneurosis; the disorder lasted two years; her eyes have never been as strong since; although she has been enabled to follow her profession; since the measles she has been very nervous and has never been strong. Four years ago she went down to Fortress Monroe to teach school; soon after going there she contracted intermittent fever, and returned home, where she was sick for some time; after recovering she went to Union Springs, Alabama, teaching, and again became sick and returned home much exhausted; since that time she has been almost constantly sick; has complained mostly of exhaustion; at times has been unable to complete her own toilet; after returning from Fortress Monroe she complained of pain in her right hip and groin; it has caused her to walk lame for some time; seems to have recovered from that now; for the past two years it has been noticed that when she appeared to gain strength she became depressed and after being a few days depressed she was more than usually lively; she had not been considered insane until within the past four months; although last winter she had a spell away from home which lasted a few days and the people with whom she was stopping called her insane; four months ago during her menstrual flow she went into the clothes-room and denuded herself; her mother discovered her and endeavored to have her come out of the room, but she would not, and it was necessary to bring her out by force; she was put on the bed, resisting constantly, but after being put on the bed she became quiet and continued in a sort of unconscious condition for twenty hours; she then sang three or four hours and began to abuse some relatives who

came in to see her; after a day or two she became apparently well and continued so until the next menstrual period, when she went through much the same scene, denuded herself; became somewhat noisy, and resisted having her clothes on; after a few days she became quiet again and apparently rational. About two months ago had a more excitable period, destroying her clothing, broke a looking glass, and some pains of glass, became very abusive of her friends and mother; was obscene but not profane. Last week she had another excitable period and for the first time gave evidence of delusion; said she was dead; had been dead since the death of her father; had been abused by her friends and family; had been starved, frozen and otherwise maltreated; became so violent that it was necessary to restrain her and she was tied into a chair; at times she has been put in a chair and held there to prevent her running away; has been bruised in this way; was confined in a room once; then she destroyed her bed-clothing, tore the slats off the window and broke some furniture, emptied a feather pillow out of the window; for the past few weeks she has been more willful and headstrong and more difficult to manage; mother says "that she could not control her without abusing her, and she determined to bring her here;" mother says that while she was south she contracted chronic diarrhœa, from which she has suffered; also that, while teaching in Alabama, she had insufficient food and a very poor quality; was compelled to board in the family of a negro and partook of the coarsest food; the menstrual flow is regular, and there is no menorrhagia; has had leucorrhœa, not lately; the last flow was preceded by a greenish fluid, very offensive; has usually slept well; appetite capricious, sometimes voracious; has never refused food longer than forty-eight hours; is subject to attacks of diarrhœa; comes willingly; is not violent, not suicidal or homicidal; is only obstinate when resisted in any whim; is emaciated; looks feeble; skin sallow; is anæmic; cause ill-health and deprivation; form, sub-acute mania; date of attack, 1869; duration, six months; first attack, first admitted; brought by her mother, Lucina A. Peck, and Curtis Miller, Jr., and E. C. Bartholomew, on order of County Judge Joel Millard; correspond with Mrs. Lucina A. Peck, Danesville, Oneida county; telegraph to Curtis Miller, Clinton, N. Y. December 7. Rested well last night; this morning was noisy and destructive; broke glass; took off shoes and stockings; sent to eighth hall. December 8. Talkative, incoherent; takes the restraint from violent patients; put in camisole. December 17. Is more quiet. December 29. Helps in hall a little and in dining-room. January 3. Says she owns the Asylum; says she will discharge the doctors; says she will be "head idiot" herself. January 4, 1870. Climbs up on top of wardrobe and hides herself; picks her clothing in pieces; noisy; sent to 9. January 9. Tore her bed in pieces; removed a lock from the bureau and tore up the carpet of her room. January 16. Mischievous, talkative, incoherent; deranges the rooms of other patients; ordered to wear a muff for a time; takes off the restraint from violent and dangerous patients. March 4.

(W. K.) Talkative, noisy; annoys other patients and tries to get them in trouble in order to see them "fight it out." March 18. Last night tried to break out glass; put in muff; noisy all night. April 14. No especial change; at times noisy. August 2. Excitable; tries to escape; ran from attendant; came to office; sat down in the lap of Dr. Andrews. September 5, 1870. Broke out window grating last night and eloped. September 7. Came back to Asylum with mother, who reports that she has behaved well at home and proposes to attempt her care there, to which the superintendent assented. Discharged improved.

Lucy N. Peck, Kirkland, Oneida county; readmitted September 27, 1871; number for year 449; pauper; woman; age 32; single; academic education; Congregationalist; good habits; native, New York; not hereditary.

For former admission see C. B. 28, page 10; was discharged September 7, 1870; improved; friends; mother says that patient was well from the time of discharge until a week or so ago; then she became sick, and in a few days was dangerously ill; the doctor who attended despaired of her life on Friday and Saturday last; on Monday or Tuesday showed the first indication of insanity; Tuesday night started from home, and walked fourteen miles; came here Wednesday morning demanding to see Dr. Andrews, to whom she said she was married; was tired and thin clad; sent to ward; is thin in flesh and anæmic; mother says is subject to attacks of diarrhœa, which are quite troublesome; sent to No. 3, and put on tonic; cause, ill-health; form, chronic mania; date 1869; duration two years; first attack; second admission; came alone; correspond with Mrs. Lucina Peck, Deansville; telegraph Curtis Miller, Clinton, N. Y.; order of Superintendent Owens received September 30, 1871. September 28. Says to Dr. Andrews that she is his wife and that the dress she has on, a calico one, is her wedding dress; that the shoes are not fit for wedding shoes; seized the doctor and was with some difficulty removed. 29. Suddenly dropped to the floor and kissed Dr. Andrews' foot; put on tonics October 1; removed to No. 6, October 15; is very erotic; seized the doctor's hand, raised her dress and tried to put it on her genitals; talks in a very lascivious manner. October 20. Decorates person; talks foolishly. 26. Visited by mother. 21. Sent to No. 9. November 12. Is very mischievous and troublesome, taking restraint from others; throwing things out of the windows. December 1. Is very lascivious in action; got into bed with another patient; imitated sexual intercourse; exposes person; feels the genitals of other patients; masturbates; in muff and anklets. January 10, 1872. Has gained in flesh and strength; more quiet; no restraint. February 15. Is talkative; lively; does not employ self. March 5. Still asserts she is Dr. Andrews' wife and addresses him as husband; tries to hold him and follow him from ward; in fair physical condition; still pale. January 12, 1873. No change since last note; she retains same delusion about Dr. Andrews and the missionaries; is in fair flesh and

strength; on 10th ward. May 12. No change; writes to her mother once in a while; has same delusions. August 16. No change; delusions fixed; in usual state of general health; on 10th ward. November 9. No mental change; on 10th ward. January 1, 1874. Retains all her delusions and is fully influenced by them; has no appreciation of her condition; only answers to the name of Mrs. Andrews. March 31, 1875. On 10 but has been on ward 8 a part of time since last note and also on 5 for a while; no mental or physical change; entirely governed by her delusions. April 30. No change whatever; retains delusions and is governed by them; hides from Dr. L., greets Dr. A. as her husband; no realization of her condition. May 25. Removed to-day by mother Discharged unimproved and went home with mother May 25, 1875.

Compared with records, and correct.

T. E. McGARR.

EXHIBIT No. 31.

Case of Mrs. Fulford.

Clarissa A. Fulford, first admission; admitted March 9, 1848; case of puerperal mania; described by husband as noisy, talkative, singing, "much opposed to her husband; says she is not his wife; that she has been poisoned by her nurse; rests quietly until about two o'clock, when she wakes and is noisy;" brought by her husband, Daniel Fulford; the records show that: "April 1. Is now on first hall; quiet and ladylike, but retains her delusions about her husband, and still says that she has been poisoned. May 1. Says less about her delusions, although she still retains them;" in June "her delusions about her husband, etc., seem to have left her." June 20. Discharged well; returned with her husband.

Clarissa A. Fulford, second admission; admitted February 12, 1873; brought by Geo. Robinson, superintendent of the poor of St. Lawrence county; case of chronic mania, two years' duration; was brought from the county house; she was placed there because people were afraid of her; she said she "carried pistols and had burned the bonds of her husband;" superintendent of the poor says that he knows nothing about the case, except that "her husband says that she is a chronic lunatic;" sent to No. 9; she was noisy, talkative, up and down, out of bed at night, scolding, fault-finding; claimed that she was a visitor and not a patient; rambling and incoherent in speech; exalted in manner. 16. Quiet and ladylike; went to chapel; sent to third hall. 23. Mischievous; scolds attendants and abuses them; tells patients that this is a bad place, and that patients are often killed here. March 4. Was transferred to ward twelve on account of her troublesome condition. April 4. Assists in dining-room work; improved in flesh; still abusive of husband; says that he is living with other women, and that is the reason why she is kept here. 21. Visited by husband and a number of Methodist clergy-

men who recognize her insane condition." On the 10th of May was more quiet; transferred to the third ward. 28. Again became disturbed as before, and was transferred to the twelfth ward. In June more quiet. July 2. Became very much excited again while talking with Dr. Gray; denied that she had ever been insane, and was illegally put in the Asylum under Dr. Brigham; her brother visited her frequently. August 1. Visited by brother and sister, who told Dr. Gray that Mrs. Fulford was very insane; he spent an hour in conversation with Dr. Gray before visiting his sister. August 22. Brother visited her an hour and a half, and told Dr. Kitchen that her husband was able to pay her bills, and ought to make her a private patient; her husband came same day but declined to see her; continues to speak of her husband as before. September 1. Feelings toward her husband continue; says she will make it hot for her husband; she will have him expelled from conference. September 29. Husband visited wife in company with Mr. Davis of Utica; after the visit said he was unwilling to assume the care of his wife because of her insane state and feelings toward him, but that he had no objections to her friends taking her, and telegraphed for her sister to come. She was discharged unimproved, September 30, to the care of her sister.

Compared with records and correct.

T. E. McGARR.

Clara H. Fulford, Florence, Oneida county, New York, readmitted June 16, 1882; order, pauper; sex, woman; age 55; civil condition, married; number of children, three; occupation, clergyman's wife; education, academic; religion, Methodist; habits good; nativity, New York; insane relations, maternal cousin; cause, ill-health following fever; form, chronic mania; date of attack, 1873; duration, chronic; number of attack, two; number of admission, three; age at first attack, twenty-one; suicidal, meditated; correspond with Dr. George H. Fulford, son, New Haven, Oswego county; telegraph to same, forward three-fourths of a mile; brought by son, the correspondent; medical certificates of Drs. Johnson and Heaton; papers, temporary bond of Dr. George H. Fulford; order Superintendent Comstock.

Patient was first admitted March 9, 1848, at the age of twenty-one; June 20, 1848, was discharged recovered. At the time she was admitted she was suffering from puerperal mania. She was readmitted February 12, 1873, suffering from chronic mania; she was discharged September 30, 1873, unimproved. See C. B. 33, page 88. Her son, Dr. Fulford, says that he has never considered his mother in her right mind since she left the Asylum the last time, but that she maintained very good self-control until about a year and a half ago, when she became gloomy and depressed, avoided society and manifested very little interest in any thing outside of herself. About six weeks ago she became talkative and incoherent, ran about the neighborhood attending the meetings of various societies. She took a great

dislike to her husband, and accused him of maltreating and abusing her, and in conspiring in various ways against her. She told the neighbors that her life was miserable, that she had been tempted to drown herself, and she now says that she would rather take her own life than come to the Asylum. In the office she is very excited and runs from one subject to another with surprising rapidity, and is too incoherent to give any definite information about herself. She says she was brought here by deception, and had no idea she was to remain. Sent to two and ordered chloral nocte.

June 18. Talkative, incoherent, wandering, accuses other patients of interfering with her affairs; complains of attendants and matron that they neglect her; patients on the ward say that she is very troublesome, and they have seen no grounds for her complaints. June 19. Is inclined to scold a great deal; says her husband and son lied to her; that she simply came here to be examined; is told plainly that her son brought the necessary and proper papers to commit her to the Asylum. June 20. Too excited and disturbed for No. 2. Interferes with treatment of other patients; asserted last night that she was helpless; had to be carried from one dormitory to another; was seen by Dr. Brush; was then in an hysterical state, refusing to speak; opening of eyelids by physician showed pupils equally dilated, responsive to light; no muscular paralysis. 22. Communion being administered to-day to Miss Roscoe; Mrs. F. told patients that she and they were going, although not an Episcopalian; her talk so excited Miss A. Spencer that she made a violent attack on Miss Sterling; Mrs. F. sent to 12. June 26. Employs some of her time on the ward, sewing, etc.; goes to ironing-room; assists in the dining-room. 28. Hysterical; put on elixir of valerianate of ammonia, ℥ i t. d. 30. All medicine discontinued. July 15. Is still on 12. Irritable and fault-finding; accuses her husband of cruel and unkind treatment; says he struck her. August 16. No material change; sent to No. 10 for new associations and surroundings. December 17. Visited by husband and brother, Wm. Hamilton; brother desired to investigate certain complaints made by Mrs. F., such as removing her from her room, cleaning it out, and a charge that Miss Burns had taken $1 belonging to her; Miss Burns came to the parlor and explained the matter (the money had been given to Mrs. Barker, the matron, as soon as found by Miss Burns in Mrs. F.'s possession); Mr. Fulford admitted that he did strike his wife in a moment of excitement with a stick across the thighs; demanded of him to be released, and threatened legal proceedings if left. 28. To-day is more disturbed in consequence of the visits of yesterday; harangues physicians and attendants; is excitable and noisy; removed to No. 7 for the day; has been on the sixth ward (since August 29). 29. Writes to Dr. Gray: "Mr. Fulford may tell all his grievances without interruption on my part and then will state mine; I do not consider him a subject for a lunatic asylum, but if either were so considered it would be my husband; for 38 years I have faithfully performed

the duties of wife, mother, Christian; I have his own testimony in two letters that I have received from him since I have been here this time; I have overlooked his many acts of violence on my person; ever kept it from his children and the world because I was confident he was under the influence of insanity caused by the circumstances of cruel and unnecessary removals and a severe rupture which came very near causing his death, but for which he got help from a physician at Syracuse who makes that disease a specialty. I had expected, when Mr. Fulford came, to be released; but if what Dr. Blumer told me yesterday is true — if Mr. Fulford told him what he said he did, I say it is a base libel on my character. He must not, after consigning me to the worst possible fate for three and a half months, array my brother and these physicians against me with base falsehoods, for that is a deliberate act. I can overlook much that is done under the impulse of excitement, but he has had time for reflection, therefore is inexcusable. * * * If my husband thinks my services are useless to him, and he can be happier without me, let him have the honor to say so and give me an opportunity to take care of myself. I taught my first school when a little over twelve years of age; I taught with him until a short time before I became a mother. I can support myself at teaching, at the needle, at housework, or, if you please, by the pen. I do not intend to eat the bread of dependence (sic)." The above is given as a sample of Mrs. F.'s lucubrations, written on scraps of papers, generally dirty, in lead pencil, October 8. Is in the same complaining state; general health better than during last month; in better flesh. 23. Is quieter; inclined to sit much in her room; gaining in flesh. Nov. 1. Sent to No. 4 on account of improvement; sews and does light work. 18. Still complains about her husband; has days in which she is more talkative than at others. 28. Tells an incoherent and rambling story about a presiding elder who had her husband removed or transferred from his charge and who at one time charged her with insanity; says that when her son was in Boston, his (the elder's) son followed him; "dogged his footsteps" and threatened to kill him; is emotional; cries easily; if a large share of attention is not given her, charges the doctor with neglect; threatens a suit for detention in the Asylum; on Sunday the 26th went to church in the city as she has done before. December 5. Remains on 4; sews some; seems of the opinion that her position as a clergyman's wife entitles her to peculiar and special consideration; is fault-finding; scolds incoherently; wants the doctors to stop and listen to her story and then goes over the entire history of her life if permitted. 13. Scolds less; manifests greater self-control; denies her insanity and threatens trouble when released. December 20. Went home to-day with husband in accordance with previous arrangements made with him.

Discharged improved.

Compared with records and correct.

T. E. McGARR.

EXHIBIT No. 32.

Case of Mary A. Pelton.

Mary Ann Pelton, West Winfield, Herkimer county, N. Y.; admitted December 16, 1878; number for year 21; order, indigent; sex, female; age, 25; civil condition, single; occupation, domestic; education, common; religion, attendant only; habits, good; nativity, South Carolina; insane relatives, paternal cousin insane, killed herself; date of attack, September 15, 1878; duration, three months; number of attack, 1; number of admission, 1; age at first attack, 25; suicidal threats; physical condition, fair; cause, ill health from anxiety; form, melancholia; correspondent, Mrs. Mary Pelton, West Winfield, Herkimer county, N. Y.; (mother) papers, order of Hon. Amos H. Prescott, county judge, Herkimer county; patient brought by mother and John M. Thomas, a brother-in-law of patient's mother and brother to patient, now here, but no blood relation to patient; patient has been healthy and strong; worked as domestic in North Hartford; had a bad feeling in her head in June, from exposure to the sun and hanging out clothes, but was not confined to bed at all or prostrated but in a very slight degree.

In August she visited this institution with her sister and remarked that she might become an inmate; had a bad feeling in her head since June; in September she went home, expecting to learn dressmaking, but two weeks after it appeared she was unable to do this; her friends noticed that she appeared strangely; talked considerably; shook her head about; within the last two weeks she has gone visiting daily and been mischievous and troublesome at neighbors; been willful in her actions, had to be brought home forcibly; when she came home in September she felt as if she would like to take her life by taking laudanum, but at present she diselaims any suicidal desire; her mother states that soon after she came home patient has "an excessive discharge from her vagina, at first like matter, later like white of an egg and then ceased;" patient's menses being delayed two weeks after time and fearing pregnancy she visited Dr. Seymour of Utica, somewhere about six weeks ago; her mother states that Dr. Seymour put an instrument of rubber not so large as one's finger up into her parts; told her she had two tumors; that he would like her to return to Utica and he would put her in a hospital in his care and would cure her in two weeks; patient confessed that she had been exposed to "bad disease," feared she had got it, feared she was pregnant and went to Dr. Seymour to be relieved of her difficulty; patient's mother says her daughter has been a chaste and faithful worker; that the idea she had a "bad disease" worried her considerably; sent to twelve.

December 18, teases her associates by her continually seeking attention and conversation; is restrained a portion of the day, because of her running here and there and bothering every one; is taking

chloral at night and tr. hyos, t. i. d.; has to be fed by attendant; December 23, chloral stopped; December 26, takes her food voluntarily; is in a distracted condition of mind; December 29, was disturbed for some days; restless moving to and fro, complaining of headache; crying; says she will never get well; denies that any thing is the matter with her mind; says that she ought never to have come here; hair disheveled; wrings her hands, moans and groans, and is frenzied; picks person and clothes; is taking hyoscyamus, tr. t. d.; January 10, is not sleeping well though improving in health and less disturbed; given chloral again; January 12, put on c. l. oil emulsion, t. i. d.; hyos. discontinued; still somewhat disturbed, restless and uneasy but not so gloomy; January 17, removed to two; January 23, has gained rapidly, works upon ward, and today removed to No. 4; February 1, complains of severe pain in her head; put on pil. ergotin, t. d.; claims that she will never get away from here but that her friends have committed her here for good; February 5, eats and sleeps well; has no "hope" about herself; talks in the same depressing strain; says at same time she is not so bad as she was; February 11, is improving in flesh and in health but still asserts that she will never get out of here; this one idea seems to have a firm hold of her mind; February 28, ergotin pill discontinued, as pain is no longer complained of; March 20, visited by mother who has promised to take her home; is now quite depressed, untidy, reckless in conduct, negligent, irritable; threatened to set self on fire; a few days ago she attempted suicide by drowning in the bath tub; April 5, again attempted to destroy herself by choking with her hands and also by hanging her head off the bed; April 6, sent to fifth ward; April 17, has been quiet and well-behaved on five and is to-day sent to No. 2; April 30, emulsion discontinued; May 10, is complaining, fault-finding, restless, uneasy; talks only of going home; says her mother has promised it and will take her home, even on bond; this makes her willful, impertinent; still asserts that she ought never to have been brought here; that her friends were trying to put her out of the way and arranged this matter to accomplish this; May 15, visited by mother who was anxious to remove her, but was refused except on bond; May 19, for want of appetite is given glycerine tonic; May 28, is frequently filthy and is sent to number five; for leucorrhea is using tepid water injections; May 29, goes into the rooms of other patients and exposes her person; talks obscenely; June 8, annoys and vexes other patients by pinching them; pulling their hair, etc.; throws herself on the beds and interferes with the attendants when at work; sent to number seven; June 19, visited by Dr. Rose; July 12, masturbates before the patients and attendants and exposes her person; wristlets put on for a short time; in taking pod. pil. for constipation; on the fifteenth, visited by cousin; July 29, tonic and other medicines discontinued; muff ordered to-night to prevent masturbation; August 5, throws bedding, clothing, etc., out of the window at night, strikes other patients; sent to number seven; August 12, sent to twelve for convenience; August 25,

has destroyed five chromos which hung on the wall by picking and tearing them; sent to eight; August 31, is obstinate and opposed to care; is filthy, is masturbating as heretofore, and restraint (camisole) is ordered day and night; is given chloral for sleeplessness and is taking iron and gentian through the mouth to improve her general condition; September 5, defecates in her clothing, urinates on the floor and dances in the water, masturbates shamelessly; asserts that she is going to act so bad that she will have to be sent home; September 13, is more controlled and restraint is removed; iron and gentian discontinued; October 1, put on glycerine tonic; is pale and thin; October 10, no longer filthy; is quiet and doing better; sent to ten; October 22, improving slowly and sent to six; a few days ago was pushed over in the yard by another patient and sprained her shoulder; October 28, all medicine discontinued; November 30, is improving in mental and physical condition; to-day attended chapel; December 12, sent to number three because of improvement; December 17, sent to number two; assists about work of ward; is neat and quiet; January 31, 1880, this month has done nothing to employ herself but read a little and takes care of her room; March 9, begins to employ herself more; is improving daily in mental strength and is in good flesh and color; sent to number four, taking no medicine; March 18, 1880, discharged recovered, and went home with her mother.

Compared with records and correct

T. E. McGARR.

EXHIBIT No. 33.

Case of Henry Hindman.

Henry Hindman, Albany, Albany county. Admitted January 19, 1881; order, pauper; sex, man; age, 28; civil condition, single; occupation, laborer; education, common; religion, Episcopal; habits, liquor and tobacco; nativity, New York; insane relations, none; cause, intemperance; form, acute mania; date of attack, January, 1881; duration, two weeks; number of admission, 1; suicidal, no; homicidal, no; bodily condition, conjunctivitis; tongue, clean; pulse, 84; eyes, blue; heart, normal; lungs, normal; came in camisole, handcuffs; correspond with Rebecca Hindman, sister, 215 North Pearl street; telegraph to same at high school during school hours; brought by Dr. Stonehouse and C. H. Winnie; medical certificates of Drs. A. Van Derveer and John B. Stonehouse; papers, order Superintendent Rafferty.

Dr. S. states that he has been subject to periodic sprees, lasting about a week, for several years; these occur two or three times a year; after he has been drinking for a few days he has hallucina-

tions of sight and hearing. Twelve days ago he began to drink whisky and has drank very hard; he soon began to refuse food and has taken but little nourishment; has been wakeful and sleepless at night. Last Saturday night got out of his room by escaping from the window; he was undressed and wandered about the roof of the piazza in the snow; he had the delusion that he was controlled by his guardian angel who commanded him to do this; he has attempted to take out his eyes under the influence of the same delusion; he was admitted to the Albany City Hospital the next day; he was suffering from conjunctivitis, following the self-inflicted injury; while there he has had hallucinations of sight and hearing; has imagined that he has seen and talked with an angel, and has been more or less controlled by what the angel is supposed to have said; sent to No. 4; hot beef essence; hot water to eyes. 20. Resists and opposes care; would not have any thing done for his eyes; he was restrained by camisole in which he slept in a crib-bed to prevent injury to his eyes; under the influence of the delusion that his guardian angel does not wish him to eat refuses food and is fed by tube. 22. Says the angel will allow him to eat and he takes food voluntarily. Jan. 31. Since last note has gradually become quiet and well-behaved; is coherent in speech and seldom speaks of his "guardian angel;" is eating and sleeping well; has a fair appreciation of his condition. Feb. 10. Sent to eight for benefit of change; no longer speaks of his "guardian angel," and seems free from delusions, but is still sleeping in camisole to prevent self injury to eyes. 12th. Sent to seven because of improvement; eats and sleeps well. 14th. Is free from delusions; to sleep in open bed and without restraint; assists about ward work; is neat, quiet and orderly. 20th. Sent to five because of continued improvement. March 15. Sent to No. 2 and put on oat-meal for breakfast. 31st. Sent to No. 1; works on lawn with Mr. Mahar; fast becotming established in mental and physical health; takes food freely and sleeps well. April 18, 1881. Discharged recovered and went home with Mr. O'Callaghan.

Compared with records; correct.

E. N. BRUSH.

EXHIBIT No. 34.

COPY OF INFORMATION FURNISHED TO THE STATE BOARD OF CHARITIES FOR THE YEAR ENDING SEPTEMBER 30, 1880.

Officers of the Institution.

	Compensation.
President of the board of managers, Hon. Samuel Campbell	None.
Secretary, Theodore Pomeroy	None.
Treasurer, Thomas W. Seward	$1,500 00
Superintendent, Dr. Jno. P. Gray	4,000 00

Date of appointment, July, 1854.

Buildings.

Cost of	$637,065 58
Capacity	600

Real Estate.

Number of acres of land	200	
Value	$24,878 84	
Value of buildings	637,065 58	
		$661,944 42

Personal Property.

Furniture	$62,000 00	
Farm stock and implements	7,000 00	
Farm produce (over expenditures)	7,651 73	
General supplies (on hand)	3,000 00	
Miscellaneous articles	800 00	
		80,451 73
Total valuation		$742,396 15

RECEIPTS AND EXPENDITURES FOR THE YEAR ENDING SEPTEMBER 30, 1880.

Cash on hand	$4,960 18

Received from State.

For salaries of officers	$14,934 40	
From unexpended appropriation	45,634 14	
Total from the State		$60,568 54

Received from other Sources.

From counties, towns and cities	$119, 643 69	
From individuals for support of inmates	50, 884 11	
From all other sources	5, 827 11	
Total		176, 354 91
Total receipts		$236, 923 45

Ordinary Expenditures.

For salaries of officers	$14, 934 40
For wages and labor	45, 263 09
For provisions and supplies	56, 385 98
For clothing	7, 076 65
For fuel and lights	9, 656 11
For medicines and medical supplies	5, 828 82
For furniture, beds and bedding	8, 021 72
For ordinary repairs	15, 768 84
For all other ordinary expenses	22, 536 60
Total	$185, 472 21
For extraordinary repairs	27, 891 71
Total expenditures	$213, 363 92
Average number of patients	$610\frac{6}{11}$
Average weekly cost of support	$4 00

Assets.

Balance in cash	$28, 519 71
Due from counties, towns and cities	24, 255 81
Due from individuals	1, 478 93
Total assets	$54, 254 45

Movement of the Population.

	Men.	Women.	Total.
Number at the commencement of the year,	318	302	620
Received from September 30, 1879, to September 30, 1880	247	221	468
Whole number treated	565	523	1, 088
Daily average under treatment			$610\frac{6}{11}$

	Men.	Women.	Total.
Discharged recovered	74	81	155
Discharged improved	40	26	66
Discharged unimproved	117	80	197
Discharged not insane	13	1	14
Died	27	15	42
Whole number discharged	271	203	474
Remaining September 30, 1880	294	320	614

Remarks.

Superintendent	$4,000 00
First assistant physician	2,000 00
Second assistant physician	1,600 00
Third assistant physician	1,400 00
Fourth assistant physician	1,300 00
Steward	1,400 00
Matron	500 00
Special pathologist	1,300 00
Treasurer	1,500 00
Total	$15,000 00

EXHIBIT No. 36.

The following paper is the case of the patient Heath, alleged to have been killed in the Asylum, and referred to in the testimony of the following witnesses, viz.: Barisdale, Halpin, Buckley, Dr. Ford, Dr. Brush, Dr. Gray.

Miles W. Heath, Vestal, Broome county, admitted September 3, 1873; order, private; sex, male; age, 34; civil condition, single; occupation, farmer; education, reads and writes; religion, no; habits, temperate; nativity, Pennsylvania; insane relations, none; consumption on mother's side; number of attack? number of admission, 1; suicidal, no; homicidal threats; eyes, grey brown; pupils, normal; tongue, slight coat; pulse, 72 and feeble (came in irons which were removed with difficulty); lungs? accompanying bodily disorders, probably has epilepsy; physical condition, good; has lost some flesh during the last three months; cause, injury to head; form, chronic mania; correspondent, Amos Heath, Vestal Centre; Tel. Union; order, Temp.; bond of brother, Amos Heath; permanent, Amos Heath and Charles Nichols, Vestal Centre; brought

by brother, Amos Heath. Patient when about six years of age fell and injured his head ; an abscess formed on the top of his head and ever since this time he has been "singular," rather simple and awkward in his ways ; at the age of fifteen he left home for a couple of days ; father missed him and sent off his brother to hunt for him, but while they were off he returned ; he says he went off to avoid a cousin of his who troubled him by laughing at him ; he thought that he was not well and "foolishly" left home ; his cousin told him that if she had been his mother she would never have borne him ; when eighteen years of age some of his fellows about the neighborhood knocked him down with stones and left him senseless ; he says that he picked himself up in about three minutes leaving them there for he had enough of it ; brother says that after this he was worse ; was more peculiar and excitable ; while young says that he got angry very easily, and when he did he would "cry until he choked ;" in the fall of '69 he left home again and stayed some five weeks ; during this time "I was real wild and noisy and told the people I was mad ; I told them that I was hungry as a bear, mad as Bedlam, that when I was three days old I cried to go to the table ;" his brothers took him home, he having written that he wished to come home ; he was found sick and run down in general health ; injuries on his body ; for past six or seven years he has been in a comfortable condition, although subject to his "mad spells ;" this spring he has been worse than before ; he has had six "raving spells" since April ; these he says come on him like a flash and he will "rave and tear ;" he does not become unconscious and can relate every incident and tell his sensations ; during these he has smashed in his house and once the house of his neighbor ; brother says that he masturbates and that lately he has been more fierce after the women ; he thinks he is married to all of them ; "I am married to all eternity ;" manacles which he had on one hand were removed by three attendants, as he refused to allow their removal ; after they were off he said that it was right that they were removed ; he thought that his brother had no right to put them on, and he being a free man, determined that they should remain on ; remained quiet, giving no trouble and eating and sleeping well. 16. To-day went about the ward proclaiming that he was God ; in the garden ran away and threatened to stone anyone who should come near him ; threatened to kill them. 17. Says that he has been kicked and beaten on ward by attendant ; says there are no bruises, however ; says that he was knocked down and kicked when he was caught. October 3. Is noisy, profane and abusive ; boisterous on ward and in yard ; says policemen are here ; very incoherent in speech and maniacal. October 6. Noisy at night ; willful, boisterous, complaining of being abused, knocked and kicked. October 27. Very maniacal at supper table ; suddenly jumped under the table saying the world was coming to an end and tried to upset the table ; was removed with difficulty. 28. Is more disturbed ; put in chair strap to prevent injuring patients ; says he must fight to keep

away the devils, striking with his fists at imaginary objects; says the black devils are after him. October 29. Has severe boil on wrist; opened. November 6. Is very much disturbed and maniacal; kept on ward; at times restrained to chair by strap. November 11. Threatening attendants to kill them; tried to induce patient Somers to help him; also Mr. Stearns, to first kill the attendants and then the physicians and thus escape; began shouting and threatening Attendant Williams and was put in chair with strap; was visited by brother and told him he was beaten and bruised by attendants; was stripped and carefully examined by Supervisor Jones who found no marks of violence; sent to 12. November 13. Yesterday patient, in presence of Drs. Andrews and Ford, threatened to knock down and kill any attendant who should touch him; is in bed. November 14. Died of uræmia at 11:40 P. M.

This is a true copy from the records and the whole of the records.

T. E. McGARR.

EXHIBIT No. 37.

Occupation.

The question of occupation for the patients of an hospital has various important aspects. What is occupation for a sick person? To what extent is it useful? Who is to judge of the amount and kind of occupation? What occupations in general hospitals, and among people generally, are unsafe or undesirable in institutions for the insane? All these are questions which naturally arise in the minds of those having the responsibility in the matter. Occupation for the sick is any thing in the nature of labor, exercise, amusement, reading, talking, looking at objects in nature, or at pictures, or, indeed, any thing that, for the time, takes wholly or in part the attention of the patient. Thus we need not confound occupation with actual physical labor, and we should not, for it is occupation that is needful and useful in an hospital or institution of any kind for the sick, insane or infirm and not labor.

Out of the wide scope indicated, it would seem that the need and tastes of most people could be met, at least so far as, on the one hand, it may be for the health and comfort of the patient, and on the other, within the power or means of the institution to secure. Whatever means may be adopted generally, it still remains for those in authority to determine, in any individual case, how far occupation may be beneficial and safe at given times, as the condition varies, and how far the sick person may be induced to acquiesce in what may be deemed advisable. In these things disease is often an imperious master. In a theoretical way, it would be easy to determine

the occupation for the inmates of any class of institutions, while practically, it is a very different problem. The theorists would have simply to enumerate means and appliances; but those whose experience has brought them for years face to face with the inherent difficulties of the subject, see it in quite another light. They see the *real* people in their actual condition, whose welfare rests in their judgment of what it is wise to do or not to do.

It is easy to *say* "put the farmer and laborer at farm work, the carpenter, cabinet-makers, shoemakers, tailors, painters, printers, each at their respective trades, and teach trades to those who have none." This we hear often, as the talk of inexperienced, self-styled "alienists," who are without practical knowledge of the disease — people whose eyes, by an occasional visit to an asylum, serve them in the place of knowledge and experience, to say nothing of the incalculable value of their ears, through which, in a casual conversation with an officer, they will acquire, and digest for immediate delivery to the public more information and authoritative dogma than the officer himself is conscious of ever possessing. Such learned pamphleteers have no doubts and misgivings that what they put forth is the real nut of knowledge cracked and the kernel picked out.

My predecessor, Dr. Brigham, was a thoughtful man, and these are his words: "That many of the insane are benefited by labor, especially in the open air, is unquestionable, but let it not be supposed that all are. According to our experience, labor is rarely serviceable in recent cases, and not unfrequently injurious. It would be surprising if this were not the case, and would contradict all we know of the pathology of the disease. In recent cases of insanity there is increased arterial action of the brain, and labor would increase the circulation, especially with the head down, and be likely to aggravate the disorder. This is not merely an opinion unsupported by facts. I have repeatedly seen recent cases made worse by labor. * * * Incurable cases, instead of being immured in jails, and in the town and county poor-houses, without employment, where they are continually losing mind and becoming worse, should be placed in good asylums, and have employment on the farm or in shops. In this way they would, in general, be rendered much happier, and some would probably recover.

"But there are other insane persons that ought not to labor, and some that will not, and to one or the other of these classes belong many that have been sent to this Asylum. Many of the cases received here are either of recent origin, and these, for reasons already given, ought not to labor, or they are violent and excited patients that cannot be induced to make the attempt."

After twenty-six years of experience here, I can more than echo this language. The great majority of those admitted to this institution are overworked, and undernourished people of both sexes. Many of them are old, and others are feeble, and suffer under chronic diseases and infirmities. They indeed need rest far more than work; rest of body and rest of mind.

When we look at the causes which lie at the foundation of the mental disorders in the vast majority of those who come here, we can well realize this truth. These underlying causes, too, are largely traceable to the toils, anxieties and sacrifices in the discharge of the legitimate duties and responsibilities of life, and only in a minor measure to dissipations and vice. I repeat, the most need rest and suitable occupation for the time, in the nature of diversion rather than labor, of which latter they have had too much. We give them all the work they really need.

In connection with the institution there is a farm and garden of 200 acres, well cultivated, as its condition and products show, and mainly by the labor of attendants and patients. The shops constitute a building 121 feet long and twenty-seven feet wide, and give all the space necessary for such carpenters and other workers in wood, painters, and workers in iron can utilize. The tailor shop is larger than we ever have tailors to fill; the sewing-rooms in the women's department are sufficiently utilized in doing all the sewing and mending of the institution. The domestic work, such as sweeping, dusting, making beds, work in the dining-rooms, and all the details requisite to cleanliness, good order and comfort is well performed. Large airing grounds, well shaded and well supplied with comfortable seats, provide for out door life, and the abundant sunlight and air so vital to the sick and well: an amusement hall or theater, for plays, concerts, recitations, lectures, of which two a week are given from September to April, sufficiently occupy the week evenings of this part of the year. Libraries of good books containing over 2,000 volumes, furnish solid reading matter. Newspapers in large quantities, 35,200 the past year, the exchanges of the daily papers of the city and those obtained from other sources, with those sent to patients by their friends, furnish light and useful reading, and keep those who may desire it, and many do, abreast with the current matters of the world.

The institution is located in a beautiful region, and from almost every one of the hundreds of windows, there are pleasant views, and the east wings overlook the city fully, as the building is on an elevation. The water is pure, the food is abundant and wholesome, the wards are well lighted and aired, and supplied with comfortable furniture, beds, etc., and on the walls are hung pictures; nearly a hundred sane people, as immediate attendants, reside in the wards, and live with the patients, as their constant friends and companions; the officers look after their welfare with unremitting attention. The institution is so open to the public, that more than 10,000 people visit and go through the wards yearly, and no week day is without this public visitation. Patients' friends the past year made a list of more than 3,000; besides all these, public officers, as superintendents of poor, committees of boards of supervisors, and various religious and other assemblies convening in Utica, see the institution freely. For religious worship the chapel is open to all on Sabbath afternoon when we have a regular chaplain, a fine organ and good choir,

and a number are also able to attend the morning service in the city churches.

The streets are paved, and well-laid sidewalks extend in every direction about us, giving opportunity for walking outside the grounds, which a large number enjoy. Thus we have, within and around us, the sources of occupation usual to the various classes of people which the institution receives, and we may justly say, more resources and comforts than most of them have been accustomed to in their own homes. Yet with all these, many are discontented, unhappy and complaining, still not more so than in their own homes, and among their own families and friends. We never lose sight of the fact that they are all sick people, and we are not discouraged or depressed. On the contrary, year after year, we seek to improve and beautify the institution and its surroundings, and multiply its resources, and thus contribute more and more to the enjoyment of those whom the misfortunes, accidents, trials, duties and afflictions of life drive to its doors. We strive to make it assimilate to home, and ordinary life, as far as possible, and take from it institutional peculiarities. Such, I consider the true methods of occupying or employing patients in such an institution as this.

As to the question of labor, apart from the idea of occupation, labor in a commercial or financial aspect, I have given the subject much thought and practical examination. Immediately after my connection with the Asylum in 1850, I was assigned, among other duties, the charge of the amusements, occupations, schools, labor, etc., of the patients. I carefully noted the influence of these means upon the health and mental condition, and gradually reaching conclusions, from personal observation, of the value, character and amount of occupation. Although satisfied myself of the correctness of the views, and the course finally adopted, I resolved not to leave the matter to vague probabilities and guesses, but to have a series of observations carried out systematically, and the results minutely recorded for a number of years. Therefore, in 1861, we commenced a careful system of statistical records of all the employment and occupation, and indeed all the movements of the patients. To accomplish this the following tabulation of facts is required.

Movements of Patients, New York State Lunatic Asylum.

Monthly Record———. Ward———.

Work *.....	A	Camisole, day.....	N
Work on ward.....	B	Muff, day.....	O
Work in dining-room.....	C	Wristlets, day.....	P
On the ward.....	D	Camisole, night.....	R
Out Walking.....	E	Muff, night.....	S
In the yard.....	F	Wristlets, night.....	T
Sick in bed.....	G	Covered Bed.....	U
On extra diet.....	H	Dirty habits.....	V
Fed.....	K	Fits, number of.....	W
Fed with tube.....	L	Chapel.....	X
On medicine.....	M	Church, city.....	Y

* Includes sewing, knitting, work in laundry, on the farm, at the barn, in the shops.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

18	19	20	21	22	23	24	25	36	27	28	29	30	31
..	..	..	..	..	..	..	..	..	..	..	..	..	..
..	..	..	.	..	..	..	..	..	..	..	..	..	..

Total number of patients.....

Total days.....

Each attendant in charge of a ward is supplied with such a printed form on the first of each month, and a daily record is made. This record has now been kept sixteen years, and embraces the movements of 5,795 cases.

In a careful retrospect of these years I am well persuaded, that the system adopted is correct and humane, and only needs expansion and perfecting in details. As a vital starting point it recognizes the patients as sick people, and the institution as an hospital for their care, comfort and recovery, and places all responsibility, as to exercise, labor, etc., entirely in the hands of the medical faculty, to be directed in accordance with the varying condition of the patients and makes the institution what it was intended to be, an hospital, and in no sense a work-house.

The following table shows the number of days of work performed by the men patients in the Asylum, in each month during the past fifteen years:

	1861	1862	1863	1864	1865	1866	1867	1868	1869	1870	1871	1872	1873	1874	1875
January	1,463	1,847	1,053	1,022	1,196	1,785	1,436	1,617	1,288	1,169	1,271	1,326	1,596	1,568	1,555
February	1,312	1,584	817	1,021	1,093	1,808	1,374	1,425	1,240	1,224	1,230	1,229	1,303	1,410	1,496
March	1,390	1,574	974	1,153	1,233	2,012	1,539	1,596	1,340	1,609	1,258	1,307	1,616	1,541	1,611
April	1,424	1,223	1,321	1,200	1,552	2,191	1,571	1,707	2,044	1,578	1,564	1,469	1,582	1,572	1,476
May	1,754	1,512	1,859	1,349	1,916	2,230	1,765	2,300	2,413	2,004	1,999	1,716	2,066	1,748	1,774
June	1,647	1,375	1,573	1,727	1,789	2,143	2,054	2,586	2,549	2,202	2,087	1,553	1,709	1,871	1,853
July	1,762	1,762	1,477	1,715	1,759	2,201	2,217	2,441	2,442	2,071	1,993	1,798	1,813	1,824	1,887
August	1,922	1,390	1,027	1,516	2,048	1,967	2,143	1,951	1,831	1,957	2,043	1,875	1,770	1,814	2,023
September	1,873	1,482	1,122	1,634	1,871	1,772	1,784	1,927	1,874	1,887	2,230	1,773	1,810	1,659	1,967
October	1,748	1,370	1,268	1,474	1,983	2,136	1,823	1,820	1,874	1,772	1,995	2,212	1,710	1,735	1,766
November	1,639	1,281	1,242	1,331	1,623	1,570	1,429	1,385	1,359	1,432	1,428	1,683	1,500	1,417	1,720
December	1,660	1,218	979	1,211	1,358	1,393	1,049	1,280	1,226	1,506	1,482	1,378	1,641	1,639	1,765
Totals	19,594	17,618	14,712	16,353	19,421	23,208	20,174	22,035	21,480	20,411	20,580	19,312	20,117	19,798	20,893

This table shows the percentage of labor, to the whole population of men patients, during the same period.

YEARS.	Number days of work.	Number days of patients.	Per cent of labor.
1861	19,594	102,180	19.17
1862	17,618	96,890	18.18
1863	14,712	96,050	15.31
1864	16,353	102,142	16.01
1865	19,421	109,373	17.75
1866	23,208	118,888	19.52
1867	20,174	113,804	17.74
1868	22,035	108,295	20.34
1869	21,480	111,623	19.24
1870	20,411	113,750	17.94
1871	20,580	118,398	17.38
1872	19,312	109,927	17.56
1873	20,117	104,212	19.30
1874	19,798	104,641	18.92
1875	20,893	108,124	19.32

The average percentage for fifteen years, 18.25.

TABLE showing the number of days of work performed by the women patients in the Asylum, in each month during the past ten years.

	1866	1867	1868	1869	1870	1871	1872	1873	1874	1875
January	2,981	2,942	2,951	2,401	2,366	2,600	2,085	2,466	2,221	2,292
February	2,720	2,715	2,679	2,202	2,087	2,157	1,815	2,231	2,250	2,221
March	3,141	3,070	2,660	2,477	2,394	2,396	1,968	2,341	2,422	2,557
April	2,865	2,956	3,034	2,136	2,087	2,181	1,978	2,558	2,226	1,875
May	3,169	2,904	2,899	2,095	1,906	2,467	1,871	2,327	2,320	2,495
June	3,007	3,059	2,769	2,148	2,045	2,272	1,727	2,053	2,351	2,524
July	3,098	2,994	2,362	2,241	2,170	2,124	2,145	2,288	2,360	2,486
August	3,121	3,075	2,223	2,460	2,196	2,203	2,349	2,404	2,356	2,620
September	3,102	2,814	2,276	2,608	2,649	2,110	2,255	2,288	2,215	2,285
October	3,132	2,876	2,436	2,518	2,461	2,214	2,552	2,439	2,410	2,334
November	2,794	2,809	2,639	2,418	2,405	2,393	2,404	2,024	2,316	2,988
December	2,967	2,711	2,233	2,401	2,455	2,280	2,638	2,299	2,273	2,817
Total	36,097	34,925	31,161	28,105	27,221	27,397	25,787	37,718	27,720	29,494

TABLE showing the percentage of labor, to the whole population of women patients, during the same period.

YEARS.	Number days of work.	Number days of patients.	Per cent of labor.
1866	36, 097	116, 549	30.97
1867	34, 925	107, 834	32.38
1868	31, 161	107, 442	29.00
1869	28, 105	108, 590	25.88
1870	27, 221	115, 891	23.48
1871	27, 397	102, 259	26.79
1872	25, 787	103, 303	24.96
1873	27, 718	103, 537	26.77
1874	27, 720	107, 476	25.79
1875	29, 494	110, 945	26.58

Average percentage for ten years, 27.26.

