

510

# Fifty-fifth Annual Report

OF THE

## Charles V. Chapin Hospital

Providence, R. I.

FOR THE YEAR ENDING

September 30, 1964



PROVIDENCE  
THE OXFORD PRESS  
1965



HONORABLE WALTER H. REYNOLDS  
*Chairman, Board of Hospital Commissioners*  
1951 - 1964

# Fifty-fifth Annual Report

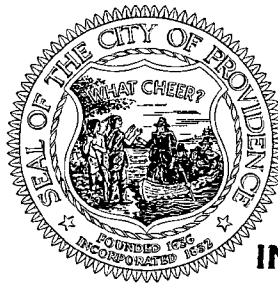
OF THE

## Charles V. Chapin Hospital

Providence, R. I.

FOR THE YEAR ENDING

September 30, 1964



IN CITY COUNCIL

AUG 16 1965

READ:

WHEREUPON IT IS ORDERED THAT  
THE SAME BE RECEIVED.

*Vincent Reggia*  
CLERK

PROVIDENCE  
THE OXFORD PRESS  
1965

Accredited by Joint Commission on Accreditation of Hospitals

Approved by the Council on Medical Education and Hospitals, American Medical Association, and the American Board of Pediatrics, for the training of Residents in Pediatrics

Approved by the Council on Medical Education and Hospitals, American Medical Association, and the American Board of Psychiatry, for the training of Residents in Psychiatry

Member hospital, American Hospital Association

Member hospital, Hospital Association of Rhode Island

Service-Benefit hospital, Hospital Service Corporation of Rhode Island (Blue Cross)

Approved by Committee on Nursing Education, Rhode Island Department of Health, for affiliate training in communicable diseases

## TABLE OF CONTENTS

	PAGE
Board of Hospital Commissioners.....	5
Administrative Staff .....	6
House Officers who served during the year ending Sept. 30, 1964 .....	8
Consulting Staff .....	9
Visiting Staff .....	11
Historical Report .....	17
Report of the Board of Hospital Commissioners.....	20
Report of Superintendent .....	22
Report of Business Administration .....	28
Financial Report .....	30
General Statistics .....	35
Report on All Diseases .....	36
Cross-Infections .....	44
Report of the Neuro-Psychiatric Department.....	46
Report of Director of Nursing Service and School of Nurs- ing .....	50
Report of the Laboratory.....	52
Report of the X-Ray Department .....	58
Report of the Dietary Department .....	59
Report of the Maintenance Department .....	60
Acknowledgments .....	62

**BOARD OF HOSPITAL COMMISSIONERS**

*Chairman Ex-Officio*

MAYOR WALTER H. REYNOLDS

ALEX M. BURGESS, SR., M. D.....Term expires 1965  
JAMES H. FAGAN, M. D.....Term expires 1966  
ROBERT E. CARROLL, M. D.....Term expires 1967  
JOSEPH SMITH, M. D., *Supt. of Health, Ex-Officio*

*Secretary*

JOSEPH SMITH, M. D.

**Committee on Organization**

James H. Fagan, M. D.                      Alex M. Burgess, Sr., M. D.  
Joseph Smith, M. D.

**Visiting Committee**

James H. Fagan, M. D.                      Robert E. Carroll, M. D.  
Joseph Smith, M. D.

**Nurses' Committee**

James H. Fagan, M. D.                      Alex M. Burgess, Sr., M. D.  
Joseph Smith, M. D.

**ADMINISTRATIVE STAFF****October 1, 1963—September 30, 1964****Superintendent**

Edward J. West, M. D.

**Assistant Superintendent and Clinical Director**

\*William H. Foley, M. D.

**Assistant Superintendents**

\*\*Fioravante N. Nora, M. D.

\*\*\*Vasant A. K. C. Gideon, M. D.

**Senior Resident Physicians**

†Illuminada V. Santiago, M. D.

††Bella R. Rodriguez, M. D.

**Psychiatric Department****DIRECTOR**

Ernest A. Burrows, M. D.

**Pathologist**

LeRoy W. Falkinburg, M. D.

**Roentgenologist**

Manuel Horwitz, M. D.

**Director of Laboratories**

Albert V. Troppoli, A.B., Sc.M.

**Director of Nursing Service and School of Nursing**

Elizabeth Regan McKenna, R. N.

---

\*Appointed September 14, 1964

\*\*Resigned June 16, 1964

\*\*\*Resigned September 6, 1964

†Resigned October 4, 1964

††Appointed December 9, 1963, Resigned October 4, 1964

**Assistant Directors of Nursing Service**

**Communicable Disease Division**

\*Ann M. Hall, R. N.

\*\*Grace Cannon, R. N.

**Psychiatric Division**

Susie Tanzi Marcello, R. N.

**Assistant Instructor**

Sally Foster Hopkins, R. N.

**Business Manager**

William A. Manning

**Social Workers**

**Case Work Supervisor (Psychiatric)**

Ruth F. Levy

Maureen C. Gill

S. Ruth Vaughn

\*\*\*Helen H. Hoban

Hope M. O'Brien

Jacqueline A. Cahir

**Supervisor of Volunteer Services**

Rhoda Morrison

**Clinical Psychologist**

Charles Devine

**Matron**

Jennie A. Borreca

**Dietitians**

Dorothy Kelly

†Margaret Desjarlais

††Eileen Izzi

**Pharmacist**

Frank Colacci, Ph. G.

**Supt. of Plant Maintenance and Operation**

James E. Kelley

**Housemother—Nurses' Home**

Mary Gannon

\*Resigned August 9, 1964

\*\*Appointed August 10, 1964

\*\*\*Appointed October 28, 1963

†Resigned July 12, 1964

††Appointed June 22, 1964



**HOUSE OFFICERS WHO SERVED DURING YEAR  
ENDING SEPTEMBER 30, 1964**

**Residents in Pediatrics**

Diana T. Su, M. D.	Jose N. Serrano, M. D.
Celia S. Sayoc, M. D.	Deanna T. Yadao, M. D.

*Affiliates for Communicable Disease Training*

William H. McDermott, M. D.    From Rhode Island Hosp.

**Residents in Psychiatry**

Parvis Farvardin, M. D.	Ponciano de la Cruz, M. D.
Choong G. Park, M. D.	Bal K. Kaushal, M. D.
Dominador C. Calderon, M. D.	Delia F. Bilgera, M. D.

**Affiliate Interns from Miriam Hospital**

Samir Moubayed, M. D.	Farag D. Sciammas, M. D.
Solomon Littman, M. D.	Robert S. Potash, M. D.
Jack Schinazi, M. D.	Felice Iapaolo, M. D.
Robert Pierre Pauly, M. D.	En Shu Chang, M. D.
Helen Iro Athineos-Schinazi, M. D.	
Adib Zaky Abdel-Massie, M. D.	

1965

## CONSULTING STAFF

## PHYSICIANS

James F. Boyd, M. D.	John T. Monahan, M. D.
William P. Buffum, M. D.	Lucy E. Bourn, M. D.
Hilary J. Connor, M. D.	Edmund J. Sydlowski, M. D.
Paul C. Cook, M. D.	Daniel D. Young, M. D.
Frank H. Mathews, M. D.	Clarence J. Riley, M. D.
Elihu S. Wing, M. D.	John C. Ham, M. D.
Henry E. Utter, M. D.	Francesco Ronchese, M. D.
Julius G. Kelley, M. D.	William B. Cohen, M. D.
James Hamilton, M. D.	Harold G. Calder, M. D.
Meyer Saklad, M. D.	Gustavo A. Motta, M. D.
Alex M. Burgess, M. D.	Malcolm A. Winkler, M. D.
Cecil C. Dustin, M. D.	Frank J. Honan, M. D.
Edward T. Streker, M. D.	Elihu Saklad, M. D.
Francis H. Chafee, M. D.	Jacob Greenstein, M. D.
Francis V. Corrigan, M. D.	William J. O'Connell, M. D.
Morgan Cutts, M. D.	Vincent P. Rossignoli, M. D.
Frank A. Merlino, M. D.	Nora P. Gillis, M. D.
William H. Roberts, M. D.	Himon Miller, M. D.
Kalei K. Gregory, M. D.	Reuben C. Bates, M. D.
Carl D. Sawyer, M. D.	Stanley S. Freedman, M. D.
Earl F. Kelly, M. D.	Bruno G. DeFusco, M. D.
Herman A. Lawson, M. D.	William P. Shields, M. D.
Banice Feinberg, M. D.	Eric Denhoff, M. D.
Ira C. Nichols, M. D.	Herman B. Marks, M. D.
Pasquale V. Indeglia, M. D.	Earle F. Cohen, M. D.
Edward A. McLaughlin, M. D.	Frank Giunta, M. D.
Norman A. Johnson, M. D.	Briand N. Beaudin, M. D.
Richard E. Haverly, M. D.	Gilbert Houston, M. D.
William H. Foley, M. D.	Gerald Solomons, M. D.
Alfred C. Conte, M. D.	Reginald A. Allen, M. D.
	Parker Mills, M. D.

**SURGEONS**

John J. Gilbert, M. D.	George F. Conde, M. D.
William A. Mahoney, M. D.	Mark Rittner, M. D.
Michael J. O'Connor, M. D.	James H. Fagan, M. D.
Alfred L. Potter, M. D.	Joseph B. Webber, M. D.
Francis B. Sargent, M. D.	William M. Muncy, M. D.
Vincent J. Oddo, M. D.	Anthony Corvese, M. D.
Joseph C. Johnston, M. D.	Walter J. Molony, M. D.
Edmond C. Laurelli, M. D.	Charles Potter, M. D.
Raymond F. Hacking, M. D.	Wilfred Pickles, M. D.
Robert R. Baldrige, M. D.	Lee G. Sannella, M. D.
Frank W. Dimmitt, M. D.	Craig S. Houston, M. D.
Eske Windsberg, M. D.	H. Frederick Stephens, M. D.
Daniel V. Troppoli, M. D.	Herman Winkler, M. D.
Rudolph W. Pearson, M. D.	Linley C. Happ, M. D.
Edward S. Cameron, M. D.	Jarvis D. Case, M. D.
Mihran A. Chapin, M. D.	J. Stafford Allen, D. D. S.
Anthony V. Migliaccio, M. D.	Charles F. Cannon, D. M. D.
Nathan A. Bolotow, M. D.	

**VISITING STAFF****DEPARTMENT OF PEDIATRICS****In-Patient Department**

## PHYSICIAN-IN-CHIEF

Maurice Adelman, M. D.

## VISITING PHYSICIANS

Isadore Gershman, M. D.	Leonard B. Bellin, M. D.
D. William J. Bell, M. D.	Hilary H. Connor, M. D.
Clara Loitman-Smith, M. D.	Rudolf A. Jaworski, M. D.
John P. Grady, M. D.	Jay M. Orson, M. D.
John T. Barrett, M. D.	George H. Taft, M. D.