I am well satisfied that this tabulation represents all the *labor* that ought to be got out of the class received here for treatment,* and I can repeat the language I used on this point in 1865: "The record gives, I think, a fair means of estimating the proportion of men who can properly be expected to work in such an institution as this, and from these figures the value of the labor of patients in contributing to their own support may be approximately ascertained. How much this labor contributes to the happiness, improvement and recovery of patients is a most important question. I have no doubt of the great value of labor as a curative means, but it requires care to determine who shall work and how much work each may do. As among men everywhere, so here it sometimes happens that those who would be better for labor are lazy or selfish, and will say: "I pay and will not work, or the county pays for me and I don't wish to work." These instances are comparatively rare, and when attendants themselves are thoughtful and industrious, there is little difficulty in getting all to work who should be permitted to do so. Indeed, if not guarded, many would overwork.

*While writing this report, we took the record of a single day and ascertained the amount of, what is denominated by many, labor, *i. e.*, the number of patients who do some sort of work beyond the simple care of their persons, as taking care of their rooms, making beds, sweeping, assisting in the dining-room, in the work of the ward, in the kitchens, etc., with the following result: Of the 308 men, 210 did something in the way of occupation; eighty-two were old and infirm, maniacal, profoundly demented, or declined to work; sixteen were helpless.

This gives a percentage of occupation, 68.18. Of the 269 women, 162 were of the first-class; 68 of the second, and 39 were helpless, giving a percentage of occupation, 60.22. Deducting the whole number of helpless, the total percentage of occupation would be 71.84.

This is rather an under than an over statement, as the record was made in the cold weather of December, when only a limited number of the men could be out of doors.

"It must be borne in mind that the average day's work would not be over six hours, and generally less, and that the workers are not able-bodied men, who can accomplish an ordinary laborer's work. I am well satisfied, from long and careful observation, that from twenty-two to twenty-five per cent would be the highest estimate of six hours' workers, who could be depended upon. Some might work eight or ten hours, while others could not work over two or four, and maintain their bodily health; so that six hours would represent the full average. In the women's department the average would probably be greater, as their labor is less exhausting, and can be performed in the house independently of the state of the weather."

There is no difficulty in summer, or in any weather, when patients can be out of doors for hours together, in securing all necessary occupation, air and sunlight; but in this climate, during a large part of the year, the weather is too inclement to give the necessary out-door freedom with safety, and especially to the feeble, who most need it. All systems grow if properly developed, and they may expand in similar directions, though into more practical lines of thought and action. For instance, in the early treatment of the insane, when little idea of the power of self-control was entertained, little direction was given to mental discipline, either of the intellectual or moral faculties. Books, pictures, association, entertainments, employment of various kinds, were hardly thought of; but as experience revealed the fact, that self-control not only remained, to a good degree in most cases, but that its recognition and development were of the highest possible importance to their comfort, care and treatment, means for accomplishing the result began to be thought of. Dr. W. A. F. Browne, of Scotland, in his lectures upon "What asylums were, are, and ought to be," delivered in 1837, writes:

"Until the noble efforts of St. Vincent de Paul were crowned with success, the madman was, on the continent of Europe, either expelled from society as an outcast unworthy of care or compassion, or burnt as a sorcerer unworthy even of those rude forms of justice which then prevailed. * * * The reign of humanity in Bedlam commenced only about twenty years ago. Before that period the lunatic might be truly said to live under a reign of terror. Immured in a wretched and comfortless prison-house, and left to linger out a life-time of misery, without any rational attempt at treatment, without employment, without a glimpse of happiness or a hope of liberation, he was terrified or starved into submission, lashed, laughed at, despised, forgotten. The great objects were — confine, conceal. Protect society from his ferocity; protect his sensitive friends from the humiliating spectacle of such a connection. Regarded as wild beasts, all maniacs indiscriminately were treated as such. Nay, the imprisoned tiger enjoys a milder fate, for his keepers have an interest in his health and preservation."

That this is a mitigated, rather than an exaggerated summary of horrors, will presently appear. Until very recently such lunatics as

could not with safety be suffered to roam at large were confined in common prisons.

In 1815, before the committee of the House of Commons, Dr. Monroe stated that under his superintendence "gentlemen were never chained, but that such measures were necessary for the poor in public establishments."

Soon chains were taken off, liberty was enlarged, patients were brought out of solitary cells and dungeons into association with each other, and gradually the modern humane treatment was inaugurated. Now, this well-recognized idea of self-control expands itself in all directions, and finds outlet and expression in the various means of occupation I have indicated, and various sources of enjoyment. We see it also expressed in the order, cleanliness, subjection to discipline, respect for themselves and others, manifested in well-organized institutions, also in the chapels, libraries, amusement-rooms, etc., erected in connection with asylums, and in the large freedom from the seclusive restraint. Notwithstanding all this the disease is unchanged and without treatment, and the necessary guards to the development and maintenance of self-control in duly organized asylums, we should soon relapse into the dreadful condition of the past. There is no resting or stopping place; what has been achieved is not transmissible, except through the channel of unceasing labor; we have not achieved a change in the disease, or in humanity, but simply in the knowledge of what we may and can do with the disease, by invoking the better laws of our being to our aid as moral agents, to the progress of medical science, calling into exercise whatever of good is left in the partial wreck of mental balance which the disease presents. So distinguished an authority as Dr. Bucknill has said on this point: "If strong motives are addressed to the patient he is capable of controlling the manifestations of the malady under which he suffers. * * * The extent to which the insane are capable of controlling their actions is conspicuous in the wards of a well-ordered lunatic asylum. The medical officers of such an institution find some two or three per cent of the patients whom no moral influence appear to touch; but the vast majority are enabled, with a little encouragement and assistance, to control their passions and emotions with nearly as much success as the people out of doors." This I fully indorse in the broad and comprehensive sense in which it expresses the point; not in the puerile sense of control under promise of rewards, as to children, but under those inducements which address themselves to the reason and moral sense of men and women, reflection as to duty, interest, regard for the welfare of others, the ideas of comfort, health, security, right and wrong.

I remember when I saw enough good in the idea of schools to carry them on, but under the light of experience I found at length that such elemental methods fell short of the best results, and failed to develop self-control. It occupied a man to spell and read and write, but at the same time it belittled him, and carried him back instead of forward. It impressed him with the idea that to be at school as

a boy was all that was left of him in the opinion of sound, reflecting, professional men. It neither suggested nor stimulated responsibility, but the contrary. While such exercises were just the thing for idiots and imbeciles, they were not sufficient for men and women, even if insane. Libraries, abundance of newspapers, reading, conversation, lectures, theatricals, ordinary labor and personal care of themselves, in fact all the methods of occupation bringing the patient within the ordinary ways of thinking, feeling and acting as responsible men and women were adopted to replace schools, thus properly relegating schools to the conditions of life and age with which they harmonize and to which they belong. I should, now, as soon think of setting the men systematically to rolling hoops, and the women to playing with dolls, as to assemble them in rooms at "sham school."

The question naturally arises, having all these resources, how do we know that they are utilized? Of course upon the internal administration, the daily and hourly management and care of patients must depend largely the success of any system of government in such an institution.

The fidelity of the immediate attendants constantly with the patients must, to some extent, be presumed, but, in any system of responsible executive management, should not be simply taken for granted. The regulations of the institution provide for a steward and matron, and that they should be much in the wards and among the patients; also for a clerk or extra attendant in the division for men, and another in that for women, "to attend to the clothing," etc., all of which officers being in various parts of the house unexpectedly, would be a possible check on attendants, but the provision in this important matter goes further, and creates "supervisors of departments," who, being over the attendants, and having the special responsibility of seeing that the orders of the physicians are carried out; that the sick, feeble or excited have proper attention; that any changes in the condition of patients are at once reported to the medical officers; that those who go out to work or to walk are properly clothed; who administer the medicines, see that those who cannot care for themselves in their natural wants are properly seen to; who hear the complaints and troubles of patients with each other or with the attendants and report to the physicians, whose duty it is to report at once any neglect or misconduct of attendants, who, in fact, stand as a constant safeguard and guarantee of the execution of rules and directions.

In some institutions this work is done by one supervisor, but I am persuaded that it is wise, humane and economical to employ six of these subordinate officers in an institution of this size and character, thus giving to each an average of 100 patients and their necessary attendants.

I have given a great deal of thought to the organization of the asylum, and the practical working of the rules and regulations, and I am well satisfied that the individual responsibility required under

them is of the greatest importance, not only as a matter of security to the patients, but also of mental discipline to the attendants.

The fact that each attendant signs an agreement, as follo vs, is an additional safeguard :

" In consideration of being employed by the superintentent of the New York State Lunatic Asylum for the said Asylum I do hereby agree to work for the said State Lunatic Asylum for one year from date, at any work or service assigned me by the said superintendent or other officer, on the terms specified opposite my name, payable after the first month, so that one month's wages will remain unpaid until the end of the year; and I agree to observe and obey the rules and regulations of the Asylum and the directions of the superintendent or other officer, from time to time; and in case I leave my employment before the expiration of one year from date, without the permission of the superintendent, or am discharged for the violation of the rules or neglect of duty, I am to forfeit one month's wages; and if I continue in the employment of the Asylum after the termination of this contract, I agree to be liable to forfeit one month's wages on the conditions above specified."

Here the attendant solemnly enters into a contract, as to his or her conduct, with the distinct understanding of the penalty, not only of dismissal or fine, but of a record of the exact fact for which such dismissal or fine is adjudged, under the agreement, as an indelible stamp on character. As each person employed is furnished with a copy of the printed rules and regulations for guidance, no plea of ignorance can be put in as an excuse for dereliction of duty.

I have deemed it my duty thus to set forth this subject, which is one of the problems of internal government of such institutions, and to give the records of these fifteen years for whatever they are worth, and for whatever use they may be to others.

Improvements and Repairs.

A few years ago I advised the construction of large verandas or sun rooms, which your board heartily indorsed. These have been constructed in connection with nine of the twenty-four wards, and I would earnestly urge them in connection with every ward. A committee of the Board of State Charities which visited the institution the past summer, Prof. Anderson, of Rochester, and Edward W. Foster, of Potsdam, warmly approved these structures, and at the meeting of the Board of State Charities, in Utica, in September, they were strongly commended. In a communication to the London *Lancet*, Dr. Bucknill thus speaks of this feature of the Asylum, after his visit to this country in 1875 : " A very pleasant feature of the newer wards are the glass rooms in which they terminate. They are the exaggeration of bay windows, and they not only add greatly to the light and cheerfulness of the whole ward, but form most comfortable and agreeable lounging or working-rooms."

With this improvement, and the enlarged recesses or central sitting-rooms, the wards will not only be much lighter and pleasanter, but

observation of the patients can be more thoroughly carried out, and social intercourse more easily promoted. Furthermore, this improvement will enable us to increase the capacity of the wards, which is a great desideratum.

The thorough and permanent character of the repairs which have been made from year to year may now be tested. The floors first relaid in hard wood in the front building, though now in use eighteen years, two years longer than the original floors, and nearly as good now as on the day they were put down. The floors of all but one of the front wards have been relaid. The rear wards, which were built later, and were not in use till 1846, have been repaired frequently, and nine have now been relaid, and the same work on the remaining seven cannot longer be delayed. They are not only thoroughly worn out, but they are in a condition to absorb the deleterious materials only too abundant in hospitals, and to engender disease. We have had some cases of erysipelas in those wards during the past two years, which I am constrained to believe were due to the saturation of the decayed woodwork. Originally the work on the rear wings was imperfect, and after thirty years of use, and a great amount of patching and mending, it would not be unreasonable that it should require entire renewal. I sincerely hope that the repairs in the remainder of the women's ward may be completed the coming year. The progress of such work, with the wards crowded with women, is not only difficult, but is detrimental to the comfort and welfare of the patients. In 1852, a plan was projected for heating the Asylum by steam and ventilating it by a fan. At the inception of the idea the board of managers consulted Mr. Joseph Nason, who had given the subject considerable attention, and he at once proceeded to develop suitable plans for carrying out the proposed work. As this was the first instance of heating and ventilating an hospital by such means, the earlier plans were largely experimental, and changes and modifications were made from time to time during the progress of the work. The long coils of steam pipe, with branch T's at each end, were first tried, afterward altered, so as to have return bands at one end, thus giving a more free circulation, and these were found to be successful.

The fan was completed and put in operation in June, 1854. This is a centrifugal fan, fourteen feet in diameter and seven feet wide, and has been in use ever since, and has been a complete success from the beginning. The form of the buildings made it necessary to have two fans, and subsequently a second was introduced. These fans have each a capacity to discharge a little more than 1,000 cubic feet at each revolution. This was tested for some years by a recording apparatus. The speed was adjusted, so that in the months of December, January, February and March, the supply was such as to give 120 cubic feet per minute to each person; April, May, October and November, 137 cubic feet to each person, and in June, July, August, September, 200 cubic feet to each person, thus securing the largest amount of air during the warm months. These fans have

both been run day and night, without intermission, since their introduction. We consider it absolutely necessary to run the fans at night as well as during the day, as ventilation is really more important at that time ; all the household being in at night, and the windows, as a general rule, closed. As I have stated in former reports, "in an asylum in this climate, where so large a proportion of the population must remain within doors so much of the time, and so many of them are helpless or indifferent concerning their habits, and where the attendants, as a matter of necessity and duty, must remain with them, it cannot be less than the commonest dictate of humanity to secure for all the amount of pure air requisite for health and comfort." It requires about 1,500 pounds of coal a day to run the fans, or a trifle over two pounds for each occupant.

The general introduction of steam heating has necessarily led to improvements in apparatus and to a variety of forms of radiating surface, in both cast and wrought iron. When the wrought-iron piping began to wear out, in 1869, we commenced experimenting with cast iron radiators, in blocks, which were manufactured under patent held by H. B. Smith & Co., of Westfield, Massachusetts, in order to be prepared to judge of what would be best and most economical to replace the piping when it became necessary to do so.

After two winters of careful observation our engineer, Joseph Graham, suggested a modification of the cast-iron block, which has since been used with entire success. This modification was adopted by the Messrs. Smith & Co., and the block further improved by them, is known as the Utica or Asylum pattern, and has been introduced into the asylum at Oshkosh in Wisconsin, and Ossawatomie in Kansas, and in other institutions.

This block system has now been used to replace the worn-out pipe in the Asylum, through the women's department and center building and for the three rear wards of the men's department. With this arranegment the heating and ventilating are, we believe, better and more economically accomplished than by any other method in use in large institutions. During the past winter, 1875 and 1876, a careful thermometric record was kept and the following diagram shows how equally the temperature of the wards were maintained without regard to the varying conditions of the external atmosphere.

Through the winter months we throw in by the fans 5,000,000 of cubic feet of air per hour, and it requires about eleven pounds, per hour, of coal to raise the whole atmosphere of the house one degree above the temperature of the outside air ; and the apparatus is so adjusted that the engineer is able to keep the house in the uniform condition, as shown in the diagram, by his attention to the varying state of the outside thermometer.

One of the great advantages of this plan is that the radiators can be placed so directly under the flues as to realize, in the highest degree, the benefit of the important principle in warming buildings, of bringing the radiating surface as near as possible to the point where the air is to be warmed and delivered. Again, the blocks

form a compact arrangement which can be boxed in with wood, lined in the inside with tin or sheet iron, so that no heat is waisted by absorption of the walls as in the use of brick chambers. All the necessary repairs can be readily made, and as cast iron resists the destructive action of steam much longer than wrought, it is therefore more desirable, and in the end more economical than the wrought-iron pipes.

In 1875, the president of the board of trustees and the superintendent of the Northern Wisconsin Hospital for the Insane visited some twelve institutions, heated by steam, and embodied their observations in a printed report. Among the apparatus examined was that in use here.

They unhesitatingly gave the preference to the modified Gold's radiator, both as to efficiency, easy of management, and cheapness. This was introduced into the part of the building then about ready for occupancy, although in the other wing pipes were in use. In his annual report of the same year, Dr. Kempster remarks: "After the most careful examination of prominent hospitals throughout the country, and after obtaining the results of experimentation conducted under the observation of some of the oldest and most experienced hospital superintendents and other observers, the conclusion was reached that the system adopted (Gold's modified radiator) had the greatest number of advantages, and was the least liable to get out of order, or prove inefficient." After thorough trial of the cast-iron radiators and pipes side by side through the winter, the advantages were so much in favor of the Gold radiators that the doctor advocates their substitution for the pipes originally placed under the north wing, first erected, although in use only three years. I cite the experience of this institution, which is located at Oshkosh, where the winters are protracted and severe, as a good confirmatory test of the efficiency of the apparatus we have adopted.

EXHIBIT No. 38.

The managers consider the method of heating and ventilation of the institution to be the safest, most economical and best. Information is frequently sought as to the system adopted. Recently an application made through the State department by the British governm ent for a detailed statement concerning the appliances and method, was referred to Dr. Gray, the superintendent of this institution, who made a report which was submitted to this board before transmission. The managers deem it such a clear and sufficient statement of the method adopted, that they embody it as a document worthy of permanent accord for use and reference.

Mode of Ventilation and Heating.

1. The mode of ventilation adopted is that of forcing air into the building by the use of two centrifugal fans, a drawing and description of which accompany this communication.

2. The air is delivered from the fans to all parts of the building.

3. First: Into the large channel or basement air duct, or air plenum, which is continuous under the whole building, as shown by drawing "A."

4. Second: From this air duct or air plenum, the air passes by flues into the various wards and rooms to be supplied. Each flue is independent; that is, it has an exit at but one point. These flues open into the wards or rooms to be supplied at a point above the level of the top of the windows and doors, so that no air movement caused by opening a window or door will disturb the current of the incoming air. The air is thus distributed uniformly through every part of the building.

5. From the corridors and rooms flues are constructed, starting just above the base-board, each flue passing independently into the attic air chamber. Over part of the building there is ridge ventilation, arranged as shown in drawing "B." Over other parts of the building the exit is through ventilators fixed at regular distances, which ventilators are shown by sectional drawing "C."

6. Each fan delivers at each revolution 1,000 cubic feet of air. They can be driven to supply almost any desired quantity. They are here driven night and day, and supply 5,000,000 cubic feet of air per hour, which is a little over 100 cubic feet per minute to each occupant of the house night and day.

7. The main air duct or plenum is large enough to contain any quantity or air desired, without the need of a rapid current. The area of the flues leading from this duct to the wards and rooms is equal to forty-two inches for each occupant. The exit flues from the wards and rooms to the attic and chamber is equal to sixty-four inches for each occupant. The exit area through the ridge ventilation and the ventilators equals seventy inches for each occupant.

8. In every single sleeping room there is a flue for the exit of air of sixty-four inches area. In associate sleeping-rooms the area of the several flues is equal to sixty-four inches for each occupant. The flues for the supply of air open on the corridors at the heighth already stated. The sleeping-rooms receive the air from the corridors at or near the floor. In some of the wards there is no threshold under the door, and the doors are shortened at the bottom to allow a space between them and the floor of sixty-four inches area. In some the air enters the sleeping-rooms through a register in the bottom rail of the door. In the associate sleeping-rooms, where sufficient air could not thus be obtained for several patients, openings are made through the walls at points near the floor. In a few of the rooms for the feeble the flues for the supply of air open into the rooms.

9. This mode secures the most abundant supply of fresh air. It secures what ventilation means practically; that is, such constant *dilution* of the body of the air contained in the building by fresh air sent in as to make it for all practical purposes pure.

10. I do not use the words "fresh and foul air flues." In reality this method secures a constant flow of pure air through the building from its entrance to its exit, and the gradual enlargement of the

areas facilitates the passage and exit of the air, and compensates for the frictional resistance in passing through the building.

11. It is stated in paragraph four that the air is introduced at a height above the doors and windows. While this is undoubtedly best, it is not absolutely necessary to success in ventilation. It is proper to say that in a hospital for the insane, it is advisable to have the air enter above a point where patients would be likely to throw articles into the flues, and also to avoid the evil of patients crowding about the flues and impeding the thorough distribution of the air. In the offices of the institution, in the residence of the officers, and some of the rooms not constantly used in the hospital proper, the air is introduced just above the base-board, and in some instances through the floor; but in all cases, no matter where the air is introduced, the exit flues should start from near the floor as already described. Where the air is thus introduced, it is important to locate the flues so as not to have them opposite windows.

12. Where the rooms are large, as in case of parlors and sitting-rooms, and require two or more flues far the introduction and exit of air, it is important to distribute them so that all parts of the rooms shall be supplied uniformly.

13. Heating is combined with ventilation. The air is warmed to the degree required by being compelled to pass over cast-iron radiators, through which steam is circulated, on its way from the fan to the occupied parts of the building. These radiators are placed in the main air duct or plenum, and are in separate blocks directly underneath the flues leading from this duct to the occupied parts of the building. There is a block of radiators for each set of three flues, one flue leading to each story. Each block has an independent connection with the main steam pipe, so that each block can be used separately. Each block is cased in on the sides leaving the bottom open for the free passage of air over the radiators. By this arrangement the air is warmed at the nearest point of its delivery for use, and the heat is not wasted by absorption into the walls of a large general air chamber, and the temperature of the air sent into any special part of the building can be regulated as may be desired, simply by introducing more or less steam into the individual blocks.

14. These radiators are soc onstructed and connected as to make what is called a "steam coil," and the blocks are so arranged and connected that steam can be turned upon one-third, two-thirds, or the whole, as the atmospheric temperature may require. Of course, there is no impediment to the passage of the air through these blocks for summer ventilation when heat is not needed, as the space between them is sufficient for the passage of the largest volume of air required.

15. This large body of air entering and distributed in the manner described produces no appreciable current. It is not found necessary to raise the temperature of the air introduced higher than 100 degrees at the point of entrance to the wards and rooms, in order to secure a general temperature of seventy degrees throughout. Thus the air is not rarified, expanded, or dried, to a degree that interferes with healthfulness and comfort.

16. This system does not require registers to control the temperature of the room by closing and unclosing them. The amount of air delivered over each radiating block is warmed to the temperature there required, and as the volume of the air delivered is uniform and constant, thorough ventilation is obtained. Registers in the wards of an hospital would be likely to be used to close off the flow of air if it was too warm, that being easier done than to give information to the engineer having control of the heating blocks. Registers are used in the offices and residences of the officers.

17. It is possible to determine the exact amount of coal necessary to raise a given amount of atmosphere one degree, and this gives the key to the necessary amount of coal to be burned in the steam boilers to raise the whole quantity of air introduced to any desired temperature. The engineer by observing the temperature of the external atmosphere, and knowing the volume of air delivered, can, with sufficient accuracy, supply the necessary amount of heat.

18. To illustrate: The cubic capacity of the wards and rooms of this Asylum is, in round numbers, about 5,000,000 feet. Five million cubic feet of air are sent in by the fans per hour, night and day. Twelve pounds of coal will raise this atmosphere one degree per hour. At this writing the average outside temperature for the past twenty-four hours has been ten degrees below zero. The temperature of the wards has been maintained at from seventy to seventy-two, and we have burned eight tons and 1,280 pounds of coal, an average of 720 pounds per hour; the actual number of occupants, 722.

Description of Fan.

The fan and its supports are of iron, the casing of wood; the rotary or operating part of the fan consists of a shaft with eight radial arms set back on a curve (as shown in the drawing), at the extremities of which are fastened iron wind boards, three feet wide and five feet long, in the direction of the axis; the extremities of the wind boards are six feet from the center and consequently describe a circle of twelve feet diameter. The shaft extends beyond the casing and rests on pulley blocks, and on the driving side it is lengthened six feet to receive the driving pulley and remove all obstruction to the easy entrance of air to the fans; the motion is imparted by a belt passing over the pulley, four feet in diameter, with ten-inch face, on the end of the shaft, the arms and boards revolve within the wooden casing, the circumference of which, instead of being concentric with the shaft, describes a curve of increasing diameter and forms outside of the wind boards a channel of constantly enlarging capacity toward the point of delivery. The casing is therefore scroll-shaped, this space being six inches in front and enlarging to three feet at the bottom. The height of the casing from the floor is eighteen feet. The cross-sectional area is equal at the point of delivery to forty-two square feet. The opening in each side of the fan-casing, for the inlet of air, is six feet in area. This

whole machinery is placed in a room, the floor of which is on a level with the floor of the main air duct, and the air is admitted through a large open space, double the area of both inlets, and properly guarded.

The managers are glad to be able to say that the current receipts from the several counties of the State, and from private patients, and the income derived from the farm, has always been, and now is, sufficient to meet all current expenses of the Asylum; and further that they not only have never asked aid from the State treasury for these purposes, but have made improvements and have expended on the buildings more than $100,000 from these current receipts.

The managers earnestly desire that the institutions for the insane in process of erection in other places in this State should be completed, as by their completion the efficiency of this Asylum would be increased, and the insane throughout the State receive proper care.

The managers have made frequent personal visits to the Asylum, examined and audited all the accounts, and thoroughly inspected the wards.

EXHIBIT No. 39.

An Abstract of the Laws of the State of New York, in Regard to the Commitment of Insane to Asylums, their Detention and Discharge, and Comparison of the Same with the Statutory Provisions of England.*

By JOHN P. GRAY, M. D., LL. D.

Two broad considerations underlie this subject — the welfare of the individual, and the safety of the public. The question of unnecessary interference with personal liberty, and the possibility of confounding sane and insane in the application of laws made to protect the latter, as well as society, are vital considerations. It is a fact and practically an axiom, that insanity implies or includes the necessity of special laws to meet the conditions which grow out of it, or in other words, to meet the symptoms and results of the disease itself. The laws upon the subject differ in various countries, as well as in the various States of our country. The objects everywhere are to determine what constitutes insanity, what degree or character of insanity produces loss of accountability for acts, or necessitates provision for the government of the person or property, and finally, confinement in hospitals, asylums, retreats, etc.; for treatment and safety.

I do not propose here to enter into the subject generally, but

* Address as President of the Association of American Medical Editors, delivered at Buffalo, N. Y., June 3, 1878.

only in relation to the methods of determining the question of lunacy, in any given case, for the commitment to, detention in, and discharge from institutions, authorized under legal statutes for the treatment and care of the insane. This subject has received great attention by men eminent, both in the medical and legal professions, and the fact that the laws so widely differ both in their construction, established methods of procedure, and the officers authorized to administer in their execution, tend to show the inherent difficulties that underlie it, both as a matter of law and social polity. Such laws necessarily call into requisition, in their provisions and execution, both medical and legal science; to determine the existence of disease, its degree, and the propriety of restraint by commitments, the detention and the restoration to liberty. The determination of these questions must rest largely upon the individual judgment of medical men. Cases of insanity differ largely in the mental manifestations, social and general surroundings and conditions, and the natural character of the individual, hence the difficulty of any general rule applicable to all cases.

In looking over the statutes of the several States, those of New York coincide more nearly with those of England than do those of any other State. The initial question is: How is insanity to be determined? This issue was raised under the common law writ, *de lunatico inquirendo*, in any individual case suspected, and this went directly to the question of personal liberty. The laws of England require that any person brought within their provisions must be certified on medical authority to be "either a lunatic, or an insane person, or an idiot, or a person of unsound mind." The statutes of New York, now in force (chap. 446, Laws of 1874: "An act to revise the laws of the State relating to the care and custody of the insane; the management of the asylums for their treatment and safe-keeping; and the duties of the State Commissioner in Lunacy") provide that "the terms lunacy, lunatic, and insane, as used in this act, shall include every species of insanity, and extend to every deranged person, and to all cases of unsound mind other than idiots." For idiots, the law has made certain special provisions. While it is difficult in a statute to enter into a scientific definition of insanity or do more than use a succession of terms which are rather synonymous than definition of each other, it is found practicable to lay down some rule by which the insanity may be established, justifying and requiring confinement. What in law constitutes an insanity sufficient to confine is involved in the provisions authorizing the medical certificates, as an initiatory proceeding, necessary in all cases. The certificates declare in terms that the person "is insane, and a proper person for care and treatment under the provisions of chapter 446, Laws of 1874," and recites the reasons therefor. This establishes the lunacy and the necessity of confinement. The commitment becomes legal by the approval of the certificates by a judge, and thus the commitment and detention are made legal.

CERTIFICATES OF INSANITY.

England.

Medical Certificates — Number and Time for Making.—Two medical certificates must be made out, in the case of private patients, within seven clear days from the date of the examination by the physicians; in the case of pauper insane only one is demanded, and the patient must be admitted within seven days of the examination. No medical certificates are required for chancery patients.

Qualifications. — Physicians making certificates must be in actual practice and duly registered. No medical attendant in an asylum can make a certificate, and no physicians having proprietary interest in, or who receive any percentage of profits from an asylum. The medical certifiers must not be in partnership professionally, nor can the certificates be signed by the father, brother, son, partner or assistant of the person having charge of the patient, and no physician who signs the order or request for admission to an asylum can sign the medical certificate.

Exceptions.—When there is but one medical man in a village, and the case is urgent, the patient may be admitted on this certificate, but must be examined after admission, and within three days, by two other physicians.

Character of Certificate.— The facts upon which the opinion of a medical man is based must be stated in the certificate, and as observed upon the day of examination; and every statement designated as a delusion verified; and hearsay statements must be designated as such, and the names of the persons giving them must be mentioned.

Approval of Certificates. — Exact copies of all medical certificates (with any interlineations and erasures) must be sent to the Commissioners in Lunacy within twenty-four hours after the admission of the patient, for approval, and if imperfect, they must be returned for correction, and if not corrected within fourteen days, the patient must be discharged.

New York.

Medical Certificates — Number and Time for Making.— The certificates of two physicians are required, in all cases, and must be made out within ten days of the examination by the physicians, and patient must be admitted within ten days of such examination, or a new certificate is required.

Qualifications.— Physicians making certificates must have been in actual practice at least three years, of reputable character, graduates of some incorporated medical college, a permanent resident of the State, and all such qualifications must be certified to by a judge of a court of record. No physician can make a certificate committing a patient to an institution of which he is either the superintendent, proprietor, officer or regular professional attendant.

Exceptions.— None.

Character of Certificates.— They can only be made after a personal examination of the party alleged to be insane, and must be according to forms prescribed by the State Commisioners in Lunacy. The facts upon which the opinion of the medical man is based must be stated in the certificate and all duly certified under oath.

Approval of Certificates.— All certificates must be approved by a judge or a justice of a court of record of the county or district in which the alleged lunatic resides, and no person can be held in confinement for more than five days without such approval.

Proofs.—Before approving or disapproving of certificates of lunacy, the judge or justice may institute inquiry, take testimony as to any alleged lunacy, and in his discretion call a jury in each case to determine the question of lunacy.

COMMENTS.— It will be observed that upon the matter of certificates the British and New York statutes agree in main essential points. In New York, the law gives three more days for making out certificates and getting a patient to the asylum; makes three years' practice an essential in an examiner in lunacy; while the English law specifies no time. The English law extends the list of those who are excluded by interest or relationship from making out certificates. The English law prescribes more specifically how the facts observed and acquired from others, and upon which opinion is based, shall be set forth in the certificate. The English law simply requires the approval of the certificate, by a Commissioner in Lunacy, and fourteen days are allowed for correcting defects, while in New York the Commissioner in Lunacy only prescribes the form of certificate, while its approval must be by a judge or justice of a court of record in the judicial district where the alleged lunatic resided, and must be done within five days; furthermore, New York provides the still greater safeguard, that before approving the certificate, a jury may be impaneled on the option of the court.

There is this further guaranty in the New York statute: If any insane person, or any friend in his behalf, is dissatisfied with any decision or order of any county or special county judge, surrogate, judge of superior court, or court of common pleas, or police magistrate, he may take an appeal, within three days, to the supreme court, who shall stay proceedings and forthwith call a jury to decide upon the facts of lunacy. The court shall, in making investigation, call at least two respectable physicians, and if the jury find the person sane, the justice shall discharge him or otherwise confirm the order sending to the asylum.

Thus it will be observed that while the legal processes are simple and unobstructive, they nevertheless amply guard the rights of the individual, and in New York more especially place the whole, at every step, under judicial protection, though the intent of the law is evidently to rest the determiation of the actual question of insanity upon medical authority.

Since the Law of 1874 went into operation, over 1,600 patients have been admitted into the Asylum at Utica, and I have reason to know that the approval of judges is not a mere ministerial act. The defects in certificates have been mainly failures by the medical examiners to give sufficient detail of the facts upon which they have based their opinions.* During the four years of the operation of the law, about two and one-half per cent of the certificates have included as insane, cases of intemperance with violence and peculiai-

* As this paper goes to press, a certificate is received at the Utica Asylum, with the following indorsement: "Not Approved. This certificate is entirely insufficient in form. The facts indicating the insanity must be stated and should (in the true spirit of the law) be stated in such detail as to show upon the face and mere statement, that the patient is insane. A perusal of the certificate will show that the examining physician has already stated his opinion — he should also state his reasons for such opinion. They should be so particularly stated as to convince another reading them, that his opinion is well-founded and correct."

ties, of hysteria and meningitis. During the four years previous, about three per cent of the admissions were of this same class.

As evidence of the good faith of medical men, and the integrity of public officers, and friends seeking admission for patients at private charge, I can state that in an experience of twenty-eight years and the reception of 10,000 patients, there have been but three attempts to get persons into the Asylum under improper motives, two public and one private. The other cases, admitted and discharged not insane, were of the classes already mentioned and criminals who had either successfully feigned insanity, or been acquitted by juries on the ground of insanity.

Why should the law authorize the courts to approve practitioners generally as medical examiners, instead of constituting a small board of expert examiners?

First.— The qualifications are expressly set forth in the law, and all medical men who possess them should be equally entitled to be made medical examiners.

Second.— This permits the family physician, who is necessarily conversant with the facts of the case, to act as an examiner, and to name to the family a second examiner. It thus preserves the rule in regard to consultants, and gives the liberty to any family to say what physicians shall be brought within its confidence.

Third.— If the public officer or court designated only a few examiners, those might be appointed in whom neither the family, nor the family physician, had confidence, and a speculative class would be likely to seek and secure the appointments, and the office of examiner might soon become one of mere political reward, which the best men in the profession would avoid.

Fourth.—In the sparsely settled districts, unless general practitioners were selected, great expense would ensue from the examiners having to go long distances, or the alleged lunatic being transported to their offices.

Fifth.—An alleged insane person should always be examined at home under ordinary surroundings, with as little unnecessary official show, excitement, parade or exposure as possible, and the privacy of families and family affairs should be as carefully kept as in any other disease. All this will be better secured where the family physician and *confrere* are employed.

COMMITMENT OF THE INSANE.

England.

Commitment.—An order, a statement and the medical certificate already mentioned are required.

Pauper lunatics are sent to asylums upon the order of the parish relieving-officer, acting with a clergyman or justice, accompanied by the certificate of a physician, surgeon or apothecary, and a statement which is to be filled out with exactness in the form of answers

New York.

Commitment.—An order, a statement recorded in the case-books of the institution, and two medical certificates are required for public patients, and a bond in place of the order for private patients.

Pauper patients are admitted on an order of the superintendent of the poor of the county in which the patient resides, accompanied by the two medical

ENGLAND.

to questions embracing the history of the patient.

Private patients are admitted on an order signed by a relative, friend or some person authorizing them to be placed under restraint, and the person signing the order must have seen the patient within one month of its date, and this person becomes responsible for the payment of the expenses of the patient while in the asylum. This order is in the form of a written request, and must be accompanied by a statement similar to that required in the case of paupers, and two medical certificates.

Chancery patients are committed on "an order signed by the committee appointed by the Lord Chancellor, and having an office copy of such appointment annexed."

Criminal lunatics are committed under order of the courts.

NEW YORK.

certificates already mentioned. State paupers are committed with certificates on an order of the secretary of the Board of State Charities.

Indigent persons, who are in such limited circumstances that they cannot "support themselves and their families under the visitation of insanity," are committed under the order of the county judge after proof of indigence, and that the insanity is not over a year's duration, accompanied by two medical certificates.

Violent and dangerous insane, whom their friends neglect to confine, are also sent by the county judges, with two certificates. Criminal insane were committed by order of the courts.

Private patients are admitted on a bond, executed by responsible parties, for their maintenance and accompanied by two medical certificates.

A statement and history of all public and private patients, in all the institutions, must be recorded in the case-books within three days after admission.

In county and municipal institutions for pauper insane, the commitments are under special acts, which include commitment by local commissioners of charities and corrections, police justices, and other municipal authorities, but in all cases the two medical certificates, judically approved, are required.

COMMENTS.—It will be observed that in England, judicial authority is not invoked in commitment of any of the insane, and that private patients may be confined on an order, signed by any one, whether that person be a friend, relative, or even an entire stranger, and that a month may elapse between the time of this person seeing the alleged insane person, and granting the order for his admission, and that for pauper insane but one certificate is required. It is evident that the guarantees, both for private and pauper patients, are greater under the New York statutes than under the English.

SUPERVISION AND VISITATION.

ENGLAND.

Supervision.— The officers charged with this duty are masters in lunacy, Commissioners in Lunacy, visitors and borough officers. There are two masters (with salary) in lunacy who act as judges in all proceedings under the writ *de lunatico inquirendo*, who are barristers of ten years, or sergeants-at-arms, and are appointed by the Lord Chancellor.

There are six Commissioners in Lunacy (with salary); three medical men

NEW YORK.

Supervision.— The officers charged with this duty in New York are the State Commissioner in Lunacy, the State Board of Charities, boards of managers, municipal boards, and commissioners appointed from time to time in special cases under courts.

Special commissioners are appointed by the Supreme Court, as the exigency arises in cases of *de lunatico inquirendo*.

The Governor of the State has the

ENGLAND.

and three barristers, who act as visiting commissioners; there are also six commissioners, non-visiting, and these latter are unpaid. Commissioners must have been in medical or legal practice five years. The board grant licenses to corporations or private individuals to open asylums, visit and regulate asylums, report to the Lord Chancellor their condition, conduct and management, and all matters connected with the certified lunatics in England and Wales. They visit all licensed houses within the limits of certain terrritory (four of these visits are made conjointly by a medical and legal commissioner, and two by a legal commissioner), and see all the inmates and examine as to the number admitted, discharged, died, etc. Their jurisdiction is London and Westminster, and county of Middlesex, and borough of Southwark and certain places of counties Surrey, Kent, Essex and "every other place within the distance of seven miles from any other part of London, Westminster or Southwark."

All other houses or asylums are visited by commissioners nominated annually in each borough, consisting of three or more justices, who act gratuitously, and one or more medical men who receive remuneration. Three, one a medical man, visit four times a year, and two other visits must be made by one or more of these commissioners, with two visits of supervision by a barrister and medical man.

Two or more of the commissioners are empowered to visit all work-houses and jails where lunatics are confined.

Lord Chancellor's Visitors.—These are three, consisting of one legal and two medical visitors; they are required to visit all chancery patients in asylums as well as those in private dwellings, all being under their jurisdiction.

In the Parliamentary report of the select committee, Dr. C. Lockhart Robertson presents the following tabulation, showing amount of visitations of private lunatics (not paupers) by chancery visitors and commissioners:

The Statement.

I. Chancery Visitors: Patients in asylums, one visit yearly; patients in private dwellings, four visits yearly.

II. English Commissioners in Lunacy: Metropolitan licensed houses, six visits yearly, provincial licensed houses, two visits yearly; lunatic hospitals, one visit

NEW YORK.

power also to appoint at any time a special committee of visitation and examination.

The State Commissioner in Lunacy (with salary) is appointed by the Senate on nomination by the Governor, and is charged with the visitations of all asylums, public and private, and is authorized to inquire into their management and conduct, and report annually to the Legislature, and to make investigations into any alleged negligence or improper treatment of the insane, and in the name of the people of the State to issue an order for the remedy of any negligence, improper treatment or provision, and to report to the Supreme Court for relief if the order is disobeyed or negligently executed.

He also visits all chronic lunatics in the custody of the county asylums organized under a license from the Board of State Charities, and those confined in municipal and city asylums, on all of which he reports annually to the Legislature.

The State Board of Charities consists of eight members, one from each judicial district, appointed by the Senate upon nomination of the Governor, and, excepting the secretary, serve without pay. They are empowered to visit and examine into the condition of all charities of the State and all institutions, public or private, where insane are under treatment or in custody, to inquire into their government and management in all respects and the condition and treatment of patients.

Boards of managers are appointed by the Senate, on nomination of the Governor, and have entire control and direction of State asylums, and appoint the chief officers, establish by-laws, rules and regulations. A board is appointed for each institution, the members of which act without pay. A majority is required to visit the asylums once a quarter, and the whole board once a year. They have the power to regulate the admission and discharge of patients, and control and direct the entire financial affairs, and are required to report annually to the Legislature, within fifteen days after the opening of the session. These boards consist of eight or more members in each.

The municipal boards are local boards created under laws authorizing the organization of municipal and county asylums, over which they have full power of visitation and control.

England.	New York.
yearly; patients in private dwellings, one visit yearly; (not chancery lunatics). III. Scotch Commissioners in Lunacy: Patients in asylums, two visits yearly; patients in private dwellings, one visit yearly.	
Licenses.— Persons or corporations desiring to take out licenses to open and carry on asylums, large or small, must make applications to the board at least fourteen days before a stated meeting of the commissioners. This must state the number of patients, the sex and the arrangements for separation, must give the place of the house, number and size of rooms, and quantity of land attached, and whether for public or private patients.	*Licenses.*—The State Commissioner is authorized to license private asylums, and every application must be accompanied by plans of the premises, a description of the buildings, the extent and location of the grounds, the number of patients of each sex proposed to be accommodated, and, after a personal examination of the premises, if he finds them suitable, he may grant the license. The State Board of Charities have power to grant licenses to counties to erect and organize asylums for the chronic insane, and to fix the rules and regulations for their government, and to withdraw the licenses if they are not properly conducted.

Comments.—It will be observed that, under the English and New York statutes, there are visiting, controlling and local boards, with varied functions and duties, similar in character, and so constituted as to embrace all the interests, requirements and rights of the public and individual growing out of the establishment of institutions for the insane of every grade and character, and securing the personal liberty of those committed to them, as far as the conditions arising in the disease will justify.

In a recent report of a special parliamentary committee on lunacy laws, a printed quarto of six hundred pages, a large number of prominent men were examined. At the conclusion, Rt. Hon. the Earl of Shaftesbury, who has been on the English Lunacy Commission nearly fifty years, and permanent chairman since 1845, who was also member of the first committee of inquiry in 1828, and who had, by permission of the House of Lords, been attending this investigation, gave his views at great length. He stated: "I cannot recollect a single instance in which a patient has been brought into an asylum in whose case there was not sufficient grounds for saying that he was the proper subject for care and treatment. I can hardly recollect a single instance. I see, by referring to the evidence which has been given before your honorable committee, that such is the testimony of every man of experience, who has been consulted on the matter." To the question, "At the same time there is a feeling which has been expressed, not only generally, but by witnesses before the committee, that a large number of persons are admitted into asylums in a state of sanity and kept there?" he replied, "I have no doubt those statements would be made, because

I never knew the case of a patient, either under confinement or after confinement, who did not say that he had been most unjustly confined. I hardly know an instance." Question: "At any rate, it is your lordship's opinion that the admission into an asylum is now sufficiently guarded?" Answer: "I think so." Question: "Would you say the same with regard to their detention there; is it not the case that they are sometimes kept there longer than is necessary?" Answer: "I don't think they are so now;" and he adds: "It is a very great responsibility to send out a patient upon the world, both with respect to the patient himself, and in respect of society, before you are satisfied that he is cured, or, at any rate, in such a state that he can be safely trusted."

When Governor Hoffman, of New York, in 1874, appointed General Francis C. Barlow, then Attorney-General of the State, Dr. Thomas Hun, of Albany, and M. B. Anderson, LL. D., president of Rochester University, a committee to examine into all institutions, public and private, they reported that no persons were improperly confined in the State, and no cases have since been reported, either by the State Commissioner in Lunacy or the State Board of Charities. Such facts go to show the efficiency of the law and the fidelity of the medical profession to the principles of science and humanity.

DISCHARGE OF THE INSANE.

England.

Discharge of Patients.— Private patients are discharged from any licensed house or hospital by the direction, in writing, of the person who signed the order of admission. If such person be dead, absent or insane, then the husband or the wife, the father, the mother, then the nearest of kin, or finally the person who made the last payment of account, may successively have power to give such order, and if there be no relative, friend or qualified person thus required to act to make the order, then the commissioners may direct the discharge as they see fit.

In the case of pauper patients the guardians of any parish or union, or an officiating clergyman of any parish not under guardians, with one overseer or any two justices of the county or borough may, in writing, direct the discharge or removal, provided they are not certified in writing as dangerous or unfit to be at large, by the medical officer in charge, of any pauper insane patient. Any two or more of the commissioners may discharge any pauper patient from houses licensed by themselves, after two visits, with seven days intervening, if such patient is detained

New York.

Private patients are discharged by the managers of asylums, or may be removed by the persons executing the bond upon which they are received. Those who have been committed upon a warrant of a judge as dangerous to be at large, may be discharged upon the order of a justice of the Supreme Court, or if recovered, may be discharged by the board of managers upon the superintendent's certificate of recovery. Indigent patients are discharged by the managers upon recovery, and if not recovered in two years are liable to be removed after notification to the county judge, and they may also be discharged to the county authorities or friends by the board of managers. They may also be removed by their friends, though uncured, at any time before the expiration of two years, on presentation of a certified copy of a bond with sureties, approved by the county judge of the county from which the patients were sent, the bond being filed in the county clerk's office. This bond must guarantee "the peaceable behavior, safe custody and comfortable maintenance without further public charge" of the lunatic so removed.

ENGLAND.

without sufficient cause; and for like reasons two commissioners, one a physician, may discharge any pauper patient from houses licensed by justices, but in all cases the medical attendant of the house or hospital shall be examined, if he desires to be, upon the subject before the discharge, and his statement shall be in writing and recorded.

No lunatic, certified to be dangerous, can be removed from any house or hospital, without first obtaining the consent of the Commissioners and Visitors.

Criminal insane are discharged by the courts, after due investigation.

NEW YORK.

The managers, on the superintendent's certificate of complete recovery, may discharge the pauper patient, and whether admitted as dangerous or not, "upon the superintendent's certificate that he or she is harmless and will probably continue so, and is not likely to be improved by further treatment in the asylum." They may discharge any such patient to their friends upon the same guarantee as to safety, maintenance, etc., as mentioned in regard to indigent patients.

Criminal Insane.— A patient of the criminally insane class can only be discharged by an order of a justice of the Supreme Court, or a circuit judge, if upon due investigation it shall appear safe, legal and right to make such an order.

Municipal and County Asylums.— In the counties of New York and Kings the county commissioners of charities having charge, discharge, but only on "the certificate in writing of the physician thereof, which certificate shall be filed and kept in such asylum, stating that such discharge is safe and proper."

No insane person can be discharged from any poor-house or county asylum (excepting New York and Kings) except upon an order of a county judge or justice of the Supreme Court, "founded upon satisfactory evidence that it is safe, legal and right to make such discharge." Any other person or officer making such a discharge commits a misdemeanor and is punishable by a fine of not more than $500 or less than $100, in the discretion of the court.

COMMENTS.— In England and America the provisions for the discharge of the insane are essentially the same. As in the initiatory proceedings for confinement, the responsibility is mainly thrown upon the medical profession, so also is the responsibility of discharge. In the discharge of pauper patients there is no practical difference in the two countries. In respect to private patients, the statutes of New York are more simple and practically effective. In New York the managers of each asylum have the power to discharge without formality, and even without the assent of the relations or guardians, while in England the consent of the person who signed the request or order for admission must first be obtained, or his successor, which may cause delay, annoyance, or even work to the detriment of the patient. Indeed, the parliamentary report spoken of shows that the institutions have frequently to invoke the influence, and sometimes the official power of the commissioners to compel the removal of private patients. In New York the bond, or as termed by the

English law, the order, on which private patients are admitted, provides for discharge "whenever he shall be required to be removed by the managers or superintendent," and in case of refusal, for the payment of "all expenses incurred by the managers or superintendents, in sending such patients to his friends." This compulsory provision has had to be enforced at times by the managers.

Of course, in both countries the writ of *habeas corpus* stands as an ever-present protection against any possible wrong. This, however, has not been appealed to but three times at the Utica Asylum since my connection with the institution, in 1850, * and in these three cases the patients were immediately remanded to the Asylum by the courts. The statute of New York provides against any probability of unnecessary or improper detention of private patients, under any circumstances, as it makes the delivery of the patient by the officers to the friends a mere matter of request at any time, as the friends are not even put to the slight inconvenience of making a formal order in writing, as in the English law, and the managers may discharge summarily.

Since writing the above, the State Commissioner in Lunacy, Dr. John Ordronaux, has brought out a very valuable work, entitled "Commentaries on the Lunacy Laws of New York, and on the Judicial Aspects of Insanity at Common Law, and in Equity, including Procedure in England and the United States." He announces as the result of his observations and experience as a Lunacy Commissioner, of his studies in revision of laws, and of his examination of institutions, that:

"In the organization also, and management of our asylums, and the provisions made for the care of the pauper and indigent insane, this State has made great progress; and lastly, in establishing a system of supervision of its insane wards, it has completed its guardianship of all departments of its public charities.

"To unfold, therefore, the reason of the laws of governing the civil and criminal status of the insane has been the object to which I have addressed myself in these commentaries. They are designed to cover, not only the Revised Statutes of New York, but the while field of those decisions in law and equity, which give rise to some of the most difficult questions in jurisprudence. And inasmuch as they would be incomplete as a manual, without some discussion of the practical methods of enforcing these laws, I have added a chapter on Procedure; prefacing the whole work with a digest of adjudicated principles in the Jurisprudence of insanity, together with a synoptic sketch of the development of our statute aw, herein, in the form of a History of Lunacy Legislation in England and the United States."

Since that time there have been admitted 10,600 patients.

REGULATIONS, CONDITIONS AND FORMS

Concerning Admission of Persons to the New York State Lunatic Asylum.

For the information of those desirous of placing patients under treatment in the Asylum, we append the following extracts, requirements and forms of law:

The law relating to the insane is chapter 446, Laws of 1874, entitled "An act to revise and consolidate the statutes of the State relating to the care and custody of the insane; the management of the asylums for their treatment and safe-keeping, and the duties of the State Commissioner in Lunacy."

TITLE 1, § 1. No person shall be committed to or confined as a patient in any asylum, public or private, or in any institution, home or retreat for the care and treatment of the insane, except upon the certificate of two physicians, under oath, setting forth the insanity of such person. But no person shall be held in confinement in any such asylum for more than five days, unless within that time such certificate be approved by a judge or justice of a court of record of the county or district in which the alleged lunatic resides, and said judge or justice may institute inquiry and take proofs as to any alleged lunacy before approving or disapproving of such certificate, and said judge or justice, may in his discretion, call a jury in each case to determine the question of lunacy.

§ 2. It shall not be lawful for any physician to certify to the insanity of any person for the purpose of securing his commitment to an asylum unless said physician be of reputable character, a graduate from some incorporated medical college, a permanent resident of the State, and shall have been in the actual practice of his profession for at least three years, and such qualifications shall be certified to by a judge of any court of record. No certficate, of insanity shall be made except after a personal examination of the party alleged to be insane, and according to forms prescribed by the State Commissioner of Lunacy, and every such certficate shall bear date of not more than ten days prior to such commitment.

§ 3. It shall not be lawful for any physician to certify to the insanity of any person for the purpose of committing him to an asylum, of which the said physician is either the supertntendent, proprietor, an officer or a regular professional attendant therein.

TITLE 3, § 37. The terms "lunacy," "lunantic," and "insane," as used in this act, shall include every species of insanity and extend to every deranged person and to all of unsound mind, other than idiots.

It will be seen, from the above sections, that the requirements of the law for the commitment of an insane patient to an asylnm and and holding him there in confiement are:

1. The certificate of two physicians, under oath, settting forth the insanity of such person, as defined in the section last cited.

2. The physicians signing the certificates must be duly qualified as

medical examiners in lunacy, and be certified by a judge of a court of record, to possess the qualifications specified in the first paragraph of the second section. The certificates must be made on personal examination of the patient, and in accordance with the forms prescribed by the State Commissioner in Lunacy, and bear date not more than ten days prior to the commitment.

3. The certificate must be approved by a judge or justice of a court of record of the county or district in which the patient resides, before, or within five days after the patient is placed in confinement, in order to authorize his confinement more than five days.

The following is the form of medical certificate prescribed by the Commissioner in Lunacy:

FORM OF MEDICAL CERTIFICATE.

STATE OF NEW YORK, }
County of , } *ss.:*

I, , a resident of , in the county aforesaid, being a graduate of , and having practiced years as a physician, hereby certify, under oath, that on the day of , I personally examined . of*

*(Here insert sex, age, married or single, and occupation.)

and that the said is insane, and a proper person for care and treatment, according to the provisions of chapter 446 of the Laws of 1874.

I further certify that I have formed this opinion upon the following grounds, viz.: *

*(Here insert facts upon which such opinion rests.)

And I further declare that I possess the qualifications specified in section 2 of title 1 of chapter 446 of the Laws of 1874, and that my qualifications as a medical examiner in lunacy have been duly attested and certified by *

*(Here insert the name of the judge granting such certificate.)

Sworn to and subscribed before me, }
this day of , 187 . }

The judge's certificate of qualification, the form of which we give below, need not be attached to the medical certificate, as the physician makes oath to the fact of being qualified, in each instance. It may be retained by the physician or placed on file in the county clerk's office.

JUDGE'S CERTIFICATE OF QUALIFICATION.

STATE OF NEW YORK, }
County of . } *ss.:*

I hereby certify that of , is a physician of reputable character, a graduate of an incorporated medical college, to-wit: , and a permanent resident of the State, and that he has been in the actual practice of his profession for at least three years.

JUDGE'S APPROVAL OF THE FINDING IN CERTIFICATES OF LUNACY. TO BE PRINTED OR WRITTEN UPON THE BACK OF SUCH CERTIFICATE.e

STATE OF NEW YORK, } ss.:
County of }

Pursuant to the provisions of chapter 446 of the Laws of 1874, I hereby approve of the findings of lunacy against A. B. upon the facts set forth in the within certificate.

Dated, _____ _____

———————of————————court

ADMISSION OF PATIENTS.

Patients are admitted to the Asylum upon public orders or upon the bond of friends guaranteeing the prompt payment of bills.

Of those committed on public orders there are two classes — pauper and indigent patients. Pauper patients are sent to the Asylum upon the order of the superintendent of the poor of the county in which the patient resides, in accordance with section 5 of the law.

The order of the county, or special county judge, or judge of the superior court or common pleas of the county where the patient resides, secures the admission of indigent persons not paupers. A certificate of indigence entitles the person in whose favor it is issued, to two years' treatment in the Asylum if he is not sooner cured, and is by law limited to cases of insanity of not more than one year's duration.

The object of this humane provision is, undoubtedly, to extend the benefits of this institution to persons of limited means, whose insanity is of recent date, and, therefore, probably curable, and, if recovered in the space of two years, restoring them to their families and their property unimpaired, and saving them from the paralyzing influence upon their future life of finding themselves, by the loss of health and reason, reduced to poverty. Patients sent through this channel generally supply their own clothing and pay their own traveling expenses to and from the Asylum.

Patients supported at their own expense, or that of their friends, are received, when there are vacancies in the Asylum, giving preference to recent cases, upon the certificates of two physicians, duly qualified as medical examiners, approved by the judge of the county or district in which the patient resides, and upon a bond signed by two persons whose financial responsibility is certified by some bank or county officer, or some well-known, responsible person.

The form of a bond, to be executed by the friends of the insane person admitted as a patient, is as follows:

WHEREAS, of in the county of , an insane person, has been admitted as a patient into the New York State Lunatic Asylum, at Utica:

Now, therefore, we, the undersigned, in consideration thereof, jointly and severally bind ourselves to Thomas W. Seward, treasurer

of said Asylum, to pay to him and his successors in office the sum of dollars cents per week, for the care and board of said insane person, so long as he shall continue in said Asylum, with such extra charges as may be occasioned by his requiring more than ordinary care and attention, and also to provide him with suitable clothing, and pay for all such necessary articles of clothing as shall be procured for him by the steward of the Asylum, and to remove him from the Asylum whenever the room occupied by him shall be required for a class of patients having preference by law, or whenever he shall be required to be removed by the managers or superintendent; and also to pay all expenses incurred by the managers or superintendent in sending said patient to his friends, in case one or either of us shall fail to remove said patient when required to do so as aforesaid; and if he shall be removed at the request of his friends before the expiration of six calendar months after reception, then to pay board for twenty-six weeks, unless he shall be sooner cured, and also to pay, not exceeding fifty dollars, for all damages he may do the furniture or other property of said Asylum, and for reasonable charges in case of elopement, and funeral charges in case of death; such payments for board and clothing to be made semi-annually, on the first day of February and August in each year, and at the time of removal, with interest on each bill from and after the time it becomes due.

In witness whereof, we have hereunto set our names this day of , in the year 18 .

(Name.) [L. S.]
(P. O. address.)
(Name.) [L. S.]
(P. O. address.)

This will certify, that I am personally acquainted with and , the signers of the above bond, and consider each of them fully responsible for the prompt discharge of its obligations.

(Name.) [L. S.]
(P. O. address.)

This agreement, or bond, is generally signed by near relatives or other friends of the patient, or legal guardians, if any such there be, at or prior to the time of admission. It may, however, be signed subsequently, and sent to the Asylum, if, upon the admission of the patient, a sum of money sufficient to secure its execution is deposited.

Upon application, we will furnish any of the above forms of medical certificates or bond for private patients, in blank.

We regret to be obliged to call the attention of county officers to the following law, which is too frequently overlooked or disregarded:

"All town and county officers sending a patient to the Asylum shall, before sending him, see that he is in a state of perfect bodily

cleanliness, and is comfortably clothed and provided with suitable changes of raiment, as prescribed in the by-laws."

We request, especially, that patients brought to us from county houses be clean and free from vermin.

All persons require at least two suits of clothing, and several changes of under garments. Most of the patients go out regularly, and consequently require clothing suited to the season. For males, great coats and boots are required in winter; shoes answer in summer; slippers are worn in the house. Females also need ample clothing for walking and riding in the winter.

The supply should be liberal when it can be afforded. All clothing is marked with the name of the patient to whom it belongs, and much pains are taken to have it kept in good order and repair.

The removal of a patient should not be attempted while laboring under severe bodily disease, as fevers, erysipelas, large and dangerous wounds or sores, consumption, etc.

In conveying a patient to the Asylum, let it be done, if necessary, by force, rather than by deception Truth should not be compromised by planning a journey to Utica or a visit to the Asylum, and, when there, suggesting the idea to the patient of staying, while his admission was already decided upon; nor should patients be induced to come and stay a few days to see how they like it, under the impression that they can leave at pleasure. Such treachery not only destroys confidence in friends, but also, too often, in us, by the seeming conspiracy to which we are supposed to be a party, than which there can scarcely be a greater barrier to improvement. The patient should be brought by an intelligent and intimate acquaintance, who will be able to give a minute history of the case, or a written account should be transmitted. In the latter should be stated the name, age, married or single, number of children, occupation, degree of education, profession of religion, habits, nativity, residence, predisposing and exciting causes. Here give a minute history of the patient from youth up, temperament, peculiarities, disposition, etc.; also the cause supposed to have affected the patient immediately preceding the attack; state what relatives, near or remote, are or have been insane or peculiar; also what disease the patient has suffered from, fits, skin diseases, dyspepsia, constipation, piles, ulcers, etc. Give the date of the attack, going back to the first noticeable disturbance, no matter how slight; also the duration of the more marked and decided symptoms, the number of attacks (if this be not the first) and, if ever before admitted, the number of admissions to this Asylum, and how complete was the recovery in the interval of the attacks; state fully the condition of the patient at the time of admission; whether suicidal or homicidal; whether he eats, sleeps, strikes, breaks, destroys, or is noisy or inattentive to personal cleanliness, and whatever else that may occur to the friends, likely to be useful to us.

It is desirable that application for admission be always made before the patient is brought to the Asylum, in reply to which any de-

sired information will be cheerfully furnished. All correspondence about or with patients should be post-paid, and addressed, to Dr. John P. Gray, Superintendent of the State Lunatic Asylum, Utica, N. Y.

EXHIBIT No. 40.

Improvements and Organization.

I would call your attention to the importance of building a small wing or hospital for the special care of the more feeble and sick class of men, similar to that erected in 1874 for the women. My experience as an assistant medical officer so impressed me with the importance of such special provision that in my first annual report as superintendent, in 1854, I brought this matter of an hospital forward. I then said: "Our arrangements for taking care of the sick, though probably as good as in other similar institutions, must be regarded as very imperfect. All sick patients should be immediately removed from the wards to an hospital department, properly arranged, where every attention demanded by their condition could be bestowed; where the physician could visit them frequently during the day, and in the night, if necessary, without disturbing others; where those very ill could be visited, and, if advisable, nursed by their friends." I have urged this since in my reports. A single large room was originally designated as an hospital which was directly over the rooms of the most excited patients, and in connection with the shops. It was soon found to be unsuitable for the purposes of the sick and feeble, and this class have always been cared for in the wards with the other patients. They undoubtedly can be well cared for in this way, but it would be much better to have special hospital provision. The experience of the great benefit of the small hospital wing for women makes the need of the one for the men seem more urgent. Such a wing could be put up with all the necessary bath-rooms, etc., and arrangements for steam heating, similar to that for women, for $10,000.

I would recommend the extension of the shops on the line of the road to the barns, and the discontinuance of that part of them adjoining the rear one-story wing for the more disturbed men, and its conversion into a day-room for this ward. This would remove the carpenter and paint shops farther from the occupied buildings, and make them more convenient of access, and safer, and the portion thus disused could be made into a day-room at moderate expense.

The remodeling of the women's wards, 7, 8 and 9, and the erection of three large day-rooms in connection therewith, which was progressing at the close of the last year, have been substantially completed and they are now occupied. The painting of the walls cannot be done until the plastering is thoroughly dry, but this can be done without vacating them or seriously interfering with comfort.

In the original construction of these wards no day-rooms were provided beyond a small room at the extremity of each, which was not only contracted, but being constructed across the end of the wards, shut out the light and prevented the free movement of the air through the halls, where the patients spend most of their time. A number of years ago we partly remedied these defects by taking out one room on the side of each ward, and making it a recess or open sitting-room, giving at the same time more light to the ward. These changes were made when the work of putting in the heating and ventilation was being carried out. Still, the defects were manifest, and appeared more conspicuous as experience revealed more and more clearly the necessity of light, space, and cheerful surroundings, so essential to the well-being of this class of persons. When in 1872 I urged the remodeling of these wards, and the construction of large day-rooms for all the disturbed classes, and your board directed me to make out and submit plans for the work, I felt that a most important step was taken toward the higher usefulness of the institution. I had seen the marked increase in the order and quiet of the wards, and the better condition, in every way, of the patients of the most disturbed classes when they were removed years ago from the basement rooms to the larger and more airy wards, specially erected for them, where they had space to move about freely, without jostling each other, or coming in unnecessary collision.

Although these day-rooms have been open but a short time, they have demonstrated their usefulness in the additional comfort they afford to patients, and in the greater ease and convenience with which the attendants are able to take care of them, to say nothing of the cheerfulness and sanitary value which the sunlight gives to the wards. The provisions for the care of the quiet and convalescent classes in an asylum are comparatively simple, and if an institution can select its patients and receive only the quiet, the arrangement of an asylum would be as easy as that of an ordinary hospital. The difficult problem is the care of the disturbed.

An ordinary visitor going through the wards of an asylum is very naturally struck with the contrast between the most quiet and convalescent wards and the most disturbed. If the institution is well organized, and the patients properly classified, he will see that the difference, as he proceeds from ward to ward, is not only noticeable, but is a steadily increasing one. The first two or three are so quiet and so much like well-ordered outside life that he can hardly understand why these people are not in their own homes. He does not take in the fact that the most of them have been in the several more disturbed wards, as each case may have required, during certain stages of the disease; that the twelve wards for each sex are not simply so many apartments for reception of a certain number of people, but so many wards, arranged for the subdivision of the patients, to correspond with the various manifestations of the disease in each case. As he looks at a profound case of melancholy, a restless, unhappy and uneasy patient, whose mind and very soul are

tortured with distressing delusions, or at a case of mania, where perhaps some form of restraint may be necessary, to prevent denuding the person, or self-inflicted injury, or violence to others, it does not occur to him that soon these very persons may take the places of the quiet and cheerful convalescents he has just seen. He sees in a large institution like this, where so many cases are annually admitted, and so many are manical or melancholic, and so many feeble, helpless or old, the whole of insanity spread out, as manifested in all these hundreds before him, but he does not see clearly if at all the reason why one is in a certain ward and another in another; in other words, he does not appreciate the law of classification which supposes each individual placed where it is best for him, for the time being, in order to secure his most speedy restoration. He does not understand that this large subdivision into wards is for the very purpose of meeting more successfully the condition and symptoms, both mental and physical, of the disease. Some patients may go through almost every ward, and others three or four, and again, in some instances treatment may not be necessary except in one. The basis of classification is simply the power of self-control as manifested in the manner, speech, and personal care which the individual may exercise. There is more curative power in an institution in its large means of classification than in one where there are but few wards. Each ward becomes precisely what the condition of the patients may there represent, and they are moved from one ward to another as their condition changes.

An asylum should be so constructed as to give ease of access to every part, from the central or administration building. Every ward should have abundance of light, and should be so arranged as to afford easy observation of every part of it by the attendants; the form or outline of the building should be such that the wards for the more disturbed are at some distance from the more quiet, while remaining connected they should have a different outlook from those of the quiet and convalescent. The various classes should overlook each other in their external view as little as possible, and for the best order and the highest good of the patients, the grounds for exercise should also be separated; that is, there should be at least two divisions of the grounds for each sex; one for the convalescent and more quiet, the other for the several classes of more disturbed. Of course this does not imply necessary confinement of the patients to these grounds, because they walk and take exercise not only upon the grounds, but far beyond them, while the men patients are also about the barns and over the garden and farms, but these special divisions mentioned are for ordinary out-door airing and lounging for the more invalid and the more excited who are not able to work, and for the use of all who can be out of doors and under observation at such times as they do not work. In this institution these provisions have always existed, to a certain extent. The aim has been constantly, as opportunity has afforded, to make the ward-separation more complete, to arrange the day-rooms so as to afford more independent and separate

outlook, to give the largest possible amount of sunlight, and to extend the airing or exercising grounds so as to take away as far as possible the sense of confinement. With the new day-rooms and the special hospital rooms constructed for women (and we hope the same improvements will not be long delayed for the men), the institution will be arranged for the best care of all classes of patients for which it is designed.

The whole institution constitutes a double hospital, one for each sex, separated by a central building, which is for the purposes of administration, and the residence of the officers, the chapel, theater, etc. Each side is under the care of two medical assistants, with a steward for the men, a matron for the women, and a general clerk for each, the superintendent having supervision of the whole. Each side contains twelve wards, five on the first story, four on the second, and three on the third. Each story is a department, and six supervisors, three of each sex, have the care and supervision under the physicians, each of a department. Each ward has a chief attendant and as many assistants as the number and condition of the patients may require, and also a dining-room attendant. Thus each ward practically constitutes a family living together in and out of doors. Each supervisor has constant oversight, under the immediate direction of the physicians in charge, of the wards assigned to his or her department. They go through all these frequently during the day, observe the conduct and manner of the attendants, give them all necessary directions in regard to any matters that may arise concerning their duties, administer the medicines that are prescribed, carry messages to and from the medical office throughout the department, report to the office any thing unusual that may occur, before or after the visits of the physicians, and see that all the orders of the physicians are carried out by the attendants, and report any inefficiency, neglect or defective service on the departments. The chief attendant on each ward has charge of the patients and the direction of those associated in their care. The dining-room attendant has the care of the dining-room, tables, etc., and assists on the ward in all leisure hours when not engaged in his or her special duty. The various sewing-rooms are under the seamstresses, who have charge of the work and oversight of the patients who assist; so also of the ironing-rooms. For the men the tailor has charge of the shop and the oversight of such patients as work with him; so also of the carpenter shop, plumber shop, paint shop, wash-house and kitchens, in each place the person in charge having the oversight and direction of the patients who assist and work with him. The same rule prevails in the out-door work with the persons in charge of the horses, cows, pigs, etc. The men patients who work in the garden, and on the farm, are under the immediate direction of the attendants who are assigned to take them out, and work with them, while the general labor is under the direction of the farmer and gardener. Throughout the whole institution, in every ward, dining-room, sewing or other work-room, and in every shop, and in the kitchens, wash-house, and wherever

employed persons are engaged in labor, there are always patients working with them. All attendants, and those engaged in in-door employments, and all attendants who work with patients on the farm and garden, live in the wards with them, taking their meals in the dining-rooms with them, and are thus constantly associated with those whom they have in charge, while those having charge of the shops, barns, etc., simply have the care of them through the day or through the hours they are with and assist them. Thus a wise regulation is carried out, that "every patient must be in the charge of some responsible individual at all times, unless permitted to be at large by the superintendent." Every employee of the institution has a printed copy of the by-laws, rules and regulations, where their several duties are distinctly set out and to which they are required to conform. As the officers and attendants all reside in the building, their duties are practically without hours, as they are all liable to service at any moment, and they are always accessible. The night protection is secured outside by the persons who sleep at the barns, and the night fireman in charge of the engine-house, shops, etc. Inside, in charge of the wards and patients, there are two regular night watchers for each sex. They go upon duty before the attendants in charge retire. They pass through the wards, hourly, and go off duty after the ringing of the morning rising bell. They receive from the physicians in charge each night a written list of the persons they are especially to look after and such verbal directions as may be necessary, and report in writing in a book in the morning. Their duties are to look after the sick and feeble, maintain constant watchfulness and observation over the wards, taking up those who need that sort of care, and communicating with the physicians in charge if any one is taken sick in the night, or is unusually disturbed.

To maintain integrity and efficiency in this body of employees for such arduous, constant, and often perplexing duty, it requires not only care in their selection as to character, plain rules and regulations for their guidance, but also that they should be provided with suitable recreation and respite from the constant strain.

To secure all this and at the same time give social life, religious and other privileges in the midst of the discharge of these duties, I have given a great deal of reflection. This requires such organization as before stated, as will insure unceasing supervision of the patients, and a sufficient number of attendants so that for limited periods all the necessary duties can be performed by a part of them, that is, by certain ones remaining in while others are out. No attendants can ever leave the wards in which they are on duty without permission. This permission presumes the necessity of passing the duty of one to the other for the time being. As this permission of absence must be in writing, in the office, it is known to all members of the medical staff what persons are temporarily absent and who assume their duties. To accomplish this systematized recreation or respite, on each department the attendants are grouped into threes so as to give rotation in absences. For instance, one attendant

out of the three is absent one Sunday of the month all day and the other two are at home; so they alternate on week day evenings and it is so adjusted that there are always two in for one out. Each is permitted to be out at church, lectures, or to visit their friends two evenings of the week, so under this arrangement of grouping they are permitted to be out for a brief airing or exercise in the day, when not out walking with the patients, but are not permitted to go off the grounds without permission. Each is allowed one-half day of every month for any personal business matters, and the necessary time for the care and procurement of their own clothing, etc. If the illness of patients or any other exigency of the service requires the temporary abridgement of these privileges, the attendants are expected to acquiesce, and they do. When they are employed they are given the rules and regulations to read so that they may understand fully the requirements of the position, and I find as a matter of practical observation that such as fail to appreciate the importance and responsibility of the duties do not long remain. In my judgment and observation of the working of this plan the employees have sufficient open air exercise and recreation to maintain good physical and mental health, and to keep up the necessary social relations of life, and at the same time to insure a constant interest in the work in which they are engaged. In this great problem of daily and hourly care, I have always felt it to be of the highest importance that the attendants should be as happy and contented as possible, to give them the proper spirit and endurance for their work.

The whole organization is intended to secure the medical and general supervision of the patients night and day. The constant responsible oversight and care of this great institution, in all its interests, is a charge which involves the life and welfare of six hundred helpless sick, and at least a million of dollars of property.

The organic law creating the Asylum, with all the amendments and modification, to the present time, with the by-laws originally adopted and subsequent amendments, together with the rules and regulations for the administration of all the affairs of the institution in all its departments, as they now stand, are the outgrowth of experience. The present thorough organization has, therefore, been a matter of gradual growth.

The institution was opened in January, 1843. Within a year after the opening of the Asylum, the superintendents throughout the United States and Canada organized an association, embracing all the medical superintendents of American institutions for the insane. This association of men have met annually ever since in international convention, to discuss the important questions involved in the construction and organization of hospitals, and the care and treatment of the insane. All the practical questions relating to the management of asylums have been discussed and re-discussed by this body with the constant light of advancing science and accumulated experience. Among the important contributions of this association was the early enunciation of a series of propositions relating to the establishment,

location, construction, and organization of hospitals for the insane, which from time to time have been expanded until they now constitute an invaluable code of principles for guidance in these matters.

EXHIBIT No. 41.

Progress of Treatment.

However admirable in construction hospitals for the insane may be, however perfect the organization, insanity as a disease is precisely the same as it has always been, a disease marked by changes from the slightest to the most extraordinary, in the character, manner, habits of thought, and conduct of the individual. These very features in the disease have made hospitals and isolation from home an imperious necessity. The hospital itself means, in a broad sense, more or less seclusion from the world and restraint of personal liberty. In the words of Chief Justice Shaw of Massachusetts, "the right to restrain an insane person of his liberty is found in that great law of humanity which makes it necessary to confine those whose going at large would be dangerous to themselves or others." Again he says, "besides it is a principle of law that an insane person has no will of his own. In that case it becomes the duty of others to provide for his safety and for his own." It is this great law which has created asylums. Though the history of insanity is really coeval with the history of man in all ages, and may be traced through all sacred and profane literature, little can be said showing successful treatment until within a century past. Until what may be called the modern treatment was adopted attention was mainly directed to protection against the violent and dangerous conduct of the insane rather than the medical treatment of the disease.

The problem of caring for the noisy, violent and destructive patients has always been and still is one full of difficulty. The manifestations in this direction are the offspring of disease, and in fact, symptoms of disease. Formerly when insanity was not as well understood, strong repressive measures were deemed necessary for almost all of the insane, and were almost universally resorted to. This was not because our predecessors were cruel or barbarous, but simply because medical science then had not taken particular interest in the care of the insane, and experience was almost entirely confined to the question of custody and safety. We cannot speak of these medical men as barbarous any more than we could denominate methods of surgery in past centuries as barbarous, when the fathers in medicine were slowly and experimentally working out problems, perhaps simple enough to us now. For more than a century men have been practically working out the best methods for the care and treatment of the insane. When Shakespeare said "who can minister to the mind diseased?" he indicated the state of knowledge at that day. It wsa a question which no one had undertaken to solve. He might

with equal significance, at that time, have asked "who can heal a lung disease, or tie the carotid artery?" When Henry the Eighth confiscated the priory of Bethlem, and ordered that it be turned into an asylum for lunatics, he was really laying the foundation for the beneficent work we now see moving on throughout the world. In the light of what men are pleased now to call "humanity," the history of Bethlem, for a long period of years after its opening, is a dark line of cruelty and horrors; but viewed from a standpoint of those times, and side by side with the prisons of that age, and with the general harshness of men as they then were, its history is only the expression of the sentiment of that period. If we read the history of the Tower of London and consider the bloody deeds there executed upon men and women, and even children, we only read a reflection of the sentiment of that age. The men and women who governed and directed the affairs of the Tower governed and directed the affairs of Bethlem. The administration of civil government which executed men for opinions, hung them for petty thefts, and put them into vile dungeons and to the rack, kings and princes and even the most delicate women, was merely expressive of the sentiment of that age, as were the chains and dungeons for the violent insane within the grand old walls of Bethlem. When recently in London, I visited Bethlem and also the Tower. Bethlem, now under one of England's best medical superintendents, is the expression of the enlightened views of the care of the insane, both in a humane and a scientific aspect. Dr. Savage, the medical superintendent, who is himself a lecturer on insanity, and the asylum a place of clinical instructions, gave me a full view of that establishment, and pointed out certain changes already made and others still to be made, to keep pace with the progress of the times. The new light everywhere, the bright decorations on the old walls, the comfortable furniture, the kindly attendants moving through the wards, all forced upon my mind the wonderful contrast with a now buried or rather a historical past.

In the Tower the implements of torture, the dreary dungeons, whose walls are covered with emblems expressive of the injustice of a past age, and odorous of the gentle blood so rudely shed, were exhibited for what they formerly were, gloomy and bloody records, now gone, not shown to reveal what England now is. From the end of the reign of Henry the Eighth, 1547, for two hundred years, there is no history of the care of the insane which we desire to dwell upon. These were centuries of war, fanaticism and bloodshed, and the insane shared the common fate of all who could not help themselves. They were left to themselves while the violent and dangerous received simply such care and attention as the safety of the public required. All this, however, stands not as a history of wanton cruelty, but a history of mankind in progress from the rude to the refined, from science in swaddling clothes to science advancing to manhood.

About that time, 1750, St. Luke's Hospital, England, was estab-

lished by voluntary subscription, and the good people of Philadelphia, Pennsylvania, simultaneously put forth the idea of a better and more humane care of these unfortunates. So about that period was liberty expanding and science progressing, and the origination of these movements for the amelioration of the condition of the insane was among the beneficent outgrowths of this enlarged sentiment of the time. Illustrious men in medicine, in law, and in science gave their aid in both countries.

The year 1815 found England looking into her mad-houses, and then appeared the famous parliamentary "blue book" with the evidences of the condition of Bethlem. At that same period the State of New York was discussing the enlargement of her provisions for the insane in connection with the New York hospital, and beginning seriously to look after the insane poor in the poor-houses. As a result of this early movement in this State, Bloomingdale Asylum was built and commenced its benevolent work, but it was from the first almost entirely utilized by the independent classes, and the poor still remained largely uncared for. In 1830 a movement was set on foot to establish a State asylum. Out of this came the State Asylum at Utica, gradually developed, and opened for the care of patients on the 16th of January, 1843.

It is simply the truth of history to say that at the opening of this institution such were the ideas of the necessity of seclusion and strong apartments for the care of maniacal patients, that special rooms were constructed. Says Dr. Brigham: "As is well known, the present building forms only part of a contemplated establishment. It was originally intended solely for the quiet and convalescent class, consequently no strong rooms were provided for the noisy and violent. We are therefore without any now, though by lining some of the rooms with boards, and making stronger doors, we have made some of the rooms safe and comfortable for this class, but we have no cells or dungeons. Every patient has a good sized room, well ventilated and warmed." Again he says of these rooms: "They are well ceiled with boards, handsomely painted, which makes them warmer, safer and better for patients than those with plastered walls, the upper part of the door opening into the hall from each room is open lattice work so that the patients can look into the hall and constantly be seen through it. The window which lights each room is strongly secured by a lattice shutter, so opened that the patient can look into the yard or garden. If he is disposed to tear his bed or bedding they are removed from the room during the day." The windows had double iron grates, one of cast and one of wrought iron, and in addition a wooden shutter, and all those rooms were in the basement.

In the wings subsequently erected strong rooms were provided. These were lined with heavy planks and the windows were guarded like those previously constructed. Part of the doors were strong heavy wood with glass in the upper part for a point of observation, and others were made of heavy oak slats, or open frame work, and some of them were lined with boiler iron, firmly riveted, and a padlock

put on in addition to an ordinary lock. Even in the ordinary wards there was firmly anchored in many of the rooms an oak plank to serve as a seat which could not be used as a weapon, and at the end of each wing, where the disturbed classes were to be cared for, there was an inclosed yard for exercise, forty feet square. All these arrangements undoubtedly represented the foremost ideas of that period, and the institution was placed under the charge of Dr. Amariah Brigham, one of the ablest medical men at that time engaged in the care and treatment of the insane, and they were simply introduced because it was believed such strength of structure and such arrangements were necessary. The projection and construction of the additional wings containing a number of strong rooms in the basement similar to those described in the original structures, by Dr. Brigham, after he had assumed the charge of the institution, is conclusive proof that he believed that such requirements were both wise and humane.

In addition to the rooms already mentioned, there were twelve special "strong rooms," six for each sex, "to afford accommodations to some of the most noisy patients requiring seclusion." They were not built in the basement, but a story above ground, in a block of buildings used for shops, etc., but attached to the other wings. They were seven feet by nine, built of heavy brick walls, laid up in cement and plastered with cement, the floors also being cement laid upon brick arches. They were constructed without any windows, but in the center of the building, with a corridor passing entirely around them, the light and air admitted, not directly from the outside, but from the corridor through the slatted doors. These doors, like those of the other strong rooms, were an open frame-work of oak, and in the wall of each room there was a small opening, six by ten inches, lined with heavy oak plank and guarded by an oak door opened with a lock. This aperture was designed to pass in food and drink without the necessity of opening the large door.

This, however, was only one phase of the institution; it was the exceptional side of this great charity of the State. The humane care of the classes for whom all these, now to us, extraordinary, painstaking, and expensive arrangements were made, was a great problem which experience only could solve. These arrangements were not inconsiderate and inhuman; they were determined upon deliberately, after the most careful consideration by Dr. Brigham and the commissioners, who were men of the highest character. These "strong rooms" were not erected as "abodes of cruelty," but were simply expressive of the belief of the best people at that time in regard to the dangerous character of the insane and the necessary provisions required for their safety. Some of those rooms, in the basement, remain as they were, except the heavy locks. They have long been used as store-rooms.

I have said this was only one phase of the institution. To be sure it is that one phase which always stands out, and by which the inconsiderate would be most likely to judge of the whole. The problem

was then, as now, how best to ameliorate the condition of the insane and especially of those cases where the disease manifests itself in violence of speech and conduct, and disregard of the proprieties and decencies of life, to secure against violence the most troublesome and dangerous as they were then considered, were kept much in their rooms where they could be observed through the open-work frame doors. This was the case when I entered the institution in 1850 as an assistant. A number were then confined in the strong rooms, and only taken out for short periods, and these took their meals in their rooms, for in the most disturbed wards there were no dining-rooms. Restraints were freely used as then deemed necessary.

Yet from the opening of the institution in January, 1843, to 1850, ameliorations were going on, and elements of comfort were being constantly introduced, the medical aspect of insanity was receiving attention; the American Journal of Insanity was projected by Dr. Brigham, the first journal of this kind founded. An association had been formed by the medical superintendents of America with a view to discussing this broad subject, and elevating the standard of the care of the insane; newspapers, books, and other reading matter were introduced into the wards, with games such as checkers, dominoes, etc. The nucleus of a library had been formed, and the amount of seclusion had been lessened, a certain proportion of the strong rooms had been discontinued, or used simply as ordinary rooms. In every direction science, experience and humanity were moving together toward improvements, increasing the comforts of the patients and the means of recovery.

In 1851 the "Opal" was started, a publication the contributions to which were from the patients, the proceeds being used for books, amusements, etc. With the permission of Dr. Benedict, who was then superintendent, I went to Boston, New York, Philadelphia and Washington, and personally solicited books from publishers and others, and secured in this way 1,129 volumes. In 1852, being then in charge of the male department, by permission of the superintendent, I had a small portion of the most disturbed ward set off for a dining-room, and on a given day took out every man who was in seclusion and brought them all into the dining-room where we had knives, forks, and other ordinary table furniture, remaining myself with the attendants while the patients took their meals, until it was considered safe. From that day seclusion was banished, and the strong rooms used thereafter only as ordinary rooms, and as speedily as possible remodeled. Since then no person has been secluded except temporarily for extreme noisiness, or on account of some illness. In connection with this movement, large airing courts were arranged, and all this class of patients were permitted to go out, and, as a further result, very soon a large number were taken out to work and all restraints were lessened.

Though the question of occupation had been much discussed, it was practically limited in its application to a small proportion of the patients, and no record was kept of what was done; in fact the whole

question was then in its infancy. Dr. Brigham, as his annual reports show, had appreciated the value of labor, and had recommended the erection of work-shops, and in 1847 he says, under the head of "shops, farm, and labor": "They are found to be well-adapted for the purposes for which they were designed, and give us ample room for shops and other purposes. Thus we have a plumber's and painter's shop, two for joiners, one for tailors, one for shoemakers, and two rooms for printers, and other rooms for sewing, mattress-making, etc. In all these patients are more or less employed."

Undoubtedly these small apartments then and for some time afterward considered ample, fully represented the ideas of labor at that period. These were beginnings, and though small, as I look back upon them, they seemed large then. They were indeed great advances, for it must be kept in mind that it was comparatively a new thing for the insane to work, and it was quite natural that what was done should be made the most of. As experience showed, from year to year, what might be done, occupation became more and more extended and systematized.

As I have stated in the thirty-fourth report, when appointed an assistant in 1850, among the duties assigned to me was the charge of the occupations, amusements, schools, labor, etc., and I noted the influence of these means on the bodily health and mental condition of the patients.

In 1851 a system of improvement was commenced on the farm, garden and grounds; and during 1851 and 1852 over twenty-five thousand tile were laid for the drainage of the garden and farm, making over five miles of under drains, and an open water-course carried through the grounds some two thousand feet, into which the under drains could empty. The front grounds also, some ten acres, which had been in a rough state, were worked over, subsoiled, graded and then tile-drained. All this work, together with the ordinary work of the farm and garden, was done largely by patients and attendants; and I personally supervised it, being part of each day with the patients for the very purpose of observing the effect of occupation, and the character and amount of it which would seem most advisable.

Following upon this for several years, extensive alterations and repairs of the buildings were made in connection with the introduction of steam heating and forced ventilation; and in such work as carrying out rubbish and in assisting in the unskilled part of the labor, patients worked with the attendants. From this time forward in the farm and garden work, making roads and keeping them in order, grading about the premises, keeping in order the lawns and grounds, the patients, with the attendants, have done all the work that has been deemed proper. In 1861 we established a system of organized labor in the Asylum, at the same time instituting a series of records of the same, which have been kept ever since. Previous to that period I had given much consideration to the subject, and to the importance of practically carrying out such physical and mental occupation as would be beneficial to the patients and at the same time

promote the public interests. I had come to regard the word "occupation" as much more applicable to the needs of the sick than the word "labor." As I have stated in a previous report, "occupation for the sick is any thing in the nature of labor, exercise, amusement, reading, talking, looking at objects in nature, or at pictures, or indeed any thing that for the time takes wholly or in part the attention of the patient," not confounding occupation with laborious physical work; but giving it that wide application which is needful and useful in an hospital or institution of any kind for the sick, insane, or infirm; and further, as stated in previous reports, "the great majority of those admitted to this institution are overworked and under-nourished people of both sexes. Many of them are old, and others are feeble and suffering under chronic diseases and infirmities. They, indeed, need rest more than work, rest of body and rest of mind. When we look at the causes which lie at the foundation of the mental disorders in the vast majority of cases that come here, we can well realize this truth. These underlying causes too are largely traceable to the toils, anxieties and sacrifices in the discharge of the legitimate duties and responsibilities of life, and only in a minor measure to dissipation and vice. I repeat, the most need rest and suitable occupation for the time, in the nature of diversion rather than labor, of which latter they have had too much."

During my visit in Europe the present year, I made the question of occupation a special point of inquiry and observation in connection with the institutions I saw, and in conversation with prominent men in the specialty. Without going into details, I am well satisfied, as a result of such inquiry, that labor is quite as thoroughly carried out here as in the institutions abroad. Furthermore, among the best men there, labor, or more properly speaking, "occupation" for the insane, is understood in the light in which I have heretofore viewed it, and have heretofore represented. Tailoring and shoemaking are more largely represented there than in this country, but they admit a larger proportion of that class of operatives than we do here. The occupation most sought after, and considered the most beneficial, was that which could be accomplished out of doors in the open air. I saw there bodies of patients going out to the farm and garden, and others walking about the grounds, also about the shops and barns, presenting the exact counterpart of the daily summer life of the institution here. I saw the labor records of some of the institutions where it may be said special attention had been given to out-door work and exercise, and they were about the same as those that had been kept here for a series of years. Their ornamented grounds, their tennis and other games, their amusement halls, etc., showed that it was not all work; and that they endeavored to carry out in these institutions, in some measure, the enjoyments of outside life.

In 1865 I wrote, "I have no doubt of the great value of labor as a curative means, but it requires care to determine who shall work and how much work each may do. As among men everywhere, so

here it sometimes happens that those who would be better for labor are lazy and selfish, and will say, 'I pay and will not work,' or 'the county pays for me and I do not wish to work.' These instances are comparatively rare, and when attendants themselves are thoughtful and industrious there is little difficulty in getting all to work who should do so. Indeed, if not guarded many would over-work. It must be borne in mind that the average day's work would not be over six hours, or less, and that the workers are not able-bodied men who can accomplish an ordinary day's work. I am well satisfied from long and careful observation that from 22 to 25 per cent would be the highest estimate of six hour workers who could be depended upon. Some might work eight or ten hours, while others could not work over two or four and maintain their bodily health." What I said fourteen years ago, experience has justified. While the tabulated statements show a larger number than 25 per cent of the population did some kind of work, I am satisfied that the true average of labor would not be over 25 per cent of six-hour labor per day.

In reviewing and presenting this subject in a previous annual report, I said: "I am well persuaded that the system adopted is correct and humane, and only needs expansion and perfecting in details." This is what we have constantly been doing. From the beginning we have kept ever before us the fact that the patients are sick people; that the institution is an hospital for their care, their comfort and recovery; and that all responsibility touching their exercises, labor and care, in every way, as well as the responsibility of their medical treatment, must be entirely in the hands of the medical staff, and must be directed in accordance with the varying condition of each patient; and the constant recognition of this, and the application of such principles makes the institution what it was intended to be, an hospital for the sick and not a work-house. As experience shows the way, we have sought to utilize all the means and sources within and around us for the benefit of the patients. No year has passed during which we have not added something toward improving and beautifying the institution and its surroundings, and multiplying the resources which contribute to the happiness and welfare of those whom the misfortunes, accidents, trials, duties and afflictions of life have committed to our care. Our endeavor has always been to make the institution assimilate to home and ordinary life as far as possible, and to take away from it institutional peculiarities. These I consider the true methods of occupying or employing patients in such an institution as this.

Among the subjects to which I gave particular attention in my visit to Europe was that of restraint. Not the question as to whether restraint should be used, as that is an indisputable proposition, but whether it should be, as practiced by many of the most prominent British alienists, by the hands of attendants, holding and restraining, or by certain mechanical means. The uses of restraint in this institution, as has been announced in previous reports, are as follows: 1. In cases of suicidal disposition, where it is so determined and persist-

ent that watchfulness will not insure the necessary safety. 2. Where there is determined and persistent disposition to self-maiming, or exposure, or denuding of the person, or self-abuse. 3. Where there is great destructiveness or violence toward others.

In 1860 I used the following language:

"Restraint and seclusion *per se* are inadmissible. As means of treatment they should be recognized according to their remedial value."

This I reiterate as the basis upon which I would still use restraint, and I would prefer, wherever it is necessary, to be used for any length of time, it should be by the simple means of the camisole, waist-belt, or mittens, rather than trust to prolonged holding by attendants. I have no hesitation in saying that so used restraints are a merciful provision and contribute to the protection of many cases against themselves, from the violent and often dangerous propensities in the disease. I saw no camisole or mittens in the institutions I visited in England, but I saw strong dresses, fastened with lock buckles, precisely such as we are in the habit of using here, and also what they called "ticken" dresses. I saw restraint in Scotland. I saw a variety of restraints in the French and other institutions which I visited on the continent. I also saw what were called "strong rooms" and "padded rooms" everywhere abroad; saw patients in them and heard what could be said in favor of, and against them. I should prefer the use of the covered, or as Dr. Lindsay of Scotland calls it, the "protection bed," to the strong rooms for excitable feeble patients. In the former, the patient is locked in the room where he can only be seen by the night watch, by opening the door, and unless he is making some noise it cannot be known whether he is asleep or awake, or whether he is exhausting himself by standing up or walking about the room, and whether he needs any assistance or not. With the covered bed the room door is left open and the night watch can hear and see the patient every hour through the night and administer to his wants.