**Out-Patient Department**

## PHYSICIAN-IN-CHARGE

Maurice Adelman, M.D.

## VISITING PHYSICIANS

Peter L. Mathieu, Jr., M. D.	Wilson F. Utter, M. D.
Mario Vigliani, M. D.	Thomas H. George, M. D.
Betty B. Mathieu, M. D.	Normand E. Gauvin, M. D.
Harold B. Lang, M. D.	Valentino R. Simone, M. D.
*Ruth A. Bell, M.D.	Alfred Toselli, M. D.
John E. Farley, Jr., M. D.	Howard S. Lampal, M. D.
Alexander A. Jaworski, M. D.	Anna Sandberg, M. D.
John F. Hogan, M. D.	Carl F. DeLuca, M. D.
Joseph T. Barrett, M. D.	Martin J. Shorr, M. D.
Robert M. Lord, Jr., M. D.	George K. Boyd, M. D.
Sophie N. Wlassich, M. D.	Fouad E. Yazbak, M. D.
*William L. Mauran, M. D.	V. A. D'Alessandro, M. D.
*Frederick A. Peirce, Jr., M. D.	Paul H. LaMarche, M. D.
Ernest P. Mennillo, M. D.	John B. Montgomery, M. D.
Robert D. Corwin, M. D.	

\*Leave of absence.

**DEPARTMENT OF NEURO-PSYCHIATRY****In-Patient Department****PHYSICIAN-IN-CHIEF**

William N. Hughes, M. D.

**VISITING PHYSICIANS**

Kathleen M. Barr, M. D.	John O. Strom, M. D.
Ernest A. Burrows, M. D.	Dominic L. Coppolino, M. D.
Sarah M. Saklad, M. D.	Patrick F. O'Mahony, M. D.
Barry B. Mongillo, M. D.	Bruno Franek, M. D.
David J. Fish, M. D.	Oscar E. Stapans, M. D.
Thomas L. Greason, M. D.	Louis V. Sorrentino, M. D.
	Max Faintych, M. D.

**Out-Patient Department****PHYSICIAN-IN-CHARGE**

William N. Hughes, M. D.

**VISITING PHYSICIANS**

Louis V. Sorrentino, M. D.	*Robert W. Hyde, M. D.
Max Faintych, M. D.	Ivan J. Laszlo, M. D.
Antonio Capone, M. D.	Eufrocino N. Beltran, M. D.
Alfred L. Quartaroli, M. D.	Alexander S. Ruhig, M. D.
Robert A. Massouda, M. D.	Alfred E. Fireman, M. D.
	Martin H. Triedman, M. D.

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\*Leave of absence

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**CONSULTANTS ON CALL****MEDICINE**

Chief, Ezra A. Sharp, M. D.

**VISITING PHYSICIANS**

Earle H. Brennen, M. D.	Joseph G. McWilliams, M. D.
William L. Leet, M. D.	Laurence A. Mori, M. D.
Irving A. Beck, M. D.	George E. Kirk, M. D.
Russell S. Bray, M. D.	Gustaf Sweet, M. D.
Frank D. Fratantuono, M. D.	Herbert F. Hager, M. D.
David Litchman, M. D.	Michael DiMaio, M. D.
John T. Keohane, M. D.	Oswald D. Cinquegrana, M. D.
William Fain, M. D.	Robert Maiello, M. D.

**ASSISTANT VISITING PHYSICIANS**

Edwin B. O'Reilly, M. D.	James J. Scanlan, M. D.
John J. Lury, M. D.	Raymond E. Moffitt, M. D.
Robert E. Carroll, M. D.	Max Bloom, M. D.
Jacob Stone, M. D.	Paulo A. Botelho, M. D.
James J. Sheridan, M. D.	Juergen Nicolas, M. D.
James F. Hardiman, M. D.	Mario Tami, M. D.
Jaroslav Koropey, M. D.	Dario A. Herrera, M. D.
Marvin S. Kerzner, M. D.	

**Pulmonary Diseases**

Chief, Peter F. Harrington, M. D.

**VISITING PHYSICIANS**

James B. Moran, M. D.	Thomas H. Murphy, M. D.
-----------------------	-------------------------

**Dermatology and Syphilology**

Chief, Vincent J. Ryan, M. D.

**VISITING PHYSICIANS**

Bencel L. Schiff, M. D.	Carl S. Sawyer, M. D.
Louis Levine, M. D.	

**Urology**

Chief, Howard K. Turner, M. D.

## VISITING SURGEONS

John F. Streker, M. D.	Arthur J. Clarkin, Jr., M. D.
Ralph V. Sullivan, M. D.	Vincent I. MacAndrew, M. D.
Nathan Chaset, M. D.	Anthony J. Rotelli, M. D.
Ernest K. Landsteiner, M. D.	William S. Klutz, M. D.

## ASSISTANT VISITING SURGEON

Genarino R. Zinno, M. D.

**Gynecology**

Chief, George W. Waterman, M. D.

## VISITING SURGEONS

Ralph DiLeone, M. D.	Thomas F. Fogarty, M. D.
George E. Bowles, M. D.	Frederic W. Ripley, Jr., M. D.
James P. McCaffrey, M. D.	Calvin M. Gordon, M. D.

## ASSISTANT VISITING SURGEONS

John J. Sheehan, M. D.	Robert C. Hayes, M. D.
Gene A. Croce, M. D.	Vito L. Coppa, M. D.
Edward Cardillo, M. D.	Henry C. McDuff, Jr., M. D.
Bertram H. Buxton, Jr., M. D.	

**Surgery**

Chief, Ralph D. Richardson, M. D.

## VISITING SURGEONS

Charles J. Ashworth, M. D.	Leland W. Jones, M. D.
David Freedman, M. D.	Robert Gorfine, M. D.
Seebert J. Goldowsky, M. D.	J. Robert Bowen, M. D.
Wilfred I. Carney, M. D.	Richard P. Sexton, M. D.
Thomas C. McOsler, M. D.	Joseph E. Caruolo, M. D.
Arnold Porter, M. D.	Robert W. Riemer, M. D.
Thomas Perry, Jr., M. D.	John R. Stuart, M. D.
Jack Savran, M. D.	

**Neurosurgery**

Chief, Hannibal Hamlin, M. D.

## VISITING SURGEONS

Julius Stoll, Jr., M. D.

Walter C. Cotter, M. D.

**Orthopedics**

Chief, William A. Horan, M. D.

## VISITING SURGEONS

William V. Hindle, M. D.

Stanley D. Simon, M. D.

Vincent Zecchino, M. D.

Edward Spindell, M. D.

Ralph F. Pike, M. D.

Leonard D. Emond, M. D.

Henry M. Litchman, M. D.

**Ear, Nose and Throat**

Chief, Thomas L. O'Connell, M. D.

## VISITING SURGEON

Thomas R. Littleton, M. D.

## ASSISTANT VISITING SURGEONS

Richard Rice, M. D.

\*Mendell Robinson, M. D.

**Ophthalmology**

Chief, F. Charles Hanson, M. D.

## VISITING SURGEONS

Linus A. Sheehan, M. D.

Milton G. Ross, M. D.

James H. Cox, M. D.

Nathaniel D. Robinson, M. D.

Charles W. Does, M. D.

**Dentistry**

Chief, Walter C. Robertson, D. M. D.

## VISITING DENTISTS

Nicholas G. Migliaccio, D. M. D.

Leo Kantorowitz, D. D. S.

Harry Goldberg, D. D. S.

Saunders Spooner, D. D. S.

Morris L. Biderman, D. D. S.

\*Leave of absence



**Anesthesia**

Chief, Samuel Pritzker, M. D.

**VISITING ANESTHETISTS**

Nathan S. Rakatansky, M. D.   Thomas A. Egan, M. D.  
Priscilla Sellman, M. D.   William A. McDonnell, M. D.  
Americo J. Pedorella, M. D.   Herbert Ebner, M. D.  
Nicholas Pournaras, M. D.

## Charles V. Chapin Hospital

### Historical

The hospital is under the control of the Board of Hospital Commissioners, made up of five members, of which the Mayor is ex-officio chairman, the Superintendent of Health, an ex-officio member, and three other members chosen by the City Council, one each year for a three-year period of service.

This hospital was built for the purpose of caring for all kinds of contagious diseases and originally was known as the Providence City Hospital.

It is built on a plot of land, nearly square, twenty-five acres in extent, that expansion into a large general hospital might at any time be undertaken without the acquisition of additional property.

The original cost, including land, was about \$450,000. It was opened for the treatment of patients March 1, 1910.

In 1912, at a cost of about \$50,000, the expansion of the hospital was deemed necessary and a unit for advanced cases of tuberculosis was built. The capacity of the hospital was thereby raised to one hundred and ninety beds, one hundred and forty for acute communicable and venereal diseases, and fifty for advanced cases of pulmonary tuberculosis. In 1930 the nurses' home with 139 rooms, a psychopathic building with 60 beds for the care of psychiatric patients, and additions to both the service and laundry plants were completed at a cost of \$700,000.00. At the same time a general Out-Patient Department was inaugurated and housed in the lower floor of the psychopathic building. On January 6, 1932 an addition to the isolation building was completed for the accommodation of fourteen private patients suffering from infectious diseases.

In 1944, cubicles were constructed in the ward for tuberculosis (later named the Hindle Building), reducing the number of beds there to 41.

In April 1946, because of a lack of surgical beds in general hospitals, a private surgical unit was opened in the West Building. In August 1955, this unit was discontinued as ample surgical facilities were available elsewhere.

Because of the large number of vacant beds at Wallum Lake Sanitarium, the tuberculosis unit in the Hindle Building was discontinued and a pediatric unit for the care of non-contagious cases was established in 1954. Following the survey made by Dr. Theodore H. Ingalls in 1958, the pediatric unit was transferred to the West Building and a new unit for convalescent and mild female psychiatric cases was established in the Hindle Building and formally opened on October 6, 1958.

The Hindle Building now has a capacity of 37. In April 1962, similar facilities were provided for 16 male patients on West I. These two wards, together with the 62 beds in Lippitt Building, brought the total to 115 for psychiatric care.

The transfer of West I to the psychiatric service, and loss of space on Richardson II taken by the new formula room, brought the total of beds and bassinets for pediatric and communicable cases down to 103. It should be understood that this number is provisional, because in an epidemic, additional beds can be set up to almost double the capacity.

Patients are admitted on the recommendation of any practicing physician and the hospital works in close harmony with the City Health Department.

All patients are asked to pay for their treatment according to their financial means, though no one is refused treatment because of his inability to pay.