In the 18th annual report, 1860, the covered bed is thus described:

"This bed is constructed like an ordinary child's crib, with the addition of a slatted cover. This arrangement does not interfere with the movements of the patient in rolling from one side of the bed to the other, or moving the limbs in any way. It merely prevents the patient from sitting up or getting out of bed. As the sides and top are open, the air circulates as freely about the body of the patient as in an ordinary bed. Restraint in a horizontal posture is used in cases of exhaustion where the physical health of the patient demands that he be kept in bed. The medical thought involved is readily appreciated. Sick people ordinarily lie in bed under the advice and direction of the physician, but the same class when insane will not always do so, and these arrangements are to effect this end."

Of restraint generally I then said:

"We look upon restraint and seclusion, directed and controlled by a conscientious and intelligent medical man, as among the valuable

alleviating and remedial agents in the care and cure of the insane. That they are agreeable in their application or use, either to the physician or patient, no one will maintain. Indeed, few, if any, medical prescriptions are agreeable. The bitter of nauseating draughts, the abstinence in diet, the seclusion of the patient to the sick room, and the exclusion therefrom of friends, are prescriptions for the cure of disease, as are the knife and appliances of surgery, and they are adopted and prescribed as such. The physician who would not administer the best remedy, because it might offend the taste, or the surgeon who should not use the knife, or other means, bscause he might thereby cause pain; or the obstetrician who would lay aside, under any such consideration, the remedies required in critical cases, would be unworthy of the profession, and the confidence of the public.

"We have been led to these remarks, first, because the public and those who have friends in the institution are interested in knowing the general and special means and appliances for the proper and humane care of those, who, by reason of their disease, are unable to care for themselves, or remain in their families; and, secondly, because in this branch of the profession, especially in Europe, and to a small extent in this country, there has been a movement toward the substitution of the hands of attendants, padded rooms, seclusion and depressing remedies for mechanical appliances; any and all of which are, in our opinion, more uncertain in results, and more liable to abuse than restricted mechanical treatment."

EXHIBIT No. 42.

Custody and Treatment.

The proper control of the insane has been a problem at all times difficult to solve satisfactorily. The great difficulty of the problem lies in the fact that in their care or treatment there is, from the first, interference with personal liberty. But the disease itself being a dethronement of reason, leaving its victim to the impulses of his own emotions and passions, renders him not only dangerous to others, but incapable of taking care of himself. Therefore, as a matter of necessity, society has protected itself by the summary and secure confinement of the lunatic, and laws have been enacted to carry out this purpose. The next step was the care of the property that any lunatic might possess, the State thus becoming his guardian. The English statutes first placing the lunatic under the care of the State were enacted in 1272, in the reign of Edward I.* And from that

* In the reign of Edward I, 1272, a statute was made giving to the king the custody of idiots and insane persons and in the subsequent reign an act was passed "De Prærogativa Regis" in which their rights were further guaranteed.

"The king shall provide, when any that before-time hath had his wit and memory happen to fail of his wit, as there are many *per lucida intervalla*, that their lands and tenements shall be safely kept without waste and destruction, and that they and their household shall be maintained comfortably with the profits of the same; and the residue shall be kept for their use, to be delivered unto them when they come to be of a right mind."

time forth the rights of the insane were under the care of the crown. There has been since that period scarcely any question as to the right and humanity of restraining the insane by law. This legal restraint at the same time has guaranteed more or less their protection and treatment. Institutions for their reception, their care and treatment have grown out of this exercise of guardianship which the law has assumed, whether public or private. State institutions are the highest expression of this provision of law. They constitute the means devised by the State to carry out its will in the confinement, protection and treatment of its wards. The law undertakes to say what classes of persons shall be so confined; how the question of insanity shall be determined in every case; and designates the officers to conduct the inquiry; and prescribes all the forms of law necessary to confinement, treatment and discharge. As far, therefore, as the law is concerned, the restraint is absolute, the law governing and controlling the insane in a degree measured solely by the degree of loss of self-control or the measure of responsibility. The fact that insanity is manifested in such a wide range, in loss of self-guidance and self-control and power of self-protection from the slightest to to the most complete degree of helplessness, makes the problem of adapting the law to each particular case a difficult one; but, nevertheless, the law of this State leaves the determination of the question, as far as it relates to confinement in asylums, to the judgment of *medical men*, of prescribed qualifications, subject to the approval of the courts. Each State institution has a board of managers, who are the legal guardians of the institution, and all its concerns and its inmates, who are appointed and removed conjointly by the Governor and Senate; and they are authorized to make all needful and suitable rules and regulations for the administration of affairs; and are to appoint and remove those who are charged with the immediate administration and the personal care and treatment of the insane.

Of the commitment and treatment of the insane in this State the statutes are very specific, very simple, and very clear. No difficulties have occurred in connection with any of the patients brought to this institution since their revision and codification in 1874, although since that time more than 2,500 persons have been admitted. Creating asylums by statute is an acknowledgment of the wisdom and the necessity of restraint upon personal liberty. There is no power except that of the State which can interfere with the personal liberty of the individual, and this in regard to the insane grows out of the manifestations of the disease itself, and is quite as much a matter of protection to the individual and for his cure as to the safety of the public.

Thus far there seems to arise no question as to the necessity, wisdom and humanity of restraint, though the law takes the insane from their own homes, out of the care of their own immediate families, and places them in the hands of its own agents. All this is done for the double protection of society and the individual, and for the welfare especially of the latter, securing to him the chances of

recovery from his disease or its alleviation as far as possible, or his proper care if the disease persists.

To what extent this restraint of his liberty shall be exercised during his residence within the hospital, and who shall be responsible for the exercise of that restraint, are two of the most important questions to be considered. They involve primarily the original question of protection of the person against the manifestations of the disease with which he is afflicted, and the comfort of those about him with whom he is necessarily associated. These necessitate an organization to carry out, as far as practicable, the order and discipline needful to secure the highest personal good of all those confined within asylums. Whatever the rules and regulations may be to secure these ends, they must be carried out by individuals. The question, therefore, of restraint assumes the most difficult aspect at this point where it must be exercised under personal responsibility and control. How far can the insane be left to themselves, how far can they be guided by persuasive measures, and how far is it necessary to control their wills by the will of another? If they can guide and control themselves, hospitals are not necessary; if by simple persuasion they could remain harmless in their own homes it would be superfluous to remove them. It is because they can neither be left to themselves, nor to persuasion, that the law has stepped in and authorized control. The history of the disease leaves no room here for argument. How to exercise these three conjointly in the most judicious, wise and kindly manner is the problem that enters into the organization and the constant conduct of any institution. Without this personal direction an institution would be a scene of chaotic disorder, exhibiting the ungoverned and undirected delusions of its inmates, with violence, indecency and indifference to personal habits. With this personal direction and constant vigilance, an institution shows in the main order, peace and scrupulous care of person. A well-organized hospital, therefore, should represent the *maximum of personal freedom* which the disease will allow, and the *minimum of restraint* which it compels. While under such organization the patients will in general need nothing beyond such personal guidance as has been spoken of, but there will always be certain exceptional cases in which the disease at times will manifest itself in such severity, that the victims will disregard all rules, all persuasions, all proprieties, and will require physical restraint to protect them from injuring others, from indecent exposure, and from becoming the victims of debasing passions. What means shall be employed in the exercise of this necessary physical control in such cases? Shall it be by direct physical force at the hands of those in immediate charge of the patients? Shall it be by placing them in solitary seclusion, allowing them free play in their ideas and conduct; or shall it be by certain appliances in the form of modes of dress, or such other simple appliances as still protect them, and yet keep them in the constant presence of others and of their attendants? The question reduces itself, therefore, as far as direct physical restraint is concerned, to that of personal or mechanical means.

Nothing more strikingly illustrates the prevailing tendencies to push theory to extremes than the history of this question in regard to the use of physical restraint in the custody and treatment of the insane. So rapid has been the comparatively recent progress of medical science that the practice of hardly more than a generation ago is already associated in our minds with many features of the "dark ages," when insane persons were regarded simply in the light of dangerous beings with an incurable disease upon them, whom no person could approach without risk. Confinement was the harsh and solitary imprisonment of a cell, and all the means of physical restraint had reference mainly to protection against their violence. We need not go through the history of this period, or of the gradual progress to the present views in regard to the disease, and the modern institutions for its care. The question we would propose to ourselves, therefore, is whether, having so far modified direct physical restraint, it would be judicious or right to abandon it altogether. Whether it would be in the way of progress to relinquish what are called mechanical appliances, and resort only to personal physical force in the exceptional cases requiring to be controlled? For I assume that no man, short of a fanatic, would advocate the policy of leaving the lunatic entirely to himself; and really, the substitution of solitary seclusion for the present mild forms of restraint is simply retrograding toward the very barbarities from which the lunatic has in modern times been rescued.

To illustrate — whether the determined suicide should be continually watched or held by human hands, or whether he should wear a mode of dress restraining his hands, or a simple strap about his waist, by which his arms are restricted to limited motion, or whether he should have his hands encased in mittens, or as our English brethren say "locked gloves," to prevent the numberless mischiefs which a man's hands can do when beyond the control of reason. The exceptional cases where restraint is necessary, either by force of attendants or by the physical appliances indicated, form but a small proportion of the insane, but as a matter involving a great principle it is just as important medically and as important for the individual as though every insane person required one or other of such measures. I have given this subject the most careful and conscientious consideration and review during the past thirty years, and in my annual reports from time to time have set forth the actual practice in this institution, describing the exceptional cases, and the means of restraint used. Twenty years ago I said:

"Restraint and seclusion *per se* are inadmissible. As means of treatment they should be recognized according to their remedial value."

The class of cases in which mechanical restraint is here used are:

First. Cases of suicidal disposition, where it is so determined and persistent that watchfulness will not secure the necessary safety.

Second. Where there is determined and persistent disposition to

self-maiming or injury, or denuding of the person, or debasing self-abuse.

Third. Where there is great destructiveness or violence toward others.

The means of restraint we use are the camisole, the waist-belt, buckskin mittens, and in rare instances the leather muff. No means of restraint are ever applied, except in each instance by the order of a medical officer.

That the three classes of exceptional cases exist among the insane in every country, no one who has seen any thing of insanity will deny. In small institutions, where the patients admitted can be selected, such cases might not be found ; but in institutions where all classes and conditions of the insane are received, they will be found, especially in acute mania and melancholia. As already stated, the question simply resolves itself into how they shall be so controlled as not to injure or improperly expose themselves or injure others. No person having any familiarity with the insane, or any correct views of the modern treatment in hospitals would, for an instant, think of punishment in connection with these helpless classes. The necessary restraint of such persons, whether by the physical force of attendants or by mechanical means, implies only preventive measures in the sense of actual and necessary protection, and the question can only be properly argued from a strictly medical standpoint. No physician, conscious of his responsibility to his patients, could abandon them to themselves in such a perilous and irresponsible state from any mere sentimentalism or love of notoriety. Necessary vigilance and control must be exercised, either by the means already stated, or by putting the patient under the influence of drugs. After faithful trial in the same class of cases of restraint, by the hands of attendants and by the mechanical means above mentioned, I am forced to the opinion that the latter method is judicious, safe, less irritating, and less painful to the patient. After visiting Europe, where there has been much more discussion upon the subject than in this country, and where the most earnest efforts have been made to limit, if not to abolish, all the means of restraint, applied to the hands, arms, etc., and after seeing persons held by attendants, seeing them in strong rooms and in padded rooms — all these actually being only different means of restraint — I still prefer the camisole, belt and mittens, where the patient is kept in the presence of others, to either of the forms of repressive seclusion, or to the personal coercion by the physical force of attendants, always bearing in mind the principle of guidance I have laid down, the maximum of personal freedom which the disease will allow, with the minimum of physical restraint which it compels.

There are feeble, anæmic cases of mania and melancholia, and certain cases of general paresis and paralysis, which are so indifferent to their personal needs and so incapable of self-guidance or self-control that the ordinary arrangements of associate dormitories or single bed-rooms are inadequate protection ; and others again, whose

delusions are of such a nature as to lead them to disregard their necessary comfort and welfare. Though they absolutely need rest in bed in a horizontal position, they will not remain in bed, but be about their rooms standing up, walking, exerting themselves in various ways as their morbid fancies may suggest or their delirium drive them. These patients must either be watched and held in their beds by attendants, or fastened in their beds by some physical measures, or placed in covered or protection beds, or left alone in their rooms to wear out and exhaust themselves. As I said in my annual report twenty years ago, "feeble, anæmic sick people ordinarily lie in bed under the simple advice of the physician, but certain of the insane, in the same physical state, will not do so." For these we use the covered bed, or, as Dr. Lauder Lindsay, of Scotland, calls it, the "protection bed." I have, in several annual reports, mentioned and described this bed as like an ordinary bedstead, with sides like an ordinary child's crib and a slatted cover. These beds have a wire mattress and ordinary mattress and bedding, making a most comfortable spring bed, and they are so roomy that the patient can turn and roll about and make all the movements that he could in any bed except that he cannot sit up or get out of bed. At night the room door is left open so that the night-watch can see the patient without the noise of opening a door, and can administer to any wants. This method of securing horizontal posture for rest and sleep in such cases is, in my judgment, more humane and kindly than locking them in strong rooms with mattresses on the floor, or in padded rooms with the same arrangement where they are necessarily left to themselves, or than holding by attendants, or fastening them to ordinary beds by sheets or by what is known as the "bed-straps," * which some seem to prefer to the covered bed.

In obedience to the instructions of your board, I lay before you the latest opinions of European alienists on the question of restraint, in Germany, France and England. The declaration of the German and French superintendents are taken from the published transactions of the German Psychiatrical Society at Berlin and Heidelberg, and from those of the Medico-Psychological Society of Paris. In regard to the practice of restraint in English asylums, the facts presented are taken from the last annual report of the Commissioners in Lunacy. These utterances are the latest and most authoritative on the subject, as they come from men prominently associated with the management of asylums and the treatment of the insane. I quote

* The bed-strap consists of a leather strap, about eighteen inches wide and twenty-two inches long, with a center and two side straps at the top, and two long straps at the bottom, and one about the middle of it. The central top strap is fastened to the head of the bed, and the two bottom straps to the foot; the patient is then placed on the cushion; the middle strap is passed about his waist, and the two remaining straps at the top passed forward diagonally across the breast, and buckled to the waist strap, thus confining the body of the patient to the cushion. Two bights or anklets move on rings on the straps attached to the foot of the bed. These are buckled around the ankles and attached to the straps going to the foot of the bed to regulate, and in a measure restrain, the motion of the feet.

fully with a view of giving as clearly as possible their views in their own words, especially where definite opinions were expressed.

Dr. Heinrich Schüle, the well-known superintendent of the asylum at Illenau, Germany, in the second German edition of his handbook of mental diseases, 1880, discusses this very class of cases, in the chapter in which he treats of restraint.

"Rest in bed for highly anæmic patients. With these must be included a great number of emaciated melancholics, with feeble pulse, cold extremities, and little power of assimilating nourishment. The horizontal position, rendering possible an increase of blood supply to the brain, together with the invigorating influence of the warmth of the bed, acts as the first and most rational means of quieting the patient. Anæmic maniacal patients, also, who exhibit the same enfeebled state of circulation, are often very quickly quieted when we succeed in keeping them in bed. * * * Do these patients, however, for which rest in bed seems to be imperative, really stay in bed? This leads us to the question of the admissibility of mechanical restraint."

The author then, while favoring non-restraint ideas, which, he says, should be the leading principle in the treatment of the insane, remarks that, though this system has had great success, it has also led to extremes, and adds:

"It has been attempted to elevate this 'free' treatment to an absolute dogma, with an exception in surgical cases. In this lies, in my judgment, an extravagance which in special cases can hardly be more mildly criticised than was formerly the opposite extreme. There are morbid psychical symptoms which demand an imperative intervention, and against which the 'non-restraint' system struggles in vain." He refers to certain cases of chronic mania and of strongly marked melancholia, and asks where is there any "adequate protection" against the uncontrollable impulse to various forms of self-mutilation? And adds, "shall there stand day and night for weeks a double watch of attendants, and is this indeed a sufficient protection? Does this rather not excite the patient still more? Such cases must be witnessed with an earnest desire for 'non-restraint,' and while in possession of an able corps of attendants, in order to bring home the practicable limits of this 'free' treatment. Like instances could be greatly multiplied, and even aside from these cases of self-injury, there are cases among the female patients which in the interests of decorum and decent behavior will at all times impose a duty even upon the most enthusiastic 'non-restrainer.' This is not the place to enter more closely into this detail of asylum practice which, for some years back, has so unnecessarily agitated some minds. Let us confess it candidly; true 'non-restraint' lies in the spirit of the medical treatment in general. If this be directed by pure humanity, so that, in every detail, we are conscious of meeting the various phases of the disease only, and always by the most intelligent means of combat and tranquilization, then will the appropriate modification suggest itself in each individual case. The phy-

sician then, in his earnest desire to carry out the 'free' treatment system, will proceed to the utmost limit, yet he will not consent to be so far misled by the love of a dogma, to jeopardize the interest and welfare of his patient. The conscientious asylum practitioner, with a patient in a state of acute delirium, who threatens to exhaust his powers to the verge of death, *must* employ restraint, and if it cannot be otherwise, patiently bear the anathema as long as his opponents are unable to reveal the secret of meeting this life endangering waste in a more reasonable manner, for the patients are placed in our care for cure and not for mere observation."

The *Zeitschrift für Psychiatrie*, vol. XXXVI, contains a discussion on the subject of restraint which took place at a meeting of the German Psychiatrical Society in Berlin, in June, 1879. The discussion was opened by Dr. Schäfer, who started with the proposition that there could be no question as to restraint in the wider sense of the word. It is implied in the structural arrangements of asylums, inclosures, seclusion-rooms, etc.; in the arrest and transfer of insane patients to hospitals; in many cases of sickness, and in surgical operations where patients cannot be allowed the free use of their limbs. The only question is as to the degree, mode and extent of the forms of restraint to be resorted to. The personal experience of all may not agree, each one may view the matter from his individual standpoint; we may treat the subject in two ways: Either by collating isolated facts, or by laying down general principles. The old barbarous mode of treating lunatics has given away to the advance of science and humanity, and the improvements in buildings and in medical treatment, which has rendered *less* restraint necessary. Restraint in itself is considered an evil; but it is not yet proved that it would be for the welfare of the patient to dispense with even its occasional application. Dr. Schäfer adds: "The avoidance of mechanical restraint may do positive harm, first, by putting the patient in a position to injure himself, and second, by the prejudicial effects in certain circumstances of the substituted means, such as the long continued use of narcotics, constant watching and restraint by the hands of attendants, all of which may do more harm than the application of mechanical restraint. If it be said that unless we make *complete* disuse of restraint, there will be temptation to resort to it unnecessarily, this reproach applies equally to all therapeutic measures, as all may be abused. A good physician appreciates the value of perfect liberty when he can give it, but also knows how to avoid its disadvantages where occasion requires. All agree in using only the minimum of restraint that is necessary. On this principle there will be little difference in treatment in different institutions."

Dr. Ideler thought absolute non-restraint was impossible. He referred particularly to cases in which there was a tendency to self-injury and where restraint was indispensable.

Dr. Jastrowitz held that the diversity of opinion in regard to non-restraint was due to the diversity of definition, each man interpreting for himself the meaning of the term. He thought it better, there-

fore, to enter upon the subject *practically*. Non-restraint did not mean that the patient should have his own free will, no one regarded isolation as restraint, nor could one question the propriety of applying restraint in cases requiring surgical treatment, or as a means of saving life in patients who refuse food. The clothing of patients with untearable coats and dresses, or with unremovable gloves or mittens, could not be regarded as restraint, the gloves did not really constitute mechanical means, because they did not prevent the free use of the extremities.

Dr. Tigges found non restraint in vogue when he entered the Sachsenberg Asylum, and continued its use with but few exceptions. He confessed that he had doubted whether it was always in the interest of the patient to pursue the non-restraint system. He spoke of narcotics as being a most important means of support in carrying out the system, such as morphia, chloral and a combination of morphia and chloral. By using these within bounds, accidents could be avoided. As instances in which non-restraint was apparently fraught with disadvantage, he mentioned cases of pneumonia in winter, in patients of lowered vitality. It was impossible to avoid decrease of temperature during the night, and this was the cause of death in such cases, so that at the *post-mortem* one could not reject the scruple that the patient's life might have been saved by keeping him in bed by mechanical means. He cited the case of a madman who had murdered his wife, and who threatened physicians and attendants with violence, so that all stood in awe of him. He was put in seclusion, and narcotics could not be used in any form. Under the development of delusions and hallucinations, he became so fond of this isolation that all attempts to bring him among others were answered with the same violent threats and acts. This state of affairs lasted three or four years. In this case the idea forced itself upon one that by using the strait-jacket it would have been possible to bring this man among his fellow patients, and by the use of enemata render his entire surroundings more human. Surgical cases and forcible alimentation constituted the exceptional cases in which he had used restraint. He cited five cases of death, from patients jumping out of windows without protection.

Dr. Edel had no doubt that non-restraint was the leading principle in the treatment of the insane. There were exceptions, however, in which the temporary use of restraint by means of gloves, waist-straps, and even the strait-jacket, was indicated. These were: First, in the transfer of acute maniacs; second, in cases of injury; third, in dangerous patients, whose delusions constantly compelled them to aggressive acts; fourth, in disturbed paretics, to prevent self-injury.

Dr. Müller did not think it right to regard mechanical restrains as preposterous. The alienist was justified in using it, as occasion required, no less than the practical physician, the surgeon and the clinician.

At a subsequent meeting of this society, held at Heidelberg, in

September, the discussion of restraint was resumed. Dr. Westphal opened the discussion, and expressed himself as strongly in favor of the views of Conolly being carried out as regarded all mechanical restraint, which he maintained were based on humanity, but added that there were alienists equally humane who could not concur in Conolly's views. It seemed as if the advocates of non-restraint had, as it were, "taken a lease of humanity," which he considered a wrong standpoint from which to regard the question. Humane impulses in the treatment of insanity were to be found everywhere, and the question was, "What were the best and most appropriate means of treating certain patients?" He would put the question in these terms: "First. Is it possible to further develop the present state of science in relation to the treatment of certain forms of insanity to the point of abolition of all mechanical restraint? Second. Is the abolition of all coercive measures of advantage in the treatment of the insane, or does it involve such disadvantages, in view of which, we ought not to make the attempt?" These questions had been theoretically discussed *ad nauseam*. Such dicussion was, however, wholly without value, as a settlement of the question could only proceed from actual experience. He states that in his own personal experience he had abolished all mechanical restraint, though in Germany, opinion was divided on the question whether it was advantageous to entirely abolish restraint or to retain it for a certain set of cases apart from those which were surgical, which he declared Conolly himself had excepted, while adding that those who had entirely dispensed with it were of opinion that neither necessity nor advantage justified its partial use.

Dr. Nasse declared himself in the main in accord with Westphal. He took exception, however, to the designation of non-restraint as a special system; the mildness of the system of Conolly had been exercised before that reformer's time; the peculiar feature of Conolly's proposition was that he insisted on the absolute abolition of every mechanical physical restraint. The idea of abolishing all restraint in the treatment of the insane could not be entertained. He claimed that the unconditional acceptance of non-restraint was fraught with danger, and said that in England, in many places, medical freedom of treatment had been compromised by the encroachments of the laity on this account; that non-restraint was merely apparent and not an actual fact. He stated that while he was an advocate of the abolition of mechanical restraint, he believed that "exceptions were indicated where restraint must be used. These were surgical cases and diseases of the eye; persistent self-injury; excessive self-abuse, especially in women; cases where patients obstinately remain out of bed and stand on their feet to the point of œdema; cases of extreme anæmia which need rest in bed; patients who persistently occupy the kneeling position to the point of creating a slough; cases of excessive motor restlessness in sick, feverish patients, etc., as in melancholia agitata, and the acute delirium of paretics; those rare cases in which the patient himself

begs for restraint to prevent self-injury; in forcible alimentation." He added, it must be considered that there were cases in which the utmost patience on the part of the attendants became exhausted; cases whereby the lives of the attendant were endangered and out of consideration for whom restraint was necessary. To wholly exclude mechanical means of restraint in the treatment of such exceptional cases, he regarded as an injury to humanity. The careful use of restraint, on the other hand, he held to be the duty of the physician and beneficial to the patient. He concluded with the maxim of Dr. Yellowless of Glasgow: "Non-restraint so far and so long as it is best for the patient."

Dr. Snell considered the question of seclusion as of the greatest consequence; he said that Conolly had insisted on non-seclusion, except in padded rooms. He proposed as a substitute the holding of the patient, good feeling, etc., but it seemed difficult to him to avoid seclusion, especially with aggressive patients.

Dr. Filter maintained that he "had succeeded in abolishing all restraining apparatus. He thought that the exceptions set forth by Dr. Nasse could be treated by constant watching."

Dr. Brosius stated that the discussion had thus far not given the substitute for the strait-jack, etc.; while all agreed that the greatest possible extent of non-restraint ought to be carried out, he had abolished the strait-jacket, and had substituted a larger one therefor, to-wit, the seclusion cell, and the asylum itself, with its walled courts. He could not conceive how Dr. Filter managed in the cases mentioned by Dr. Nasse. He thought that disturbed patients could not be held day and night by attendants. Such excellent attendants were not to be had.

One great difficulty in the discussion of this subject is that the use of the word "non-restraint" appears to be contrasted in the minds of many with the general prevalence of the restraint in former times, and thus does not really mean total abolition of restraint, but only means the establishment of a rule to which restraint shall be the exception. In other words, that we should aim at the minimum, in which it may be fairly said that all practically agree, since no one would advocate it except as a necessity for the welfare of the patient himself in securing the treatment he requires. This would seem to be clearly expressed in the foregoing discussions. Even Dr. Westphal, the most enthusiastic for non-restraint, admitted the use of seclusion, though "it only occurred as the exception during the day in the Charité Asylum, and then only for a certain time." He does not say whether he would consider holding patients forcibly a matter of restraint. It must also be observed that the exception made by the various speakers really cover the whole ground, at least in principle, and that the reasons for the use of restraint could not have been more strongly stated than by Nasse, a professed advocate of non-restraint.

In this connection I would also refer to a pamphlet issued by Dr. Van Andel, superintendent of the asylum at Zütphen, on the ques-

tion of restraint, a paper read before the international medical congress at Amsterdam in September, 1879. He starts with the proposition that "the rational carrying out of the principle of non-restraint system must be adopted as the general rule." He would state the question, "in what cases and under what circumstances are mechanical means of restraint to be permitted in the treatment in the insane?" He holds that the use of mechanical restraint is allowable in exceptional cases.

In regard to the views entertained in France on the subject of restraint, we have the most recent expression of leading alienists in the transactions of the Medico-Psychological Society of Paris in March, during the present year, and published in July, 1880, in the "Annales Medico-Psychologiques."

The discussion was opened by Mr. Dagonet. After referring to the question of non-restraint which had long occupied public opinion, and to the work of Conolly, he remarks:

"One would have thought it entirely settled; be this as it may, since it presents itself anew to-day, it is right to inquire if the absolute and systematic suppression of the camisole is to be considered a step in advance, and if the means proposed to take its place in order to meet exceptional cases where its employment is rendered imperative do not constitute a method difficult to put in practice, and to be rejected at this day by the majority of physicians as being much more inhuman." He refers to the introduction of the camisole by Pinel as the substitute for the barbarous confinement of the insane. "It was Pinel who first traced with a master hand the rules for the proper application of coercive measures." "We must," he said, "accord to lunatics as much freedom of motion as is compatible with their own safety and that of others; give them liberty to run about; to expend their agitation in a closed space, limiting ourselves to the simple expression of the strait-waistcoat." He then quotes from the article in the *Dictionnaire de Medicine et de Chirurgie Practiques*, by Dr. Pain, on the camisole.

"Cassimir Pinel remarks with reason that non-restraint exists in England no more than in France; that the means of restraint only differ. The use of the camisole has been replaced by the hands of attendants and darkened rooms. It is, therefore, simply a question of comparing the advantages and drawbacks of each. Whatever form may be adopted, restraint is indispensable in a great number of cases. In order to suppress restraint, it would be necessary to abolish at the same time the delusions and hallucinations which cause these deplorable manifestations. There is certainly quite a category of lunatics, for whom the application of the camisole is an absolute necessity. No other means could be substituted with advantage." He then refers to patients who refuse food and struggle with dreadful energy and who must be restrained and fed as a question of life or death to them. "Every physician has had occasion to observe those destructive patients whose irresistible impulse to tear and destroy every thing within reach nothing can check." He says that though these are exceptional cases, if

allowed freedom of movement they would utterly destroy their clothing, bedding, etc., and adds: "To thwart this instinct of destruction, are they, when otherwise inoffensive, to be shut up entirely nude for whole weeks and months in a cell? or must they be subjected to the punishment of being held fast by attendants, whose patients cannot well be indefinitely depended upon? A suitably applied camisole is a much more practical means of meeting such emergencies. Every one has seen patients possessed during their periodic paroxysms with irresistible and persistent suicidal and homicidal impulses. They even come themselves to beg the application of the camisole, which in certain cases affords them a sufficient guaranty against their own dangerous tendencies." He then refers to a strong case in his own experience, when a young man in a paroxysm had inflicted a severe wound with a butcher knife on another person in an attempt at homicide, who had several paroxysms lasting from fifteen days to three weeks, and at such times had "himself begged to have the camisole applied," and adds, "this very simple means permitted him during his period of delirium to exercise freely and to enjoy, under suitable surveillance, the common life of the place. Would it have been better, in accordance with the new ideas which men would impress on us as progress, to have shut him up in a padded and dark cell?" He refers also to epileptics with violent and furious delirium, and after giving an illustrative case asks: "How should we have succeeded in giving him the necessary care which probably saved his life at that juncture, had we not been able, by means of a camisole sufficiently large and well-supplied, to keep him in bed? who could have wished to compel attendants, at the risk of being killed or grievously wounded, to restrain the patient day and night? These means would have been absolutely impracticable. Restraint applied by the hands of attendants is in most cases impossible, and seclusion in a dark and padded cell is a form of restraint harsher than the application of the camisole. It is prejudicial to the patient in every point of view; it prevents his taking the exercise necessary for his health, and enjoying in the open air this relative liberty, indispensable as it is to the performance of his different functions." After again stating that it should be employed in exceptional cases, he says: "Its absolute and systematic suppression, and its substitution by other means, such as restraint applied by attendants or prolonged seclusion in a cell, constitute, I repeat, a more objectionable and deplorable means of restraint, and one which is but erroneously dignified with the name of "philanthropy." He then refers to the use of restraint in England and concludes:

"Conolly wished to bring about a reaction against deplorable abuses, but to Pinel belongs the immortal honor of having put non-restraint into practice, and if he did not invent the word, he discovered the method. Since his time lunatics have been treated like all patients, with humanity, and they enjoy a freedom, relative, without doubt, but as complete as possible. According to the precepts of this great teacher, the camisole ought only to be applied in

cases really exceptional, and the means which it is proposed to substitute for it by a sort of infatuation and reaction have, from all points of view, more serious inconveniences. The English themselves are abandoning this latter method; let us render homage to their practical spirit and not seek to renew in France an experiment upon which our judgment has long since been passed, and against which our neighbors across the channel are themselves now protesting."

M. Magnan, after speaking of his use of restraint, preferred the muff to the camisole, but after visiting the asylum at Sainte Anne, says: "I was surprised to see patients in a great state of agitation, completely free. The attendants, readily excited, as you know, in the presence of excited lunatics, seemed, on the contrary, very calm. When the patients reach an inordinate degree of agitation they are shut up in padded cells" He then resolved to try the same methods, and had been continuing them, with his colleague, M. Bouchereau. This would seem to be restraint by seclusion.

M. Labite — "If we wish to calm excited patients we have only to put them into an immense court. Thus, if you put twenty into a hectare of land, they isolate themselves and eventually become tranquil. In my institution the men, who have large airing-courts, are less excited than the women, whose courts are smaller."

At the September meeting of the society, M. Bouchereau said he could only repeat what M. Magnan had said on the question at the last meeting. To questions by M. Legrand du Saulle, as to how he managed cases of suicidal melancholia, especially at night, and maniacal and epileptic furor, M. Bouchereau replied, that in his institution all patients of that category were placed together in the same ward, and during the night they were under the surveillance of two night-watches, and that "the latter patients are put in padded cells without camisoles."

M. Motet believed that the use of the camisole was more humane than that of non-restraint. "Surely it was preferable, when the patient was maniacal, to employ a mode of restraint so long in use rather than to have him held by five, six, or even eight attendants who compress the patient and cause ecchymoses and sometimes even luxations." He referred to accidents and fractures "caused by the suppression of the camisole and the intervention of attendants." He declared "the camisole, as employed at the present time, is not an instrument of torture, as people are too prone to speak of it, but its application, made in moderation and only when the thing is indispensable, was even a humane measure.

M. Luys could only corroborate M. Motet's observations as regarding himself; when he saw the struggles which take place between patients and attendants, he always gave preference to the camisole.

M. Mabille entertained the same views, and he stated the case of a patient from Ville-Evrard, with ideas of suicide, who came from another asylum with a complete loss of his hair. To preclude the possibility of a similar accident they had lost no time in applying a camisole and fixing him to a chair.

M. Bouchereau did not think that he had yet absolutely carried ont non-restraint in his practice. If he applied it in his service, it was by way of experiment and comparison with the system heretofore generally adopted.

M. Christian, at a subsequent meeting of the society where the discussion was continued, after referring to the unquestioned use of restraint by ordinary practitioners, and in ordinary hospitals in cases of surgical operations where chloroform is not used, and also in cases of delirium where persons got out of bed in the night and disturbed the associates in the whole ward, went on to ask:

"Do you believe that one would hesitate to fix him in bed and, if necessary, to apply a camisole? Indeed, families themselves, be their social status what it may, have no such scruples. When one of their members, under the visitation of disease, becomes boisterous, violent and dangerous, he is rendered incapable of self-injury by restraint; and with what gentleness this is applied, you may gather from the condition of the unfortunates who are brought to us covered with contusions and abrasions, and bearing on their ankles and wrists the visible traces of the cords with which they have been bound."

He remarks that it is the safety and interest of the patient himself which demands the restraint. "The madman must be prevented from injuring himself and others, and here we have a motive before which every other consideration must yield." He deprecates seclusion, and quotes from Pinel upon that point. After referring to the history of the reformation of asylums and the claims that have been set forth in favor of non-restraint, he thus refers to the substitutes:

"It may be a padded cell in which the patient can be abandoned to himself without fear of self-injury; gloves like those used by boxers or fencers which they apply to prevent him from injuring himself or others, or garments of a thick, substantial fabric buttoned behind, and used to prevent his removing or destroying them; or again, they may envelop him in a sheet; finally and especially, it is surveillance, a surveillance exercised every instant by two, four, or it may be six of these model attendants, who delicately seize the patient in their robust arms whenever he becomes too boisterous, and without struggle, without violence, have him glide into the padded cell."

He refers to the experience of England, Germany and Switzerland for some years, where efforts had been made to adopt non-restraint, and to the remarks of Dagonet at the former discussion, and quotes the words of Dr. Laehr: "I know no alienist in Germany who accepts non-restraint in an absolute manner. Nor is there any who voluntarily adopts means of restraint and applies them systematically," and adds:

"I venture to say that in France we are all of the same opinion. We avoid restraint as much as possible, but when it is imposed on us by force of circumstances it is our duty to apply it, for we have to protect the madman against himself, and ourselves against him.

Conolly himself was unable to do otherwise, and to attribute to him the honor of a great discovery is really to be satisfied with mere words."

He then refers to the various strictures that had been made in regard to the use of the camisole, and to his own experience at Mareville and Charenton, and adds:

"I use the camisole, but I use it as seldom as possible. On an average I have never had two per cent of patients on whom it was applied. * * * Finally it is only used on a physician's order and under his control. Not only does it not hamper the patient's movements, but it enables him to move about at liberty, and if need be, he may be afforded sufficiently free motion of the arms and hands. If, in viewing the question from its sentimental aspect, you deplore the insult offered to manly dignity by camisoling a fellow-creature, let me ask if this manly dignity is not already compromised by the fact of patients covering themselves with ordure, denuding and mutilating themselves and striking those about them? Is this any thing more than a piece of humanitarian sentimentalism?' I may say that for me, the camisole possesses one immense advantage. It prevents struggling between the patient and his attendants. Were this the only reason for retaining its use it would appear to me all sufficient." After alluding to the difficulty of always obtaining attendants who have the necessary patience and indifference to insult which is acquired only by reflection and a high sense of duty, he refers, as a last consideration, to the frequency of rib fractures and other injuries from non-restraint, and adds: "This has become so common that the question has been raised forsooth whether the bony system of lunatics is not more friable; if their blood has not a tendency to decompose. I do not know what foundation there is for this supposition. I only know that in France we have as yet seen nothing of the kind. I know that this singular alteration of the bones and blood only occurs in non-restraint asylums, and should I appear sceptical I believe that the best prophylaxis will be to dispense with the gentleness of model attendants, and return to the humane and reasonable use of the camisole."

M. Delasiauve to the question: "Is it true that the methods of treatment extolled by Conolly differ in essence from our own, or that they are at all superior," answered with an emphatic negative, and declared that there were patients who must be restrained in some way or another, and would give the preference to the camisole over padded cells and restraint at the hands of attendants. He added:

"But let it be well understood that non-restraint being the rule with us as with our neighbors, the use of the camisole only applies to the very exceptional cases where restraint is necessary."

As a practical illustration he stated that at Quatremares, with 550 to 600 patients, only from four to seven were in camisoles, which he considered "did not point to any inferiority on their part."

M. Lunier expressed the opinion that mechanical restraint might

still further be reduced with a more numerous corps of attendants; that there ought never to be less than one to every fourteen patients; that while favoring the greatest limit of its use "complete suppression of the camisole seemed an impossibility."

M. Lasègue cited two cases showing the advantages and drawbacks of the camisole. In one instance the friends of the patient, horror-stricken at the suggestion of the camisole, themselves "subsequently bound the maniac with ropes in such a manner that his wrists still bear the marks of the restraint." The other was in an ordinary hospital where a typhoid fever patient "was clumsily camisoled by a nurse and found dead on the following morning."

M. Foville fully indorsed the paper of M. Christian on the question of restraint.

From an examination of the last report of the English Commissioners in Lunacy, we are forced to the conclusion that non-restraint does not mean, in practice at least, the abolition of physical restraint or coercion, or even the abolition of mechanical means of restraint; and the commissioners have nowhere directed or even recommended the discontinuance of such measures. They use these words: "Restraint appears to be a method of dealing with the more ungovernable cases." They also apply the word "treatment" when speaking of restraint.

The memoranda or records of their visitations in fifty-nine public asylums shows that in twenty-seven of them, such mechanical means of restraint were used as camisoles, locked gloves, waistcoat, strait-waistcoat, strong sleeves, jacket, and vest. And also such expressions as "hands tied," "hands fastened to the side," and "tied and secured to the bed," and they record in one of the wards of one institution, "sixteen women who, owing to destructive habits, were wearing exceptionally strong dresses." These methods are recorded by the commissioners as being used for surgical reasons, for violence and destructiveness, for picking the face, to prevent suicide, for destructive propensities, for extreme violence, for self-injury, self-mutilation, persistent destructiveness. In five other institutions where the above means are not said to have been used, packing, either with wet sheets or dry sheets, has been used for medical reasons; to allay excitement; to prevent exhaustion; for the treatment of acute mania; and in one instance the commissioners remark for "acute mania and with beneficial results." In one of these institutions where both wet and dry packing were used three, four, nine, and even ten hours, the commissioners remark: "Considering that this is absolute restraint of a very complete kind, it is important that it be not unduly prolonged, and in our opinion should never exceed six hours continuously." In one other institution where the commissioners say restraint is rarely if ever used, they say: "The occasions on which the men were placed in the shower bath appear to have been 259; of women there are 118 entries of this treatment." This is an institution with 689 patients.

They do not record the cases held by attendants though they refer

in one instance to an institution where no restraint is recorded where they were called upon to inquire into a case on the score of "harsh and unkind treatment by an attendant," in which they exonerated the attendant, finding that the "patient had been violent, requiring a certain amount of manual control and coercion." In another institution where they speak of no instances of mechanical restraint, and where there were complaints of "ill-treatment at the hands of attendants," they say that after full inquiry they would state that "no more coercion was used than was absolutely necessary in the circumstances."

Including under mechanical restraint wet and dry packing, which the commissioners characterize as absolute and complete restraint, there are thirty-two out of fifty-nine institutions where such means are found to be absolutely necessary. Seclusion is recorded as being used in forty-nine of the fifty-nine institutions. Generally the reasons for seclusion are not given. In the report, as far as they are stated, they were for maniacal excitement, for acute mania, for violent and dangerous cases, and for violent and troublesome patients. The attention of the commissioners being called to the question of unlocked doors they make this remark: "The question of having unlocked doors in the asylum appears to have been under discussion here. Where so many lunatics, a large percentage being suicidal or dangerous to others, are congregated, we cannot approve of a project which appears to be attended by much risk without corresponding advantage."

It would seem that the English superintendents and the commissioners have the same exceptional classes to deal with, and that they find in practice some mode of protective restraint must be resorted to. Their variations of practice would indicate that, instead of a settled conviction of the benefit of some particular method, they were disposed rather by a variety of means to apply whatever might be the best to accomplish the desired object of necessary protective control with the least discomfort and risk to the patient. We are obliged to take it for granted that those who have figured as advocates of non-restraint do not really mean the abandonment of all coercive measures, for after all, seclusion against the will of the patient, or the use of padded rooms, wet and dry packing, showering and manual force of attendants, can be regarded in no other light than as restraint.

I think it must be admitted from the foregoing that there is no real difference in principle among experienced professional men who have devoted their lives to this branch of science applied to the practical ends of humanity and benevolence. Compared with the manner in which the insane were treated in former times the present system is indeed one of "non-restraint." Intelligent medication, exercise in the fresh air, good and abundant food, moderate and pleasant amusements, congenial occupation, as far as practicable, combined with comfortable surroundings, have proved a sufficient treatment for the greater proportion of the insane, so far, at least,

as to make the necessity of forcible means and mechanical appliances the "exception to the rule." But as these exceptional cases do exist on the universal confession, and always will, they require exceptional treatment. How their best and most humane care can be accomplished is the serious problem that brings itself to every conscientious mind. The principles on which all must agree are simply these: The guiding object should be the welfare of the patient (not forgetting also the safety of those about him), his care and cure in the surest and speediest manner possible. The responsibility of all measures to these ends must rest upon medical decision and judgment alone; whether control over extreme violence, manifesting itself suicidally or homicidally, shall be established by the simplest mechanical restraint, or by drugs, or by the application of water in shower baths, or by wet packing, or by the hands of attendants, with all the risks of personal struggles, or by seclusion in rooms with or without clothing or bedding, with the risk of self-injury, by such means as still remain to the patient, or by any other measures known to science and experience, must all depend ultimately upon what the medical man on the whole shall deem best for the patient. All this must come under the one head of medical care and treatment, precisely as is the case with the physician in general practice in the treatment of other diseases, or the treatment of any diseases in any ordinary hospital, with this difference, perhaps, that whatever the physician in the case of the insane in hospitals advises, he is expected to see carried out. Wherever the question of restraint arises in connection with any individual case among his patients, he must judge of the nature and extent of that restraint, and he must be presumed to know and be able to judge between what is cruel and what is humane, protective and curative, as well as the surgeon knows and judges in his operations between necessary pain and useless barbarity. I would close this with what I uttered twenty years ago:

"We look upon restraint and seclusion, directed and controlled by a conscientious and intelligent medical man, as among the valuable alleviating and remedial agents in the care and cure of the insane. That they are agreeable in their application or use, either to the physician or patient, no one will maintain. Indeed, few, if any, medical prescriptions are agreeable. The bitter and nauseating draughts, the abstinence in diet, the seclusion of the patient to the sick-room, and the exclusion therefrom of friends, are prescriptions for the cure of disease, as are the knife and appliances of surgery, and they are adopted and prescribed as such. The physician who would not administer the best remedy because it might offend the taste, or the surgeon who should not use the knife, or other means, because he might thereby cause pain; or the obstetrician who would lay aside, under any such consideration, the remedies required in critical cases, would be unworthy of the profession, and the confidence of the public."

EXHIBIT No. 43.

Commitment, Detention and Discharge of Patients.

When abroad, in 1879, I gave special attention to the questions of commitment, detention and discharge of patients; also to the general management, internal and otherwise, of hospitals for the insane, privileges granted, occupation, treatment, etc. I had the honor and good fortune to meet some of the Commissioners of Lunacy, and among them the distinguished chairman, the Right Honorable the Earl of Shaftesbury; also some of the most prominent present and Ex-Chancery Visitors in Lunacy and many of the medical superintendents. From these gentlemen, as well as from personal observation, I was able to obtain knowledge of the law and practice obtaining, and of the government, general and internal, of hospitals for the insane. I was strongly impressed with the close resemblance of the law and practice of the State of New York in regard to the admission and discharge of patients, the guarantees, however, being greater in New York than in Great Britain, especially in respect of medical certificates and official magisterial interference. The New York law and practice in respect of discharge is also much simpler in regard to both private and public patients. In the appendix of my report for 1878 I presented the resemblances and differences in these and other respects between the English Lunacy Statutes and those of New York.

I beg to present here the opinions on the English and Scotch laws, in their practical application, on the most important matters which concern the insane, which were given before a Parliamentary Commission of 1877 under a resolution of Parliament ordering "That a select committee be appointed to inquire into the operation of the lunacy law, so far as regards the security afforded by it against violations of personal liberty."

I might have summarized the matter and thus brought it into briefer space, but it seemed best, as far as possible, to give the exact language used. I have drawn from the testimony of men of large experience and great distinction in connection with the care of the insane and management of hospitals, as well as from the testimony of officials exercising governmental supervision, and it is an interesting and significant fact that the opinions expressed before that commission by the distinguished medical men called before it were fully indorsed by Lord Shaftesbury, a man of such a vast experience and such illustrious name in the annals of philanthropy in connection with the care of the insane. The unanimous opinion of the law held by such men on all vital points concerning the care of the insane, and indorsed by such an authority as Lord Shaftesbury, should be conclusive of its wisdom and practicability.

The English law in regard to medical certificates is much simpler and much less guarded than that of the State of New York. Two medical certificates are required in cases of private patients, and but

one in the case of paupers and no medical certificates in the case of chancery patients. All the qualification requires is that the medical men "shall be registered physicians or apothecaries." They are not required to be approved by any judicial or other authority. In New York the law requires in all cases, private or public, two medical certificates, and these must be made under oath by medical men authorized as examiners, and the certificates must be approved in writing by a judge.

Mr. Perceval, Secretary of the Lunacy Commissioners, on his examination before the Parliamentary Committee of 1877, testified in answer to the question, "Is it necessary that the two medical men who signed the certificates should be qualified practitioners?" that up to 1858 there were no qualifications specified; that patients could be sent by a physician, apothecary, or surgeon; that the medical act of 1858 provided for the registration of all medical practitioners, and when the lunacy acts were last amended, in 1862, advantage was taken of that circumstance to get a proper definition of the words 'physician, apothecary, or surgeon.' These words throughout the lunacy acts now mean medical practitioners registered under the act of 1858, and no other person can sign a certificate.

"Q. He may be a physician, surgeon, or apothecary?

"A. He may be a physician, surgeon, or apothecary. We do not care what he is, so long as he is a registered medical practitioner. He has such a qualification as entitles him to be on the register, and that is sufficient."

The English law provides that the medical man must have seen a patient within seven days before admission; copies of the certificates are sent to the Commissioners in Lunacy within twenty-four hours after the admission of the patient, and any defects may be remeded within fourteen days after being issued, and the certificates must always be in form. The New York law provides that the certificates must be in form as required by the Commissioners in Lunacy, and must be completed and approved by the court within five days.

Mr. Perceval testified in regard to private patients that two medical certificates and a request, or order, by some friend or acquaintance is all that is required; in regard to public patients an order of the magistrate accompanied by one certificate. To the question whether the certificates should not be countersigned by some public officer he answered: "I do not think there would be any additional protection to the patient at all; but there are of course two sides to every question, and you would interpose an additional difficulty, no doubt, if that is your objection upon that which is hard enough already."

"Q. I wish to know whether you do not think there should be some public officer, or some public record of the incarceration of people against their will?

"A. You have a public record, and I do not personally think that the intervention of a public officer would be of any material value at all to the liberty of the subject. It would certainly not be a ma-

terial guaranty, and it would oppose an additional difficulty to the earlier treatment of insanity, which is so very important.

"Q. Are there different forms of insanity, some of which may be aggravated by early treatment, and others cured?

"A. That is a medical question which I will leave, if you will allow me, to the medical witnesses."

Mr. James Wilkes, one of the Commissioners of Lunacy, in answer to the question: "Do you think the protections which the law at present provides against the detention of persons who are not lunatics are quite sufficient to protect the interests and person of the subject?" replied: "I think they are; I must say that if I myself were to be insane, or had any one belonging to me afflicted in that way, I should place perfect reliance in the present safeguards which the certificates and orders provide.

"Q. Do you regard the medical certificate as in itself a personal protection to liberty?

"A. Of course it would not be, apart from the order and the statement, but is a most important thing in deciding on the insanity or not of a patient, and as to the propriety of placing that patient under care and treatment.

"Do you think the precaution which the law at present provides sufficient?

A. Yes, sir.

"Q. The certificate now is permanent, lasting until the patient is discharged; do you think that is a good thing, or that the certificate ought to be for a limited time and renewable?

"A. I do not think there is any necessity for renewing it. Many of the patients in licensed houses are very poor; they are received and kept really at rates which are little above pauper rates, and any additional certificate would be a tax upon the friends, for I presume it would fall on the friends, and I really do not know what good it would do.

"Q. I understood you to say that you think it desirable in all cases that they should be very early treated?

"A. I think so.

"Q. You make no exception?

"A. No, sir. There may be an exception as to the period; it depends upon what is called early treatment. There might be some very slight insanity, a first attack, which gets well very rapidly, perhaps before any one would think of removing a patient to an asylum.

"Q. You think there are no cases of a very excitable temperament, in which, being sent to those places, might increase the complaint and tendency to mania?

"A. No, sir; I do not think so. I think the removal from home associations, and from the exciting causes of the disease, tends very rapidly to the recovery of the patient."

Dr. J. Lockhart Robertson, one of the Lord Chancellor's visitors in lunacy, and previously a medical superintendent, was examined. To the question as to qualifications of the physician, he replied: "I do not think a special knowledge of lunacy is so important as being a well-educated physician.

"Q. Are you of the opinion that the present mode, by the certificate of two medical men, surgeons for instance, or apothecaries, is a sufficient safeguard to the liberty of the subject?

"A. I think it is. I think the difficulty is to get the certificates. I think medical men are so afraid of actions that the great difficulty is to get the certificates signed. In an urgent case early treatment is, of course, of great importance to the patient.

"Q. You are decidedly of the opinion that the safeguards against the improper admission and detention of persons in asylums, hospitals and licensed houses are practically sufficient, and that a more complicated system of checks would do more harm than good?

"A. Yes, decidedly."

Dr. Robertson expressed the opinion that it might be desirable to have some official order by a magistrate in cases of private patients; this would give protection to the friends as well as the physicians making the certificates.

Dr. J. Crichton Browne, Lord Chancellor's visitor in lunacy, and previously a medical superintendent, was examined.

"Q. I will ask you the same question that I asked Dr. Robertson. Are you decidedly of the opinion that the safeguards against the improper admission and detention of persons in asylums are practically sufficient, and that a more complicated system of checks would do more harm than good?

"A. I am.

"Q. That is an opinion based on your experience in your official capacity, and also on your previous experience?

"A. It is.

"Q. I do not know whether you concur with Dr. Robertson in the opinion that the additional order, or inquiry, before a magistrate might be desirable in the case of private patients, generally speaking.

"A. Before a magistrate?

"Q. Yes, such a one as is now in use with regard to pauper patients?

"A. I really do not believe that there would be any additional security in such a provision; in signing the orders for pauper patients many magistrates regard it, if a certificate is in due form, as a ministerial act. They sign the order merely as a matter of course. Such an arrangement with reference to private patients might cause delay, as it does sometimes in the case of paupers when there is a difficulty in finding a magistrate. I think, also, it might increase the prejudice against asylum treatment. The public would look upon insanity as in some way connected with crime, if a patient had to be taken before a magistrate.

"Q. Would you recommend that the certificates should be renewed from time to time?

"A. I have thought over that and I do not think that would be any additional safeguard.

"Q. Might not some system of medical referees in such a case possibly be established instead of taking any chance medical man that comes first? Might there not be some person who would pass an examination in mental diseases, to whom all these cases might be referred instead of taking the first chance medical man?

"A. It might be so, but I think it would tend rather to diminish public confidence to have specialists signing certificates. The public would come to associate them with mad doctors, and my impression is that it is better to have general practitioners sign the certificate. The public have more confidence in the decision of the ordinary family doctor."

Dr. Browne's treatment was that the early treatment was of the greatest possible value.

Dr. John Charles Bucknill, over eighteen years a medical superintendent and Lord Chancellor's visitor in lunacy thirteen and one-half years, testified:

"Q. With reference to the admission of private patients into asylums and their discharge, what do you think the principle of that ought to be?

"A. I think the principle should be to make the admission as easy as possible; in order to provide for early treatment, and to make the discharge as easy as possible; in order also to provide for early treatment, for if there is difficulty in getting a patient out of asylums there will be a disinclination to send them in. This is a point which has been very well worked out by the Scotch Commissioners in Lunacy and they have proved it by statistics."

Dr. Bucknill expressed the opinion that with the medical certificates in case of private patients, the law should provide that the person who gave the order should bear some relation to the patients, saying: "As to the person himself, the statute gives no indication as to who the person should be, and in point of fact and practice the most improper persons may sign the order. A gentleman's footman may sign for the gentleman's son; a foreigner will sign for his lunatic friend and leave the country immediately; a solicitor's clerk will sign; all manner of people will sign, people who cannot be held responsible.

"Q. You think the order is considered more as a matter of form and that the certificate of the medical man is really relied upon?

"A. No; the real power is possessed by the man who signs the order. The certificate and the order go together; with regard to the admission, the patient once admitted, the man who signs the order holds the staff to such an extent that the patient cannot be removed from the asylum unless the person who signed the order is incapable. If he becomes incapable, by disease or by insanity, of if

he is dead, or has left the country, then the statute lays down the rule that certain other persons may order the discharge; but otherwise, if he is not incapable, no one but the person who has signed the order can procure the discharge of a patient once admitted into a licensed house or an hospital.

"Q. What remedy would you propose for such a state of things as that?

"A. It is very difficult to meddle with the existing forms without increasing the difficulty of obtaining early treatment; I think that the rule which had been laid down with regard to the discharge of patients from asylums, namely, that if a man who signs the order is incapable, then the husband or wife could act, and if there be no husband or wife, then the father or mother or the next of kin may very well be introduced in the order for admission, that if a patient has a husband or wife, he or she should sign the order, or in default, the father or mother, or next of kin, or a solicitor could for any of these, or, in case of a lunatic who has no relative to be found, I think a solicitor might be employed to act for any friend.

"Q. You have traveled a good deal in America and examined the state of things there. Can you tell us what the American law is in regard to the admission and detention of persons in asylums?

"A. It varies in every State. A good deal of change has taken place quite recently; the State of New York seems to have made the best change. There the certificates before the year before last could be signed by any two men calling themselves medical men. The new law requires that they shall be qualified medical men, and that they shall also have a certificate from some judge of a court of record, to whom they are personally known as competent for their duties. An attempt is being made to create a class of medical men who understand something about insanity, and are capable of giving certificates.

"Q. Have you considered whether easy discharge from asylums would tend to the more frequent admissions to the asylums in the early stages of the disorder, and to the early treatment of the disease?

"A. Sir James Coxe has clearly pointed out that not only the highest percentage of cases, but the shortest duration of treatment in Scotland is found in the Renfrewshire asylums, which are parochial asylums, in which the inspectors of the poor can put a patient on the outbreak of insanity, without any difficulty, and also remove him without any difficulty whatever. He points out that the authorities of asylums might, perhaps, unwillingly increase the indisposition to place patients in asylums by throwing impediments in the way of their easy removal from asylums. I take it that the succession of events which Sir James points out is this, that you get easy discharge from these Renfrewshire parochial asylums; therefore you get early treatment, and a much larger percentage of cures effected in short time.

"Q. You think that in all cases it is a great object to get early treatment?

"A. Yes, I think that is the greatest point to aim at.

"Q. Therefore if the facility of obtaining the discharge would induce the people to send all patients in the early stages to the asylums the percentage of cures would be greater, and the cures would be more rapid?

"A. Yes; that is exactly what I mean."

Sir James Coxe of the Board of Lunacy in Scotland testified:

"Q. In the report of the General Board of Commissioners of Lunacy for Scotland for the year 1859, signed by yourself, there are one or two paragraphs which I should like to read to you. 'It cannot be too often repeated, that in the treatment of insanity loss of time is unfavorable to recovery, or that every impediment that is thrown in the way of immediate treatment acts most prejudicially upon the patient, by tending to render permanent the aberration from normal action, which, under favorable circumstances, would speedily have subsided;' is that your opinion?

"A. Yes, sir.

"Q. We are, therefore, of opinion that asylums are capable of rendering to mankind far greater services than they have yet achieved; is that also your opinion now?

"A. Yes, sir; Sir James Coxe testified that the medical certificates were acted upon in Scotland by the sheriff.* 'In the case of the sheriff there is no reference to any independent medical man at present.'

"Q. The sheriff himself determines for himself whether the grounds stated for the medical men are sufficient?

"A. Yes.

"Q. He does not refer it to any independent medical man?

"A. No, he judges for himself.

"Q. In your judgment, would it be an improvement that the certificates, before being acted upon, should be, if necessary, canvassed, and further inquiry directed by some independent medical official?

"A. I think it would merely complicate matters.

"Q. You think in practice it is a sufficient precaution, the sheriff examining the certificates and the grounds stated in them?

"A. I think so.

Dr. Harrington Tuke, Fellow of the Royal College of Physicians of London, having had practice at Hanwell under Dr. Conolly, and at present having charge of a private asylum at Chiswick, testified:

"Q. Would you suggest that no certificates should be signed except by medical men who had special practice in lunacy?

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* NOTE.— The sheriff in Scotland approves certificates instead of the judges as in the State of New York. His office is still that of a local judge, and not merely ministerial, as in England.

"A. I would rather suggest that the knowledge of lunacy should be made more general than it is.

"Q. You would not have a special class of medical men for lunacy cases?

"A. No, I think not.

"Q. We have had the opinion already expressed both ways, that there should be a special class of medical men, skilled in lunacy, who should sign one of these certificates, and also that it would be a mischievous thing to have any special class of that sort?

"A. I think there would be less confidence of the public in specialists in any particular class than any two physicians taken at hazard, but I think that the physicians should be better trained.

"Q. Are you of opinion that it would be desirable also that the medical certificate should have a temporary effect, or that the certificate should be signed by medical men who had special knowledge of lunacy?

"A. No, I am not so; the result of giving it to special medical men would lead to still greater distrust than there is at present, because, as far as I have seen, the ignorance of medical men leads them to refuse to sign medical certificates.

"Q. Would you not think it desirable to limit the effect of the certificate?

"A. No, it would lead to so much mischief in so many cases that I doubt its efficacy. It would do so much mischief to the patient by the necessity of a fresh examination, and then there are actually so few cases where there is any doubt, that it would be a great pity to make a general rule for them.

"Q. Do you consider that if any obstacles were placed in the way of the committal of the insane to public or private asylums that would have a tendency to interfere with the cure and with that early treatment, which, we have some evidence, is thought to be necessary for cure?

"A. Any delay in instant medical treatment is most disastrous. Dr. Conolly and myself went over the statistics of three asylums with which we were connected. We found that seventy-seven per cent that were treated under three months recovered; those that were treated later diminished in an absolute geometrical ratio, until at last it sank to, after twelve months, something like twenty per cent fully cured. I think any obstacle in the way of medical treatment, either in an asylum or otherwise, most injurious."

Dr. Henry Maudsley, a physician, practicing in London, testified that, in his opinion, the law "with regard to the admission of patients is sufficiently stringent and quite as stringent as can be properly consistent with the treatment of insanity in its early stages." He testified that if insanity was to be cured the person must be put under treatment early, "because recoveries are entirely in proportion to the early stage at which treatment is adopted. If regulations are made more stringent than they are now (and, indeed, the present

regulation operates to some extent in that direction), the friends of patients will, instead of sending them from home, as is almost essential in the case of insanity — unlike, in this respect, other diseases — keep them at home under improper conditions, and so very much injure the chance of recovery."

As to any alteration in the law touching the certificates he testified: "I have considered the matter. If it is considered desirable, as I have heard suggested, that the certificates should go before some public official before they were acted upon, it seems to me that no public official would be in a better qualified position to judge of the value of the certificates than the commissioners, to whom exact copies are sent within twenty-four hours; indeed, not really so much so. If he entered really into the matter in each case it would be a very anxious responsibility and a formidable matter for him to undertake; and, if he did not, would simply become a mere matter of routine, adding to the publicity, adding to the expense, and adding to the delay of getting a patient under care, and would make the early treatment more difficult than it is."

Again, he testified that people "would shrink very much indeed, according to my experience, from having a public officer come in to proclaim, say a young lady at eighteen, a lunatic, or a wife after child-birth who is insane, perhaps, for a month or two. To a professional man such a public thing might be almost ruin."

"Q. Would there be a greater publicity in that way than there would be from a certificate given by a medical man in the neighborhood?

"A. Yes, it would be thought so; because, as a matter of fact, certificates are often given in this way: The medical man of the family, who is in regular attendance, gives one of the certificates. He calls in a physician in consultation, who then sees the case separately afterward and gives the second certificate. There is no alarm of the patient. It is simply an ordinary matter of consultation as it appears to him.

Dr. Duckworth Williams, medical superintendent of Sussex County Asylum, Hayward's Heath, testified:

"Q. Do you attach importance to the pauper lunatics being sent early to the asylum?

"A. Very great.

"Q. From the lunatic wards of the work-house?

"A. They should be sent at once, in my opinion, without going to the lunatic wards at all.

"Q. You think that as soon as the ordinary forms are complied with the patient should go at once to the asylum and not go to the work-house first?

"A. Certainly.

"Q. Do you say that because you think there is more chance of cure in such cases?

"A. Because thore is more chance of cure, and also on the score of economy."

Dr. Williams testified to the evil of insane being taken to the work-houses without any certificate, which was the common customs and in condemning this, he spoke the opinion of all the authorities.

The Right Honorable the Earl of Shaftesbury attended before the committee by permission of the House of Lords, and was examined. He testified that he had been a member of the lunacy commission "now close upon fifty years. I was associated with Lord Gordon on the first committee of inquiry in 1828, then in 1829, in bringing in the first bill received since that time; for twenty years I was in the habit of visiting continually." He was permanent chairman from 1845. He testified to the law generally and to changes from time to time in the statutes.

"Q. Do you consider that the facility with which patients are admitted into asylums is not too great at the present time?

"A. No, certainly not. I think that the whole of our experience confirms us in the opinion that it is not. We stated so in 1859 and we state it still more emphatically now. I cannot recollect a single instance in which a patient has been brought into my asylum in whose case there were not sufficient grounds for saying that he was a proper subject for cure and treatment; I can hardly recollect a single instance. I see, by referring to the evidence which has already been given before your honorable committee, that such is the testimony of every man of experience who has been consulted on the matter. It was likewise the opinion of the committee that sat in 1859, for they reported in that sense.

"Q. At the same time there is a feeling which has been expressed, not only generally but by witnesses before the committee, that a large number of persons are admitted to the asylums in a state of sanity and kept there?

"A. I have no doubt those statements would be made, because I never knew the case of a patient, either under confinement or after confinement, who did not say that he had been most unjustly confined. I hardly know an instance. I do not know that any instances have been adduced to prove the truth of that allegation.

"Q. At any rate, it is your lordship's opinion that the admission of patients into an asylum is now sufficiently guarded?

"A. I think so.

"Q. Would you say the same with regard to their detention there? Is it not the case that they are sometimes kept there longer than is necessary?

"A. I do not think they are so now; it was rather my opinion in 1859 that under some circumstances they may have been detained beyond the time that it was absolutely necessary, but then I think that a great deal was to be said in extenuation of that. It is a great responsibility to send out a patient upon the world, both with respect to the patient himself and in respect to society, before you are

satisfied that he is cured or, at any rate, in such a state that he can be safely trusted. Since 1859, I should very much modify the opinion I then gave.

"Q. Does your lordship consider that many of the stories that we hear, from time to time, of conspiracies and of ill-treatment are themselves delusions in the minds of people who are intending to say what is accurate?

"A. I think so, and it is a very remarkable thing that in many instances one of the first indications that a man gives, or a woman gives, of a state of aberration, is the belief of a conspiracy. I have never heard of a conspiracy being formed for a purpose of that description."

In regard to chronic cases and others being taken first to the work-house, his lordship testified:

"I think it highly necessary that in every instance the patient should go to the asylum first and pass from the asylum to the work-house, and not from the work-house to the asylum, which is very often the case. He gets into the work-house and there is detained, when if he went to the asylum it would be adjudged at once whether he was a fit case for the asylum; and if not, he would be sent back to the work-house. In that way a great number of the recent cases are kept back to a very late period when they might have been treated and sent back to the world perfectly well.

"Q. The practice is exactly the reverse of what it ought to be?

"A. Yes."

He testified concerning suicidal and homicidal cases to show the absolute necessity of taking those cases in due time.

After dealing with the statistics of suicide at large he stated that there were then in confinement in the various asylums six thousand and ninety-six suicidal patients. Referring to the criminal asylum at Broadmoor, he said that leaving out all that there were there for minor cases "there are one hundred and forty-five men charged with murder. In seventy-five cases the insanity was not recognized before the commission of the crime. In twenty-nine, insanity was recognized, but the persons were reputed harmless. In thirty-three, the insanity was recognized in the persons, not probably recognized as being altogether harmless, but insufficient precautions were taken. In eight, exact circumstances were not known."

Of ninety-eight, "charged with attempts at murder, maiming or stabbing, in forty-two the disease was not recognized before the commission of the crime; in twenty-nine, they were reputed harmless, of twelve, insufficient care was taken, and in fifteen, the exact circumstances were not known. When you come to the women there are seventy-one women charged with murder; in twenty-eight, the insanity was not recognized before the commission of the crime; in thirteen, the insanity was recognized but the persons were reputed harmless. In twenty-three, the insanity was recognized and the persons were not regarded as altogether harmless, but insufficient precautions were taken. Then you come to the stabbing; in four, the

insanity was not recognized; in six, they were reputed harmless, in two sufficient precaution was not taken." He adds: "This is a very important matter, because it shows the very large number of cases in which, through inattention, the insanity is not detected till an overt act has been committed. That is the evil way in which a large proportion of the public judge of sanity or insanity. They will never hold a person to be insane until some overt act has been committed, and that is always, invariably, the case before juries. Then an overt act having been committed furnishes a proof that the disorder is very far advanced, almost to be inveterate, and consequently incurable. What I state shows the absolute necessity of great precautions; the absolute necessity of paying attention to the earliest stage of the disorder, and though I could by no means render admission into the asylums more easy than it is, I most undoubtedly would not render it more difficult because I am certain society is in very great danger. We always have felt as commissioners that we have a double duty. We have a duty to the patients and a duty to society. We have a duty to the patient to see that he is not needlessly and improperly shut up, but we have also a duty to society to see that persons who ought to be under care and treatment should be under care and treatment, and moreover that they should be set at large before they can be considered safe to mix in society.

"Q. Do not these facts, which are very remarkable, point rather to a want of knowledge of lunacy among medical men?

"A. No, I think not; I am not going to say that there is sufficient knowledge of lunacy among medical men, but such cases as this have never been brought under their observation; they have been suffered to roam about; nobody has taken any trouble about them; in the case of many of them the family did not suspect the madness; they might have thought the man was queer and they never thought of consulting a doctor on the matter; I have no doubt a great number of medical men, if they had seen such a case at an early period, would have come to the right conclusion about it; as I was saying, the large mass of society, even educated persons, are wholly unable to form an opinion unless they see something that is very decided; that they consider aberration; something very peculiar; something out of the common way; another is this — it very often happens a great change of character is very often the indication of coming insanity; and then many people say, and very naturally, 'what is the matter with this person — he is getting very cross; he is quite a changed man; he is not half as good humored as he used to be; he has become crabbed and ill-tempered;' they do not see that this very often is an indication of his approaching insanity; they put it down to a sudden change of temper.

"Q. Has your lordship any suggestions to make upon that point?

"A. No; I have no suggestions to make, because I am very unwilling to say any thing that should restrict in any way, more than is now restricted, the person or liberty of the subject; I only wish to call greater attention to these things, that people may have their

eyes open and then they may put their heads together and see if they can devise something by which a remedy may be applied, but I have no particular suggestion of my own to make; I only give it as a very striking fact and one that should put us on our guard very much against juries, because they never deal with the matter unless there is an overt act, which overt act, ninety-nine cases out of one hundred, is a proof that the disorder is incurable."

In regard to medical certificates his lordship testified:

"It is very remarkable, taking it altogether, that the certificates have been so sound considering the great number that have been given every year; of course we must admit that they have been signed by medical men who have no very extensive knowledge of lunacy, but it is certainly very remarkable that the number of certificates which have passed through our hands since 1859 — the date of the last committee — amounts to more than 185,000, and yet of all those certificates, I do not think so many as half a dozen have been found defective; it sounds very well to say that persons acquainted with lunacy should be the only persons to sign certificates, but the fact is, as matters now stand, that a great amount of scientific knowledge as to lunacy is not possessed by many people; there are a certain number who are well informed, but the great mass of the community know very little about it, and, with the large number of the insane, dispersed as they are all over the country, you must trust to the medical men of the several districts; I have a very strong opinion on this point; the certificates hitherto have been very correct, and I am quite certain that out of the 185,000 there was not one who was not shut up upon good, fair, *prima facie* evidence that he ought to be under care and treatment; such is the testimony of all the physicians of note who have been summoned before this committee; for what does that arise from — it does not arise from the great knowledge of the medical man of the lunacy that they handle, but it arises in a great measure from the habit of keeping back the patients so long, because the parents and friends do not like to admit to themselves that the patient is affected, and so delay to call in a medical man. And then begins, when the medical man is at last called in, the fear and apprehension that the patient may be sent to a lunatic asylum and the whole affair become public; so that when the final examination is made by the medical man, who has to sign the certificate to send them to any asylum, the symptoms are so evident and so pronounced that few people can mistake them. I have very little doubt that such is the case, and such is the reason why we have so few faulty certificates. But, on the other hand, what follows from that course? Why, that the cases are very far advanced and have got pretty nearly in the category of the incurable.

"Q. And this is not very satisfactory?

"A. Very far from it."

His lordship testified against special doctors making certificates: "I think something has been said about having what they call a system of special doctors. I confess to you that I have a very great fear of a special doctor. But, assuming them to be good, in the first

place they must be very numerously spread over England and Wales, because they are wanted at the instant, and were there not an ample supply of them, you have to send a great distance to reach thees special doctors. I should like to see how Parliament would define a special doctor before I can give an opinion. I confess I should be very much alarmed if there were persons who kept themselves exclusively to that study without a constant experience of both, of all the various circumstances that beset lunacy at large and under confinement, moral as well as physical, that attend it; all the social circumstances, the ten thousand other circumstances; * * * I remember the case very well of a medical man, a doctor, an excellent man, who thought that I had some influence in obtaining the appointment of medical men to the commission. I knew him very well. He came to me and told me what he wished. To show his extraordinary knowledge of the subject, he gave me a sheet of paper as big as that, with a list of the forms of insanity. 'My dear sir,' said I, 'this will never do; if you reduce your principles to practice you would shut up nine-tenths of the people in England,' and so they would. If you have special doctors they would shut up people by the score.

"Q. There was another proposal which was to require a certain knowledge of lunacy on the part of the medical officer of health, and who are scattered over the country, and to employ them as checks upon the asylums and as a kind of deputy visitors, to supplement the visits of the commission?

"A. To that I should very much object. I wish to speak with the greatest respect of them, but I think medical officers of healt, to a great extent, are young men, and uninstructed men, who have taken the office merely because they think it gives them a position and qualifies them to get on in their profession. They are not likely to have any great knowledge of lunacy. Then, again, being local people, they would be in friendship or in antipathy with the superintendents of asylums. Consider another point; we must do every thing we can to keep the best medical men in the service and to get them to sign the certificates. I am sorry to say that now the very best medical men refuse to have any thing whatever to do with the certificates, they are so afraid of the responsibility and of being hauled over the coals,' as the phrase is, that they will not do it.

"Q. Another proposal was to take a person whose mind was affected to an hospital where he would be treated as he would be in any other hospital, and that afterward, provided he became fully insane, he should go to an asylum, but that otherwise he might be restored to society without having any taint of insanity upon him?

"A. I think it would eventually come to the same thing. These probationary asylums would be considered lunatic asylums, and it would be said of the people taken there: 'Oh, you know he escaped going to the asylum, that is true, but he was in a probationary asy-

lum. He was so queer and so odd that they were obliged to send him there.' The taint of lunacy, which I see this committee is so justly afraid of, would be as much fastened on him as if he had gone direct.

"Q. In process of time the hospital would get the character of a lunatic asylum?

"A. Yes, they would be called semi-lunatic asylums, and all that sort of thing; they would come under the same category at last."

In regard to certificates his lordship further testified:

"Q. Should you not think it an additional security to the freedom of the subject if one of the signers of the certificates was a person in some official capacity? Now, as your lordship is aware, there are two medical men — they may be surgeons, apothecaries or physicians — who sign the certificates. Do not you think it would be an improvement if one of the signers of the certificates was in some public capacity?

"A. No, sir. In the first place, I should be sorry not to have two medical certificates for the confinement of any patient in a licensed house. I do not know where we could find a public man who was also a medical man.

"Q. By a public capacity I meant an officer connected with the union or somebody responsible to the public?

"A. I think it was the right honorable chairman who put the question to me the other day on that subject. I said, I strongly objected to an officer of the union. He was not a man of sufficient standing. Oftentimes he has merely taken his place because it gives him a status. He is not a man of sufficient standing. Some of the medical men who sign the certificates are of very high standing and degree, and you could not allow them to be overruled by an inferior officer.

"Q. Do you not think that it would be an improvement if the certificates did not partake of the final character they now assume; that they should be of a more temporary character than they are now?

"A. I do not think so.

"Q. We were told that in Scotland the patients cannot be sent to the lunatic wards of work-houses without a certificate; does your lordship consider this a good plan?

"A. An excellent plan; it is not the same with us.

"Q. In England, of course, a lunatic may be sent to the lunatic ward of a work-house without any certificate at all?

"A. Yes; the relieving officer may send him in, or any one may send him in.

"Q. He only wants a certificate signed when he goes into an asylum from the lunatic ward?

"A. Quite so.

"Q. You think the Scotch plan of requiring the certificate upon the lunatic going in the lunatic ward of the work-house is preferable?

"A. Very much preferable.

"Q. We have had evidence from the Scotch Commissioners in Lunacy, in which comparisons very favorable to the Sotch system have been drawn, with regard to the intervention of the sheriff. Your lordship has, I think, already expressed an opinion with regard to the intervention of a public authority. Would you consider that the prospects of cure derived from placing a patient under early treatment would be considerably interfered with if the law were altered so as to necessitate the intervention of the magistrate in this country?

"A. Most undoubtedly; the great fear in England of so many people is publicity, and any thing that tends to bring the patient before the public and to make the case of a patient notorious would induce people to keep that patient so long as they could before they submitted him to the treatment of an asylum or of a single house. It would interfere very materially with it.

"Q. On the whole, your opinion is most decided that the intervention of the magistrate would be injurious to the person, as regards his recovery, and no protection to him as regards his liberty?

"A. None whatever; I think it would take away nine-tenths of the protection he now has. I cannot conceive any thing which, to my mind, would be worse. I will do any thing that I can in the world to protect the patient, but I know if I were to assent to what is proposed I would assent to that which would be irreparable injury.

"Q. I think your lordship is under some misapprehension as to the part that the sheriff acts in the matter; he has the option of acting according to his own discretion, either ministerially or judicially. He may judge, and usually does, of the fitness of the evidence upon which the medical men grant the certificate, or he may not do so. He may judge, and usually does, of the fitness of the persons to give evidence under the circumstances; for instance, relationship, or any thing of that kind, might be regarded as a disqualifying characteristic in a person signing a certificate?

"A. That is what we should object to; we should object to any inexperienced layman taking upon himself to reverse the decision of the medical man.

"Q. He would not in that case reverse their decision; he would merely remit it to other medical men, who, in his opinion, were competent to grant the certificate?

"A. It is all very right that it should be so, but then see what it ends in; it ends, after all, in the opinion of a medical man, for it is only one set of medical men against another set."

EXHIBIT No. 44.

Case of Habeas Corpus.

Mr. James B. Silkman was brought to the asylum May 21, 1882, by Henry B. Ford, deputy sheriff of Westchester county, on the certificates of Drs. G. B. Balch and A. C. Benedict, two qualified examiners, whose certificates were duly approved by Hon. S. D. Gifford, county judge of Westchester county, the agreement for his support while in the asylum being executed by Theodore H. Silkman, his son, D. G. Crosby and D. Seybel. He remained in the Asylum under treatment until August 19, when he was taken to Poughkeepsie to appear before a court on a writ of *habeas corpus* and was recorded in the books of the institution as discharged by an order of the court on the writ. At the time of his admission and during his stay in the Asylum I was laboring under such physical disability from the attempt upon my life that I had no knowledge of his case except the record in the case-book, and the information obtained from the physicians in charge. The history of his case, as recorded in the case-book on his admission, and while under treatment in the Asylum, in my judgment, shows that he was insane when admitted to the institution, and during all the time he was therein, and at the time of his discharge on an order of the court. In my absence from home on account of illness, Dr. A. S. Russell, the physician in charge, who had had constant observation of Mr. Silkman during his stay in the Asylum, gave sworn testimony to the court to Mr. Silkman's insanity during his residence in the Asylum and at the time of his discharge by the court.

Fatal Casualty.

In the table of deaths the case recorded as fracture of the skull was the case of George F. Brown, a patient who was killed by another patient on Sunday morning, the 7th of May, 1882. Mr. Brown was admitted to the Asylum April 21, 1882, was seventy-six years of age and was in a condition of dementia. He was also in feeble bodily health, but well enough and strong enough to associate with other patients on the ward. David R. Poulton, the patient who made the fatal assault, was admitted to the Asylum February 9, 1882. Dr. Brush, who was in charge during my illness covering this period, described the case as follows: There were no evidences or manifestations on the part of Poulton previous to this attack that he had any feeling toward Mr. Brown, nor had he made any threats in regard to any persons in the Asylum, his suspicions and delusions referring mainly to persons in Syracuse. The attack was made in the morning while the patients were dressing and preparing for breakfast. Mr. Brown at this time was up and on the ward, as was also Mr. Poulton. Mr. T. E. Williams, the attendant in charge, was aiding other patients when he glanced down the ward and saw Mr. Brown with his coat on his arm going toward the wash-room, and

Poulton with a leg of a table which he had wrenched off following. Mr. Williams immediately ran, but before he reached Poulton the latter had struck the fatal blow. Poulton was at once disarmed and the physicians in charge of the male department, Drs. Russell and Josselyn, summoned. It was found Mr. Brown had sustained a fracture of the skull, from which he died about an hour afterward. When seized by the attendants Poulton said: "I have demanded the keys three times." Subsequently he told Dr. Hunt, the coroner, that he had not meditated striking Mr. Brown until he saw him passing down the ward and then instantly decided to kill him, take the keys and liberate the patients, "insane persons who are brought to the Asylum to be killed." Then he at once wrenched off the table leg and gave the blow. He afterward said he had struck the wrong man; that he meant to kill a doctor or an attendant. The coroner, Dr. James G. Hunt, and Mr. Brown's son, residing in the city of Utica, were notified and came at once. The coroner went on the ward, viewed the body, examined the three attendants who were present at the time and talked with Mr. Poulton. As the killing was done openly, in the presence of a number of persons, and there was no question as to the cause of death, the coroner did not deem it necessary to summon a jury, and the son expressed the hope that no unnecessary publicity would be given to the case. The coroner made the following statement: I have fully investigated the matter and find that neither the Asylum authorities nor the attendants were in any way responsible.

On the 16th of June following, Messrs. John C. Devereux, Oscar Craig and E. W. Foster, members of the State Board of Charities, and Dr. Stephen Smith, State Commissioner in Lunacy, came to the Asylum to investigate the matter. In addition to their interview with the physicians, they examined Mr. Williams, attendant, privately, saw and conversed with Coroner Hunt, and the son of Mr. Brown, and also with Mr. Poulton. No report of the result of their deliberations has been sent to the managers of the Asylum or to the superintendent. It may not be improper to say that some of the members of the committee expressed the opinion at the Asylum that such matters should be made public through the newspapers, the State Commissioner in Lunacy, however, dissenting from this view

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STATE OF NEW YORK, } *ss.:*
County of Oneida, }

UTICA, N. Y., *February* 2, 1884.

Ogden Backus, being duly sworn, says: Mr. Hughes entered the Asylum last Friday morning, January 25, 1884. He was brought here by his son; Mr. Hughes' was a re-admittance; he was brought here in 1878 and remained three months, and was discharged cured; he went home and attended to his business; he was a farmer;

Mr. Hughes when he came here was in fair physical condition and seemed to realize where he was; his pulse was eighty; tongue coated. After the history given by his son he was sent to the ninth ward, which is the suicidal ward; he ate a good dinner and told Attendant Orendorf that he was crazy again and that he had probably overworked himself; that afternoon the patient was quiet; toward evening he ate his supper and then went to bed, sleeping in the dormitory where the night watchman could watch him; between eleven and two o'clock he began to grow restless in bed; this Friday night, February 25, about twelve o'clock I was notified that the patient was very noisy, and that they were obliged to place him in a covered bed; I sent the patient some quieting medicine, consisting of two drachms of tincture hyoscyamus, fifteen grains of chloral.

By the FOREMAN:

Q. What is a covered bed?

A. It is a bed surrounded by slats; it is an ordinary low crib with a cover; the patient remained noisy all night, disturbing the ward all night; I believe he took the medicine that I sent him; did not go to see him when I was notified that he was noisy; he was on the ward where the night watch could see him constantly; the night watch stays in that ward all night and does not leave it; the next morning while sitting in this office with Dr. Brush, Supervisor Jones informed me that Mr Hughes was very violent, striking patients and attendants and he wished some instructions to know what to do with the patient; I directed that he be sent to the fourth hall, which is the ward for disturbed patients; I then started on my rounds through the house and saw Mr Hughes in the day-room of four; he was walking the room with his hands in his pockets, am not quite positive; I went up to him and put my hand on his shoulder and said to him: "Mr. Hughes, what made you so disturbed this morning?" He looked very sullen and refused to answer; I then asked him why he struck the patients; he did not reply, but simply walked away; I repeated the question and followed him; he turned on me and muttered something in Welsh, I think it was; I do not understand Welsh; I then saw I was disturbing him by questioning him and deemed it wise not pursue the matter; I then left the day-room and went to finish my rounds about the house; about twelve o'clock, this was Saturday, while on the twelfth ward, Mr. Barrisdale, supervisor of first department, came up on to twelve and told me Mr. Hughes was very bad, and asked me what to do with him; I went down immediately with Mr. Barrisdale to the fourth ward and found Mr. Hughes sitting in one of the strong chairs with a waist belt put around him; there was some blood on the chair, on the floor, and the floor for some little distance about was wet with water as if it had been mopped up; his mouth was bloody, although the blood was not running from it; I asked of the attendants how did this happen, but did not get any satisfactory statement; I put my finger in the patient's mouth to ascertain where the blood came from and I found a frac-

ture of the lower jaw a little to the right of the center; the attendant said take care, doctor, he will bite you, but the patient did not offer any violence toward me; after making my examination I reported immediately to the office of Dr. Charles W. Pilgrim, who is in charge of the men's side; we then together saw Dr. Brush, then I reported the affair to Dr. Gray, the superintendent. Dr. Brush, Dr. Pilgrim and myself then went on to the ward, removed the waist belt of the patient, he was then quite feeble, we took him into the attendant's room which opens from the ward, pulled up his shirt and found there were two or more ribs fractured.

By the CORONER:

Q. Which jaw did you find fractured?

A. It was the lower jaw; I found the ribs fractured on the left side; under Dr. Brush's direction I went up to the eighth ward to get a room ready for him; shortly after the patient came up stairs with Dr. Brush, Dr. Pilgrim and an attendant; I do not recall the name of the attendant; the patient was undressed, placed in bed and his side dressed with adhesive straps; he was then quite feeble and a little whisky and carbonate of ammonia were administered

By a JUROR:

Q. Did the patient walk to his room when he was taken from the chair?

A. He walked to his room by the assistance of Dr. Brush, Dr. Pilgrim and one of the attendants.

(Copy.) OGDEN BACKUS.

ALBERT SPENCER, *Coroner.*

STATE OF NEW YORK, } *ss.:*
County of Oneida, }

UTICA, N. Y., *February* 2, 1884.

John Charles Hughes, being duly sworn, says: I am a son of the deceased Evan D. Hughes; I recognize it to be the body of my father; I reside in the town of Nelson, Madison county; that is where my father lived; one week ago last Monday my father worked during the forenoon; during the afternoon father and mother went to Morrisville; this is three and one-half miles from where we live; they came home about six in the evening of the same day; I was alone in the house at that time; mother called me out and father and I took care of the horse; I inquired about the business he was going to do, and got no satisfactory answer; he seemed all right at this time; at the same time he seemed to be worrying for a day or two previous about some trouble.

By the CORONER:

Q. What was the nature of the trouble?

A. He had a lawsuit and had paid the cost of the court; we first discovered that my father was insane one week ago last Monday evening; when mother was showing me the things they had bought at Morrisville, he said: "You bought a good many things to-day; I do not think we will be together to enjoy them long;" to the question why? he said something is going to happen before morning; to the question what is going to happen? he said that he was going to die; this was the first we noticed that he was insane; he was violent at times before we brought him here; one week ago last Tuesday I went to Morrisville to consult a doctor; before I got home he was violent and attempted to leave the house; he had the idea that the dog was mad and turned back and went to bed; from the time I returned from Morrisville we had extra help in the house; Tuesday night he was restless, but showed no violence; one week ago last Wednesday he became very violent; he told my mother and myself that if he had a razor or axe he would cut himself; we had two men there all the while, and then four; on the 25th day of January, at noon, we placed him in the Asylum; our reason for placing my father in the Asylum was that we had been advised to do so; that he had become so violent that it was necessary as a protection to himself and ourselves; Dr. Chase told us that we had better take him to the Asylum while he was under the influence of the chloral that had been administered to him.

(Copy.) JOHN CHARLES HUGHES.

ALBERT SPENCER, *Coroner.*

STATE OF NEW YORK, }
County of Oneida, } *ss.:*

UTICA, *February* 6, 1884.

John W. Jones, being duly sworn, says: I am an attendant here at the Asylum; I am supervisor of the second department; that embraces the ninth ward; I knew this patient Mr. Hughes; I have been an attendant at this institution for nearly twenty years.

By the CORONER:

Q. What are your duties in your department?

A. I have a general supervision of the department, and do as directed by the doctors in the care of the patients; I carry medicine around.

Q. What portion of this institution comprises the ninth ward?

A. It is the second department; I distinctly remember when Mr. Hughes was brought here; that was the 25th of January; he was taken up on the ninth ward and left there by an attendant; there are three attendants there constantly; I am not there all the while;

the patient was very incoherent in his talk; he was not raving; this was Friday, the 25th, the day he was brought here; I next saw the patient about 7 A. M., Saturday; he then was crazy; taking off his clothes and throwing them about the ward; the next I saw of him after that was at 10 o'clock of the same morning on the ninth ward; he had his coat and vest off at that time, and a slipper in his hand, and I was told by Mr. Mahoney and J. M. Jones that he had been striking some of the patients with it; I told the two attendants there to take care of him until I could report him to the doctor; I reported him to Dr. Backus; he told me to remove him to the fourth ward; I gave him in charge of Mr. Weir, and told him that the patient is violent, and to take charge of him; that was all; I then went back into my own department; I saw the patient after that on the eighth ward after he was brought back.

Q. At what time was he brought back on to the eighth ward?

A. It was about half-past 12 of the same day; he was in an injured condition; I noticed that his lower jaw bone was injured; I do not know from personal knowledge how this happened.

Q. Did he remain in that ward until he died?

A. He did.

By a JUROR:

Q. Did this man's son see the patient Hughes before he died?

A. He saw him every day; I think he (the son) was here three or four days; he took some of his meals here and lodged in an opposite room to his father while he was here.

(Copy.) J. WILSON JONES.

ALBERT SPENCER, *Coroner.*

STATE OF NEW YORK, }
County of Oneida, } *ss.:*

UTICA, *February* 6, 1884.

J. B. Orendorf, being duly sworn, says: I am an attendant here in the Asylum; I have been employed here the last time fourteen years; I came here in April, 1863, and was here about five and one-half years; I recollect the patient, Mr. Hughes, that was brought here January 25; he was placed upon the ninth ward, which is a ward for patients predisposed to suicide.

Q. What was his condition at that time?

A. He was somewhat depressed and I thought it was a case of melancholia.

Q. How long did he remain on your ward?

A. From Friday at one o'clock until Saturday at ten o'clock, I should judge; I was away Friday evening from half-past six until eleven; when I returned he was walking in the dormitory in his night clothes; I left him in charge of Mr. James Mulherron, the night watch, and went to bed.

By the FOREMAN:

Q. What kind of a bed was Hughes placed in that night?

A. It was an open bed placed in the ten bedded dormitory; at six o'clock the next morning John M. Jones, an attendant on the ninth ward, and myself got Mr. Hughes up and he dressed himself; when I came in the morning we took him out of a covered bed which he had been placed in during the night; he was very much depressed that morning and ate very little breakast; after breakfast he stood on the hall with his arms in this manner (shown) nearly half an hour, with his eyes looking up to the ceiling and fixed; I went and got a chair and set him into it; he did not show any resistance; we wanted to sweep the hall and we took him and carried him down to the day-room; he would not or could not walk; he seemed to be laboring under some delusion; we made a sort of a basket of our hands and so carried him down, and then instead of sitting up in the chair he sprawled himself out; we tried to sit him up in the chair; he seemed to imagine that he could not sit up straight; at half-past nine of Saturday morning I went to the theater to work, I think by the order of Dr. Backus; I was absent about twenty-five minutes; when I came back Mr. Jones and Mr. Mahoney were holding him in a seat, each had hold of an arm; he was kicking and frothing at the mouth; he spit at the attendants and tried to bite them; Supervisor J. W. Jones had gone to the office to report it; when he returned he said the orders were to take him to No. 4; Supervisor Jones, assisted by J. M. Jones and Mahoney, took him there.

(Copy.) JOHN B. ORENDORF.

ALBERT SPENCER, *Coroner.*

STATE OF NEW YORK, }
County of Oneida, } *ss.:*

UTICA, *Feb'y.* 6, 1884.

John M. Jones, being duly sworn, says: I am an attendant here on the 9th ward; I came here the 24th day of December last; I recollect the patient Hughes, that was brought here one week ago last Friday, January 25; he came into my ward about half-past one Friday afternoon; after he had got through dinner Mr. Orendorf told me that I had better bathe him and I did so; I afterward took him down to the day-room and stayed with him that afternoon; he was quiet there until six o'clock; we remained until eight o'clock in the evening, and then I undressed him and put him to bed; I placed him in the third bed from the door, in what we call the ten bed dormitory; this was all I had to do with him until six o'clock the next morning; at that time Mr. Orendorf and myself went up and took Mr. Hughes out of the covered bed.