At a meeting of the Board of Hospital Commissioners on December 21, 1931, in accordance with a resolution passed by the City Council on December 7, 1931, the name of the Providence City Hospital was changed to the Charles V. Chapin Hospital. The purpose of this resolution was to respect and to pay homage to Dr. Charles V. Chapin, who was about to resign as Superintendent of Health, after a continuing service of forty-eight years and who, by virtue of holding this office had been a member of the Board of Hospital Commissioners since that body had been organized. It was largely through his efforts that the hospital had been built. Not only had he been given the responsibility of planning the construction, but during all the years which followed he had frequently

visited to observe the functioning of his endeavors. He was rewarded in this eminent manner for his faithful devotion to the welfare and health of this community which, through pride for his world-wide fame as a public health officer, esteemed no honor too great for the distinction he had brought on our city. He resigned as Superintendent of Health, January, 1932.

Dr. Chapin died January 31, 1941 after a lingering illness incidental to his age. He was in his eighty-sixth year at the time of death. In many ways this hospital is a monument to his great talents in preventive medicine and public health.

On October 11, 1939, Dr. Richardson resigned as superintendent of the hospital, after serving with distinction in this capacity from 1910, to assume a similar responsibility at the Rhode Island Hospital. At the opening of the institution, in collaboration with Dr. Chapin, he was instrumental in the development of a new principle of aseptic technique as applied to the prevention and spread of communicable diseases. How well this theory gained favor was soon manifest by its trial and acceptance throughout the country by many leading clinicians, who in this complimentary manner, testified to the adequacy of its merits. By his resignation the hospital lost a distinguished manager and the city a faithful servant.

Dr. William Hindle took office as superintendent on January 1, 1940. As its second superintendent, he led the hospital through the trying war years. In his sudden death on July 26, 1945, the hospital suffered a great loss.

On September 14, 1945, Dr. Hilary J. Connor was elected by the Board of Hospital Commissioners to fill the vacancy. He had been an assistant superintendent here from 1917 to 1921 and in the years that followed, became well known in public health circles in Providence and in Rhode Island. He was an excellent administrator who was untiring in his efforts to maintain the hospital at its highest efficiency and to provide the best possible care for patients. For personal reasons, he tendered his resignation effective October 3, 1960 and it was with great regret that the Board of Hospital Commissioners accepted it.

Dr. Edward J. West was elected by the Board of Hospital Commissioners to succeed Dr. Connor.

## Report of the Board of Hospital Commissioners

### *To the Honorable City Council:*

The Board of Hospital Commissioners presents its Annual Report for the fiscal year ending September 30, 1964. The details of the various activities, problems, and accomplishments of the hospital and its various departments are described in the reports of the Superintendent and the department heads.

While the citizens of the City of Providence can continue to take pride in the efficient functioning of this hospital under the able administration of Dr. Edward J. West and his staff, it is time that the State assume its full responsibility for the fiscal operation of this institution and not submit the taxpayers of the City of Providence to supporting the other thirty-eight communities. During the past fiscal year, the City of Providence was called upon to cover a deficit of close to \$300,000 for the hospital.

During the fiscal year, 758 so-called emergency cases were seen after hours at the Administration Building. These were primarily children brought for diagnosis and treatment. No remuneration was received for these cases and no estimate of cost has been made.

The following additions to the staff have been made for the year starting January 1, 1965.

Morris L. Biderman, D. D. S.	Paul H. LaMarche, M. D.
Robert D. Corwin, M.D.	Henry M. Litchman, M. D.
Leonard D. Emond, M. D.	John B. Montgomery, M. D.
Alfred E. Fireman, M. D.	Alexander S. Ruhig, M. D.
Marvin S. Kerzner, M. D.	Martin H. Triedman, M. D.

It is our sad duty to note the death, on January 15, 1964 of Dr. J. Murray Beardsley, who was chief of surgery; also the death of Dr. Louis I. Kramer on November 3, 1964,

chief of medicine. Francis M. Hackett, D. D. S. died on September 3, 1964.

Dr. Ralph D. Richardson, the son of our first superintendent, was appointed chief of surgery and Dr. Ezra A. Sharp was appointed chief of medicine.

The Board notes with regret, the decision of our Chairman to withdraw from political activity and welcomes his successor, trusting he also will have a long and fruitful administration.

The Board of Hospital Commissioners once more wishes to express its sincere appreciation to all the members of the staff and to the employees for their continued faithful, efficient service; and to acknowledge again the debt owed by the hospital to the community and to the many doctors on the visiting and consulting staffs who have continued to provide valuable services without financial recompense.

The staff of volunteers has done much to brighten the stay, especially of the adult patients, and has contributed immensely to the goodwill and understanding for which we are noted.

Respectfully submitted,

HONORABLE WALTER H. REYNOLDS  
*Mayor, Chairman*

JOSEPH SMITH, M. D.,  
*Superintendent of Health, Secretary*

JAMES H. FAGAN, M. D.

ROBERT E. CARROLL, M. D.

ALEX M. BURGESS, SR., M. D.

*James H. Fagan M.D.*  
*Alex. M. Burgess M.D.*  
*Robert E. Carroll M.D.*  
*Joseph Smith*  
*Sec.*

## Superintendent's Report

### *To the Board of Hospital Commissioners:*

I herewith submit the annual report of the hospital, including both statistical and financial data, for the year ending September 30, 1964. The following tables, in condensed form, furnish information concerning the activities of the hospital. A small number of resultant discrepancies may be noted which are due to departmental transfers.

#### STATISTICS FOR ALL PATIENTS

	1964			1963		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital at end of fiscal year.....	97	42	55	114	48	66
Total number of patients admitted during the year .....	2,633	1,380	1,253	2,511	1,310	1,201
Live births .....	0			0		
Number of patients in hospital at beginning of fiscal year .....	114	48	66	83	30	53
Total number of patients under treatment .....	2,747	1,428	1,319	2,594	1,340	1,254
Total number of patients discharged..	2,650	1,386	1,264	2,480	1,292	1,188
Average daily population .....	95.9			101		
Average residence .....	15.2			14.9		
Largest number in any one day.....	129			133		
Smallest number in any one day.....	55			73		
Total days' treatment .....	35,087			36,849		
Total number of deaths .....	27			21		
Number of deaths within 48 hours....	12			6		
Fatality for all cases .....	1.0			0.8		
Total visits to Out-Patient Department .....	7,534			7,531		

#### PEDIATRIC, NON-COMMUNICABLE

	1964			1963		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital at end of fiscal year .....	10	6	4	18	10	8
Number of patients admitted during the year .....	497	289	208	541	305	236
Number of patients in hospital at beginning of fiscal year .....	18	10	8	4	1	3
Total number of patients under treatment .....	515	299	216	545	306	239
Number of patients discharged .....	505	293	212	527	296	231
Average daily population.....	12.5			11.0		
Average residence .....	9.1			7.6		
Number of deaths .....	3			1		
Number of deaths within 48 hours....	2			0		
Fatality rate .....	0.6			0.2		
Days' treatment .....	4,586			4,023		

## PEDIATRIC COMMUNICABLE\*

	1964			1963		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital at end of fiscal year.....	7	4	3	10	5	5
Number of patients admitted during the year.....	309	169	140	355	196	159
Number of patients in hospital at beginning of fiscal year.....	10	5	5	8	1	7
Total number of patients under treatment.....	319	174	145	363	197	166
Number of patients discharged.....	312	170	142	353	192	161
Average daily population.....	9.7			11.7		
Average residence.....	11.3			12.1		
Number of deaths.....	1			3		
Number of deaths within 48 hours.....	1			3		
Fatality rate.....	0.3			0.8		
Days' treatment.....	3,542			4,265		

\*This table is a part of the schedule "Communicable, All Ages."

## COMMUNICABLE, ALL AGES\*

	1964			1963		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital at end of fiscal year.....	9	5	4	15	7	8
Number of patients admitted during the year.....	353	192	161	402	219	183
Number of patients in hospital at beginning of fiscal year.....	15	7	8	9	1	8
Total number of patients under treatment.....	368	199	169	411	220	191
Number of patients discharged.....	359	194	165	396	213	183
Average daily population.....	11.5			13.9		
Average residence.....	11.7			12.8		
Number of deaths.....	2			5		
Number of deaths within 48 hours.....	1			4		
Fatality rate.....	0.5			1.3		
Days' treatment.....	4,217			5,070		

\*This table includes the schedule "Pediatric Communicable."

## PEDIATRIC

	1964			1963		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital at end of fiscal year.....	17	10	7	28	15	13
Number of patients admitted during the year.....	806	458	348	896	501	395
Number of patients in hospital at beginning of fiscal year.....	28	15	13	12	2	10
Total number of patients under treatment.....	834	473	361	908	503	405
Number of patients discharged.....	817	463	354	880	488	392
Average daily population.....	22.2			22.7		
Average residence.....	10.0			9.4		
Number of deaths.....	4			4		
Number of deaths within 48 hours.....	3			3		
Fatality rate.....	0.4			0.5		
Days' treatment.....	8,128			8,288		



## MEDICAL

	1964			1963		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital at end of fiscal year .....	1	1	0	4	3	1
Number of patients admitted during the year .....	74	38	36	50	22	28
Number of patients in hospital at beginning of fiscal year .....	4	3	1	0	0	0
Total number of patients under treatment .....	78	41	37	50	22	28
Number of patients discharged .....	77	40	37	46	19	27
Average daily population .....	2.1			2.0		
Average residence .....	10.0			16.2		
Number of deaths .....	3			0		
Number of deaths within 48 hours...	2			0		
Fatality rate .....	3.9			0		
Days' treatment .....	771			747		

## NEURO-PSYCHIATRY

	1964			1963		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital at end of fiscal year .....	77	30	47	77	28	49
Number of patients admitted during the year .....	1,709	861	848	1,519	765	754
Number of patients in hospital at beginning of fiscal year .....	77	28	49	70	28	42
Total number of patients under treatment .....	1,786	889	897	1,589	793	796
Number of patients discharged .....	1,710	859	851	1,512	764	748
Average daily population .....	69.7			74		
Average residence .....	14.9			17.9		
Number of deaths .....	19			15		
Number of deaths within 48 hours...	7			2		
Fatality rate .....	1.1			0.9		
Days' treatment .....	25,513			27,009		

A comparison of this report with the previous year (1963) shows an increase in the number of patients admitted for treatment but a decrease in the total days' treatment for each patient. There were 2,747 patients cared for, the largest number since 1955, the year in which the largest epidemic of poliomyelitis on record occurred in this locality. This increase in admissions was due to patients cared for in the Neuro-Psychiatric Department, the details of which will be found in its report.

There was a decrease in the average days' treatment for patients in both the Pediatric and Neuro-Psychiatric Departments. This trend has followed the pattern of the last several years and can be explained best by the increase in the number of patients cared for in the out-patient clinics and also the increased number of prescriptions filled for these patients. There were 1,305 visits made to the Neuro-Psychiatric out-patient clinic, almost 300 more than during the previous year.