By the CORONER:

Q. Is this all you know of this case?

A. No, it is not; I was called out by Mr. Mahoney about ten o'clock Saturday morning, the day after he came, to assist him to place Mr. Hughes in a seat; we seated him down and put on his coat and vest, he stayed on the seat very quiet for a few minutes and I went back to my work; I was at my work about five minutes I should think, and I was called out again by Mr. Mahoney to assist him; Mr. Mahoney and I stayed with him about ten minutes, one on each side of him; I told Mr. Mahoney that I thought it best to go and report him to Supervisor Jones; I stepped up to the 8th ward and reported, and Mr. Jones came down, and Mr. Hughes was removed to the 4th ward; when Mr. Hughes went into the 4th ward he was violent.

(Copy.) JOHN M. JONES.

ALBERT SPENCER, *Coroner.*

INQUEST RESUMED AT ASYLUM.

FEBRUARY 7, 1884.

John Somers, sworn and examined:

By the CORONER:

Q. Mr. Somers, you are an attendant here, are you?

A. Yes, sir; night watchman; attendant first and night watchman afterward.

Q. How long have you been employed here?

A. Since May 23, 1876; eight years from this May; I was attendant first and appointed night watchman.

Q. Did you know this patient, Mr. Hughes, brought here?

A. Yes, sir; I saw him here that night he was brought here.

Q. You were on duty that night?

A. I was on duty relieving Mr. Mulheron on the ninth while he was at supper, and I saw Mr. Hughes; he would not stop in bed; I could not keep him in bed; then I took another man out of the covered bed and put him in; he was not noisy then; he went into the covered bed quite voluntarily, and I closed him down; that was between 11 and 12; then between 12 and 1 o'clock Mr. Mulheron, the regular night watchman on that ward, called me and told me about him being very noisy, and I went to see Dr. Backus about it; he prescribed some medicine, and he took and drank it all; I did not know any thing more about him, only in the morning I took from the night watchman the report that he was noisy from 12 to 4; at 12, 1, 2, 3, 4, and awake at 5, and that is all I know about it.

Q. You didn't see any thing more of him?

A. No, sir; that is all I know about it.

By Mr. SHEARMAN:

Q. Have you heard any of the attendants of number four speak of what occurred there?

A. I heard them speaking of there being a fuss.
Q. Did you hear them say as to what was done with Mr. Hughes?
A. No, sir.
Q. Haven't you heard any one speaking of what occurred?
A. Yes, sir.
Q. And who was engaged in it?
A. I couldn't say.
Q. Haven't you heard any of them say they were engaged in it?
A. I heard Mr. Weir and Mr. Brown were the parties there, but I haven't heard any thing about it, sir.
Q. Haven't you heard any thing further about it?
A. No, sir, only that they were sorry any thing had occurred.
Q. They said that?
A. Yes, sir.
Q. What did they say and who was engaged in it?
A. I couldn't say.

By Mr. SPENCER:

Q. Do you know that these parties were there when he received those injuries?
A. I couldn't say, sir; I am not here at all in the day time.
Q. You did not have to use any violence in putting this man in the covered bed.
A. No, sir.
Q. There was no one else there at the time except yourself?
A. No, sir; no one but myself.
Q. What was your idea in putting him in a covered bed?
A. Because he wouldn't stop in the other bed; he would not stop in the open bed; I would hardly be out of the room before he would be after me.

By Mr. BECKER:

Q. He took the medicine all right?
A. Yes, sir; he sat up in the covered bed and drank it all up.
Q. Do the doctors usually prescribe without going to see a patient?
A. Well, sometimes if a patient is noisy they send something to quiet him.
Q. They do not go to see him?
A. Yes, sir, they do; if a patient is very violent the doctor goes to see him, but if a patient is just noisy they send him medicine and I give it to him.

By Mr. MARTIN:

Q. After you put him in the covered bed he was noisy?
A. Well, when the other watchman came he found him so.
Q. Did he want to be taken out of the bed?
A. Well, I don't know; I took only the report from the other watchman in the morning.

JOHN SOMERS.

A. C. Weir, sworn and examined :

By the CORONER :

Q. Mr. Weir you are in attendant at this institution ?
A. I am.
Q. How long have you been employed here, sir ?
A. Twenty-nine months.
Q. What is your business particularly ?
A. I have got charge of a hall.
Q. Which hall ?
A. No. 4.
Q. You knew this patient, Mr. Hughes, that was brought here on the 25th of January ?
A. I did not know him, but was told about him when he came on my ward.
Q. What time was he brought to you, Mr. Weir ?
A. I think it was half-past ten.

By the DISTRICT ATTORNEY :

Q. In the day time ?
A. In the forenoon.
Q. On which day ?
A. It was on the 26th he came to my ward.
Q. That is the 4th ward ?
A. Yes, sir.
Q. Where was he brought from, as you understood ?
A. From the 9th ward.
Q. Who brought him ?
A. Mr. Jones and Mr. Mahoney.
Q. And are they employed on the 9th hall ?
A. They are ; and also by Supervisor Jones of the second department.
Q. Are there other attendants on the 4th hall except yourself ?
A. There are.
Q. How many others besides yourself ?
A. Three besides myself.
Q. Now when did this injury occur to Mr. Hughes ?
A. That I could not tell.
Q. Well what time in the day or evening was there any difficulty whatever out of which this arose ?
A. I should think about twenty minutes to twelve of the same day.
Q. Then he had been on your ward about two hours ?
A. About an hour and a half.
Q. During the time he was there on the ward how many attendants were there ?
A. There was three.
Q. Besides yourself ?
A. Two besides myself.
Q. Who were they ?

A. Mr. Bills and Mr. Brown.

Q. They are the regular attendants on the ward?

A. They are.

Q. Now, Mr. Weir, were you there all the time that Mr. Hughes was there?

A. I was not in the day-room all the time he was there; I was on the hall all the time he was there on the hall.

Q. How long did you remain there after he was first brought there?

A. I remained, I should think, it was about twenty minutes to twelve, when I went up to report him to Supervisor Barrisdale.

Q. You say he was brought about ten or a little after?

A. About ten.

Q. You remained until about twenty minutes to twelve?

A. Yes, sir.

Q. Had any altercation taken place in that time?

A. I think there had.

Q. We will begin from the time when he first came there, and you will state his condition and what occurred?

A. When he came to the ward I was sitting on the third chair from the north end of the ward; I saw him come in and the attendants holding him by each arm, and they kind of dragging him along, and I got up and Mr. Jones locked the door behind him, and Mr. Jones and I went down to the day-room after him, and Mr. Jones told me he had been very violent and striking the patients on nine, and we went down to the day-room and Mr. Jones, the attendant, and Mr. Mahoney sat him in a chair, and Mr. Mahoney says: "Here is a bad patient, you will have to look out for him;" I was in the day-room at the time.

Q. Now after he sat him down what occurred?

A. He sat there quiet as long as I remained in the day-room; I remained until Mr. Jones and I came back to this end of the ward.

Q. Then what occurred?

A. A few minutes after that, I could not tell the number of minutes, he came up to my end of the ward from the day-room; he was very much excited; he looked at the windows and acted as if he would dive out through the windows; I got between him and the window and tried to talk to him, and tried to quiet him down, and asked him not to get excited, and he remained there a few minutes and then went into the day-room again.

Q. Were there any other attendants with you at this time?

A. Not then.

Q. Were there any in the day-room?

A. Yes, sir.

Q. Who?

A. Mr. Bills.

Q. He went to the day-room then?

A. Yes, sir.

Q. What did you next see of him or learn?

A. It was a very few minutes after that the doctor came on the ward.

Q. What doctor?

A. Dr. Backus.

Q. What did he say?

A. He asked me where Mr. Hughes was, and I told him he was in the day-room, so the doctor and I walked down into the day-room and the doctor went up and spoke to him; he could not get any answer from him; he muttered something, in Welsh, I should think; I could not understand what he said.

Q. What was he doing?

A. He was walking around.

Q. What next?

A. The doctor took him by the hand and he twitched his hand away from him; we did not say any thing more to him then.

Q. Did the doctor leave then?

A. The doctor and I returned from the day-room to the ward and talked a few minutes together about the patients.

Q. Then he left the hall?

A. Yes, sir.

Q. Then Mr. Hughes was in the day-room?

A. Yes, sir.

Q. How soon after that did you learn any thing of him?

A. Well, I should think perhaps twenty minutes or half an hour; I could not tell the exact time; Mr. Bills came to the end of the ward with him; Mr. Bills and another patient had hold of him; he was kind of resisting and they were fetching him along; when they came through the passage way I got up and met them and said, Mr. Bills: "Mr. Weir, you will have to take care of this man; I can't do any thing with him;" we fetched him up and sat him on the chair where I got up from; Mr. Bills says: "I will have to go to the dining-room; it is about time to get dinner;" we sat him in the chair where I got up from, and as soon as we sat him there he jumped up, and I stepped around to his side and sat him in the chair again; he put his arms on the chair arms and got up, and I could not well hold him down, and I didn't want to get in front of him because he was violent; I stepped around to the left side of him and took hold of him by the collar with my right arm, and with my left I had hold of his left arm; I had a little purchase that way, because I was a little behind the chair; Mr. Brown was in his room changing his clothes.

Q. That was the other attendant?

A. Yes, sir; that was the other attendant; he stepped around, Mr. Brown did, on the opposite side and took hold of him; he came and we held him down as well as we could, because we saw that the man was very much excited and he tried to bite us and kick us, and we had to go around to the side and handle him as carefully as we could; I was there, I should think, at least five minutes; I should think perhaps a little over five minutes, and I said to him: "Mr. Hughes, I think you know better than to act the way you do;" after a while he seemed to sit all right and kind of quiet; "now,

Mr. Brown," says I, "it's getting near dinner time; you take care of him and I will go up and see what is to be done with him;" I went up, but did not see the supervisor on No. 1; I waited there over five minutes for him.

Q. Which supervisor?

A. Supervisor Barrisdale; I started to come back to the ward and I met Supervisor Barrisdale, and I told him that I came to see what was going to be done with Mr. Hughes; that he was so very violent that it was necessary to have something done with him; when I got back on the hall Mr. Brown was about half way from the bath-room door to where Mr. Hughes sat with a basin of water and a sponge; I went to Mr. Hughes and I saw there was trouble and I asked him "What is the trouble?" Then I asked Mr. Brown, "Have you had trouble with Mr. Hughes, Mr. Brown?" And he said, "We have had trouble, and I wished you had strapped him before you had gone up;" I could see blood on Mr. Hughes' mouth and face and knew there was trouble; I assisted Mr. Brown to sponge him off — his face and his hands; we could not do that very well because he tried to resist and blew a bloody spittle at us; I stood at one side and held him; after we got him sponged off as well as we could, I went up and got a basin of water, and I asked Mr. Hughes to rinse out his mouth; he kicked at me, and I stepped back so that he did not kick me; I talked with him a few minutes and asked him to drink some of the water, but he struck the cup of water out of my hand; I went up to the water-closet and got a mop and tried to mop up the water; just as I was setting the mop away Dr. Backus came in; he stepped up to Mr. Hughes and opened his mouth to see where he was bleeding; I said, "take care, doctor, he will bite you;" he put his finger in his mouth and he made no effort to bite him; "Mr. Weir," says he, "how did he come by this injury; his jaw is broken?" I could not answer him; I says, "Doctor, I can't tell you, I was not on the ward;" I could not answer his question because I did not know; the doctor immediately left the ward, and the bell rung and the patients went to dinner, and I sat down beside Mr. Hughes, and he says, the first word, "you have no business to strap me in this chair."

Q. Was he then strapped in the chair?

A. Yes, sir; he was not strapped when I left him.

Q. You left him with Mr. Brown?

A. I did.

Q. He had him strapped to the chair?

A. Yes, sir.

Q. And that was the condition in which you found him, with blood on his face?

A. Yes, sir.

Q. Did Hughes say any thing else?

A. I asked him: "How did you come to be injured, Mr. Hughes?" He said: "I will let you know when the doctor comes down?" I said: "Don't you know that you were very violent and tried to injure us, and I thought this was the best to do?".

Q. What did he say to that?
A. He didn't make any reply then.
Q. Was Mr. Brown the only attendant left on the hall when you left?
A. He was.
Q. And the only attendant when you came back?
A. He was.
Q. Mr. Brown is here now?
A. He is.
Q. How long did Hughes remain in the chair — strapped there — after you went back and found he was injured?
A. Probably twenty minutes; it might have been half an hour.
Q. Did any thing else take place during that time; any conversation take place between you and Brown and Hughes?
A. No, sir.
Q. And was any thing done for him except what you have said?
A. That was all; we sponged him off.
Q. Did any other doctor come back except Dr. Backus.
A. Yes, sir; three others.
Q. Who?
A. Dr. Brush, Dr. Pilgrim and Dr. Backus.
Q. And Dr. Backus was the one first came and found the injury?
A. He was.
Q. Did they make an examination?
A. Yes, sir.
Q. While he was still in the chair?
A. No, sir; they took him into my room.
Q. What did they do?
A. They stripped up his shirt there.
Q. And made an examination?
A. They did; Dr. Brush placed his hand on each side standing behind him and extended his hands to the front of his body; Dr. Brush then said something to Dr. Pilgrim which I did not understand; then Dr. Pilgrim placed his hands in the same way — one on each side.
Q. How long were they engaged in that?
A. I should say fifteen minutes.
Q. Where was he taken from there?
A. To the eighth ward.
Q. You did not see him, or have any thing to do with him after ward?
A. No, sir.
Q. About what time was he taken there?
A. It was nearly one o'clock.
Q. About how long were you gone when you went up after this supervisor, and before you came back and found the injury?
A. From five to ten minutes.

Q. And when you went back and found he was injured and strapped in the chair, were there other patients about there?

A. Yes, sir, the chairs were nearly all filled.

Q. Nearly every chair occupied?

A. Yes, sir.

Q. Most of the patients seated?

A. Some sitting, others not.

Q. Was there any thing said by Mr. Brown as to how the injury occurred?

A. Mr. Brown reached the patient with the basin of water from one side about the time I reached him from the door; then I said: "What in time is the matter here? Have you had trouble with him?" Mr. Brown says: "Yes; I wish you had strapped him to the chair before you went up." After that I made inquiries from the patients and I found one patient who said he had struck his face on the chair when he was trying to jerk away from him.

Q. Who was that patient?

A. Mr. Winnie.

Q. Is he a violent patient?

A. No, sir.

Q. Is there any thing else, Mr. Weir, in addition to what you have stated, that can throw any light upon the subject?

A. All I can say is that I made full investigation as to how the injury occurred because I was very much worked up about it; I had had charge of the hall seventeen months and nothing had occurred, and it worked me up quite a good deal, and I was bound to find out where the injury was received; I said: "Mr. Brown, if you have had such a tussle with him you must know how this injury was received." He positively declared he did not know.

Q. Did Mr. Brown say that he had had a tussle with him?

A. He did, and that he had to call one of the patients to assist him.

Q. Did he say any thing as to how it began?

A. He did not say.

Q. Did he say any thing with reference to his having a tussle in order to keep control of the patient?

A. He said he had a tussle with the patient, and that other patients helped him.

Q. That was his remark?

A. Yes, sir.

Q. Is it customary, Mr. Weir, to call upon patients to assist you?

A. Sometimes.

Q. Do you mean by that it is simply a custom?

A. It is done sometimes.

Q. How many attendants are usually in charge of that ward you speak of?

A. Four; it is a very large and crooked ward.

Q. Where were the others when you went away?

A. One in the dining-room with a patient getting dinner; one — Mr. Brown — was with me, and the other place was vacant.

Q. So that there were only three attendants there?

A. That was all.

Q. You say it is sometimes necessary to call upon patients to assist the attendants?

A. It is.

Q. And what occasions that necessity; is it by reason of their violence?

A. Yes, sir; sometimes patients come out of their rooms in the morning and take hold of you; they come out of their rooms sometimes quite naked and make sudden attacks on you and you have always to be on your guard, and in cases of that kind it is sometimes necessary to call patients to your assistance because the other attendants are not within sight or hearing.

Q. Well, from knowing Mr. Hughes as you did, do you think it was necessary for Mr. Brown to call upon patients to assist him?

A. Well, I couldn't hardly answer that question.

Q. You could not say as to that without knowing how violent the man was?

A. No, sir.

By Mr. Barnes:

Q. How many patients have you on that ward?

Q. Twenty-nine on the ward.

A. Is it part of the duty of the attendants to take care of the dining-room and assist about dinner.

A. Yes, sir; one of the hands takes care of that.

Q. He leaves about 11:30 to take charge of the dining-room?

A. Yes, sir.

Q. That takes one of the men away?

A. Yes, sir.

Q. The attendants have their rooms on the hall?

A. Yes, sir.

Q. You stated that Mr. Mahoney helped to bring Mr. Hughes down?

A. Yes, sir.

Q. How long did he stay there?

A. He stayed three or four minutes; not long; he went right back; the two attendants went back before Mr. Jones, the supervisor, went back.

By Mr. Martin:

Q. Did you learn in any way how he could have broken his ribs in the tussle; whether he fell or any thing of that kind?

A. I could not learn.

By the DISTRICT ATTORNEY:

Q. Did Mr. Brown say as to whether they had fallen on the floor?
A. He didn't say any thing about that.
Q. Did you ask him any thing about that?
A. I did.
Q. What did he say?
A. He said he did not know as he fell on the floor.

By Mr. KINCAID:

Q. Mr. Weir, what was your object in leaving the ward?
A. I thought I had better have some restraint to put upon him at that time of day when we were going to have dinner.

By the DISTRICT ATTORNEY:

Q. Do you mean by that that you were liable to have less attendants and it was necessary to have some restraint to put on him?
A. Yes, sir; it was necessary for the attendants to have dinner ready and some of us have to go in to dinner with the patients and that would leave only one man on the ward and it was necessary to have some restraint.
Q. Do you go to the dining-room; some of the attendants with the patients?
A. Yes, sir; if some of the patients are not fit to go to the dining-room they remain on the ward and some of the attendants must stay with them.
Q. So that in that case one attendant would be left with Mr. Hughes?
A. Yes, sir.
Q. And you thought restraint had better be put upon him without leaving him there with one attendant?
A. Yes, sir.
Q. Is it customary to leave the hall with one attendant when there are violent patients that way?
A. It could not be otherwise on that hall; that hall is so crooked that the attendants cannot always be together and can't always see each other.

A. G. WEIR.

James Brown, sworn and examined:

By the CORONER:

Q. Mr. Brown, you are an attendant in this institution?
A. I am, sir.
Q. How long have you been employed here, sir?
A. Since the 20th of July last.
Q. In what department are you?
A. I am on the fourth ward.

By the District Attorney:

Q. How old are you, Mr. Brown?
A. I am twenty-six years old.
Q. Always lived in this country?
A. No, sir.
Q. When did you come here?
A. Eight years ago.
Q. You know Mr. Hughes?
A. I do know him, sir.
Q. The man who was injured?
A. Yes, sir.
Q. You were on the fourth ward when he was there?
A. Yes, sir.
Q. On the same ward with Mr. Weir?
A. Yes, sir.
Q. You knew when Hughes came there?
A. No, sir; I did not.
Q. You did not know when he was first brought on the ward?
A. No, sir.
Q. When did you first see him; where were you at the time he came on the ward?
A. I was in my room dressing.
Q. What time in the day was that?
A. In the forenoon, Saturday.
Q. Saturday, the 26th?
A. Yes, sir.
Q. You were in your room dressing, as you understood, when he was brought there?
A. Yes, sir.
Q. After dressing, you came out and saw Hughes there?
A. Yes, sir.
Q. Who else was there with Mr. Hughes?
A. Mr. Bills and Mr. Weir.
Q. What time in the day was that?
A. I should think it was about half-past eleven.
Q. When was he brought there, as you understood; how long before that?
A. Well, he was in there for some time; I could not say; half an hour, or such a matter.
Q. Where was Hughes when you first saw him?
A. Coming through the hall; there was an attendant on one side of him and a patient on the other.
Q. Walking along?
A. Walking along.
Q. Who was that attendant?
A. Mr. Bills.
Q. Who was the patient?
A. Mr. Winnie.

Q. He has been a patient on that ward how long?
A. Well, I don't exactly know.
Q. He has been there since you were there?
A. Yes, sir; he was there four or five months.
Q. They were walking along the hall then in a quiet way, or was Mr. Hughes violent?
A. He was very violent.
Q. Struggling?
A. Yes, sir; and trying to get away.
Q. Where did they go with him?
A. They sat him in a chair.
Q. Well, what else was done?
A. Well, when I saw he was so violent, I stepped back of the door and got a waist belt.
Q. What was done with that?
A. It was not put on.
Q. It was not used at that time?
A. No, sir.
Q. What did you do with the waist belt?
A. Nothing then.
Q. What did you do with the waist belts — strap them to the chairs?
A. Yes, sir.
Q. And the chairs are fastened to the floor?
A. Yes, sir.
Q. It was not used at that time?
A. No, sir.
Q. What else was done with Mr. Hughes?
A. Mr. Bills then went away and I came; Mr. Weir and I were there.
Q. Mr. Weir and yourself?
A. Yes, sir.
Q. What did you have to do, if any thing?
A. I tried to keep him in the chair with Mr. Weir.
Q. Just state what he did and what you did; just describe to the jury what occurred, in your own way, and what his condition was and what you had to do.
A. He tried to get out of the chair several times; he stood up and we sat him back in the chair, and we did that five or six times; Mr. Weir stood behind the chair and I stood in front; Mr. Weir had one hand on the coat collar, and with the right hand he hit the patient.
Q. He did what?
A. He hit the patient.
Q. Where did he hit the patient?
A. In the face.
Q. Mr. Weir hit him?
A. Yes, sir.
Q. In what way?
A. With his fist.

Q. With his fist?
A. Yes, sir.
Q. Just describe how he did it.
A. Well, he closed his hand in that way (indicating).
Q. Which side of the face did he strike?
A. The right hand side.
Q. The right hand side?
A. Yes, sir.
Q. Any thing else done?
A. I hit the patient.
Q. You hit him?
A. Yes, sir.
Q. How many times did you strike him?
A. Once.
Q. With the clenched fist or with the hand?
A. With the fist.
Q. Where did you hit him?
A. In the abdomen.
Q. Was that while he was sitting, or standing?
A. While he was sitting; just as they sat him down.
Q. Why did you hit him?
A. Well to see if we could keep him quiet.
Q. You understand what the rules are?
A. I do.
Q. You know that one of the rules is, that you are never to strike any of the patients under any circumstances?
A. Yes, sir; in that ward we can't help it.
Q. You are aware of that rule?
A. Yes, sir, I am.
Q. How long did that continue?
A. Well, I should think four or five mintues.
Q. We will come to the time when Mr. Weir went away; do you remember that?
A. I do.
Q. And leaving you there the only attendant?
A. I do.
Q. About what time in the day was that?
A. Perhaps that was about twenty minutes to 12 o'clock.
Q. About how long was Mr. Weir gone?
A. Well, I should think about eight or nine minutes.
Q. During the time that he was gone did you have any altercation with Hughes?
A. I did.
Q. Were any others present except patients?
A. No, sir.
Q. Patients there?
A. Yes, sir.
Q. Now will you state in your own way what this altercation was between you and Hughes; how did it occur and what was done?
A. I tried to help him in the chair; he resisted and tried to get

away; then he got out of the chair on the floor on his knees; I put him back in the chair again; he was struggling to get away; I was afraid if he got away he would hurt the patients or me.

By the CORONER:

Q. Did you get the patient back in the chair yourself?
A. I did, myself.
Q. What next?
A. I put the strap on; by that time or a little after that the doctors and Mr. Weir came; there was blood on the floor before Mr. Weir left the hall.

By Mr. BECKER:

Q. Did you put the strap on alone?
A. With the assistance of a patient.
Q. What next?
A. There was some blood on the floor before Mr. Weir left the hall; there was some blood on the floor and the doctor asked me how that came there; I told him I didn't know; he asked me how the patient got hurt; I did not tell him.

By the CORONER:

Q. This was Dr. Backus?
A. Dr. Backus.

By the DISTRICT ATTORNEY:

Q. What reply did you make to him?
A. I told him I did not know.
Q. You did know, didn't you, Mr. Brown?
A. I did; Dr. Backus examined his mouth and found his jaw fractured; he could not get any satisfaction how it was done.
Q. He tried to find out how it was done?
A. He did.
Q. He asked you various questions about it and your replies were that you did not know?
A. I didn't know.
Q. He went and reported it?
A. He went away and came back himself with Dr. Brush and Dr. Pilgrim.
Q. What was done then?
A. They removed the waist belt from the patient, and they took him into the bedroom where I sleep; I believe they examined him; I do not know.
Q. You do not know what they said?
A. No, sir.
Q. Now were you there when Mr. Weir came back?
A. I was.
Q. And the doctor came soon after Mr. Weir returned?

A. He did.

Q. And when Mr. Weir came back did you have a dish of water with a sponge?

A. I did.

Q. And where did you get that?

A. I got that in the bath-room.

Q. And Hughes was strapped to the chair then before you got that of course?

A. He was.

Q. And you went to get that for the purpose of washing the blood from his face?

A. Yes, sir; I washed off the blood from his face.

Q. Now, Mr. Brown, you state you said to the inquiries of the doctors as to what occurred that you did not know?

A. Yes, sir.

Q. You say, though, that you did know?

A. Yes, sir.

Q. Well, will you tell just how it occurred, knowing as you did just how it occurred?

A. I have stated just how it occurred.

Q. No, you have not told us how the injury occurred?

A. I told you that Weir stood back of the chair and I stood in front, and Mr. Weir hit the patient.

By Mr. KINCAID:

Q. More than once?

A. Twice.

By the CORONER:

Q. With the clenched hand?

A. With the clenched hand.

By Mr. KINCAID:

Q. Both times in the face?

A. Once in the face.

Q. Where did he hit him the second time?

A. In the head.

By Mr. BARNES:

Q. Did he him with his knuckles?

A. With the side of his fist; he hit him first on the jaw, the second time on the head.

Q. On which side of Hughes' face. ?

A. On the right side.

By the DISTRICT ATTORNEY:

Q. Now, Mr. Brown, how many times did you hit the patient?

A. Once.

Q. Was that with the fist?

A. It was.

Q. Just indicate about on your person where you hit him?
A. Right here (indicating the abdomen).
Q. That was while you and Mr. Weir were there together?
A. Yes, sir.
Q. It was before he went after the supervisor?
A. Yes, sir.
Q. How long before?
A. A few minutes before.

By Mr. VAN EMBURGH:

Q. Had he bled before Mr. Weir left?
A. Yes, sir.
Q. Where from?
A. From the mouth.

By the DISTRICT ATTORNEY:

Q. Now, while Weir was gone did you have any scuffle with the patient?
A. I did not have any more than to get him into the chair.
Q. Did you call on any patients to assist you?
A. No, sir.
Q. Then when Mr. Weir came back you say you had the dish with the sponge and was endeavoring to sponge off the blood; did Mr. Weir ask you how any injury occurred?
A. No, sir; the doctor asked him and Mr. Weir said the man was all right when he went away.
Q. Did the doctor ask Mr. Weir.
A. I could not say he asked him what occurred; Mr. Weir said he was all right when he went away.
Q. What else was said right then?
A. Then the doctor asked me how it occurred; I told him I did not know.
Q. Did you say to the doctor at any time that you had hit him, and that Mr. Weir had?
A. Not that I know of?
Q. Well, was there any scuffle between you and Mr. Hughes while Weir was gone in which Hughes fell over the chair, or against the chair?
A. Not that I know of.
Q. Did you strike Mr. Hughes at all while Mr. Weir was gone?
A. No, sir, I did not.
Q. Did you use any violence in the way of giving a blow?
A. I did not.
Q. Either with the fist or with the foot?
A. No, sir.
Q. You did not jump on him with your knees?
A. I did not.
Q. Was he on the floor at any time while Mr. Weir was gone?
A. Only on his knees.

Q. Was he down on the floor at any time while you and Mr. Weir were there together?

A. No, sir.

Q. Was there at any time a blow inflicted, either with the fist or with the feet, excepting the three that you have stated?

A. That was all.

Q. And from the time you came on the ward and saw Mr. Hughes, after you had dressed, you were not away from Hughes until after the injury?

A. Only to go after the water.

Q. That was after the injury, was it not?

A. Yes, sir.

Q. Did you learn afterward, Mr. Brown, that ribs were broken?

A. I did not; well, afterward I did; after he had been taken to ward eight.

Q. Did you learn from the doctor that came that the jaw was broken?

A. I did.

Q. Did you realize then how the jaw became broken?

A. I did.

Q. Did you understand how the ribs were broken?

A. I did not.

Q. You learned afterward that ribs were broken?

A. I did.

Q. When?

A. After he went to ward eight.

Q. Was that after the three doctors had been called?

A. Yes, sir.

Q. Did anybody else than you and Weir have any thing to do with Mr. Hughes, or take hold of him in any way?

A. They did before we did.

Q. Who was that?

A. Mr. Bills and Mr. Winnie, as I understood.

Q. Mr. Winnie, the patient?

A. Yes, sir.

Q. You have described their walking up the hall?

A. Yes, sir.

Q. Was Mr. Hughes all right at that time?

A. As far as I saw.

Q. When he came into your charge was he then all right?

A. As far as I saw.

Q. When he came then into your charge, when you and Mr. Weir got him, he was all right?

A. I could not see any thing the matter with him.

Q. There was no blood?

A. No, sir.

Q. How long afterward was it that you struck him?

A. A few minutes; perhaps three minutes.

By Mr. Van Emburgh:

Q. Mr. Weir struck him twice?
A. Yes, sir.

By Mr. Barnes:

Q. You say you know how the jaw was broken?
A. Yes, sir; by the blow delivered by Mr. Weir.
Q. You are satisfied that that blow broke his jaw?
A. Well, I did not know at the time, but when the doctor examined it I believed it was from the effects of the blow.
Q. Then it is your belief it was broken in that way?
A. Yes, sir.

By Mr. Keim:

Q. From being there with him all the time, is there any way that you can think of now how he could have received these other injuries; did you push him violently into the chair?
A. No, sir; not so that he got hurt.
Q. Which side was Weir?
A. He was back of the chair.
Q. Did Mr. Weir have, at any time, hold of him with the right arm, and take hold of him with the left; was Mr. Weir, as you are sitting there, exactly back of him, or side ways from him?
A. Exactly back.
Q. And when he hit him, he was exactly back of him?
A. He hit him sideways, like this (indicating).
Q. He was right back of his head?
A. Yes, sir.
Q. You were exactly in front?
A. I was exactly in front.
Q. Did you think it was a terribly powerful blow that he struck him?
A. I did not think the blow was sufficient to do that?
Q. Where do you think you hit him?
A. I am sure I hit him down pretty low.
Q. Was it not in some way that might have broken his ribs?
A. No, sir; it was not.
Q. When they removed him from the chair to your room, did he get up and walk by himself?
A. No, sir; I think he was assisted; I don't know but that he could walk, but they were afraid to let him go alone.
Q. Did he make any complaint of being hurt then?
A. Not that I know of.
Q. Now, you say that when Weir was behind Hughes, he had hold of Hughes' collar?
A. Yes, sir; with the left hand; he had hold of his collar with the left hand, and he struck with the right hand.
Q. Now, just recall the position; just get that into your mind

and then describe it; do you state that Weir stood behind him with the left hand on the collar?

A. Yes, sir.

Q. Was this the way?

A. Yes, sir.

Q. You are certain?

A. I am certain.

Q. Now, are you sure that Mr. Weir did not strike in this way (indicating)?

A. I am.

Q. Are you certain that he was not in this position at some time?

A. He may have been, but not at the time he gave him the blow

Q. How did you hit him?

A. I had hold of Hughes' right arm with my left, and I struck the blow with the right; he was struggling to get up.

Q. Why did you hit him, Mr. Brown?

A. To see if I could not keep him quiet.

Q. When did he stop resisting you?

A. Not until the strap was put on, and then he tried to get out and he couldn't go, and then he got quiet.

Q. Was he so weak that he couldn't walk when they took him out of the chair?

A. I should think he could, but they led him out.

Q. How far did that strap go?

A. It was put around the waist and strapped to the chair.

Q. After you put that strap around him did he continue to struggle?

A. He did.

Q. How long was it after that — after you had put the strap on — that Weir came back?

A. About five minutes.

Q. After Weir came back did he continue to struggle until the doctor came?

A. I could not say.

Q. Was he apparently quiet after the first doctor came?

A. I think after the doctor came Mr. Weir told him to look out; that the patient would bite his finger when he put it in his mouth, but he did not bite him.

By Mr. Barnes:

Q. From your experience on the hall, and seeing the waist belts put around patients, and seeing them struggling after they were put on, could a patient struggle hard enough against that belt to break his own ribs?

A. Well, he may if he kept rocking like that (indicating); I think he could.

By Mr. Becker:

Q. How wide is the belt?

A. I should think about an inch and a half in width.

By Mr. KEIM:

Q. Was he very violent when Weir left to see the supervisor?
A. Yes, sir, he was.
Q. You say it took as much as Weir and you both could do to handle him?
A. Yes, sir.
Q. Well, you say you put him in the chair alone?
A. I put him in the chair alone, but a patient helped me to put the strap on him.
Q. You say a patient helped you to secure him?
A. Yes, sir.

By Mr. KINCAID:

Q. You went for this belt just as soon as you saw the patient coming through the hall?
A. Yes, sir.
Q. Is there any reason why you did not put it on to restrain him before he was struck?
A. Well, the head attendant was there, and I could not put it on until he told me to do so.
Q. Not unless Mr. Weir told you to do so?
A. No, sir; I knew though that if the belt was put on he would be kept from hurting himself or us.
Q. Have those chairs arms to them?
A. They have, something like this (indicating a chair with high arms).
Q. These chairs in which they are strapped have arms to them?
A. Yes, sir, similar to this.

By Mr. KEIM:

Q. You claim that you had to hit him to conquer him?
A. That was what I intended.
Q. How was it that this occurred?
A. I put him in the chair once and then I had to strap him after that; I knew I could not keep him there, and that he could get away and might hurt me or some one else.

By Mr. BARNES:

Q. As violent men run on your ward, did you consider him a violent patient?
A. He was the most violent patient I have ever seen there.
Q. How long have you been on there?
A. Since the 20th of July last.
Q. Where do you live?
A. Utica.

Q. Did you see the doctor make an examination with reference to the injured jaw?

A. I saw him put his finger in his mouth.

Q. Which side did he examine?

A. The right side.

Q. Did he make any examination of the left side?

A. He may; I cannot say.

Q. You say he discovered that the right jaw was injured?

A. I saw him pull his lip down and examine his mouth.

Q. Did you hear the statement there that the jaw was broken on the right side?

A. I heard Dr. Backus say so.

(A waist belt, such as was used, was shown to the jury.)

Q. Could you say how this waist belt was fastened to the chair; by one post or two?

A. I think it was fastened to the right post; it was the right post; I remember that well.

Q. Could a patient twist around with that and break his ribs in this way?

A. He might if it was not put on tight.

Q. Which side did you approach him from when you came near him?

A. The right side.

Q. Will you stand by me and show just where Weir stood by the patient when he struck him?

A. Right there (indicating).

Q. It was directly behind?

A. Directly behind.

Q. Now describe how he got out of the chair when you were there alone with him?

Q. He got out of the chair and pulled me over on him; and I fell over on him and kept my arms around him and pulled him back again into the chair. (Illustrates the manner of holding patient by passing his arms around juror Barnes and bending him over.)

Mr. Barnes — Now that could break his ribs if he fell on him as he did on me then.

By Mr. Becker:

Q. Did he get clear out of the chair?

A. Yes, sir; I kept my arms around him without letting go of him.

Q. You are not sure whether you fell on him or not?

A. I did not fall on him; I did not let go of him because I thought he would hurt me or some one else.

Q. How tall a man was Mr. Hughes?

A. He was nearly as tall as I am; he was taller than Mr. Barnes; he pulled me right on top of him and I pulled him back again and sat him again in the chair.

Q. During that scuffle did he go on to the arm of the chair?
A. I could not tell; he may have.
Q. He was struggling to get away?
A. Yes, sir; and I was struggling to keep him in the chair.

By Mr. KINCAID:

Q. Mr. Brown, from what you know of the scuffle with him during the time he was in your care, have you any idea of how the ribs became broken?
A. No, sir; unless in that way.
Q. Were you at all surprised when you heard that these ribs were broken?
A. I was, although I did not know what occurred in the day-room.

By Mr. MARTIN:

Q. You mean by that that you thought they were broken?
A. I knew nothing about it; I could not tell whether they could be broken in that way or not.
Q. How much do you weigh?
A. About two hundred.
Q. What was your judgment as to whether there was enough violence used to break the ribs; do you think they may have been broken in that way when he got out of the chair?
A. They may in the struggle; I couldn't tell; I tried so hard to keep him in the chair.
Q. You say you were not surprised when you learned that his ribs were broken?
A. I was surprised, but I say I did not know what occurred in the day-room.
Q. Did you think you had used violence enough to break his ribs?
A. I did not think I had; that there was while I was on the hall; I don't know whether he broke them when he was running up and down on the hall or not; I heard he was running up and dowi
Q. Do you know whether he fell down there or not?
A. I do not.
Q. Have you heard any such thing?
A. No.

By Mr. VAN EMBURGH:

Q. What assistance did this patient give you when you strapped Mr. Hughes in the chair?
A. He took hold of him by one hand when I was putting him in the chair.
Q. Who was that patient?
A. Mr. Winnie.
Q. Any one else assist you?
A. Mr. McQueen held him on the other side.

Q. And then you went to get the strap?
A. Yes, sir.
Q. You called these patients to your assistance?
A. No, sir; they came.
Q. Are they violent patients?
A. No, sir; they were the best two patients we have on the hall?
Q. Did they kick or strike him?
A. No, sir.

By Mr. Becker:

Q. What object did you have in not telling the doctor about that?
A. I did not want it to come out till it was necessary.
Q. Have you and Weir had any conversation about this matter since then?
A. No, sir.
Q. You have not said any thing to Weir?
A. No, sir.
Q. Nor Weir any thing to you?
A. No, sir.
Q. Is that patient that helped you quite rational at times?
A. They are both quite rational, both of them.
Q. Are they reliable persons; persons that you could depend upon?
A. Well, sometimes they have spells; you could depend upon them sometimes and sometimes not; they might say that we struck them when we had not struck them for some weeks.
Q. You can't possibly be mistaken about Weir's striking him?
A. No, sir, I am not.
Q. Has Mr. Weir been in charge of that hall since?
A. Yes, sir.
Q. You have been an attendant there since?
A. Yes, sir.
Q. Been daily in association with him?
A. Yes, sir.
Q. Has not this matter been the subject of conversation at all?
A. No, sir; not between Mr. Weir and I.
Q. Has it been between any one else and you?
A. I have told Mr. Bills something.
Q. Do you know whether Weir and Mr. Bills have had any talk about it?
A. I think Mr. Weir and Mr. Bills have talked about the matter.

By Mr. Martin:

Q. Is there any unpleasantness between Mr. Weir and you?
A. No, sir; not any.

Q. Have you had any difficulty with him?
A. Not any.
Q. Any words of any kind?
A. Never.
Q. When he came back there, did he ask you how it came that the patient was bleeding?
A. He did not.
Q. What did he say when he came back; what was his manner?
A. He said something to the doctor.
Q. You say that Hughes bled before he went out; did he say any thing in your presence about the injury?
A. No, sir.
Q. Before the doctor came, he did not say any thing?
A. No, sir.
Q. Did he make any remark that the man was hurt when he came back?
A. No, sir.

By Mr. KINCAID:

Q. He did not say that he was sorry that any thing of that kind had occurred on his department?
A. Afterward he did.
Q. How long afterward?
A. Perhaps in a day or two.
Q. Not immediately after his return to the hall that day?
A. No, sir.

By Mr. BARNES:

Q. When he came back, after seeing the supervisor, did he say: "For goodness sakes what has happened since I went away," or any thing of that kind?
A. No, sir.
Q. When he told the doctor that he was all right when he went away, you knew that was not true?
A. I did.
Q. But you did not explain to the doctor?
A. No, sir.
Q. Have you explained to the doctor since?
A. I have to Dr. Pilgrim.
Q. Any one else?
A. To Mr. Bills.
Q. Any one else?
A. Not that I know of.
Q. You have explained to them just as you have to us?
A. Not perhaps just like this.
Q. But in substance this?
A. Yes, sir.
Q. Are you in the habit of striking patients?

A. No, sir.

Q. Are any of the others on the ward in the habit of striking patients?

A. No, sir; Mr. Weir does not like to strike any one or to see anybody struck.

Q Have you ever seen him strike patients before?

A. I have.

Q. Have you ever struck them yourself?

A. Yes; it is necessary to strike them sometimes or they would be killing us; we have to defend ourselves at times.

By the FOREMAN:

Q. Were you defending yourself when you struck him like that?

A. Well he tried to bite and kick us.

Q. Mr. Weir had one arm and you had the other?

A. Yes, sir.

By Mr. KINCAID:

Q. Would you not have avoided all that by strapping him in the first place?

A. Yes, I think it might have been avoided by that.

Q. Mr. Weir could not have put it on without orders from the doctor?

A. No, sir.

Q. Then he went up to report him and see what was to be done, and you strapped him then before the doctor gave orders?

A. I did, because I was afraid he would kill me or one of the patients.

By Mr. BARNES:

Q. Then in your care of him, you exercised what was your best judgment?

A. I did.

JAMES BROWN.

Franklin Bills, sworn and testified:

By the CORONER:

Q. Mr. Bills, you are one of the attendants?

A. Yes, sir.

Q. How long have you been an attendant here?

A. A year the 15th of this month.

Q. Where did you live before coming here?

A. In the town of Marcy.

Q. And you are on which hall?

A. Fourth ward.

Q. That was the one where Mr. Hughes was at the time he received his injuries, as you understand?

A. Yes, sir.

Q. Do you remember what time in the day it was when Mr. Hughes was brought to that ward?

A. It was between ten and eleven o'clock, I think.

Q. You were there when he was brought there?

A. Yes, sir.

Q. What other attendants were there at the time?

A. Mr. Weir and Mr. Brown were on the ward.

Q. Was Mr. Hughes violent?

A. Yes, sir, he was.

Q. Very violent?

A. Yes, sir, he was pretty violent in my presence.

Q. Did you have any charge of him at any portion of the time?

A. When they brought him down to the ward I was in the day-room, in the further day-room, and they sat him down in a chair next to me.

Q. Who did that?

A. Two attendants from the ninth hall.

Q. They brought him from the ninth hall?

A. Yes, sir.

Q. You saw him as quick as he was brought in?

A. Yes, sir.

Q. Before he was seated?

A. Yes, sir.

Q. Just describe what he did as to his violence?

A. Well, he sat in the chair very quiet for fifteen to twenty minutes; that was the first thing; then he got up and walked down to the hall from the day-room where I was and walked into the other part, and was probably gone ten minutes, I should think, then came back and walked around the room, and went to one of the doors and commenced knocking against it with one of his hands; I went to him and asked him to sit in a chair and he sat there, and after a while got up and went to kicking another door; I went toward him and he went away from that door and began kicking at another; I went to him and put my hand on his shoulder and sat him in a chair, and I thought I would talk to him and try to quiet him: I put my hand on his shoulder and he commenced to bite and kick me, and I took hold of him by the collar and hand and we held him, Mr. Winnie and I, there about ten minutes; then it was time for me to go to the dining-room; Mr. Winnie helped me to hold him and I took the patient from the chair, Mr. Winnie and I, and took him up into the other room and sat him in a chair; then I went back and got a patient to go into the dining-room with me, and I went right up to the dining-room, and that was all I saw of him.

Q. That was the last?

A. Yes, sir.

Q. Were you notified or did you learn that he was injured before he was taken away?

A. I heard of it; the attendants came down, Brown and Weir,

and they said the patient was hurt ; they didn't say where he was hurt.

Q. Did they enter into any particulars at that time?

A. No, sir.

Q. Did you learn who hurt him?

A. No, sir.

Q. Have you since learned how the injury was inflicted?

A. I have learned some things.

Q. You may state what you know upon the subject?

A. Mr. Brown said that Mr. Weir hit the patient once ; he said he stood on one side of the chair and hit him once here (indicating the side of the head), and that he hit him in the abdomen ; that was what Mr. Brown told me.

Q. Did they say any thing about a scuffle?

A. No, sir, I do not think they did, to me.

Q. Did Mr. Brown speak about the patient falling over the chair and being injured in any way?

A. I do not think he did.

Q. In speaking of these injuries did Brown claim they were received by those blows which you have mentioned?

A. No, sir.

Q. What did he say as to how they were received? Did he make any claim as to what his theory was?

A. No, sir.

Q. You asked him how the man got hurt?

A. No, sir.

Q. The subject of his injury was the subject of conversation?

A. Yes, sir.

Q. Did you understand Brown to be describing how the man was hurt?

A. I asked him if he struck him and he said yes ; I asked him if Mr. Weir struck him and he said he did.

Q. Did you learn that the man's jaw was broken?

A. Yes, sir.

Q. Did you learn that his ribs were broken?

A. Yes, sir ; I heard Weir say so.

Q. Had you heard of that before Brown had the talk with you?

A. Yes, sir.

Q. Did you make any inqury of Brown as to how the ribs were broken?

A. No, sir.

Q. Now, you have had a talk with Mr. Weir about it?

A. I think I have.

Q. You have had some conversation?

A. I have asked him some few questions ; he said very little about it.

Q. Did you ask Mr. Weir if he struck Mr. Hughes?

A. Yes, sir ; I think I did.

Q. Was there any thing said about the striking, either by you or Weir?

A. I think there was.

Q. By you?

A. asked him if he struck him, and he said he slapped him on the side of the face.

Q. He said he gave the patient a slap on the side of the face?

A. Yes, sir.

Q. Did you ask Mr. Weir or did Mr. Weir say any thing at any time about this man getting hurt?

A. He said the man was not hurt until he went out to report him.

Q. Did you say any thing to Brown as to how he was hurt?

A. Mr. Brown said he was hurt while Mr. Weir was there.

Q. So that they differed in conversation about the subject?

A. Yes, sir.

Q. Weir claimed that he was not hurt until after he left the hall, and Mr. Brown claimed that he was hurt before he went away?

A. Yes, sir.

Q. Did Brown give any reasons for saying that the man was hurt before Weir left the hall? Did he say any thing about indications of an injury being apparent?

A. No, sir; nothing beyond what I have told you.

Q. Did he say that he knew Mr. Hughes was hurt because he bled before he went away?

A. I heard him say that there was blood on the floor before Weir went away.

Q. Did you see the place where the blood was on the floor?

A. I saw the place where it was mopped.

Q. It was directly in front of the chair?

A. I think it was.

Q. About how far from the man's feet, if he sat in the chair?

A. About two feet from the chair; I should think it was about a couple of feet.

Q. Could you see from where you stood, and was the man's head probably over like this, and the blood in front, directly down from that?

A. I think so.

Q. You think that the spots were near enough to indicate that blood dropped from his mouth as he sat in his chair?

A. Yes, sir.

Q. Were the blood spots far enough away to indicate that the blood came from his mouth?

A. As he bent forward, yes, sir.

Q. You would think that the man was in the chair?

A. Yes, sir.

Q. Was there much blood?

A. I didn't see any blood.

Q. Was there indications of such?

A. I couldn't say; it was all mopped up.

Q. How large a spot had been mopped up?

A. Only a small spot, about two feet square or such a matter.

Q. Now, have you had any conversation with Mr. Brown in which any thing else was said by him in addition to what you have given?

A. No, sir; I don't think I have.

Q. Have you given us all you said to Mr. Brown and all he said to you?

A. I don't know as I could state it all.

Q. Just state in your own way what you said to Brown and what he said to you; first tell me where it was you had the conversation?

A. It was on the ward; I couldn't tell you exactly where.

Q. How soon after this man was hurt?

A. It was a day or two afterward.

O. Fix it as definitely as you can?

A. I should think it was two days after.

Q. Was that the first conversation you had?

A. I think it was.

Q. Now will you state what you said to him and what he said to you, as near as you can think; if you can give the exact language do so, and if you cannot, as near as you can. Who commenced the conversation?

A. I could not tell who spoke first?

Q. Tell it as nearly as you can?

A. I think I spoke to Mr. Brown, and asked him first how it occcurred, and asked him what he had done after Mr. Weir went away; he said he tried to keep the patient in the chair with Mr. Winnie; that they tried to keep him in the chair; I understood him to say that the patient got down on the floor once and he raised him and put him back in the chair; that was the way he stated it to me; then he said that he went and got the strap and strapped the man in the chair; then he went and got a sponge and some water and sponged the blood from his mouth.

Q. Did he claim that he did that after Weir went away?

A. Yes, sir; then I asked him if he struck the patient after Weir went away or had any scuffle with him and he said no, sir, he did not; he only put him back in the chair just as I told you.

Q. Then he said he had no more trouble with him after he had him strapped in the chair?

A. No, sir.

Q. Any thing else?

A. No, sir; I don't think there is any thing else.

Q. That is all he told you?

A. Yes, sir.

Q. Will you tell us what Mr. Weir said to you; first tell us when it was?

A. Mr. Weir stated to me that the patient was not hurt; and he claims he did not see any blood on the floor up to the time he went away to see the supervisor.

Q. When did you have this talk with Mr. Weir?

A. Yesterday.
Q. Was that the first?
A. Yes, sir, I think it was.
Q. Yesterday he told you that there was no blood on the floor; and that the patient was not injured until after he went away?
A. Yes, sir.
Q. Did you tell Weir that Brown claimed that he was hurt before he went away?
A. Yes, sir.
Q. What did he say to that?
A. What did he say?
Q. Yes.
A. Well, he said that he did not see any thing the matter with the man when he went away.

By Mr. Becker:

Q. Have you ever had occasion to strike a patient?
A. Yes, sir.
Q. Often?
A. No, sir.
Q. Have you ever seen Mr. Weir strike a patient?
A. Yes, sir.
Q. Have you ever seen Mr. Brown strike them?
A. Yes, sir.
Q. Is it necessary, sometimes, to protect yourselves and the other patients?
A. Yes, sir; it is.
Q. You are almost obliged to use force at times, are you?
A. Yes, sir; you can't avoid it sometimes.
Q. Do you know whether you have been reported at the office for the striking of a patient?
A. No, sir; I don't.
Q. Whose business would it be to report?
A. The head attendant on the ward.
Q. Mr. Weir?
A. Yes, sir.

FRANKLIN BILLS.

James Mulheron, sworn and examined:

By the Coroner:

Q. You are employed here as an attendant?
A. Yes, sir.
Q. In what capacity?
A. Night-watch on the 9th ward.
Q. You know this man, Mr. Hughes?
A. He slept on my hall one night; I went to supper at quarter

past eleven, and when I got back, Mr. Somers had him put in a covered bed; he was very restless and noisy all night, so that when he was put in a covered bed he was perfectly safe as far as doing harm to myself or any one else was concerned; in the morning I went home, and that is all I saw of him.

Q. Did you assist in putting him into this covered bed?

A. No, sir, he was put in while I was at supper.

Q. Did you see the patient after that?

A. I visit the patients every quarter of an hour; he remained noisy all night; I could not keep him quiet; I could not make him understand any thing I said to him.

Q. Did you see him after that?

A. No, sir, I came the next night at eight o'clock, and he was not on that ward.

Q. He had been injured then?

A. Yes, sir.

Q. Did you learn how he had been injured?

A. No, sir.

Q. You did not know any thing about that?

A. No, sir.

Q. Is that all you know of the matter?

A. Yes, sir.

By Mr. SHEARMAN:

Q. Were you present when he was taken to the 4th ward?

A. No, sir; I left at six in the morning and went home.

JAMES MULHERON.

Dr. Ogden Backus recalled:

By the DISTRICT ATTORNEY:

Q. You took the statement that was given by the son of Mr. Hughes when he was brought here?

A. Yes, sir.

Q. Was he asked to disclose all the circumstances of the case?

A. Yes, sir; that is the rule.

Q. And as they gave it you reduced it to writing?

A. I took it in lead-pencil and wrote it out in the case book afterward.

Q. Were these preserved?

A. The pencil notes were not preserved.

Q. And from what they said to you what was the condition of the patient?

A. The condition was one of melancholia, with suicidal tendencies.

Q. Did they say to you that he was melancholy, and had threatened suicide?

A. Yes, sir.

Q. And did they give you any information as to his being a violent patient toward other people?

A. No, sir; none whatever.

Q. Did they disclose the fact to you that two or four men had been employed to take care of him?

A. No, sir; the first I heard of it was when I read of it in the paper in Mr. Hughes' evidence.

Q. And you received him here as a patient suffering from melancholia with suicidal tendencies?

A. Yes, sir.

Q. And he was sent to a suicidal ward?

A. To the ninth ward; yes, sir.

Q. Had they disclosed the facts that you have since learned, would you have made the same disposition with him?

A. I would have sent every patient with suicidal tendencies to the ninth ward, because if they are sent to other wards at night they are not so closely watched.

Q. But if you had learned that he was violent, with suicidal tendencies?

A. I should still have sent him to the ninth ward.

Q. What was there in his case that would lead any one to believe that there were suicidal tendencies?

A. For the simple reason that his son had said that he was suicidally disposed; that he had delusions that every one was down on him, and generally those delusions are connected with a tendency to suicide.

Q. And in spite of that, doctor, was he a violent, maniacal patient as distinguished from suicidal patients?

A. No, sir; his history was suicidal from what they said.

Q. But with reference to his conduct here?

A. Well, as to his conduct here; we have a condition of melancholia with frenzy sometimes; a patient may be suicidal, may be very melancholy, and yet at times have a condition of frenzy; these we still consider as suicidal cases, although while in this condition they may not be suicidal; as soon as the frenzy passes off the suicidal tendency again returns.

Q. You were not informed that it took three or four persons to take care of him?

A. No, sir.

Q. Doctor, you understand the rules of the institution governing the conduct of attendants toward patients?

A. Certainly; yes, sir.

Q. And is it one of the rules of the institution that a patient is not to be struck at any time, or under any circumstances by an attendant?

A. That is one of the rules emphatically laid down.

Q. What is the penalty, if any is prescribed, in case of the violation of this rule?

A. Instant dismissal of the attendant.

OGDEN BACKUS.

Dr. C. W. Pilgrim, sworn and examined:

By the District Attorney:

Q. You know Mr. Brown and Mr. Weir?
A. Yes, sir.
Q. And you know Mr. Hughes?
A. Yes, sir.
Q. Did you go up to see him after he was injured?
A. After he was injured, yes, sir.
Q. Who was there with you?
A. I think Dr. Brush and Dr. Backus got there right after me; I think I got there a little while before them; Dr. Backus had been there before and reported it; they were right behind me; I do not think they were over three or four seconds after me.
Q. Did you make an examination then to any extent?
A. We did not make a very careful examination.
Q. Was Hughes strapped in the chair then?
A. Yes, sir.
Q. Was he violent then?
A. No, sir.
Q. At that time he was comparatively quiet?
A. Yes, sir.
Q. Now you have had some conversation with Mr. Brown since the injury?
A. Yes, sir.
Q. As to how it occurred?
A. Yes, sir.
Q. Will you state to the jury what went on and what was said?
A. It is all down; Mr. McGarr took notes of it.
Q. This conversation was had in the presence of the stenographer?
A. Yes, sir.
Q. At the time?
A. Yes, sir.
(The notes of the previous examination were then read.)
Q. Did you make an examination afterward?
A. No, sir.
Q. Doctor, with reference to the statements as to whether they saw nothing wrong with them, did they mean nothing irrational or did they mean there was nothing in the way of an injury?
A. They meant no injury.
Q. Doctor, have you since had any conversations with Mr. Brown or Mr. Weir on the subject?
A. Yes, sir; nothing very extensive though.
Q Any thing that differs from this statement?
A. Nothing essential, although there have been a few additions made.
Q. By which one?
A. By Brown.
Q. What were those additions?

A. He claims that he saw Mr. Weir strike the patient.

Q. Before he left to report him?

A. Yes, sir.

Q. And did you ask him, doctor, if he did not strike him before Weir went away?

A. I could not say whether I asked him that or not.

Q. There was no claim made at this time that Weir struck him?

A. No, sir.

Q. When was that interview with Brown when he claimed that Weir struck him?

A. I do not remember the date; it was a few nights before the patient died.

Q. It was after that interview that was put on paper?

A. Yes, sir; that was on Saturday.

Q. How many times did he state Weir struck the patient?

A. I think twice.

Q. Did he say any thing about whether he had struck him himself or not?

A. I do not think he did at that time, but he has since; then he has admitted that he struck him in the lower part of the stomach or abdomen.

Q. Was there any thing said between you and him as to the force of the blow or how violent it was?

A. I asked him if he was sure that he had struck him low down and he said yes; I asked him if he was sure that his knee had not struck him in any way while he was on the floor; he said he was sure they had not.

By Mr. BARNES:

Q. In that interview with Mr. Brown that was taken down by Mr. McGarr, Mr. Brown just answered your questions?

A. Yes, sir; he did not volunteer any thing.

Q. Did you ask him any questions when you first went up?

A. I asked Mr. Weir, at the time, how this had occurred; his reply was, "I don't know, doctor;" of course I saw the man was very sick, and I knew the inquiry could wait much better than the man could.

Q. Did you make inquiry of Brown then?

A. I think he was standing there, but I did not address my inquiry to either one particularly?

Q. Mr. Weir said he did not know how it occurred?

A. He did.

Q. And Mr. Brown was silent?

A. Yes, sir.

Q. Any one else make inquiries?

A. Not that I know of.

Q. What did you do next?

A. We attended to the man as soon as we could and got him to the attendants' room.

Q. Who was the first physician saw him?

A. Dr. Backus.

CHAS. W. PILGRIM.

Dr. Ogden Backus, recalled:

By the District Attorney:

Q. Did you see the blood after Hughes was injured?

A. Yes, sir.

Q. About how much was there and where was it?

A. Well, there was a little on the chair and a little on his beard but the floor had evidently been mopped up.

Q. You saw the spot where it had been mopped up?

A. Yes, sir.

Q. Was that directly in front?

A. It was diagonally in front.

Q. To the right or left?

A. To the left.

Q. Did you see any on the wall?

A. No, sir.

Q. Which arm of the chair was it on?

A. It was on the left arm; it seemed as if it had dropped, a drop or two; I think there was a drop or two on the front edge of the chair.

Q. And these spots of blood indicated that they had just dropped there?

A. Yes, sir.

Q. Was there an extensive bleeding from the mouth?

A. No, sir; I was surprised that there was not more; there was no froth; of course there was a little saliva.

Q. This break of the jaw was it a complete break?

A. Yes, sir; it came down just here (indicating) and moving it produced a crepitis; you could see the line of fracture.

Q. Was there any opening in which you could put your finger?

A. No, sir; of course you could separate it, but the skin would hold it together and prevent the insertion of the finger; it dropped down a little so that in setting it you would have to raise it; that was caused by a contraction of the muscles.

Q. Was there any thing that indicated any internal bleeding from the lungs?

A. Nothing that would indicate it, no, sir.

Q. You examined Mr. Hughes before the other physicians saw him?

A. Yes, sir; I examined simply his face; I found his jaw fractured and reported it immediately.

Q. Where was the jaw fractured?

A. It was fractured a little to the right of the center.

Q. When you first went to see Mr. Hughes who had been injured, who was present of the attendants?

A. Well, I can't positively state who.

Q. Was Brown there?

A. I cannot state positively; I did not notice especially; my attention was taken up with the patient.

Q. Do you know whether Weir was there?

A. I could not state positively.

By Mr. CHENEY:

Q. Don't you know which of the attendants cautioned you to take care about the patient biting you?

A. I could not state positively.

Q. Do you know, Doctor, whether you made an inquiry after you got there of the attendants, as to how the man got hurt?

A. Yes sir.

Q. What was the reply?

A. As near as I can recall it I asked "how did this happen?" I remember saying that; then somebody, I don't know who, said that the man hurt himself against the chair; then somebody said that he slipped; I was taken up entirely with the patient and did not devote any attention to the matter.

By the CORONER:

Q. You stated on your first examination that you did not get a satisfactory explanation?

A. That was simply because I was taken up with the patient; I simply did not press the investigation, as I thought my first duty was to report to Dr. Gray.

By Mr. BARNES:

Q. Would a blow on the side of the face be likely to fracture the jaw in that way that Mr. Hughes' was fractured?

A. By a blow on the side of the face?

Q. Yes?

A. I think so; you take the construction of the jaw; a blow struck on the side would be likely to break there (indicating a little to the right of center).

Q. Would striking on his face be likely to break his jaw?

A. Yes, sir; a man might fall on his face on the floor and fracture his jaw.

By Mr. MARTIN:

Q. Was this a complete break?

A. Yes, sir; a complete break.

Q. Doctor, did you think there were more than three ribs fractured in this affair?

A. I knew there were two, and I didn't know how many more; I pulled up his shirt, and I found what is known as *crepitis* over two ribs.

By the CORONER:

Q. There is a statement from the coroner and physicians in Madison county that every rib was broken on that side?

A. I know there were two broken, but the man's condition was such that I did not deem it advisable to investigate further, as his treatment would be the same in any case, whether one or more ribs were fractured.

OGDEN BACKUS.

A. G. Weir recalled:

By the DISTRICT ATTORNEY:

Q. Mr. Weir, after you came back after you had gone to make a report to the supervisor, you stated that you saw Mr. Brown with a dish of water and a sponge?

A. Yes, sir.

Q. Was he going away from the patient or coming toward him?

A. Coming toward him.

Q. When he came up to him did he use the water and sponge?

A. We both used it.

Q. Did you say any thing to Mr. Brown as to what had occurred?

A. I did; I asked Mr. Brown what occurred; he said he did not know; he said he had a tussle with Mr. Hughes and had to get one of the patients to assist him and that he did not know what had occurred; I said, "Mr. Brown, you certainly must know something about this, because we must find out about it."

Q. What did he say then?

A. He said "I wish you had strapped him before you went to see the supervisor."

Q. Did you strike the patient at any time?

A. I could not say as I struck himI; had a hand around him and let it down on his shoulder.

Q. Will you say that you did not strike him?

A. I slapped him.

Q. Where was that?

A. It was toward the back of the neck; I stood on his left side?

Q. That was with the flat hand?

A. It was.

Q. Did any one see you do that?

A. I think Mr. Bills saw me do that.

Q. You think Mr. Bills saw it?

A. I think so.

Q. How many times did that occur?

A. I think I slapped him twice.

Q. You struck him more than once?

A. I slapped him twice in that way.

Q. Did Brown strike Mr. Hughes in your presence?

A. He did.

Q. Where did he strike him?

A. He walked right out of his room, and the first thing he did he struck twice.

Q. He struck him where?

A. In the abdomen; the first words I said were: "Go esay; go easy;" he did not have his coat on at the time; I was holding him in the chair at the time and he came up and struck him twice.

Q. Was that at the time you had slapped him?

A. I had slapped him before that.

Q. Was Mr. Brown present when you slapped him?

A. He was a little ways off.

Q. Then he saw you slap him?

A. I think so.

Q. Then he came up and struck him twice and you said "Go easy?"

A. "Go easy," yes, sir.

Q. Did you see blood on Mr. Hughes' face before you went to report to the supervisor?

A. There was no blood on his face when I left him

Q. Any blood on the floor?

A. None when I left; he was sitting quietly in a chair when I went away; he had been violent before and I thought Mr. Brown could manage him all right until I could get back.

Q. Your idea was that he was a violent patient and that you would get him into restraint during the dinner time?

A. Yes, sir; I would say I came back Sunday night; Mr. Brown rooms with me and he says to me: "Mr. Hughes' ribs are broken," I said, "this is a very said affair;' and he said "I don't know how it occurred, you might ask the patients;" then I asked the patients and since then I have thoroughly investigated among the patients to see how this occurred and by whom he got his injuries; I am not able to find out thoroughly how his ribs came to be injured.

Q. Have you learned any thing from the patients with reference to the tussle between Brown and Hughes while you were gone?

A. Yes, sir; I learned that there was a tussle and that he was on the floor.

Q. From whom did you learn that?

A. From Mr. Winnie and from Mr. Rappenberger, a German patient; I could not understand all that he said, but he showed me where his finger was bitten by Mr. Hughes during the struggle; that was while I was gone; I could not understand very well what he said; since I found out the man's ribs were injured I asked the doctor where he was injured and where his ribs were broken, and

he told me that they were broken on the front side; I do not think it could be from the time he struck him.

Q. After you came back and found Hughes injured, Dr. Backus was the first physician that came there?

A. Yes, sir.

Q. He came right behind you?

A. Yes, sir.

Q He made a personal examination of his face sufficient to determine that his jaw was broken?

A. Yes, sir.

Q. Did he make inquiry as to how his jaw was broken?

A. He asked me; I was right there; I said, "Doctor, I couldn't tell you how that occurred."

Q. Do you know Dr. Pilgrim?

A. Yes, sir.

Q. Do you remember his asking you how the injury occurred?

A. Yes, sir.

Q. Did you say there that it occurred after you left the ward?

A. Yes, sir.

Q. When you stated to the physicians that it occurred while you were away, did Brown say any thing about your statement as to whether it was true or not?

A. Mr. Brown was not in the room when Dr. Pilgrim asked me these questions.

Q. Do you remember any thing that was said?

A. The doctor asked me how that occurred; it was done, I said, while I was away.

Q. Did Brown say any thing then?

A. Not while Dr. Pilgrim was examining me; he was not present.

Q. Now, did you see any blood on the floor in any way before you went away?

A. No, sir; there was no blood on the floor when I left.

Q. How long was it after you slapped him and Brown struck him before you went to see the supervisor?

A. I should think about ten minutes; something about that time; I remained long enough to see that he was quiet and that it was safe for me to leave him.

Q. And it was five or ten minutes after that?

A. Yes, sir.

Q. You were gone how long?

A. I should think ten minutes.

Q. So that from the time you slapped him and Brown struck him there was a period of about twenty minutes elapsed before you came back and saw Brown with the basin of water?

A. Yes, sir.

Q. And up to that time you could not see any blood?

A. No, sir; and he could never have received any injury up to that time.

Q. You were not apprised that he received any injury?

A. No, sir.

By Mr. SPENCER:

Q. Is it customary or the rule to report all such occurrences?
A. Yes, sir.
Q. Do you know how it happened that Dr. Backus came into the room immediately after you?
A. I do.
Q. How was it?
A. He came in with Mr. Barrisdale.
Q. You had reported to the supervisor and he had met the doctor?
A. Yes, sir; I told the supervisor and he met the doctor.
Q. So that Dr. Backus came in with the supervisor?
A. Yes, sir.
Q. And the supervisor was there with the doctor?
A. Yes, sir.

Alexander Barrisdale, sworn and examined:

By the DISTRICT ATTORNEY:

Q. Mr. Barrisdale, you are the supervisor of one of the departments?
A. Yes, sir.
Q. Which department?
A. First department.
Q. And included in that department is the fourth ward?
A. Yes, sir.
Q. You knew Mr. Hughes, or who he was?
A. No, sir; I can't say I did; I saw him.
Q. You know there was such a man?
A. Yes, sir.
Q. When did you first see him?
A. I saw him first on the fourth ward sitting in a chair.
Q. That was after the injury?
A. Yes, sir.
Q. Did you go to the ward to see Mr. Hughes in company with Dr. Backus?
A. Yes, sir.
Q. And had Weir called on you to report the Hughes case to you?
A. Yes, sir.
Q. Did he report him as a very violent patient?
A. Yes, sir.
Q. Requiring unusual restraint?
A. Yes, sir.
Q. He reported that he was very violent and excitable, and the object in reporting to you was that you should give your attention to the subject?
A. The object was that I should see the doctor and see what was best to be done.
Q. Then you discovered that he had been injured through Dr. Backus' examination?
A. Yes, sir.

Q. Did you see any blood there?
A. I saw some blood on his lips and mouth.
Q. Did you see any on the floor?
A. No, sir.
Q. Had that been wiped up?
A. Yes, it seemed so.
Q. Was there a spot on the floor where they had been apparently mopping something up?
A. Yes, sir.
Q. That was close by the chair?
A. Yes, sir.
Q. Was Mr. Brown there at the time?
A. Yes, sir; I believe he was.
Q. Was he using a sponge and a basin of water?
A. No, sir; he had got through with them when Dr. Backus and I went down.
Q. Was Mr. Weir there at the time?
A. Yes, sir.
Q. Anybody else?
A. No, sir; I do not think there was.
Q. Any other attendant there at the time?
A. No, sir.
Q. Did you hear Dr. Backus say how the man received the injury?
A. Yes, sir; I believe I heard him ask the attendant that came up, or something to that effect.
Q. You did not know who said any thing?
A. I could not say who replied to the doctor; the answer was to the effect that they did not know the man was injured.
Q. Did you hear Mr. Weir, while you were there, say that he did not know how it occurred; that it occurred while he was away after you?
A. I asked him about it, and he said he did not know how it occurred; he made the remark that the man was not injured while he was present.
Q. Was Brown there at the time?
A. I couldn't say, but I don't think he was at that time.
Q. Were you and Dr. Backus, Brown and Weir there together?
A. Dr. Backus was not there when I asked that question of Mr. Weir.
Q. Were Brown and Weir and you there together?
A. They were on the ward at the time.
Q. And at the time Weir said this, did Brown make any reply?
A. Mr. Brown was not present, I don't think, at the time Weir made that statement.
Q. Have you heard Weir make that statement in Brown's presence at any time?
A. No, sir.
Q. Did you hear Brown say any thing about how it occurred?

A. Mr. Brown told me that he did not know how it occurred.

Q. Did Mr. Brown ever claim to you that it occurred before Weir went to notify you?

A. Mr. Brown claimed that the accident must have occurred before Mr. Weir left the ward; he claimed it must have been before that.

Q. Did he state the fact in way of argument?

A. He stated that it must have been before Weir left the hall.

Q. Could you state that was his expression?

A. I believe he said it must have occurred before Weir went away.

Q. Did he at any time state that it occurred while Weir was there?

A. He said afterward that he believed the man's jaw was broken on the ward but that he did not know the ribs were broken.

Q. Do you know how long it was before you were found or went to the spot where Hughes was after Weir had notified you?

A. I reckoned it was not over ten minutes.

Q. You think it would be about ten minutes from the time you were notified?

A. Yes, sir.

Q. Do you know whether Weir when he went to notify you had to wait to see you?

A. Yes, sir; he waited on the first ward.

Q. Did he say any thing to you as to how long he had waited?

A. No, sir.

Q. But in fact he had waited there?

A. Yes, sir.

ALEXANDER BARRISDALE.

Dr. John P. Gray, sworn and examined:

By the District Attorney:

Q. Doctor, you may state what your position in connection with the Asylum is?

A. I am the superintendent of the Asylum.

Q. And how long have you been superintendent; about how many years?

A. For about thirty years

Q. You knew this man Hughes, the patient who was brought here?

A. Yes, sir.

Q. And did you know when he was brought here last?

A. Yes, sir; I saw him the morning he was admitted, in the office, and talked with him in the office.

Q. Were any of his family with him?

A. His son was standing near him when I was talking with him

Q. Who else accompanied him, if you know?

A. I do not know; I did not address myself to any one else.

Q. Did you enter into conversation with the son as to the condition of his father then?

A. I talked a little with his son then; I first met Mr. Hughes; I recognized him; he had been here before; I shook hands with him, and called him Mr. Hughes; he said "Mr. Anderson?" I said "Do you mean Dr. Andrews?" He said "Yes." "No," I said, "I am Dr. Gray." "Oh, yes," he said. I said "I am sorry that you have had to come back again; what is the matter?" He did not speak a word; made no reply; I asked "how long have you been sick, and how have you been sick?" I asked him a number of questions to which he made no reply, but held my hand very tight in his; I then asked his son how long Mr. Hughes had been sick, and he said a little over a week; I asked him some other questions which I do not recall, but my investigation of the case led me to the impression that he was a suicidal case; I then read over the notes in the case-book.

Q. Taken by Dr. Backus?

A. Yes, sir.

Q. They disclosed what, doctor, with reference to his coudition?

A. They disclosed the fact that he had been recently taken insane, and that the prominent feature of the insanity was depression and suicidal tendencies.

Q. Was there any thing there, doctor, either in his statement of the case which Dr. Backus had taken, or in the statement which the son or father had made to you which indicated his real condition?

A. The full facts were not given.

Q. You may state, doctor, whether it would have made any difference with reference to the treatment of the patient if the full facts had been given?

A. If he had made the same statement then that he made the night of his father's death it would have made a difference in his disposition.

Q. You had a talk with the son after his father's death?

A. Yes, sir; I talked with him several times during the time the patient was here and after his death.

Q. State, doctor, what he said as to his condition after the first time?

A. During the time the father was here I think the son was here an entire week with the exception of one day when he went home, and during all that time I got no information from him touching his condition at home, though I had remarked to him two or three times that it was rather strange that his father should have developed violence immediately after coming here; but it was evidently due to some delusion or hallucination of sight or hearing that induced him to make the sudden assaults upon persons and that we could not find out what those were; I asked him once up

stairs if he would not ask his father in Welsh about his motive for attacking others; he said, "Oh, he understands English;" I saw then that he did understand my talking to him; once before his death — it was the day before his death, or the morning of that day — after I had seen him he said, "What do you think of father?" I said: "I think, as I have said before, that he is a very sick man;" he said: "Do you think he will recover?"; I said: "I do not think he will; I do not wish to say what may be possible, but I do not think he will recover;" then he said: "I shall want to make some preparation, and want to know about what to do when he dies;" I said: "It will be time enough then, and you can do so at any time after his death;" in my office, in the evening after his death, the son came in, and the conversation was opened rather abruptly; he said at once: "I would like to talk with you about arrangements to take my father's body home;" he spoke about getting it away as soon as possible; I do not pretend to give his exact words, but I think I come pretty near it in substance; he said: "I have talked with the undertaker, and I would like to take the body on the eight o'clock train in the morning, and would like to ask you if it could be taken in a common case;" I said I hardly thought it was a proper thing to do; I said I did not think, under any circumstances, in a case of death, that a body should be disturbed within as few hours as that; he asked what difference it would make; I said a gradual cooling of the body occurred after death which was the ordinary course, and it was a mark of respect to let some time pass before moving it; that with such a course the body was in better condition; that the disturbance of a body ordinarily while it was warm in that way would undoubtedly cause more rapid decomposition unless the body was packed in ice. I do not recall the answer he made to that. I said: "I have always objected to packing a body in ice. I should not advise you to do that; the time of a day matters but little and the body can then be removed without embedding it in ice; it always seems an unpleasant thing unless it is absolutely required." Well he said he would take him away. Then I said: "Now, Mr. Hughes, we have been very frank with you in every thing relating to your father; this is a very sad affair of course and we have concealed nothing from you from the time of informing you as we did at once of the injury to the present hour." He said: "Oh, yes; I do not blame the doctors any, but some attendant or some one has done wrong." I said: "It is evident that an injury has been inflicted; I have told you how I thought it occurred. Now I should like to have you state frankly to me what the condition of your father was before he was brought here, because his condition after he was brought here was developed very differently from what the history given would have warranted." He hesitated a little and then said: "Well, I will say very frankly my father was very violent at home and it required part of the time two men to hold him and part of the time we had four to take care of him." I said: "Why didn't you state that when he came here?"

He said: "Well I told Dr. Backus about it." I said: "I know all you told the doctor that was taken in notes, and you have been here all the week but you have not told me that." I said: "Why did you bring him here then, with four to take care of him at home?" He said: "Because we thought he would kill some of us and himself as he threatened to, and the doctors told us so and told us if we kept him there he would do so, and that is the reason we brought him here."

Q. That is the first intimation you had from any source connected with the family that he was then violent before coming here?

A. That was the first intimation.

Q. When did you first learn of the injury inflicted upon Mr. Hughes?

A. Probably within five minutes after the occurrence.

Q. When did you notify the family?

A. I will answer a little at length and embrace the circumstances; I was sitting in the office; Dr. Backus came in and said: "Mr. Hughes has been hurt;" I said, "how?" he said, "in some trouble or something with the attendants; I don't know how exactly;" I said, "what did you observe?" he answered, "that he has a fracture of the jaw;" I said, "ask Dr. Brush and Dr. Pilgrim to go with you immediately and examine him and come and let me know and I will go in; I at once sent word to President Campbell and to General McQuade, chairman of the business committee of the board of managers, by telephone; as I was walking out of the office then to go to the wards, I met Mr. Campbell, who accidentally came in and I told him that a patient was injured; about that time one of the doctors came out and said to me, "his ribs are fractured and he is suffering from shock from the injury;" that was all within a brief period; I asked, "How many ribs?" he said: "There are two or more ribs fractured, and his condition was such that we did not think it advisable to make any further examination now." I said: "Very well." I then afterward went up to see him, after I had talked with Senator Campbell and General McQuade who came in directly; I went up to Mr. Hughes and saw the fracture of the jaw; I saw also the condition of his ribs, although the ribs were strapped with adhesive plaster, but there was evidently some serious injury to the lung; I then asked Mr. Hughes: the moment I came in I reached my hand to him and he took my hands both in his. I said: "I am sorry this has occurred; how did this happen?" or words to that effect. He said: "I don't know." "Oh, yes, Mr. Hughes," I said "you must know how it happened. You have a fracture of your ribs, and I instantly thought he did not take in the word fracture, and said: "your ribs are broken;" "where can you feel pain, or do you feel pain;" then he put his hand on his left side. I said: "That is where the injury is; have you any headache?" "No." "Any pain anywhere else?" "No." "Now," I said, "again I will ask you how did you get your side hurt?" He said: "It seems I was in a fight." I asked him with

whom and he said he did not know. I asked: "Don't you know who it was with?" "No." I asked him: "Who commenced it?" "I don't know." I asked: "Did you strike anybody?" "No." "Anybody strike you?" "No." "Somebody," I said, "must have struck you." "No; it seems I was in a fight and we all went down over the chair together." I asked him: "How many were there?" He said: "I don't know." Then he said: "I guess two or three." Then I again asked him who they were; he again said "I don't know." That was about all the information I could get from him. I asked him if before he was hurt he did not have some trouble with some one; he said "No," so that was all the information I obtained; I did not obtain any from him subsequent to that, except what I have said; afterward, when I talked to him, I knew he recognized me perfectly, and did things requested of him, such as putting out his tongue, and putting out his hand for me to feel his pulse as I sat by the side of the bed; he did these things promptly, and one time when he was not inclined to take food by the spoon I said it could be taken by a tube, holding the cup or glass near the face and putting the straight end of the tube in the glass and the curved end in the mouth; when I saw he was disinclined to take other stimulants, such as beef tea and brandy, I said: "Mr. Hughes, I think you can take milk punch and some champagne; the champagne will settle your stomach;" (he had then a little nausea); they reported that he could not take it through the tube; I went up afterward and they told me this and I then took the tube and held it in his mouth and said to him: "you can hold that on your tongue and suck it," which he did, and he continued the use of the tube afterward; I afterward saw that he was able to recognize those things and the ordinary suggestions made in that way.

By the District Attorney:

Q. That was the same day, doctor?

A. The first conversation was the first day of the injury, but the feeding, etc., was afterward.

Q. Now coming down to the time of notifying the family?

A. Immediately after the accident I wrote to the son saying that his father was injured; on Sunday I wanted to telegraph him fearing that he might not get the letter; but we could not get the office; the office was Morrisville, and we could not get it on Sunday; then I directed a telegram to be sent down to the Utica office and requested the Utica office to forward it as early as possible Monday morning.

Q. When did the son arrive?

A. On Monday afternoon; I saw him and then told him all about the case.

Q. Now, doctor, it is one of the rules of the institution, is it not, that no attendant is to strike a patient under any circumstances?

A. It is.

Q. And it was always then a violation of the rules when they do?

A. Always.

Q. Did you make any examination of Mr. Hughes personally, either in life or after his death, to determine the number of ribs that were broken?

A. I made as personal examination and his condition satisfied me that there were at least three ribs broken; but I did not deem it proper to make an examination to determine the number, as the character of the injury was so apparent and his condition was such that it mattered but little whether there were two or several, because it was not a simple fracture, it was a crushing in of the chest and a rib or ribs penetrated the lung, and I so informed his son and told him that he had a fracture of the ribs, and told him that the danger was not so much because the ribs were fractured but because of the character of the fracture and the injury to the lung.

Q. Did you tell him this before his death?

A. I told the son before his father's death that was my judgment and I told him that night. I said too I would like to make a *post mortem*, but he said he did not want it; that he wanted to take his father home; I said that he could not take him away; that I should inform the coroner, that it would then be in his hands, and that any further disposition then would be then as the coroner would direct; he then asked me some question which I don't exactly recall in regard to the *post-mortem*; whether it was necessary, or something of that kind; I said it was not necessary for a *post-mortem* for me to determine the cause of his death; that I could not conscientiously say that, and I repeated to him my view of the character of the injury, and that that was the cause of his death — the injury and the exhaustion following; he then said that he did not care to go to the expense of a coroner's inquest; I said it was not a question of expenditure, it was a question of right in every direction and every way; he then asked if they held the inquest if he could not get the body by eleven o'clock or eleven forty; I said I thought not; then he asked if he could take it in the afternoon; I said it was barely possible; I said it would be then in the power of the coroner after he had impaneled a jury and they had viewed the body to say what was to be done; I then told him that I proposed at once to inform one of the managers by a note that night and that I should also inform the coroner, and he asked me who the coroner was and I told him.

Q. This was the night of his death?

A. Yes, sir; I immediately sent a special messenger to General McQuade, chairman of the business committee, who had been here two or three times since the occurrence, and wrote to the coroner that night saying that his services were required at the Asylum, and expressing the wish that he would come as early as a quarter before nine, and directed that the night watchman, as soon as he was off duty in the morning, should deliver the note at the coroner's house.

By the District Attorney:

Q. Did you look at the man's body?

A. I looked very carefully at his body; there was a bruise or discoloration over the ribs and a slight bruise on the temple; there was a scratch on the head that looked as if it had been made there before; there was no bruise on the chin.

Q. Any on the side of the face?

A. No, sir.

Q. Did he wear a beard or have a smooth face?

A. He has a beard; I looked very closely when I first examined him, especially at his jaw; and I looked at the body after death, and there was no discoloration there; sometimes a dark color comes to the surface some time after a blow, but there was none there.

Q. What was the character of the bruise or the color on the ribs?

A. I could not see immediately over the part the plaster was on; the parts around it were bluish and such as would come from an extensive injury; it was from the blood settling around from the inside.

By Mr. Martin:

Q. A blow sufficient to break the jaw, would it not have been sufficient to discolor it?

A. I should think it ordinarily would; this was quite unusual to me; I never saw a jaw broken from a blow; I have seen a jaw broken from the kick of a horse and from falling from a horse.

By Mr. Kincaid:

Q. Is it possible or probable that such an extensive injury could occur on the ribs from a blow from the fist?

A. I do not think it possible; it is not easy to break the ribs by a blow from the fist; the chest is constructed well, and it would require the impact with a broad surface to produce such an injury as this.

Q. So that you do not think that a man's fist could do that?

A. No, sir, I do not.

By the District Attorney:

Q. Do you know the size and weight of Mr. Brown, the attendant?

A. Yes, sir.

Q. You know about how large a man Mr. Hughes was?

A. Yes, sir.

Q. Well, doctor, suppose Mr. Hughes was sitting in a chair as you are, and Mr. Brown was behind him with his arm around him in this way (indicating); Mr. Hughes' arms in this way; Mr. Brown endeavoring to hold him; Mr. Hughes struggling; Mr. Hughes finally falling over the side of the chair; Brown being on the right

side, and Mr. Hughes falling on the left side, do you think that could have fractured his ribs?

A. Yes, sir; and my judgment was that it was done in that way.

Q. Mr. Brown was on his right side, and Mr. Hughes went over on his left side, and Mr. Brown went over on him, and the ribs were broken then?

A. Yes, sir.

Q. That would be sufficient to produce the injury existing there?

A. Yes, sir.

Q. It could be done in that way?

A. Yes, sir.

Q. And if a man went over in that way, and there was sufficient force to produce an injury, it would be likely to fracture more than one rib?

A. Yes, sir.

Q. In all cases of fracture of the ribs, the ribs do not penetrate the lung?

A. No, sir; it is rather unusual for that to occur; a direct blow from any hard substance like a mallet would do this, and the heavy pressure in a fall might produce it.

By Mr. Becker:

Q. Would it require much of a blow to break a man's jaw with the fist?

A. Of course that would depend upon the size of the bone. I should think it would require considerable of a blow; it would depend somewhat, too, from the position from which it was struck.

Q. Do you think that Mr. Weir, standing back of him and striking sideways like that, could produce a broken jaw?

A. I think it possible; I think it was made either by a blow downward, or a knock against the upper side of the chair, or on the floor.

Q. The ribs were broken on one side, and the jaw on the other?

A. Yes, sir.

By Mr. Martin:

Q. It is quite common to see ribs broken by a fall?

A. Yes, I have seen ribs broken in that way, by a man too, being thrown from a wagon, by being thrown from a horse and by a horse falling upon a man and crushing in his ribs.

By the District Attorney:

Q. Since this injury, you have made inquiry for the purpose of satisfying yourself as to how it occurred?

A. Yes, sir; from every person who was in anywise connected with it.

Q. Together with patients on the ward at the time?

A. Yes, sir.

Q. Mr. Rappenburg and other patients?
A. Yes, sir.
Q. You have had conversations with them?
A. Yes, sir; with them and others.
Q. Have they told different stories on different occasions?
A. Yes, sir.
Q. State whether one of them at first stated he was present at the time of the injury, and afterward stated that he was not there?
A. He did.
Q. And could a reliable statement be obtained from either Mr. Winnie or Mr. Rappenburg?
A. I think not.

INQUEST RESUMED AT THE ASYLUM,

WEDNESDAY, *February* 18, 1884.

John Seeley, sworn and examined:

By the DISTRICT ATTORNEY:

Q. Mr. Secley, where do you live?
A. Twenty-nine Lansing street.
Q. City of Utica?
A. Utica.
Q. What is your business?
A. I am paper hanger.
Q. You have done some work at the New York State Lunatic Asylum at Utica?
A. Yes, sir.
Q. And were you engaged here in the month of January, about the 26th?
A. Yes, sir.
Q. In what part of the institution were you working?
A. On the fourth hall day-room.
Q. Did you see Mr. Hughes there, a man so called?
A. Yes, sir.
Q. In the day-room?
A. In the day-room.
Q. What time was it in the day?
A. Between 10 and 11.
Q. Who were the attendants there at that time?
A. Mr. Bills.
Q. Was he in the day-room?
A. Yes, sir.
Q. Did you have any occasion to go into the other hall where the accident occurred?
A. No, sir.

Q. You did not know who was in attendance there?
A. I did not.
Q. In the day-room did you see any thing that attracted your attention to Hughes particularly?
A. Only the exception of going up and down the hall and kicking and pounding the doors.
Q. Did you see any altercation between him and any person?
A. No, sir.
Q. Did you see any between him and Mr. Bills?
A. Mr. Bills tried to keep him quiet in the chair; sat him down twice or three times.
Q. And in what way was that done on the part of Mr. Bills? In a violent manner?
A. No, sir.
Q. Did he talk with him?
A. No, sir; he slipped from the chair on to the floor and Mr. Bills held him on the floor.
Q. And then what was done?
A. Well, when he was pacified he was placed back in the chair again.
Q. You say "when he was pacified." How was he pacified by Mr. Bills?
A. Well, he seemed to be quiet.
Q. You say he slipped from the chair to the floor?
A. Yes, sir.
Q. Was that in his struggle?
A. It was in his struggle to get away from Mr. Bills, who was holding him in the chair.
Q. So that he was thrown upon the floor by Mr. Bills, but fell out of the chair?
A. Yes, sir.
Q. Did he go on the floor with any force?
A. Not at all; simply slipped on the floor off the chair.
Q. Apparently no force or violence?
A. No, sir; slipped between Mr. Bills' hands.
Q. Mr. Bills behind him?
A. No, sir; he was kind of in front of him, and he slipped down and carried Mr. Bills with him.
Q. Mr. Bills did not go on him, or any thing of that kind?
A. No, sir, only was over him and holding him.
Q. No violence that you saw to this man by Mr. Bills?
A. Not that I saw.
Q. After that did you see Mr. Hughes standing or walking about in any place?
A. I do not —.
Q. What I want is this: whether after he slipped out of the chair and on to the floor you saw Mr. Hughes walking about or exercising in any way to exert himself?
A. No, sir; I did not pay any attention to him.

Q. Was the last thing you saw this slipping out and placing back in the chair?

A. Yes, sir; that was the last.

Q. Did you see him when he was taken from the floor?

A. Yes, sir.

Q. Did he walk then in the ordinary way?

A. He did not walk alone; he was held by Mr. Bills and one of the patients.

Q. Didn't he have to carry him?

A. No, sir.

Q. I want to see whether he got hurt when he went on to the floor, or whether there was any indication of it?

A. I did not see him, because I was upon the step-ladder and at my work.

Q. Was there any thing in the mode in which he was taken from the room, or in his walking, that indicated he was hurt?

A. No, sir.

Q. So far as you know he was all right then?

A. Yes, sir.

Q. You saw him when he was led into that day-room?

A. Yes, sir.

Q. What time was he brought in?

A. About ten.

Q. About when was he taken out of the day-room?

A. In the neighborhood of eleven.

Q. Who brought him in?

A. I think it was Supervisor Jones of the sixth ward.

Q. Accompanied by some other person?

A. I think so.

Q. Who was with Mr. Jones?

A. I could not say.

Q. Who took him out?

A. Mr. Bills and a patient named Winnie.

Q. And they went out of the fourth hall day-room in the direction of the hall?

A. Yes, sir.

Q. Did you see Mr. Hughes at all in the hall after he was taken from the day-room?

A. No, sir; I did not.

Q. How long did Mr. Hughes stay in the day-room after you saw him slip out of the chair?

A. Well, it was probably twenty minutes.

Q. During that time Mr. Bills was in charge of the day-room?

A. Yes, sir, alone.

Q. You saw no blood or any thing else?

A. No, sir; nothing of that kind.

Q. Did you see Mr. Hughes attack any patient in that day-room?

A. No, sir; nothing more than the doors.

Q. Just tell us what your opinion is as to whether he was a very violent patient or not at that time?

A. Well, I think he required to be held.

Q. You think it required some person to take care of him?

A. Yes, sir.

Q. Did he appear to you as a very violent patient?

A. Well, I was not very much afraid of him; I was up on the step-ladder —

Q. The question is whether he was a very violent man in your opinion?

A. No, sir; I couldn't say he was so very violent; he struggled to get up and down and move about where they required him to remain still.

Q. Well, from his conduct would you say generally that it was essential that some person should have control of him and take care of him?

A. Yes, sir.

Q. Would it be essential, do you think, to protect him from doing himself violence?

A. I think it would.

Q. Is there any thing else, Mr. Seeley, that you can state that occurred while you remained there as to what was done and how it occurred?

A. No, sir; nothing further.

Q. Where were you when you were informed that the man had his ribs fractured or was injured in any way?

A. I was passing my dinner away on the hall with the head attendant of the 4th hall.

Q. Mr. Weir?

A. Yes, sir.

Q. Did he tell you?

A. He told me that the man had been hurt.

Q. Did he tell you how?

A. No, sir.

Q. Any inquiries made as to how it occurred?

A. No, sir; it was voluntary on his part.

Q. You may state what he said?

A. He said the man had two or three ribs broken and his jaw broken.

Q. You did'nt make any inquiries as to how it occurred?

A. No, sir.

Q. Were you in the hall where it was said Mr. Hughes was hurt at the time Weir told you?

A. No, sir; not until afternoon.

Q. It was at noon time and you was at dinner when Weir told you?

A. Yes, sir.

Q. The chair that he slipped out of was in the day room?

A. Yes, sir.

Q. Not on the hall?

A. No, sir.

Q. Could you state, Mr. Seeley, that he was not hurt there?

A. I could, yes, sir; all the time, though, he was holding him on the floor, Mr. Bills was between me and Mr. Hughes while he remained on the floor.