The drop in Pediatric cases during the year can be explained by the fact that again no epidemic appeared in this community. It also should be mentioned that there has been a distinct rise in the number of babies and children brought to the hospital at any hour of the day or night for treatment, and are not listed in the outpatient visits for this department. There were 758 of these so-called emergency clinic patients compared to 594 the previous year. Modern medication and advice are responsible for the continued decrease in patient days necessary for the care of these individuals. Adding the number of communicable diseases not listed as Pediatric cases (adults with suspected infectious diseases) and the clinic cases, there seems to be ample work and material for resident training.

Again, I would like to stress the increase in out-patient visits and the increased cost involved. Very few of these patients pay for care or drugs but the results of good service to those who are spared hospitalization do not appear in any statistical tables.

The gross per capita for all in-patients increased from \$34.70 to \$35.80. These figures and the deficit for the fiscal year of \$295,988.47, together with a listing of the hospital repairs, furnishings, and new equipment will be found further in this report.

There were 74 electroencephalograms done this year compared to 22 the year before.

The 1962-64 Charles V. Chapin Research Fellow, Dale E. Hunt, Ph.D., will terminate his research in the hospital laboratories on December 30, 1964.

During the first year of research, Dr. Hunt investigated the possibility of inducing antibiotic production in a non-antibiotic producing microorganism. After screening nearly one-half million mutants, which had been exposed to ultraviolet radiation, a mutant yeast was isolated which produces a thermolabile or volatile inhibitory substance that appears to be bacteriostatic for staphylococcus and pseudomonas and bactericidal for salmonella. The data indicate that the antibacterial activity shown by the mutant organism cannot be attributed to organic acids, fusel oil, or a low pH. A specific mating reaction established that

the antibioticly active yeast was derived from the original parental strain.

In an effort to secure more survivors (and possibly more mutants) from ultraviolet-irradiated yeast cells, it appeared desirable to find some means of protecting the irradiated yeast against lethal UV damage. Thus the second year of research was initiated. It was found that preliminary cultivation of yeast cells in a basal medium enriched with certain amino acids markedly increased their resistance against inactivating UV exposure. Additional studies revealed that the protection afforded by certain amino acids against UV inactivation is a rather general phenomenon in gram-positive microorganisms.

The results of these investigations have been published in three papers and reprints of these papers and other pertinent data associated with this research have been filed in the hospital library.

#### MEDICAL PERSONNEL

Drs. Iluminada V. Santiago and Bella R. Rodriguez, were obliged to leave in September to return to the Philippines. They each started a pediatric residency in 1961 and after completing it, continued on as senior resident physicians.

Dr. Fioravante N. Nora, who completed a two-year residency here and was appointed clinical director in June 1960, resigned in June 1964, to accept a position as chief medical officer of the Dr. Joseph H. Ladd School.

Dr. Vasant A. K. C. Gideon, who had been at the hospital since October 1960, resigned in August 1964 to go to the Taunton State Hospital.

It will be difficult to replace these doctors.

Dr. William H. Foley was appointed assistant superintendent and clinical director on September 14, 1964. He is a graduate of law school as well as of the Boston University Medical School. He is a former director of medical education at the

Roger Williams General Hospital and has maintained an office in Rhode Island for a number of years.

Elsewhere in this report is a list of the residents in pediatrics and psychiatry, also the affiliate interns in pediatrics.

#### CONCLUSION

I again wish to express to the Board of Hospital Commissioners my gratitude for their cooperation, understanding, and sincere interest.

I also wish to thank the visiting, resident, and nursing staffs, and all other employees for their continued good work and cooperation.

*Respectfully submitted,*

EDWARD J. WEST, M. D.

*Superintendent*

## Report of Business Administration

### *Revenue Receipts*

Receipts from all sources for the fiscal year ending September 30, 1964 amounted to \$1,134,861.53 (Exhibit 1)\* which included the State of Rhode Island grant of \$600,000.00. This was a decrease in revenue of \$7,334.22 from the previous year.

### *Operating Cost*

The total cost of operation was \$1,430,850.00 (Exhibit 2)\*\*. This amount was distributed to the cost centers of the hospital.

### *Operating Deficit*

The deficit for the fiscal year amounted to \$295,988.47 (Exhibit 3)\*\*\*.

The replacement of hospital furnishings that became obsolete along with the following improvements or new equipment are included in the operating cost:

1. \$33,000.00 for electrical engineering fees, and surveys and plans for complete overhaul of electrical system.
2. \$30,000.00 for first phase of electrical work which is expected to cost \$450,000.00 over five year period.
3. Painting exterior of all hospital buildings, about 70% completed during this fiscal year.
4. 120 chairs and 15 tables for dining rooms.
5. A new paging system.
6. 48 Captain chairs for Neuro-Psychiatric Department.
7. 1 American Optical Triangular Microscope.

### *Free Service*

Free Care for the year amounted to \$343,817.37. Determination of eligibility is made through an investigation of the

patients' income and expenditures. The cost of living scale issued by the Bureau of Labor Statistics is used as a guide; also, all welfare agencies throughout the state are contacted for verification of active assistance.

*Free Service to Employees and Trainees*

Services rendered to employees and trainees amounted to \$4,189.80.

*Outside Agencies*

The following services conducted by other city and state agencies are included in the cost of the hospital, as follows:

- |  |             |
|--|-------------|
| 1. City Health Pulmonary Clinic .....      | \$23,560.48 |
| 2. City Health Inspection of Milk .....    | 3,139.97    |
| 3. City Health Laboratory Examinations ... | 381.60      |
| 4. State Mental Retardation Clinic .....   | 1,723.86    |

To the Superintendent, Dr. Edward J. West, and all hospital personnel, I wish to express my thanks and appreciation for their cooperation during the year.

*Respectfully submitted,*

WILLIAM A. MANNING  
*Business Manager*

\*See Page 30.  
\*\*See Page 31.  
\*\*\*See Page 31.

## Financial Report

For Year Ended September 30, 1964

EXHIBIT 1

## REVENUE RECEIPTS

## In-Patient Department:

Communicable and Pediatric .....	\$ 144,058.75
Neuro-Psychiatric .....	274,823.15
X-Ray .....	8,480.39
Laboratory .....	35,235.55
Drugs .....	34,087.69
Ambulance .....	15.00
Telephone .....	8.00
Electric Shock Treatment .....	6,661.00
Electrocardiograms .....	789.00
Electroencephalograms .....	962.00
<b>Total In-Patient .....</b>	<b>\$ 505,120.53</b>

## Out-Patient Department:

Fees .....	\$ 398.00
Examinations — Food Handlers .....	1,700.00
<b>Total .....</b>	<b>\$ 2,098.00</b>
X-Ray Service .....	1,507.40
Drug Room Service .....	2,710.00
Wassermann Tests .....	4.50
<b>Total .....</b>	<b>\$ 6,319.90</b>

## Miscellaneous Earnings:

Mental Retardation Rent .....	\$ 665.00
Meals .....	584.25
University of R. I. .....	5,803.00
Abstracts .....	180.00
Donations .....	46.00
Materials .....	148.00
Refunds .....	2,243.04
Telephone .....	307.09
Electroencephalograms .....	65.00
Laboratory .....	7.00
Miscellaneous .....	175.00
<b>Total .....</b>	<b>10,223.38</b>

<b>Total Out-Patient .....</b>	<b>16,543.28</b>
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<b>Gross Revenue Receipts .....</b>	<b>\$ 521,663.81</b>
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## Deduct:

Refunds on Advance Payments .....	1,331.35
<b>Net Revenue Receipts .....</b>	<b>\$ 520,332.46</b>

## Add:

Meals and Lodgings .....	\$ 14,529.07
State of R. I. Grant .....	600,000.00
<b>Total Revenue Receipts .....</b>	<b>\$1,134,861.53</b>

## DEPARTMENTAL EXPENDITURES

## EXHIBIT 2

Opening Inventories .....	\$ 58,611.35	
Meals and Lodging .....	14,529.07	
Expenditures (Schedule A) .....	1,422,929.52	
Total .....	\$1,496,069.94	
Less:		
Closing Inventories .....	65,219.94	
Total Costs .....		<u>\$1,430,850.00</u>
Neuro-Psychiatric .....	\$ 774,096.38	
Communicable, Pediatric and Other .....	564,556.85	
Out-Patient .....	58,758.84	
City Health Department:		
Pulmonary Clinic .....	23,560.43	
Inspection of Milk .....	3,139.97	
Laboratory Examinations .....	381.60	
State Mental Retardation Clinic .....	1,723.86	
Other Non-Patients' Costs .....	4,545.44	
Total (Schedule B) .....	\$1,430,763.43	
Add:		
Undistributed Balance of Cost .....	86.57	
Total Department Expenditures .....		<u>\$1,430,850.00</u>

## STATEMENT OF INCOME AND EXPENSE

## EXHIBIT 3

Income:		
Services Rendered:		
In-Patient .....	\$ 777,261.77	
Other .....	66,681.78	
Total Services .....		\$ 843,943.55
Deductions:		
Courtesy Services .....	\$ 671.75	
Employee Free Service .....	4,189.80	
General Public Health (TB) .....	12,835.00	
Free Care .....	343,817.37	
Research .....	10.00	
Compromise Settlements .....	5,658.95	
Total Deductions .....		367,182.87
Net Services Rendered .....		\$ 476,760.68
Add:		
Other Income:		
Meals .....	\$ 11,898.98	
Lodgings .....	2,630.09	
Total Other Income .....		14,529.07
Gross Income .....		\$ 491,289.75
Expenses:		
Salaries .....	\$1,047,913.49	
Supplies Used, New Equipment and Repairs .....	382,936.51	
Total Expenses (Exhibit 2) .....		1,430,850.00
Net Operating Deficit Based on Services Rendered .....		\$ 939,560.25
Deduct:		
State of R. I. Grant .....		600,000.00
Operating Deficit .....		\$ 339,560.25
Less Adjustment for Service Rendered .....		43,571.78
Deficit for Period .....		<u>\$ 295,988.47</u>



## EXHIBIT 4

## MAINTENANCE COSTS FOR ALL IN-PATIENTS

1964	OPERATING COST	HOSPITAL DAYS	PER GROSS CAPITA COST
	\$1,255,944.08	35,087	\$35.80

## OUT-PATIENT DEPARTMENT

## EXHIBIT 5

1964	OPERATING COST	VISITS	COST PER VISIT
	\$58,758.84*	7,534	\$7.79

\* includes all clinic prescriptions filled at Charles V. Chapin pharmacy.

## SCHEDULE A

## ANALYSIS OF APPROPRIATIONS AND EXPENDITURES

Item	Description	Appropriations	Expenditures	Unencumbered Balances
0	Personal Services*	\$1,133,335.42	\$1,047,913.49	\$ 85,421.93
1	Services Other Than Personal	148,660.00	139,592.26	9,067.74
2	Materials and Supplies	230,600.00	226,123.43	4,476.57
5	Equipment Replacement	31,020.00	9,300.34	21,719.66
		\$1,543,615.42	\$1,422,929.52	\$120,685.90

\* Does not include \$14,529.07 covering payroll deductions for Meals and Lodgings.