Q. You saw nothing of the man afterwards to say he was not hurt there?

A. I could say he went out about as he came there.

By Mr. Becker:

Q. Did you see him attack or strike any one or injure himself?

A. Not any more than to strike his fist against the door.

Q. Did Mr. Bills hold him alone in the chair?

A. Yes, sir, on the floor; I think one patient held one arm in the chair.

Q Who was that?

A. Mr. Winnie; he could not control the whole of his body and he asked Mr. Winnie to hold one arm down.

Q. While they had hold of him in that way you saw his feet were flying and he was in motion?

A. Yes, sir.

Q. Struggling and resisting?

A. Yes, sir.

Q. In a violent way?

A. Not any more violent than that he wanted to get away and wanted to get up; I looked at him casually and saw the struggle.

By Mr. Shearman:

Q. Was there any one around you helping you to put on paper?

A. Yes, sir; there was only one other person; that was all.

Q. Was there any other person excepting yourself and your assistant on the hall besides the patients and the attendants?

A. No, sir.

Q. One attendant?

A. Yes, sir; Mr. Bills; that was all.

By Mr. Keim:

Q. That was in the day room, all this?

A. Yes, sir.

Robert M. Trustan, sworn and examined.

By the District Attorney:

Q. Mr. Trustan, you know the last witness, Mr. Seeley?

A. Yes, sir.

Q. Where do you live?
A. 40 Eagle street, Utica.
Q. And your business is what?
A. Paper hanger.
Q. Were you engaged with Mr. Seeley about the 26th of January in this institution hanging paper?
A. Yes, sir; I was working with him at the time.
Q. In the day-room of the fourth hall?
A. Yes, sir.
Q. Were you present and heard Mr. Seeley's testimony?
A. No, sir.
Q. Was your attention drawn to Mr. Hughes, a man so called, on that day?
A. Yes, sir; I noticed some squabbling that day there.
Q. How soon after you got there was he brought in?
A. I was in the day-room when he was brought in there.
Q. About what time did he get into the day-room?
A. I should judge somewhere in the neighborhood of two.
Q. Who brought him in, do you know?
A. I could not say; I think Mr. Jones, supervisor on sixth; that was the only man I noticed there.
Q. How long after he had been there before your attention was called to him?
A. I believe he was sitting in the chair about five minutes when he ran down the hall and began pounding the doors.
Q. Who was the attendant there?
A. Mr. Bills.
Q. What did Mr. Bills do then?
A. He took him then and sat him in the chair again.
Q. How was that done; what did he do next?
A. He sat him there, and he sat quite easily at first, and then got up and ran to another door and struck that; then he sat him down again; they had a hard tussle in the chair, and he got a little the best of him and ran toward the vestibule; they had some tall wrestling, and Mr. Winnie assisted the attendant; they had a little squabbling on the floor; then they took him up and sat him in the chair again, and the patient was getting the best of both of them, and I think Mr. Bills struck him here (indicating the abdomen) in the abdomen somewhere.
Q. He was getting the best of him you say?
A. Yes, sir; they could hardly hold him; this Winnie wasn't of much assistance; he was more bother I should judge than he was worth.
Q. Did Mr. Hughes act in a violent way toward Mr. Bills?
A. All it was, he didn't want to sit in the chair, and wanted to run around and get at the door and knock it, and Mr. Bills was endeavoring to keep him in the chair.
Q. What sort of resistance did he make; did he attack Bills or fight him?

A. No, sir; he was wrestling to get out of their hold and get away from them.

Q. How soon was that after he came into the day-room?

A. About five or ten minutes.

Q. How long did he stay there after this little tussle that you speak of?

A. He stayed on the hall until about half-past eleven; about half an hour.

Q. Did you see him go about, move about after that?

A. Yes, sir; after that he ran up and down the hall two or three times; they could not keep him in the chair and they moved him up on the hall.

Q. He continued to be violent after the tussle?

A. Yes, sir.

Q. After the tussle between Hughes and Bills, you saw no less violence?

A. No, sir.

Q. He continued to be as violent as before?

A. Yes, sir.

Q. And so continued up to the time of his removal from the day-room?

A. Yes, sir.

Q. Who took him from the day-room?

A. I believe Mr. Bills and Mr. Winnie took him up into the hall when they could not seat him in the chair.

Q. Was he very violent?

A. Yes, sir; yes, sir, he was struggling very hard to get away from him.

Q. Well, as compared with other patients in the day-room, did he appear violent?

A. No, sir; in some respects; he did not speak or say any thing; his only idea was to get out of their grasp; Winnie had hold of one arm and Bills the other; he didn't get out of their grasp; as soon as they would go away from him he would jump up and run away.

Q. When he would run away did he say any thing?

A. No, sir; I did not hear him speak.

Q. Well, from his manner, did you think it essential to control him or take care of him?

A. Yes, sir; I thought they did justice in sitting him in the chair.

Q. You observed Bills' manner toward him?

A. Yes, sir.

Q. Did you think Mr. Bills was more violent or harsher than he should have been?

A. Somewhat; yes, sir.

Q. In what respect?

A. In striking the patient.

Q. In that respect alone?

A. Well, I see him place his knee on him on the floor, and he choked the patient to quiet him down.

Q. You saw Mr. Bills do that?

A. Yes, sir.

Q. How long was that before he was taken away?

A. That was about ten minutes before he was taken out into the hall.

Q. And after that he continued to be just as violent as before?

A. Yes, sir.

Q. Up to the time he was removed?

A. Yes, sir.

Q. While they were down on the floor you saw Mr. Bills put his knee on him?

A. Yes, sir.

Q. About where was that?

A. Down low here, near the abdomen.

Q. Was he lying on his back?

A. I could not say exactly; he had one knee on the floor; he put his other knee on him and had hold of his neck.

Q. How did he have hold of his neck?

A. With his hand in this style (indicating side of neck).

Q. Is there any thing in addition to what you have stated that you can give us as to what you saw there?

A. No, sir; that is all I saw there.

Q. How many knees did he put on him?

A. One.

Q. How many times did he put it on?

A. He had it on while the patient was lying on the floor, when he scrambled out of their hands and got on to the floor.

Q. Out of Winnie's and Bills' hands?

A. Yes, sir; then Mr. Bills put one knee on him and his hand on his neck.

Q. How long did he remain in that position?

A. A minute or two, I should think; then after he got kind of quiet again he seated him in the chair again.

Q. How did he put his knee on him?

A. He simply laid it on him; I could not say what the pressure was.

Q. He did not jump on him?

A. No, sir.

Q. He simply placed his knee on him and his hands on his neck for the purpose of quieting him, as you thought?

A. Yes, sir; then he got him in the chair; then the patient began to struggle again.

Q. Did you see any indication that Mr. Hughes was hurt there?

A. Not that I saw, except that he breathed hard at one time, after he got out of the chair, and I should think he was going to froth out of the mouth; I see Winnie had hold of him, and I told Winnie to look out or he would bite him.

Q. Did you see any blood there?

A. No, sir.

Q. From what you saw of Mr. Hughes' conduct after that should you judge he received his injuries there?

A. I did not see much more of him as I was pasting a breadth of paper just then.

Q. Did you see enough to say whether Hughes struggled after that?

A. I think there was some more struggling in the chair after that; I didn't exactly see him after that; he was removed soon after that to the hall.

Q. Did you, at that time, have any suspicion that Mr. Hughes' jaw or ribs were broken?

A. No, sir.

Q. And was there any thing done inyo ur presence and the manner in which it was done which would indicate to you that his jaw could have been broken, or his ribs?

A. Nothing that could have indicated that his jaw was broken, and I didn't know as his ribs could have been broken, except as to where Bills struck the patient and had his knees on him; he struck him right here.

Q. Was he down then?

A. I could not say for sure; if he was not right in the chair he was in a kind of kneeling posture when he struck him.

Q. You say he struck him in the abdomen?

A. Yes, sir.

Q. Did you see Hughes after he was taken from the day room?

A. No, sir.

Q. I think you said that when Bills and Winnie and Hughes were having the tussle, that Hughes was getting the best of him?

A. Yes, sir.

Q. He appeared to be too violent for two to hold?

A. Yes, sir.

Q. Was it in that tussle that Bills struck him?

A. No, sir; it was after that that Bills struck him.

Q. It was after that he got out of the chair?

A. Yes, sir.

Q. It was after the time he was overpowering the two?

A. Yes, sir.

Q. Did you see Mr. Weir or Mr. Brown there that day?

A. They were that day, yes, sir, but I did not see them on the hall when Hughes was there; I saw them after the patient was hurt.

Q. Where did you see them after the patient was hurt?

A. In the day-room.

Q. Did you hear any thing said by them as to the injuries?

A. No, sir.

Q. Any thing said in your presence, or any inquiries made?

A. Mr. Bills spoke and said the patient was hurt, and after that the doctors were examining the patients, questioning them on the hall.

Q. You say the doctors were making examinations to see what was done?

A. I didn't see the doctors; I was informed by the attendants that the doctors were making an examination as to how it was done. Several of the patients were called and examined.

Q. How soon was that after you learned he was hurt?

A. It was soon after dinner.

By Mr. KEIM:

Q. I would like to ask him one question; he claims that this man was used rather rough; I would like to know if he could have done any better if he was handling him and he was overpowered?

A. My opinion would be to strap the man; I don't know that I could have handled him any better under the circumstances, because no one man could overpower him at the time, and this patient was of no great assistance to Mr. Bills.

Q. Well, from what you saw then, Mr. Hughes was a very violent man?

A. Yes, sir.

Q. The most so of any one in the day-room at that time?

A. Yes, sir.

Q. How long were you there?

A. We were on the hall several days, I should judge about four or five days.

Q. Four or five days including the 26th?

A. Yes, sir.

Q. And during the entire time you were there Mr. Hughes was the most violent man you saw?

A. Yes, sir.

Q. Did he attack or strike Mr. Bills, or bite him?

A. I should judge he attempted to bite Mr. Winnie at one time.

Q. You think he attempted to bite Mr. Winnie?

A. Yes, sir.

Q. Was that after the patient was down on the floor?

A. That was when he was in the chair.

Q. Was that after the patient was on the floor?

A. It was before he was on the floor.

Q. Did you see Mr. Rappenburg, a patient, there?

A. I don't know him by name, I think I know him.

Q. Did you see any biting of any patient's finger while you were there?

A. No, sir.

Q. By Hughes?

A. No, sir.

Q. Was Mr. Rappenburg on the ward at the time?

A. Mr. Rappenburg was in the day-room at the time of the scuefll, I think.

Q. Did you see any difficulty between him and Hughes, or Hughes make any attempt to bite him?

A. No, sir.

By Mr. Becker:

Q. You say you would consider this man a very violent man? No, you mean by that simply because he was trying to get away?

A. Yes, sir; that is my meaning of it; trying to get away from the attendants and patients, trying to overpower them.

By Mr. Barnes:

Q. And to run around the hall?

A. Yes, sir, running around and pounding the door with his hands; he did not kick them.

James Brown, recalled and examined:

By the District Attorney:

Q. Mr. Brown, let me ask you again what time it was, if you recollect what time it was Mr. Hughes was brought back from the day-room to your ward?

A. I think it was about half-past eleven.

Q. Was he brought out by Mr. Bills and Mr. Winnie?

A. He was.

Q. Were you and Mr. Weir there at the time he was brought on the ward?

A. I was in my room.

Q. He was brought out and given in charge of Mr. Weir?

A. He was.

Q. Did you see Mr. Hughes after he was brought out strike or attempt to strike any patient?

A. I did not.

Q. Or did he attempt to bite any one?

A. I did not see him.

Q. You know Mr. Rappenburg?

A. Yes, sir.

Q. Did Mr. Rappenburg assist you in controlling Mr. Hughes after Mr. Weir went away to notify the supervisor?

A. Not that I know of.

Q. Who did?

A. Mr. Winnie and Mr. McQueen.

Q. They were then on the hall? They came out of the day-room?

A. Yes, sir.

Q. Did you learn that Mr. Rappenburg had been bitten by Mr. Hughes?

A. I heard Mr. Weir say so.

Q. When did you learn that?

A. That was before Mr. Weir left the hall, I think.

Q. Did you learn that his finger was bitten by Mr. Hughes after he was brought from the day-room into the 4th hall?

A. I did not.

Q. Where did you learn that he was when he bit the finger?
A. I heard it was in the part of the hall where I was.
Q. Then Weir was in the hall at the time he was bitten, as you learned?
A. Yes, sir.
Q. Then your understanding is that the biting of Rappenburg's finger occurred before Weir went away?
A. Yes, sir.
Q. How long before?
A. I could not say; perhaps a minute or two.
Q. Now in order to get that a little more definitely, you came out of your room very soon after Mr. Hughes was brought into the hall from the day-room?
A. I did, sir.
Q. You saw Mr. Hughes when he was brought in from the day-room?
A. I did.
Q. So that after he came into the hall you saw every thing that occurred?
A. I couldn't say exactly that I did, all; I stepped behind the door after the strap and I didn't know what occurred then; that was just a moment.
Q. Now at any time did you see Hughes bite any part of Rappenburg's hand?
A. I did not.
Q. Was it not a fact that Rappenburg got into the struggle and got hurt?
A. I could not say.
Q. Was he not connected with the struggle in some way?
A. He may have been.
Q. What did you see; what can you tell us?
A. I couldn't say he was in the tussle.
Q. In any of your efforts or Weir's to take charge of Hughes or keep him quiet did Rappenburg assist you?
A. I could not say he assisted me; he may have assisted me; I couldn't swear to that.
Q. What would be your best recollection about that; that he did or did not assist you and Mr. Weir?
A. I could not be positive; I couldn't say for certain.
Q. When did you understand this finger was bitten; how long before Weir went after the supervisor?
A. Perhaps two or three minutes; not very long; not much longer than that.
Q. Did Mr. McQueen and Mr. Winnie assist you in any way?
A. They did.
Q. Was that while Weir was there?
A. That was after he left.
Q. After Weir struck Hughes on the face, he stayed there some little time, did he?
A. Yes, sir.

Q. How many minutes?

A. Oh, I should think about three or four minutes.

Q. Which occurred first, the biting of Rappenburg's finger, or the blow by Weir in the face?

A. Well, I couldn't say as to that.

Q. Well, have you any recollection as to that?

A. I should think it was before he got struck.

Q. What makes you think that?

A. Well, I heard Weir say be bit Mr. Rappenburg's finger; I couldn't say all that I heard or when I heard it.

Q. You had no reason of your own except what you heard?

A. No, sir.

Q. After Mr. Weir struck him and after you struck him, how long a time was it before Mr. Weir went away?

A. I should think three or four minutes.

Q. And during that time was he quiet or was he violent?

A. He was quite violent.

Q. Then he continued to be quiet after you both hit him?

A. Yes, sir.

Q. And struggled and required your strength to keep him in the chair?

A. Yes, sir.

Q. Both of you?

A. Yes, sir; both of us.

Q. When did this spitting occur? Did he do any spitting at you or Weir or both?

A. He did.

Q. How soon after he was brought in did he begin that?

A. I guess we sat him down first and then he began to spit as quick as he came out of the room; Mr. Weir and Mr. Bills were there and as I got there Mr. Bills left; I tried to keep him down with Mr. Weir and he spit then.

Q. Did he continue to spit at the time you and Weir had charge of him?

A. Not continuously.

Q. Did he at intervals?

A. I could not say as to that; I have no recollection of his spitting all the time; I guess he did not.

Q. How many times did he?

A. I couldn't say.

Q. A number of times?

A. He may once or twice.

Q. How long was it before you saw the last spitting?

A. I couldn't say exactly.

Q. How long before Weir went away?

A. I think two or three minutes.

Q. Was he spitting both before and after you struck him?

A. He spit before.

Q. Did he spit after you struck him?
A. I guess he did.
Q. Are you sure about that?
A. No; not positive.
Q. Would that be your best recollection?
A. Yes, sir.
Q. How many times did he spit after you struck him?
A. I could not say; I could not say whether he spit or not after that.
Q. You saw blood?
A. Yes, sir.
Q. Did he spit after you saw the blood?
A. I couldn't say.
Q. Now, Mr. Brown, there was blood on the floor?
A. Yes, sir.
Q. And was that in front of the chair directly, or was it diagonally?
A. I believe it was in front; to my best recollection it was in front.
Q. Did you see blood anywhere else?
A. I saw it on the chair.
Q. Where?
A. On the elbows or the arms of the chair.
Q. Any on the wall?
A. I did not see any there.
Q. Did you see any difficulty between Mr. Hughes and any other patient while you were in attendance?
A. I did not.
Q. So that what you did there was not for the purpose of protecting any patient from assaults by Hughes?
A. Yes, sir; it was for that I used the waist belt.
Q. I am asking you if at any time he made assaults on patients?
A. He did not.
Q. Then in your handling of Hughes it was not for the purpose of protecting patients from any assaults that he made or intended to make?
A. My intention in doing that was to keep him from getting away.
Q. To control him as you do other patients; to prevent them from getting away?
A. Yes, sir.
Q. How far did he go down on the floor when you had hold of him; was he on the floor?
A. Yes, sir; on his knees.
Q. Simply on his knees?
A. Simply on his knees.
Q. Where were his hands?
A. I had them.
Q. When he went over on his knees his hands were still with his body?
A. Yes, sir.

Q. So that when he went over he did not protect himself by the use of his hands from any fall?

A. He simply got on his knees, and I simply jerked him back; I tried to jerk him back again.

Q. Did his face strike the floor at any time?

A. I should think not.

Q. Now, you say you were on him; did you bear your weight on him; had you your whole weight on him?

A. I had not.

Q. How were you on him?

A. I think I could show you by having a gentleman come here.

Q. Did you kick him at any time?

A. No, sir.

Q. Did you get on him with your knee?

A. I did not.

Q. With neither of them?

A. I did not.

Q. Mr. Brown, I wish you would explain, if you will, in your own way, how the blood came on the floor, whether from spitting from Mr. Hughes, or whether it spurted from him?

A. Well, I thought he spit it; some such way as this (indicating); I don't know as it was exactly a natural spit; I don't think he did it in that way.

Q. Was it in spots as though it was spit, or was it spattered?

A. Most of it was in spots.

Q. After you saw the blood there was there any tussling between you and Weir and Hughes?

A. There was some after Weir left.

Q. In such a manner that the blood could get on the chair?

A. Well, I don't know but it splashed out when he spit in that way.

Q. Was he out of the chair in that way after Weir went away?

A. Yes, sir.

Q. And he went out of the chair when Weir went away?

A. Yes, sir.

Q. Was he at the right of the chair then so that the blood could get there then?

A. Not that I could say.

Q. Now, Mr. Brown, have you told with reference to this matter all that you know?

A. I have, sir. I don't know of any thing more. I think I have told every thing that I know and every thing that I saw.

Q. Have you thought over the matter carefully since the coroner's jury examined you first for the purpose of refreshing your recollection?

A. Yes, sir; I have read over my testimony and I could not say any more with reference to what I saw except one thing. If I remember right you asked me if I was surprised when I heard his ribs were broken and I said I was not. In one sense of the word I was

surprised. In another I was not. By what I heard of what occurred in the day-room I was not surprised, and then again when I heard the ribs were broken in my part I was surprised.

Q. Had you heard any thing with reference to the tussle in the day-room? Had you learned he was injured?

A. I had.

Q. When did you hear that he was injured?

A. That was on Sunday evening, I heard the ribs were broken; Sunday evening.

Q. When did you hear that his jaw was broken?

A. The same day it was broken.

Q. A few minutes afterward, when the doctors were there?

A. Yes, sir.

Q. Who told you about his ribs being broken?

A. I think it was one of the attendants from 8; I couldn't tell as to that; some attendants; I was surprised to hear that they had been broken in my part.

Q. Who told you about the tussle in the day-room?

A. I asked the paper hangers about that.

Q. When?

A. The same day that it occurred.

Q. Where did you ask them?

A. In the day-room.

Q. After the jaw was broken you asked them how it occurred?

A. I did.

Q. Which one did you ask?

A. The young man; Mr. Seeley was on the scaffold the time it occurred.

Q. Did he tell you how it occurred?

A. He told me he was badly abused.

Q. Did you think a man could struggle and offer the resistance Mr. Hughes did after he came from the day-room into your department with his ribs broken?

A. I should not think his ribs were broken; I do not know how an insane man will act after his ribs were broken.

Q. Is there any other correction?

A. Not that I know of.

Q. You say you have read it over?

A. Yes, sir.

Q. You read it yourself and signed it?

A. Yes, sir.

Q. And as you read it over you found it to be correct, except as to the matter you speak of, and you have corrected that?

A. Yes, sir.

By Mr. SHEARMAN:

Q. Did you see the finger that was alleged to have been bitten?

A. I did.

Q. Had it the appearance of having been bitten or injured in some other way?

A. It was just a little speck; I couldn't say.

Q. Sufficient to draw blood?

A. I guess the skin was off.

Q. When did you see that?

A. That was, I guess — I couldn't say exactly; it was that day some time.

Q. Was it after that struggle between you and Hughes, or before?

A. I think it was after Mr. Weir came back; I think I heard Mr. Weir talking after that about the finger; I couldn't be positive about it.

Q. Did he talk with Rappenburg about it?

A. I think Weir showed the finger to the doctor.

Q. Had it the appearance of a fresh injury?

A. Well, it seemed as if it had.

Q. From what you saw you would say it had been recently done?

A. Yes, sir, I should think it was.

By Mr. Becker:

Q. Do you know what caused that struggle; do you know what cause Mr. Weir had to sit him in this chair?

A. No, sir; I was not on the hall just then; Mr. Bills and Winnie brought him into the hall, and when I saw them coming I stepped behind the door to get the waist-belt.

Q. You didn't see Mr. Hughes do any thing?

A. He was kind of violent, trying to get away.

Q. He was brought through the hall by Bills and Winnie?

A. Yes, sir.

A. And delivered to Weir?

A. Yes, sir.

Q. And did Weir sit him in the chair?

A. He was sitting there when I got there; I didn't see them sit him there; they were coming toward the chair when I stepped behind the door to get the waist-belt, and he was struggling and resisting.

Q. Is that the usual course, to seat a violent man, or is it customary to turn him loose?

A. Well, when he is brought in from the front he is usually turned loose; we try sometimes to keep them in a chair; to seat him in a chair and keep him there.

Q. Did you know how violent he had been the night before?

A. I did not.

Q. Were you informed when you came out of your room as to how violent he had been in the day-room?

A. I was not aware of it.

Q. Was any thing said in your hearing by Mr. Bills or anybody

about his being a violent patient; as being too violent to be in the day-room?

A. Not that I know of.

Q. But, from his conduct, you saw he was a violent man, and you stepped back to get the strap?

A. I did.

Q. You say it was not used?

A. It was not used then.

Q. I understood you to say that after Mr. Weir went away two patients did have hold of Mr. Hughes with you?

A. They assisted me.

Q. Who?

A. Mr. Winnie and Mr. McQueen.

Q. Where did they have hold of him?

A. They had hold of each arm.

Q. When was that?

A. That was after Mr. Weir left.

Q. What position was Hughes in then?

A. He was sitting in the chair.

Q. You were behind him?

A. I was behind him trying to put the waist belt around him.

Q. They held each hand while you were doing that?

A. They were.

Q. Is that the only time they had hold of him?

A. That was the only time.

Q. During the struggle between you and Hughes, did they assist you?

A. Just at that time they did.

Q. While you were on the floor, when he went down, did they have hold of him in any way?

A. Not that I know of; they came there; I did not ask them to come.

Q. Did they come while you were engaged in that struggle?

A. They were there at the time, and helped me to strap him; that was just as I sat him in the chair after the struggle; the strap was right near me, right in front; they got hold of him.

Q. Did they have hold of him before that?

A. Not that I know of.

Q. Did they give you any assistance before that?

A. I guess not.

Q. While you had hold of him, and you went down partially or wholly, did they have any hold of him?

A. I could not say as they had.

Q. Are you certain as to whether or not they had hold of him, and went down with you?

A. They did not.

Q. The only two persons that went down was Hughes and yourself?

A. That was all.

Q. You saw no altercation between Hughes and the patients?
A. No, sir.
Q. Of any kind?
A. No, sir.
Q. Did you see any violence inflicted by Hughes upon any patient?
A. I did not.
Q. There was not any?
A. Not that I saw; no, sir.
Q. You saw all that occurred in that part?
A. Yes, sir; all that occurred then.
Q. So that so far as you are able to state no patient got hold of him while you were on the floor?
A. Not unless they did when I was after the strap; I got the strap after he came on the hall.
Q. Coming down to the time Weir had gone away, during any of the time Weir was away, did any patient take hold of him except as you have stated?
A. No that I could say.
Q. Can you state whether or not they took hold of him before he and you got up from the floor, or was it after you got up?
Q. After I got up with him from the floor.
Q. Then it was that the two patients held him in the chair?
A. Yes, sir.
Q. That is the only time that you can state?
A. Yes, sir.

By Mr. Barnes:

Q. After you got up off the floor you say the two patients went to your assistance? Was that because he was violent?
A. Yes, sir; he was so violent then that I could not put on the strap without their assistance.
Q. After you sat him in the chair and had the strap on him you had nothing to do with him in the way of violence?
A. No, sir; I only went after some water then.
Q. What did he do after you and he got up from the floor?
A. As I sat him in the chair I strapped him then; then he slapped his hands and feet like this (indicating) and mumbled something to himself and tried to get out but he could not.
Q. He did that after he was strapped?
A. He did.
Q. How long were you gone, Mr. Brown, after this water?
A. Perhaps a minute and a half.
Q. You went quickly, did you?
A. Not any quicker than if it had not happened; the bath-room was only a few steps.

By Mr. BARNES:

Q. You knew he was secure then?
A. Yes, sir.

By Mr. SHEARMAN:

Q. What is your weight, Mr. Brown?
A. About two hundred pounds.
Q. How near that?
A. Well, when I weighed last I weighed that to a notch.
Q. Did you see any blood upon Mr. Hughes' clothing?
A. I did.
Q. Where?
A. On the coat.
Q. Just indicate where; up and down in front?
A. Yes, sir.
Q. Did you see any upon his pants?
A. Not that I could say.
A. Anywhere else?
A. Nc not that I could see.
Q. How much blood was there upon the floor when you and he went down together?
A. Well, I couldn't say as to that.
Q. Was there any on the floor at that time?
A. Yes, sir; there was.
Q. When you and he went down together did you go over or in the blood?
A. Well, I don't know but his knees may have struck the blood; I couldn't say as to that.
Q. Was there more blood after you and he got up from the floor than before?
A. I should say not; there may have been a little speck more.

By Mr. CHENEY:

Q. Did he go over on his face?
A. No, sir.

By Mr. MARTIN:

Q. When did you first discover any bleeding or blood coming out of the mouth?
A. As soon as the stroke was given.
Q. That was before you had the struggle with him when you pitched forward?
A. That was before Weir left the hall.

By Mr. SHEARMAN:

Q. Before or after he struck him in the face?
A. After he struck him.

Q. How much blood did you see before Weir went away?
A. I could not say, sir.
Q. That was on the floor in front of him?
A. Yes, sir.
Q. Where else?
A. A little on the arms of the chair.
Q. Anywhere else?
A. A little on his coat.
Q. Anywhere else?
A. Not that I could state.
Q. Was there as much on the arm of the chair, the floor or other places before Weir went away as there was after?
A. There was more after he went away; there was more after he got back than there was when he went away.

JAMES BROWN.

INQUEST IN THE MATTER OF THE DEATH OF EVAN D. HUGHES.

February 11, 1884.

Proceedings Monday afternoon.

Dr. Charles H. Ransom, sworn and examined:

By the DISTRICT ATTORNEY:

Q. Doctor, what is your name?
A. Charles H. Ransom.
Q. And your place of residence?
A. Erieville, Madison county.
Q. You are a physician and surgeon?
A. Yes, sir.
Q. Are you one of the coroners of the county of Madison?
A. Yes, sir.
Q. Did you know Evan D. Hughes in his life-time?
A. No, sir.
Q. Well, you have since learned of such a person?
A. Yes, sir.
Q. State if at any time you saw the body which was said to be that of Evan D. Hughes?
A. Yes, sir.
Q. When did you first see it, doctor?
A. On the 4th of February, 1884.
Q. Where did you see it?
A. At his residence.
Q. And that is where?
A. Town of Nelson, Madison county.
Q. Do you know when that was with reference to the time it arrived there from Utica?

A. I think it arrived from Utica on Saturday evening, the second.
Q. You saw it Sunday?
A. Monday following.
Q. It arrived Saturday evening, and you saw the body first then on Monday?
A. Monday morning.
Q. Did you call upon any physician, doctor, to assist you in makin a *post-mortem* examination?
A. Not that day; I did the next
Q. That would be Tuesday?
A. Tuesday.
Q. Whom did you call upon?
A. Dr. Chase, of Morrisville.
Q. He resides at Morrissville?
A. Yes, sir.
Q. Did Dr. Chase perform the autopsy?
A. He did.
Q. When?
A. Tuesday, the fifth.
Q. The same day he was called?
A. Yes, sir.
Q. Where was it performed?
A. At his residence.
Q. At the doctor's residence?
A. Evan D. Hughes' residence.
Q. Where you first saw the body?
A. Yes, sir.
Q. Did anybody assist him?
A. He had a partner who was there.
Q. What was his name?
A. His name was Hammond.
Q. Do you know his first name?
A. I do not; he did not assist him much.
Q. He was about there?
A. Yes, sir.
Q. Were you present there?
A. Yes, sir.
Q. You saw what was done?
A. Yes, sir.
Q. Observed ehe condition the body was in at the time the autopsy was begun, during its progress and when finished?
A Yes, sir.
Q. Will you state in the first place what they did with reference to making the autopsy?
A. He made an incision on the median line and opened the thoracic cavity, that is where the lungs are.
Q. He made the incision then crosswise?
A. Yes, sir.

Q. You may state in your way just how it was done?
A. First we examined and found the ribs were broken.
Q. You made an external examination?
A. Yes, sir.
Q. And satisfied yourself that the ribs were broken?
A. Yes, sir.

Q. How many?
A. We did not know how many; we made an opening and found the floating ribs and three besides.
Q. When you speak of the three ribs you mean those attached to the breast bone or sternum?
A. Yes, sir.
Q. Were the parts examined externally, doctor?
A. Yes, sir.
Q. State whether there was any injury there?
A. Yes, sir.
Q. What did you examine?
A. The lung.
Q. What did you find with reference to the lungs?
A. We found that the ribs had penetrated the lung; that the lung had collapsed as you might say; the air was let out; we found the cavity where the lungs are situated filled with serum and blood; the lung was in a congested state.
Q. Where; just indicate where this place was where the lung had been penetrated; what portion of the lung?
A. I could not tell in regard to that particularly; the doctor kept the minutes of the autopsy; I should think it was near the center of the lung.
Q. Was an examination made to see what had penetrated the lung?
A. Yes, sir; we could not tell, I think because there was nothing penetrating it then; we supposed it was a rib because the rib had a sharp point; nothing remained in the lung at the time; we made an examination to satisfy ourselves as to how it was done.
Q. Did you satisfy yourselves from the examination as to how it was done?
A. We were quite conclusive in mind that the rib had penetrated the lung; where the rib was fractured it had a sharp point; the end of it was quite sharp.
Q. Did you examine any of the other parts?
A. We examined the other lung, the liver, stomach and intestines
Q. What was the condition of those organs?
A. Healthy.
Q. Which of the lungs was it that had been penetrated?
A. The left.

Q. Which side were the ribs broken on?
A. The left.
Q. Can you state where they were broken?
A. I could not exactly.
Q. And was any of the ribs broken more than once?
A. I think not; the doctor could tell you more particularly as to that than I could; it was one break.
Q. So that the end that slivered off must have been down?
A. Yes, sir; it looked that way, and penetrated the lung.
Q. Did you make an examination of the body before making the *post-mortem*, for the purpose of discovering whether there was any other injuries except breaking the ribs?
A. Yes, sir; we found his jaw fractured.
Q. About where?
A. I should think about half an inch to the right of the center.
Q. Did you find any indications of a blow or bruises about the head?
A. We found one spot on the side of the head was black and blue.
Q. How large?
A. About as large as a two shilling piece.
Q. Skin broken?
A. No, sir.
Q. Where was it?
A. That was on the temple, a little front of the temple; right on this point on the side of the head (indicating).
Q. Do you think, doctor, that the jaw could have been broken by a blow at that point where you found the black and blue spot?
A. It would be hard to say as to that; I think he must have received a blow from some cause; either a blow from the fist or something.
Q. Do you think that the break which you found could have been inflicted by a blow at the black and blue spot?
A. I think not, sir.
Q. Did you make any further examination as to whether there were other black and blue spots?
A. We examined the head but found no other black and blue spots; perhaps there was a little cut on one of the lips; not very deep; it was more like a scratch than any thing else.
Q. On the end of the lip?
A. Yes, sir.
Q. Sufficient, doctor, to produce any flowing of blood?
A. Well, I should say not.
Q. And did you examine where the ribs were broken with reference to seeing whether there were any black and blue spots there?
A. Yes, sir.
Q. Were there?
A. Yes, sir; all along the back from the shoulder blade, down to the hip.

Q. Opposite the ribs that were broken?

A. Yes, sir.

Q. Had that the appearance of an injury inflicted from the outside or was it a *post-mortem* appearance?

A. It was different from a *post-mortem* appearance; it looked as if the blood had settled there before death; his back was red from *post-mortem*.

Q. From its appearance you thought it was occasioned by coming in contact with some substance during life?

A. Yes, sir.

Q. Had it the appearance of having been made with a sharp instrument?

A. I think not.

Q. Would you say with something blunt?

A. Yes, sir.

Q. Quite blunt to have produced that appearance?

A. Well, it had not broken the skin; it must have been something blunt.

Q. How far did it extend up and down?

A. We did not measure, but from the shoulder-blade almost down to the hip.

Q. Well, then, it was black and blue the length of ten or twelve inches?

A. I should think so.

Q. That would indicate that they came into contact with some substance of that size or length to have produced it?

A. I am unable to say what — but something — some large substance; it looked so.

Q. Do you think the condition of the ribs as you saw them — do you think it could have been produced by a blow from the fist?

A. Well, if there was, it must have been more than one blow, I should think; one blow could not have produced such a fracture.

Q. You do not think it could have been produced by a blow from the fist?

A. I think not.

Q. You do not think, as a physician and surgeon, that they could have been broken in that way by a blow?

A. I should say not; that would be my opinion.

Q. If that jaw had been broken by coming into contact with a sharp substance, there would have been external evidence?

A. I should say so.

Q. And you would have been less likely to find black and blue spots had the injury been caused by coming into contact with a blunt substance?

A. I do not understand the question.

Q. If the blow had been inflicted with some large or blunt surface I ask whether you would have been likely to find these spots?

A. I should think so.

Q. As likely as if it had been done by a sharper instrument?

A. That would have broken the skin.
Q. Well, a smaller instrument?
A. It would have been apt to.
Q. Did you find any black and blue spots there?
A. No, sir; we found no mark on the skin.
Q. You found no black and blue spots except the one you mentioned on the temple?
A. No, sir.
Q. And the little scratch on the lip?
A. Yes, sir.
Q. Doctor, do you think a man striking another on the face with the fist could break the jaw as this was broken?
A. Well, I should say if he struck hard enough he might fracture his jaw.
Q. Would it require a very severe blow, doctor?
A. Well, it would depend upon how he struck.
Q. Well, suppose a man struck another on the right side of the face on the jaw with the fist, would it have been likely to have produced this injury?
A. I am unable to say just to that extent.
Q. Well, in your opinion?
A. It might have been done; yes, sir.
Q. When you say you are unable to say, you mean you are unable to say how it occurred?
A. Yes, sir.
Q. The question is whether it could have been done in that way?
A. I think it might.
Q. Would it have required a very heavy blow?
A. Well, it would require quite a heavy blow to break the jaw.
Q. Would it require a blow that would be sufficient to knock a man down?
A. I could not say as to that; sometimes a small blow could do that and other times it would require quite a severe one.
Q. You could not say whether it would require such a blow as would knock a man down to have done that injury?
A. I could not say; I should say it would perhaps.
Q. Doctor, if a blow had been inflicted by a person with the clenched fist on the right side of the face, striking with the bottom of the hand in that way, indicating — the soft part of the hand, do you think that could have broken the jaw?
A. Well, hardly; a blow inflicted in that way.
Q. Say a blow inflicted by a person standing behind?
A. I should hardly think so; it might.
Q. Of course I do not mean to indicate the force of the blow; I mean simply striking in that way, do you think a blow could have been struck sufficiently hard to have produced that effect?
A. I think it must have been quite a hard blow; he might have struck sufficiently hard to have fractured the jaw.
Q. Doctor, how old a man was Hughes?

A. I think they said he was 55 or 54; he had that appearance.

Q. About how tall?

A. I should say perhaps he was a man five feet ten inches, in that neighborhood.

Q. A very large, strong-looking man?

A. Not so very large; about medium size.

Q. About what would be his weight?

A. Perhaps somewhere in the neighborhood of 160 pounds — may be more, may be less; I never knew the man; I saw his body.

Q. Did you find any injuries — any black and blue spots on any other part of the body than you have mentioned?

A. No, sir; I did not.

Q. On the arms or on the limbs?

A. No, sir; we did not discover any.

Q. Did you find any on the front part of the body?

A. No, sir; the black and blue spots were around nearer the back and near the shoulder blade, running down to the hip.

Q. Now, doctor, what would that indicate, finding no black and blue spots in front but in the rear, as to the injury; was it a blow from behind or in front?

A. It looked as if the blow was from the side; the black and blue spots were not around on the back; it was a little back of the arm, near the arm, but a little back of it.

Q. Well, finding the black and blue spots there and none in front, would it indicate to you that the substance with which he came into contact was about that part of the body?

A. It looked so; it looked as if some pressure or something of that kind might have produced this.

Q. Well, if a man was falling over a chair and would strike it with that part of the body where you found the black and blue spots, and another person was in front of him, they all falling together, do you think that could have produced the injury?

A. Well, it may have produced it; of course I am unable to say as to that.

Q. Well, if a man should fall on the floor with another man having hold of him in a tussle, who weighed 200 pounds or thereabout, and the 200 pound man should fall upon him on the ribs, do you think they could have been broken in that way?

A. There might have been sufficient force to fracture them.

By Mr. Martin:

Q. Did I understand you to say that three ribs were broken beside the floating ribs?

A. Yes, sir.

Q. Making seven?

A. Yes, sir; if the doctor was here that kept the minutes of the autopsy he could tell you more about that than I could; they were not all in a line; some in the back and some near the front.

Q. The break of the ribs in different places, would that indicate that they were broken from the effects of a sudden blow?

A. I should think not, no, sir ; wherever the sudden pressure was brought to bear perhaps there was where the fracture would be apt to be.

Q. Would this indicate that they were rather crushed in than broken with a sudden blow ?

A. It might indicate that the pressure was uneven ; it was in front of the backbone.

Q. How far ?

A. I could not say in regard to that.

Q. How hard a blow would it require in the abdomen to produce a black and blue spot ; would it require a severe blow ?

A. Well, quite a severe blow through his clothing.

Q. It might be apt to knock him down before it produced a black and blue spot ?

A. Yes, sir.

Q. You found no such thing ?

A. No, sir.

Mr. KINCAID — Suppose I am Mr. Hughes, I am pretty nearly his weight, I am sitting in a chair which is fastened to the floor with arms like these arms somewhat, and a man weighing 200 pounds is standing by me; holding me as Mr. Barnes is now ; I am in a frenzy trying to get out of the chair, I have been doing so for some time.

Mr. BARNES—Now I pull this man over the chair arm and we all go down in a heap to the floor, striking the side of the chair, then falling over.

By Mr. KINCAID :

Q. Now, my question is, is it more likely that the injury was inflicted in that way rather than by a blow ?

A. Yes ; it looks like that more than if it came from a blow ; that would be my opinion.

Q. Rather than it was caused by any blow in front ?

A. Yes, sir ; it looked as if he had been jammed or crushed against something ; his side looked as if he had been crowded or pushed against something.

Q. Well, suppose that these circumstances occurred in that way, could the ribs have been broken in that way ?

A. It might have taken place in that way.

By Mr. MARTIN :

Q. Wouldn't he have to be struck back pretty well to have struck the floating ribs ?

A. Pretty well back, but he might go over the chair in that way and break those ribs.

Q. Well, from the fact that the ribs penetrated the lungs, would it seem to you that there had been a sudden pressure or crushing of the ribs to have produced that injury — to have forced the rib into the lung ?

A. Well, it was supported by adhesive plaster ; that might have some tendency to have kept the rib there.

Q. You don't quite understand the question. Suppose that a blow should have been inflicted in such a way as to break the ribs, would it have been as likely to have crushed it in as pressure ?

A. I think not.

Q. The fact is then, that you think they were crowded in or crushed in?

A. Yes, sir.

Q. And penetrated the lung in that way?

A. Yes, sir.

Q. Doctor, if two men were in a tussle, assuming that Hughes, for instance, and a man weighing 200 pounds were having a tussle and that they should fall upon the floor in the tussle, and the 200 pound man should fall upon him, would that be sufficient to fracture the ribs?

A. Well if the weight fell a sufficient distance, I should think so.

Q. Suppose the man was partially behind him and Mr. Hughes was over the side of the chair and the 200 pound man should fall over on him, could his ribs have been broken in that way?

A. Well, if he struck him with his knees when he went to the floor, something of that kind, I think might do it.

Q Now, suppose I have had my arms around you in this way, you raise up partially and go right over with this elbow over here (indicating) and I fell on you, could those ribs be broken in by your own elbow?

A. I should think not, hardly with his own elbow.

By Mr. KINCAID:

Q. Supposing that in the melee or tussle of this kind these men both fell over the chair upon the floor, Mr. Hughes underneath, he fell over and struck his chin on the floor, could that have produced that fracture of the jaw?

A. It might have.

Q. If he went over in that way that would have been more likely to have fractured his jaw than any blow?

A. I could not say.

By Mr. BACHELOR:

Q. If he struck that way, it would have been likely to leave a mark?

A. Yes, if he struck on his chin it would have left a mark.

Q. Then the way you found the fracture of the jaw would indicate more that the blow came from the side, rather than upon the chin?

A. Yes, sir.

By Mr. VAN EMBURGH:

Q. Did you have any theory as to how the jaw was fractured, while you were making the autopsy?

A. No, sir.

Q. But there was no external evidence of a blow?

A. No, sir.

By Mr. BARNES:

Q. Well, suppose that a man is very crazy, perfectly wild, and it requires two men to hold him in a chair; and one man is called away and one is left; and that the man remains wild, and in a scuffle they fall together on the floor; after the fall, the man is raised up bodily and put in a chair, and he is quieter, and in a few minutes you examine him and find two or three ribs broken — would you think that would be likely to occur, and that the fracture made it so that the one man could hold him?

A. I should say he would be apt to be quieter after his ribs were broken and they penetrated the lung.

By Mr. BECKER:

Q. Do you think the ribs being broken in this way, and his jaw broken, he could resist a great deal?

A. Not afterward; no, sir.

Q. Could he if the jaw was broken and the ribs not?

A. Yes, sir.

Q. With the jaw broken, doctor, could the man spit?

A. He could not spit very far, I should think; he might be able to let it run down out of his mouth.

Q. Could he bite?

A. I should say not.

Q. Could he talk much?

A. No, sir.

Q. Now, doctor, is there any thing else in addition to what you have stated that you can state with reference to these injuries and the condition of things that you found that will assist us in reaching a decision as to the cause of this man's death?

A. No, sir; that is the full extent, I think.

Q. From the examination you made of him you would say that death resulted from the penetration of the lung by the rib?

A. Yes, sir.

Q. That was the cause of death?

A. Yes, sir; I should say so.

Q. With reference to that black and blue spot on the face, do you think that was caused by a blow?

A. I am unable to say how that was caused; it was discolored.

Q. To what extent?

A. I should say as large a spot as a two shilling piece.

Q. Much discolored?

A. Well, about as much as you would find from an ordinary bruise, a yellowish tint; I could not say whether it was occasioned by a blow or not; I think it was not a *post-mortem* appearance.

Q. You saw no black and blue spots in any other place on the head or face except the one you mentioned near the temple?

A. No.

Q. And that was on the left side?

A. Yes, sir.

Q. The same side the ribs were on?
A. Yes, sir.

By Mr. KINCAID:

Q. Supposing I was struck by a blow from a man's fist on the left side of my face, or I fell over from a chair and struck the floor on my chin, which would have been likely to have produced the most discoloration, the blow of the fist or the striking against the floor?

A. I should say the blow from the fist.

Q. That would produce the most discoloration?

A. It would be more likely to.

Q. Either one might cause a fracture?

A. Yes, sir.

Q. Could a blow from the fist, doctor, be sufficiently hard to have produced this fracture without leaving a discoloration?

A. Well, I should think perhaps it might.

Q. Without discoloring the face at all?

A. Well, I should think so; it might not.

Q. And in making an examination if you found the jaw broken and found no discoloration, would it be your opinion that the jaw was not broken from the blow of the fist on the side of the face?

A. I should not want to swear to that, but that would be my opinion.

Q. It would be your opinion that it would not have been done by a blow from the fist?

A. Not on the face.

Q. Doctor, how long have you been practicing medicine?

A. A little over ten years.

Q. And you are a graduate of what school?

A. University Medical College, New York city.

Q. And what school?

A. Allopathy.

Q. You have been coroner of your county how long?

A. Going on three years.

Q. Do you think of any thing now, doctor, in addition to what you have stated that will give us any new light on the subject?

A. I do not know as I do; if the doctor was here that kept a copy of the minutes of the autopsy he might give it to you in a little more minute form; he might give you the minutiæ of it; but I have given you the extent of the injuries I found.

C. H. RANSOM.

This is to certify that the above is a true and correct copy of the minutes taken by me on the inquest of Evan D. Hughes, by the cororner of Oneida county, excepting the evidence of Ogden Backus, John Charles Hughes, J. Wilson Jones, John B. Orendorf and John M. Jones, which was taken by Mr. Spencer, the coroner's clerk, which is attached hereto.

T. E. McGARR.

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