## SCHEDULE B

## DEPARTMENTAL COST DISTRIBUTIONS

## NEURO-PSYCHIATRIC DEPARTMENT:

## Professional Care:

Medical	\$ 45,857.92
Nursing	99,768.25
Other (Soc. Wkrs., Psychom. Ther.)	49,192.81
Laboratory	38,534.79
Pharmaceuticals	29,151.93
X-Ray	3,282.71
Central Supply (Med. & Surg. Sup.)	14,306.01
Total	\$ 280,094.42

## Non-Professional Care:

Ambulance	\$ 5,198.67
Dietary	83,940.20
Laundry	47,274.40
Medical Records	9,778.03
Attendant Service	142,259.34
General Administration	124,529.91
Housing:	
Utility Service	4,590.65
Maintenance	12,981.48
Heat, Hot Water and Steam	8,262.30
Housekeeping	42,134.96
Materials and Supplies	11,927.72
Equipment Replacement	1,124.30
Total	\$ 494,001.96

Gross Cost of Patients Housed in Psychopathic Department .....\$ 774,096.38

## COMMUNICABLE, PEDIATRIC AND OTHER:

## Professional Care:

Medical	\$ 45,201.45
Nursing	128,187.69
Other Professional Care	1,288.63
Laboratory	44,198.03
Pharmaceuticals	18,780.58
X-Ray	7,649.19
Central Supply (Med. & Surg. Sup.)	8,305.99
Total	\$ 253,611.56

## Non-Professional Care:

Ambulance .....	\$ 2,034.28
Dietary .....	30,671.02
Laundry .....	33,439.05
Medical Records .....	4,451.55
Practical Nurses, Aides, etc. ....	71,490.53
General Administration .....	71,436.13

## Housing:

Utility Service .....	10,765.31
Maintenance .....	17,621.57
Heat, Hot Water, and Steam .....	14,390.93
Housekeeping .....	44,528.17
Materials and Supplies .....	9,450.93
Equipment Replacement .....	665.83

Total ..... \$ 310,945.30

Gross Cost of Patients Housed in Communicable, Pediatric and Other .... \$ 564,556.86

## OUT-PATIENT DEPARTMENT:

## Professional Care:

Medical .....	\$ 6,270.21
Nursing .....	3,699.66
Laboratory .....	2,799.34
Pharmaceuticals .....	29,002.01
X-Ray .....	558.74

Total ..... \$ 42,329.96

## Non-Professional Care:

Laundry .....	\$ 2,752.47
General Administration .....	7,464.08

## Housing:

Utility Service .....	1,009.15
Maintenance .....	763.29
Heat, Hot Water and Steam .....	544.90
Housekeeping .....	3,416.32
Materials and Supplies .....	380.67
Equipment Replacement .....	98.00

Total ..... \$ 16,428.88

Gross Cost of all Patients Treated in Out-Patient Clinic ..... \$ 58,758.84

## PULMONARY TUBERCULOSIS CLINIC:

## Professional Care:

Other (Tech. Clinic Serv.) .....	\$ 156.00
Pharmacy .....	242.70
X-ray .....	20,970.61

Total ..... \$ 21,369.31

## Non-Professional Care:

## Housing:

Utility Service .....	\$ 439.99
Maintenance .....	1,017.77
Heat, Hot Water and Steam .....	726.52
Materials and Supplies .....	6.89

Total ..... \$ 2,191.17

Gross Cost of Hospital for City Pulmonary Tuberculosis Clinic ..... \$ 23,560.48

## INSPECTION OF MILK:

## Non-Professional Care:

## Housing:

Utility Service .....	\$ 477.09
Maintenance .....	1,553.80
Heat, Hot Water, & Steam .....	1,109.08

Gross Hospital Cost for City Inspection of Milk ..... \$ 3,139.97

## LABORATORY EXAMINATIONS:

Laboratory ..... \$ 381.60

Gross Hospital Cost for Laboratory Examinations ..... \$ 381.60

## COST OF MENTAL RETARDATION CLINIC:

(State of Rhode Island):

## Professional Care:

X-Ray ..... \$ 610.28

Total ..... \$ 610.28

## Non-Professional Care:

## Housing:

Utility Service .....	\$ 241.45
Maintenance .....	508.88
Heat, Hot Water, and Steam .....	363.25

Total ..... \$ 1,113.58

Gross Hospital Cost for Mental Retardation Clinic ..... \$ 1,723.86

## COST OF OTHER NON-PATIENTS:

Pharmaceuticals ..... \$ 4,545.44

Gross Cost of Other Non-Patients ..... \$ 4,545.44

Total Department Expenditures Distributed ..... \$1,430,763.43

## Add:

Undistributed Balance of Cost ..... 86.57

Total Department Expenditures ..... \$1,430,850.00

## General Statistics

(October 1, 1963-September 30, 1964)

Population, March 1, 1910-September 30, 1964

Year	Total Discharges	Days' Treatment	Average Daily Pop.	Average Stay						Non-Resident Patients (Fiscal Year)	Out-Patient Dept. Visits	Ambulance Calls
				Contagious Diseases	Pediatrics	Medical	Tuberculosis	*Psychiatric Diseases	**Surgical			
1910.....	522	26,170	71.7	.....	.....	.....	.....	.....	.....	19	.....	544
1911.....	746	37,585	102.9	.....	.....	.....	82.4	.....	.....	21	.....	702
1912.....	1,004	44,770	122.3	34.1	.....	.....	131.8	.....	.....	48	.....	846
1913.....	1,010	44,245	120.6	28.7	.....	.....	109.4	.....	.....	64	.....	790
1914.....	1,632	44,097	120.8	39.9	.....	.....	94.8	.....	.....	78	.....	864
1915.....	1,875	51,976	142.4	27.1	.....	.....	117.6	.....	.....	68	.....	991
1916.....	1,865	52,364	143.4	20.8	.....	.....	99.9	.....	.....	110	3,592	1,081
1917.....	1,368	46,123	126.3	20.7	.....	.....	90.2	.....	.....	145	12,902	957
1918.....	1,882	46,675	127.8	27.7	.....	.....	52.0	.....	.....	188	17,415	1,392
1919.....	1,484	47,988	131.5	29.3	.....	.....	71.6	.....	.....	141	24,497	974
1920.....	1,537	48,120	131.8	32.3	.....	.....	92.0	.....	.....	100	25,712	1,459
1921.....	1,274	43,097	118.0	24.0	.....	.....	102.1	.....	.....	122	28,621	1,573
1922.....	1,194	39,636	108.6	22.9	.....	.....	123.8	.....	.....	142	24,551	1,058
1923.....	1,448	46,544	127.5	21.5	.....	.....	94.2	.....	.....	184	18,384	1,161
1924.....	1,659	44,619	121.9	20.5	.....	.....	80.9	.....	.....	155	19,289	1,383
1925.....	1,411	39,905	109.3	19.6	.....	.....	102.6	.....	.....	159	22,344	1,052
1926.....	1,657	45,458	124.0	19.0	.....	.....	94.4	.....	.....	141	20,569	1,162
1927.....	1,578	47,894	131.2	19.2	.....	.....	143.3	.....	.....	130	22,208	1,186
1928.....	1,709	47,509	127.1	19.8	.....	.....	96.3	.....	.....	134	22,821	1,455
1929.....	1,752	44,864	122.9	18.6	.....	.....	82.5	.....	.....	146	25,971	1,267
1930.....	2,039	58,086	153.6	21.5	.....	.....	64.9	18.6	.....	263	30,788	1,388
1931.....	2,727	71,669	196.4	18.5	.....	.....	84.8	25.9	.....	340	34,195	1,779
1932.....	2,556	73,983	202.0	19.8	.....	.....	116.9	24.0	.....	291	39,278	1,747
1933.....	2,310	74,862	205.1	22.8	.....	.....	155.7	25.2	.....	166	43,789	1,660
1934.....	1,918	67,974	186.2	25.7	.....	.....	161.3	28.3	.....	259	31,832	1,318
1935 (9 Mos.)	1,807	55,770	204.2	20.3	.....	.....	121.1	29.2	.....	310	28,884	1,334
1936.....	2,251	75,514	206.8	24.0	.....	.....	140.3	35.7	.....	262	35,345	1,492
1937.....	2,285	78,923	216.2	24.4	.....	.....	113.5	43.2	.....	208	35,817	1,638
1938.....	2,001	68,357	187.2	24.4	.....	.....	163.2	33.8	.....	282	27,700	1,777
1939.....	1,969	67,328	184.5	25.0	.....	.....	160.5	30.2	.....	224	34,796	1,168
1940.....	2,047	67,182	184.1	23.0	.....	.....	146.3	31.1	.....	270	29,828	1,214
1941.....	1,994	63,077	172.8	20.6	.....	.....	128.2	28.4	.....	351	27,716	1,257
1942.....	2,167	57,197	156.7	19.5	.....	.....	106.4	24.0	.....	439	26,439	1,267
1943.....	2,342	57,066	156.3	18.6	.....	.....	107.0	23.5	.....	713	17,273	1,184
1944.....	2,365	55,154	151.1	18.2	.....	.....	99.0	23.3	.....	798	14,622	887
1945.....	2,168	45,585	124.8	16.3	.....	.....	103.2	15.8	.....	709	13,922	792
1946.....	2,629	48,608	133.2	14.9	.....	.....	91.9	16.4	7.0	965	13,401	657
1947.....	3,253	55,774	152.8	14.4	.....	.....	99.1	17.2	6.6	1,282	13,701	730
1948.....	3,305	48,872	133.5	14.0	.....	.....	64.5	14.9	5.0	1,173	12,239	524
1949.....	3,443	48,542	132.9	13.1	.....	.....	67.8	14.4	4.8	1,436	12,955	538
1950.....	3,155	47,858	131.1	15.3	.....	.....	58.8	13.8	5.4	1,313	13,131	506
1951.....	3,057	42,740	117.1	13.3	.....	.....	53.0	12.8	5.5	1,254	11,163	544
1952.....	3,251	44,337	121.1	11.6	.....	.....	82.6	15.5	5.6	1,342	10,769	483
1953.....	3,084	56,667	158.0	28.1	16.7	8.7	76.9	16.1	6.2	1,320	9,819	596
1954.....	2,295	48,872	133.8	28.9	21.3	10.0	57.2	17.9	.....	1,020	8,512	645
1955.....	2,839	48,249	132.2	24.4	19.1	8.6	.....	15.8	3.5	1,491	8,810	827
1956.....	2,027	41,569	113.6	32.8	24.8	11.7	.....	15.2	.....	967	9,482	892
1957.....	2,292	35,484	97.2	18.4	15.4	13.8	.....	15.0	.....	1,127	8,471	1,187
1958.....	2,452	36,650	100.4	14.1	14.5	11.8	.....	15.6	.....	1,130	7,042	2,296
1959.....	2,592	42,012	115.1	16.1	15.1	9.7	.....	18.0	.....	1,306	5,915	2,103
1960.....	2,398	43,032	117.6	24.3	17.6	8.6	.....	18.9	.....	1,169	5,382	2,168
1961.....	2,411	39,467	108.1	20.0	13.6	13.5	.....	18.0	.....	1,181	7,171	2,315
1962.....	2,591	38,395	105.2	13.5	10.2	11.7	.....	18.1	.....	1,394	7,305	2,438
1963.....	2,480	36,849	101	12.8	9.4	16.2	.....	17.9	.....	1,342	7,531	2,287
1964.....	2,650	35,087	95.9	11.7	10.0	10.0	.....	14.9	.....	1,485	7,534	2,179

\*Wards for Psychiatric Diseases were opened June 1, 1930.  
 \*\*Surgical ward opened April 1, 1946.

## C. Report on All Diseases

Table C 1. Diseases Treated March 1, 1910-September 30, 1964

DISEASES	Oct. 1, 1963			Oct. 1, 1962			March 1, 1910		
	Sept. 30, 1964			Sept. 30, 1963			Sept. 30, 1964		
	Cases.	Deaths.	Fatality.	Cases.	Deaths.	Fatality.	Cases.	Deaths.	Fatality.
Chickenpox .....	35			27			1,217	14	1.2
Diarrhea, due to infection .....	0			0			68***		
Diarrhea, due to unknown cause .....	0			0			73***		
Diphtheria .....	0			1			5,745	689	12.0
Diphtheria carrier .....	0			0			729		
Dysentery bacillary .....	0			0			63***		
Encephalitis, acute, all forms ..	17			23	1	4.3	476	57	12.0
Epidemic parotitis (mumps)....	18			25			810		
Erysipelas .....	2			0			933	86	9.2
Gonorrhea .....	0			0			2,238	6	0.3
Gonorrheal conjunctivitis .....	0			1			181	5	2.8
Hepatitis, infectious (epidemic)	27			30			666***	0	
H. S. Carrier .....	5			2			25***	0	
Impetigo .....	0			11			634	1	0.2
Influenza .....	0			1			1,082	81	7.5
Leprosy .....	0			0			2	0	
Measles .....	36			17			4,630	233	5.0
Meningitis, aseptic .....	3			5			71§	0	
Meningitis, cerebrospinal, epi-									
demic, (Meningococcic) ....	6			2			862	145	16.8
**Meningitis, tuberculous .....	0			0			116	91	78.4
Meningitis, other forms .....	9	2	22.2	11	1	9.0	571	142	24.9
Meningococcemia .....	0			2	2	100.0	15***	5	33.3
Mononucleosis, infectious .....	24			17			132***	0	
Pneumonia, all forms .....	78			62			3,139	284	9.0
Poliomyelitis, acute, all forms ..	0			0			2,320	136	5.9
Rabies .....	0			0			3	3	100.0
Rubella .....	11			0			797	1	0.1
Scabies .....	0			0			333	0	
Scarlet Fever .....	76			106			12,047	218	1.8
Syphilis, congenital .....	0			0			166	18	10.8
Syphilis, other forms .....	0			0			3,422	32	0.9
Tinea capitis .....	0			0			12***	0	
*Tonsillitis .....	54			56			5,102	11	0.2
Tonsillitis, due to Hemolytic									
Streptococcus .....	50			29			811	4	0.5
Tuberculosis, pulmonary .....	0			1			5,927	2,206	37.2
Tuberculosis, other forms .....	0			0			313	107	34.2
Typhoid Fever .....	1			0			198	20	10.1
Vincent's infection .....	0			0			245	10	4.1
Whooping Cough .....	18			39			3,112	180	5.8
No diagnosis .....	8			10			929	12	1.3
Other diseases .....	462	6	1.3	490	2	0.4	21,114	1,065	5.0
†Diseases of the nervous system	1,710	19	1.1	1,512	15	1.0	28,680	679	2.4
‡Surgery .....	0			0			4,704	26	0.6
Total .....	2,650	27	1.0	2,480	21	0.8	114,713	6,569	5.7

\*Tonsillitis, under this heading is included pharyngitis, naso-pharyngitis, septic sore throat and other inflammatory conditions of the faucial region, the pharynx and naso-pharynx.

\*\*Some of the apparent living cases died after leaving the hospital.

†The wards for diseases of the nervous system were opened June 1, 1930.

‡Surgical ward was opened April 1, 1946

\*\*\*Beginning October 1, 1952.

§Beginning October 1, 1960.

## (Other Diseases: In Table C 1. Specified)

Living Dead		Living Dead	
Abscess of neck .....	1	Feeding, improper, of person over two years .....	3
Abscess of peritonsillar tissue ..	1	Fracture of skull, closed .....	1
Adenitis, cervical .....	2	Furuncles of toes and foot .....	1
Adenocarcinoma of common bile duct .....	1	Furunculosis .....	3
Adjustment reaction of adolescence .....	1	Gastritis, acute .....	2
Anemia, Cooley's (Thalassemia major) .....	5	Gastroenteritis, acute, due to Paracolon .....	10
Anemia, hemolytic, auto-immune ..	1	Gastroenteritis, acute, due to Proteus .....	35
Anemia, hypochromic, microcytic ..	3	Gastroenteritis, acute, due to Salmonella .....	4
Anemia, idiopathic, hypoplastic ..	1	Gastroenteritis, acute, due to Shigella .....	1
Angioneurotic edema, giant urticaria .....	3	Gastroenteritis, acute, due to undetermined cause .....	23
Appendicitis, acute .....	2	Gastrointestinal allergy .....	1
Arthritis of knee due to infection ..	1	Gingivitis, herpetic .....	3
Asthma .....	22	Glomerulonephritis, acute .....	9
Atelectasis, due to undetermined cause .....	1	Gout .....	1
Atrophy, cerebral cortical, generalized .....	1	Grand mal .....	1
Atrioventricular block, complete, unknown cause .....	1	Hematuria, renal, due to undetermined cause .....	1
A.V. malformation of right mid cerebral artery .....	1	Hemorrhage, subarachnoid, due to vascular disease with hypertension .....	1
Behavior problem .....	1	Hemorrhage, subarachnoid, due to undetermined cause .....	1
Blepharitis .....	1	Herpangina .....	1
Blood in feces, occult (melena) ..	1	Herpes zoster, fifth cranial nerve (Ophthalmic) .....	1
Bronchiolitis, acute .....	17	Hydrocephalus, congenital .....	1
Bronchitis, acute .....	26	Hyperinsulinism, due to unknown cause .....	1
Celiac disease (Malabsorption syndrome) .....	1	Hypothyroidism .....	1
Cellulitis of foot .....	1	Infection of external auditory meatus .....	2
Cellulitis of leg .....	2	Lymphadenitis, cervical .....	5
Cerebral palsy .....	1	Laryngotracheitis, acute .....	33
Cholecystitis, acute .....	1	Mental deficiency .....	2
Cholelithiasis .....	1	Microcephaly, congenital .....	2
Cirrhosis, coarse nodular (following acute degeneration of liver) ..	1	Moniliasis of skin .....	1
Conjunctivitis, acute, infectious ..	1	Nephritis, chronic .....	1
Constipation, chronic .....	1	Nephrotic syndrome due to unknown cause .....	1
Convulsive disorder due to unknown cause .....	9	Neurodermatitis disseminata .....	3
Cystitis due to non-hemolytic E. Coli .....	1	Observation for compression of spinal cord due to fracture of vertebra, D 6 .....	1
Dermatitis, allergic .....	2	Observation for convulsive disorder .....	2
Dermatitis, atopic .....	2	Observation for glomerulonephritis, acute .....	1
Dermatitis, contact .....	3	Observation for hemoptysis .....	1
Dermatitis herpetiform .....	1	Observation for herniation of nucleus pulposus .....	1
Dermatitis infectious eczematoid ..	1	Observation for infectious hepatitis .....	1
Dermatitis, due to undetermined cause .....	1	Observation for jaundice .....	1
Dermatitis venenata .....	6	Observation for mental deficiency ..	1
Dermatophytosis (Ringworm) ..	1	Observation for psychomotor seizures .....	1
Diabetes insipidus .....	1	Observation for rheumatic fever ..	2
Diabetes mellitus .....	8	Observation for torsion of appendix .....	1
Diagnosis deferred .....	5	Obesity due to excess of food ..	5
Dilatation of colon .....	2	Omphalitis, acute .....	1
Down's syndrome .....	2	Otitis media, non-suppurative, acute .....	8
Ecchyma, big toe .....	1	Otitis media, suppurative, acute, due to Staph. Albus .....	2
Eczema .....	3		
Encephalomyeloradiculitis .....	2		
Enteritis, acute .....	2		
Enterocolitis, acute .....	2		
Epiglottitis .....	1		
Erythema multiforme .....	4		
Erythema toxicum .....	1		
Exanthema subitum .....	5		
Feeding, improper, of child under two years .....	6		

Paralysis, cerebral spastic, infantile .....	1	.....	Sensitivity to poison (Phenothiazine) .....	1	.....
Peritonitis .....	1	1	Septicemia due to <i>Pseudomonas</i> .....	1	.....
Personality pattern disturbance ..	1	.....	Sinusitis, acute, ethmoid .....	2	.....
Petit mal .....	1	.....	Sinusitis, acute, maxillary .....	2	.....
Pityriasis rosea .....	1	.....	Tetanus .....	1	1
Poisoning .....	2	.....	Tetany of newborn .....	1	.....
Psychomotor epilepsy .....	1	.....	Thrombophlebitis .....	1	.....
Purpura, capillary, due to allergy ..	1	.....	Torticollis, acute .....	1	.....
or drug reaction .....	2	.....	Toxic epidermal necrolysis .....	1	1
Purpura, non-thrombocytopenic ..	1	.....	Urethritis, chronic, due to <i>E. Coli</i> .....	1	.....
Purpura, thrombocytopenic .....	1	.....	Urinary tract infection .....	5	.....
Pyelonephritis .....	1	.....	Urticaria .....	2	.....
Pyelonephritis, due to <i>E. Coli</i> ..	1	.....	Vaccinia .....	1	.....
Pyeloric stenosis .....	2	.....	Virus infection of undetermined type .....	15	.....
Pyelitis, acute .....	1	.....	Virus infection of upper respiratory tract (unspecified) .....	1	.....
Question of capillary fragility (hereditary) .....	1	.....	Volvulus of small intestine, congenital .....	1	.....
Question of orthostatic hypotension .....	1	.....	Vulvovaginitis (herpetic) .....	1	.....
Question of polyp of rectum .....	1	.....	Wound of sole, left foot (puncture) .....	1	.....
Respiratory infection, acute diffuse .....	41	.....			
Rheumatic fever .....	1	.....			

## (Diseases of the Nervous System: In Table C 1. Specified)

	Living	Dead
Schizophrenic reaction .....	535	1
Manic-depressive reaction, manic type .....	13	
Manic-depressive reaction, depressive type .....	38	
Psychotic depressive reaction .....	50	1
Paranoid state .....	7	
Involutional psychotic reaction .....	15	

*Chronic Brain Disorders*

Alcohol intoxication .....	36	
Associated with intracranial neoplasm .....	1	
Associated with brain trauma .....	2	
Associated with cerebral arteriosclerosis .....	90	7
Associated with circulatory disturbance, other than cerebral arteriosclerosis .....	7	1
Associated with convulsive disorder .....	12	
Associated with senile brain disease .....	5	
Associated with other disturbance of metabolism, growth, or nutrition .....	1	
Associated with disease of unknown or uncertain cause .....	2	
Of unknown cause .....	3	

*Acute Brain Disorders*

Associated with systemic infection .....	1	
Drug or poison intoxication .....	17	1
Alcohol intoxication .....	290	1
Delirium tremens .....	52	2
Associated with trauma (post ECT) .....	1	
Associated with convulsive disorder .....	9	1
With metabolic disturbance .....		1
Associated with intracranial neoplasm .....		1
Of unknown cause .....	2	
Associated with circulatory disturbance .....	4	2

*Psychoneurotic Disorders*

Anxiety reaction .....	60
Conversion reaction .....	2
Obsessive compulsive reaction .....	1
Depressive reaction .....	302

*Personality Disorders*

Personality pattern disturbance .....	1
Inadequate personality .....	1
Schizoid personality .....	9
Cyclothymic personality .....	3
Paranoid personality .....	5
Personality trait disturbance .....	1
Emotionally unstable personality .....	8
Passive-aggressive personality .....	5
Sociopathic personality disturbance .....	12
Antisocial reaction .....	1
Dyssocial reaction .....	1
Addiction (alcohol and drug) .....	3
Drug addiction .....	5
Alcohol intoxication (simple drunkenness) .....	6
Alcoholism .....	16

*Transient Situational Personality Disorders*

Adjustment reaction of adolescence .....	3
Mental deficiency, idiopathic, mild .....	16
Mental deficiency, idiopathic, moderate .....	24
Mental deficiency, idiopathic, severe .....	2

<i>Grand Mal</i> .....	1
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Table C 4. Diphtheria: Number of cases uncomplicated by other diseases and fatality by ages, March 1, 1910-September 30, 1964:

Ages	Living Cases			Dead Cases			Fatality		
	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910
	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964
Under 1.....	....	....	99	....	....	45	....	....	45.5
1.....	....	....	233	....	....	90	....	....	38.6
2.....	....	....	370	....	....	90	....	....	24.3
3.....	....	....	449	....	....	70	....	....	15.6
4.....	....	....	439	....	....	80	....	....	17.4
5.....	....	....	403	....	....	66	....	....	16.4
6.....	....	....	422	....	....	50	....	....	11.8
7.....	....	....	358	....	....	37	....	....	10.1
8.....	....	....	318	....	....	30	....	....	9.4
9.....	....	....	200	....	....	18	....	....	9.0
10-14.....	....	....	644	....	....	45	....	....	7.1
15-19.....	....	....	227	....	....	5	....	....	2.2
20-29.....	....	....	453	....	....	6	....	....	1.3
30-39.....	....	....	155	....	....	8	....	....	5.2
40-49.....	....	....	40	....	....	6	....	....	15.0
50-59.....	....	....	19	....	....	2	....	....	10.5
Over 60.....	....	....	5	....	....	....	....	....	....
Total.....	....	....	4,864	....	....	648	....	....	13.3

Table C 10. Scarlet fever: Number of cases uncomplicated by other diseases and fatality by ages, March 1, 1910-September 30, 1964:

Ages	Living Cases			Dead Cases			Fatality		
	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910
	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964
Under 1.....	0	0	61	....	....	6	....	....	9.8
1.....	2	1	210	....	....	1	....	....	0.4
2.....	3	5	543	....	....	18	....	....	3.3
3.....	5	10	875	....	....	14	....	....	1.6
4.....	9	14	922	....	....	30	....	....	3.2
5.....	9	19	966	....	....	20	....	....	2.0
6.....	7	23	1,122	....	....	9	....	....	0.8
7.....	8	6	979	....	....	13	....	....	1.3
8.....	5	7	867	....	....	10	....	....	1.1
9.....	5	2	645	....	....	9	....	....	1.3
10-14.....	12	5	1,680	....	....	12	....	....	0.7
15-19.....	1	4	593	....	....	9	....	....	1.5
20-29.....	0	1	834	....	....	15	....	....	1.8
30-39.....	0	0	280	....	....	7	....	....	2.5
40-49.....	0	1	75	....	....	4	....	....	5.3
50-59.....	0	0	14	....	....	0	....	....	....
Over 60.....	0	0	2	....	....	1	....	....	50.0
Total.....	66	98	10,668	....	....	178	....	....	1.6

Table C 12. Scarlet Fever: Average length of stay in days of cases uncomplicated by any other disease, March 1, 1910-September 30, 1964:

Year	Duration of Isolation	Living Cases	Fatal Cases	All Cases
1910.....	5 weeks	40.4	9.4	39.2
1911.....	5 "	49.6	16.9	47.0
1912.....	5 "	45.9	5.8	43.5
1913.....	5 "	41.0	12.5	40.1
1914.....	5 "	38.6	13.0	35.4
1915.....	4 "	35.4	6.9	35.2
1916.....	5 "	32.2	5.0	31.1
1917.....	5 "	40.5	4.4	38.5
1918.....	5 "	36.0	2.2	35.2
1919.....	5 "	40.9	6.2	39.9
1920.....	5 "	38.4	5.4	33.1
1921.....	5 "	37.9	2.0	37.5
1922.....	5 "	37.4	2.0	36.8
1923.....	5 weeks until Dec. 6th, then 4 weeks.	32.2	5.0	31.7
1924.....	4 weeks	31.2	6.0	31.1
1925.....	4 "	30.4	17.5	31.1
1926.....	4 "	29.9	18.5	29.7
1927.....	4 "	32.0	13.5	31.5
1928.....	4 "	30.1	5.1	29.6
1929.....	4 "	29.4	10.5	28.8
1930.....	4 "	30.7	17.0	30.8
1931.....	4 "	30.4	3.3	30.2
1932.....	4 "	30.9	8.9	30.5
1933.....	4 "	33.5	5.3	33.2
1934.....	4 "	34.3	2.0	34.2
1935 (9 months).....	4 weeks in usual cases and 3 weeks in very mild selected cases.	33.2	7.5	32.8
1936.....	4 weeks	30.2	14.6	30.0
1937.....	4 "	30.2	21.7	30.0
1938.....	4 "	27.8	....	27.8
1939.....	4 "	29.6	....	29.6
1940.....	4 "	31.1	....	31.1
1941.....	4 "	25.3	....	25.3
1942.....	4 "	25.9	....	25.9
1943.....	4 "	27.8	....	27.8
1944.....	4 "	30.6	....	30.6
1945.....	4 "	25.3	....	25.3
1946.....	4 "	21.7	....	21.7
1947.....	3 "	25.3	....	25.3
1948.....	3 "	25.7	....	26.7
1949.....	3 "	19.7	....	19.7
1950.....	2-3 "	21.0	....	21.0
1951.....	2-3 "	18.2	....	18.2
1952.....	2-3 "	18.4	....	18.4
1953.....	2-3 "	17.5	....	17.5
1954.....	2-3 "	17.3	....	17.3
1955.....	2-3 "	15.2	....	15.2
1956.....	2-3 "	15.2	....	15.2
1957.....	2-3 "	13.7	....	13.7
1958.....	1-2 "	12.9	....	12.9
1959.....	1-2 "	12.4	....	12.4
1960.....	1-2 "	12.7	....	12.7
1961.....	1-2 "	11.6	....	11.6
1962.....	1-2 "	12.1	....	12.1
1963.....	1-2 "	12.4	....	12.4
1964.....	1-2 "	11.6	....	11.6

**Table C 16. Measles: Number of cases uncomplicated by other diseases and fatality by ages, March 1, 1910-September 30, 1964:**

Ages	Living Cases			Dead Cases			Fatality		
	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910
	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964
	1964	1963	1964	1964	1963	1964	1964	1963	1964
Under 1.....	1	0	181	.....	.....	.....	36	.....	19.8
1.....	1	1	324	.....	.....	.....	59	.....	18.2
2.....	2	1	400	.....	.....	.....	31	.....	7.7
3.....	2	0	353	.....	.....	.....	14	.....	3.9
4.....	0	0	357	.....	.....	.....	9	.....	2.5
5.....	1	0	336	.....	.....	.....	2	.....	0.5
6.....	2	0	353	.....	.....	.....	5	.....	1.4
7.....	0	1	249	.....	.....	.....	3	.....	1.2
8.....	0	0	188	.....	.....	.....	0	.....	.....
9.....	0	0	101	.....	.....	.....	0	.....	.....
10-14.....	0	0	184	.....	.....	.....	4	.....	2.2
15-19.....	0	0	143	.....	.....	.....	0	.....	.....
20-29.....	0	0	239	.....	.....	.....	1	.....	0.4
30-39.....	0	0	45	.....	.....	.....	1	.....	2.2
40-49.....	0	0	9	.....	.....	.....	3	.....	33.3
50-59.....	0	0	7	.....	.....	.....	0	.....	.....
Over 60.....	0	0	0	.....	.....	.....	0	.....	.....
Total.....	9	3	3,469	.....	.....	168	.....	.....	4.8

**Table C 17. Whooping Cough: Number of cases and fatality by ages, March 1, 1910-September 30, 1964:**

Ages	Living Cases			Dead Cases			Fatality		
	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910	Oct.1, 1963	Oct.1, 1962	Mar.1, 1910
	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964	Sep.30, 1964	Sep.30, 1963	Sep.30, 1964
	1964	1963	1964	1964	1963	1964	1964	1963	1964
Under 1.....	8	15	973	.....	.....	.....	89	.....	9.1
1.....	4	6	534	.....	.....	.....	45	.....	8.4
2.....	1	6	380	.....	.....	.....	21	.....	5.5
3.....	0	2	280	.....	.....	.....	7	.....	2.5
4.....	2	4	223	.....	.....	.....	8	.....	3.5
5.....	0	1	156	.....	.....	.....	2	.....	1.3
6.....	0	1	105	.....	.....	.....	2	.....	1.9
7.....	1	1	99	.....	.....	.....	1	.....	1.0
8.....	0	0	45	.....	.....	.....	0	.....	.....
9.....	0	0	27	.....	.....	.....	1	.....	3.7
10-14.....	0	2	27	.....	.....	.....	0	.....	.....
15-19.....	0	0	5	.....	.....	.....	1	.....	20.0
20-29.....	0	0	10	.....	.....	.....	0	.....	.....
30-39.....	0	0	0	.....	.....	.....	0	.....	.....
40-49.....	0	0	1	.....	.....	.....	0	.....	.....
50-59.....	0	0	2	.....	.....	.....	0	.....	.....
Over 60.....	0	0	1	.....	.....	.....	0	.....	.....
Total.....	16	38	2,868	.....	.....	177	.....	.....	6.1

**Secondary Diseases Among Patients: Oct. 1, 1963-Sept. 30, 1964:**

By the term "secondary diseases" is meant diseases developing in the hospital after admission or soon after the discharge of the patient within the period of the incubation of the disease in question. They are further divided into two groups: Group I, comprising all those cases which were apparently contracted in the hospital and called cross-infections, and Group II, including diseases which developed in the hospital but which were contracted before admission.

The group to which a case is assigned depends upon two factors: first, a consideration of the incubation period, that is, whether the patient was in the hospital long enough to have contracted the disease in the hospital and whether he was home long enough after discharge to have contracted it after leaving the hospital. Secondly, consideration is given to the possibility of exposure before admission or after discharge and the possibility of exposure in the hospital wards. Usually an accurate conclusion can be drawn when all the circumstances are considered.

In the study of the sources of secondary diseases, the following incubation periods have been adopted. They are stated in maximum terms:

- Chickenpox, three weeks
- Diphtheria, one week
- Measles, two weeks
- Mumps, three weeks
- Rubella, three weeks
- Scarlet fever, one week
- Variola, two weeks
- Whooping cough, three weeks

While variations occur in the length of incubation periods in most infectious diseases, the above are adopted as a working basis.

There are side rooms and small wards in each building. When patients are in the same room but suffering from different diseases, each bed is marked by a barrier card, with or without numbers attached. When numbers are used, as in the larger wards, the unit or group to which the patient belongs is clearly indicated to facilitate carrying out rigid technique, thus preventing infection from being carried from one unit to another.

### CROSS-INFECTIONS

All secondary infections occurring among patients after admission are included either in Group I or Group II.

During the year, 883 patients were cared for in the wards for acute communicable diseases. Patients cared for in other wards are not included in estimating cross-infection rates. Patients discharged from the infectious disease wards during the year and the number of patients in these wards at the end of the year are included. A small number of resultant discrepancies may be noted which are due to departmental transfers.

There was one cross-infection as follows:

#### GROUP I

##### MEASLES — EAST I

On May 7, 1964, a ten-year-old female, #114782, who was admitted because of infectious hepatitis, developed measles on May 23, 1964, her 17th hospital day.

The source of this cross-infection was a three-year-old female, #114792 who was admitted on May 8, 1964 with measles.

#### GROUP II

One child developed an infectious disease to which he had been exposed before admission to the hospital.

##### *Measles*

On November 24, 1963, a five-year-old male, #113579, was admitted to East I with scarlet fever and developed measles on his 7th hospital day.

OUT-PATIENT DEPARTMENT  
1964

Departments	New Patients	First Visits Old Patients	Total Individuals	Revisits	Total Visits 1964	Total Visits 1963
Neuro-Psychiatric .....	116	164	280	1,025	1,305	1,031
Pediatric .....	67	86	153	220	373	432
Emergency Clinic .....	441	94	535	223	758	594
(Pediatric)						
*Pulmonary .....	1,138	1,408	2,546	2,552	5,098	5,290
Totals .....	1,762	1,752	3,514	4,020	7,534	7,347

\*Pulmonary Clinic of the Providence Health Department.

PHARMACY

	1963		1964	
	<i>Prescrip- tions</i>	<i>Revenue</i>	<i>Prescrip- tions</i>	<i>Revenue</i>
Clinics				
Out-Patient .....	3,011	\$1,400.40	3,261	\$1,282.05
Employee .....	722		615	
Nurse .....	286		197	
City Poor Physicians .....	523	846.35	581	1,197.80
City Health Dept. ....	....	379.85		243.40
	4,542	\$2,626.60	4,654	\$2,723.25

AMBULANCE AND GARAGE SERVICE

	1963		1964	
	<i>Trips</i>	<i>Mileage</i>	<i>Trips</i>	<i>Mileage</i>
Ambulance #1 .....	432	3,142	496	3,187
Ambulance #2 .....	507	4,081	431	3,042
Station Wagon .....	1,348	7,374	1,252	6,831
Sedan .....	1,236	4,836	1,106	5,459

## Report of the Neuro-Psychiatric Department

This year there has been a larger increase in admissions than has been noted before. During the fiscal year 1964, 1,709 patients were admitted, which is an increase of 189 over the 1,520 admitted in 1963. It is interesting to note that this admission rate closely approaches that of the Institute of Mental Health, Rhode Island Medical Center. The number of patients admitted has tripled as the department approaches its thirty-fifth year of operation. It is quite apparent that the unique service which this department offers to the community—namely, observation, evaluation, and temporary care for the emotionally disturbed—is much needed, used, and appreciated. Nearly one-third of the emotionally disturbed patients admitted were found to have a major mental illness.

### ADMISSIONS

First Admissions.....	1,098
Second " .....	328
Third " .....	150
Fourth " .....	64
Fifth " .....	28
Sixth " .....	11
Seventh " .....	7
Eighth " .....	3
Ninth " .....	3
Tenth " .....	2
Eleventh " .....	7
Twelfth " .....	4
Thirteen " .....	4
	1,709

Five less juveniles—eighteen years and under—were admitted in 1964 (29 males and 37 females), a total of 66.

Once again, many more patients were returned to the community than were transferred to other hospitals.

## CONDITION ON DISCHARGE

<i>Year</i>	<i>Improved and Recovered</i>	<i>Unimproved</i>	<i>Dead</i>	<i>Total</i>
1963 .....	910	587	15	1,512
1964 .....	965	726	19	1,710

## DISPOSITION

Home .....	847
Home, Against Advice .....	112
R. I. Medical Center, Institute of Mental Health .....	630
R. I. Medical Center, General Hospital .....	1
Butler Hospital .....	24
Veterans Administration Hospitals .....	
Brockton .....	24
Davis Park .....	4
West Haven, West Haven, Connecticut .....	1
Rhode Island Hospital .....	10
Our Lady of Fatima Hospital .....	3
Woonsocket Hospital .....	4
Pawtucket Memorial Hospital .....	1
St. Joseph's Hospital .....	2
Roger Williams Hospital .....	1
Kent County Hospital .....	1
Fuller Memorial Sanitarium .....	2
Convalescent and Nursing Home .....	2
Briarcliffe .....	1
Police Custody .....	8
Narcotics Division .....	1
Family Court .....	2
A.W.O.L. ....	10
Dead .....	19

## Causes of Death:

Acute Brain Syndrome, drug intoxication, (drug unknown) .....	1
Bronchopneumonia .....	7
Cerebral hemorrhage .....	1
Arteriosclerotic heart disease .....	4
Mitral stenosis .....	1
Cerebral thrombosis due to arteriosclerosis .....	1
Atalectasis due to infection (organism unknown) ..	1
Malnutrition .....	1
Acute congestive heart failure .....	2

Total ..... 1,710

Nine of the patients who died were over 65 years of age.

A listing of diagnoses on discharge appears in Table C1 Specified of the General Statistics.



598 patients were admitted as transfers from general hospitals. This is an increase of 141 over the previous year. The greatest number of these transfers came to us directly from the Accident Rooms of the general hospitals.

10 more patients were transferred to general hospitals than during the previous year. In 1963, 12 were transferred; in 1964, 22.

The number of patients 65 years and older increased by 5. In 1963, 166 such patients were admitted; in 1964, 171.

#### DISPOSITION OF PATIENTS AGE 65 AND OVER

Home .....	45
Home, Against Advice .....	6
R. I. Medical Center, Institute of Mental Health ..	104
Nursing Home .....	1
Butler Hospital .....	2
Woonsocket Hospital .....	1
R. I. Medical Center, General Hospital .....	1
Briarcliffe .....	2
Dead .....	9

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171

The number of patients with a primary diagnosis of alcoholism has continued to increase. This is a trend which has been apparent over a period of years. In 1963, 334 were admitted; in 1964, 406, an increase of 72 patients so diagnosed.

The same services have continued to be offered to the community. Patients in need of evaluation, observation, and short-term treatment are readily accepted, thus relieving the burden for the family, the private practitioner, and the general hospital. Upon admission to the hospital, immediate evaluation and treatment is begun to determine a patient's status for prompt return to the community, if possible, or transfer to another hospital should long-term care be required. A fifteen-day evaluation period is allowed by law, which makes it necessary for the psychiatric staff to work quickly.

The Volunteer Program has continued to grow and provides many recreational activities and individual services on a daily, weekly, and monthly basis.

The Social Service Department continued to provide its customary services to the staff, the patients, and the community.

As always first consideration was given to obtaining information about the patients, and close cooperation was maintained with community agencies for after-care planning.

Psychological services still gave first consideration to the acutely ill patient and conferred with the staff concerning diagnosis, treatment, and prognosis.

At this time I would like to express my appreciation to the members of the visiting staff, the department personnel for their willingness to accept a continued increase in pressure of work and the demands that it makes upon each and every one.

*Respectfully submitted,*

ERNEST A. BURROWS, M.D.

*Director*

*Neuro-Psychiatric Department*

## Report of Director of Nursing Service and School of Nursing

At the end of the fiscal year, the staff was as follows:

DIRECTOR OF NURSING SERVICE AND  
SCHOOL OF NURSING

Elizabeth R. McKenna, R. N.

ASSISTANT DIRECTORS OF NURSING SERVICE

COMMUNICABLE DISEASE DIVISION

Ann M. Hall, R.N.\*

Grace M. Cannon, R.N.†

NEURO-PSYCHIATRIC DIVISION

Susie Marcello, R.N.

ASSISTANT INSTRUCTOR

Sally F. Hopkins, R.N.

SUPERVISORS

Magdalen Buckley, R.N.

Margaret Petrillo, R.N.‡

Naurita Waters, R.N.

ASSISTANT SUPERVISOR

Barbara Mignault, R.N.

\* Resigned August 9, 1964

† Appointed August 10, 1964

‡ Appointed June 22, 1964

The emphasis in nursing education in intensive care unit nursing and rehabilitative care resulted in the discontinuance of communicable disease nursing affiliation of St. Joseph's Hospital School of Nursing during the past fiscal year. This loss of student nurses has of necessity meant a compensatory increase in our staff to meet patient care requirements, and a service teaching and supervision program of orientation applicable to the hired personnel.

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Since 1910, there has been a total of 12,435 student nurses trained here.

Service needs dependent upon seasonal incidence of diseases in the communicable division plus orientation to both neuro-psychiatric and communicable divisions, have allowed for flexibility in augmenting service needs during the past year in both areas.

The Nursing Department has benefited from the interest, understanding, and guidance it has received in meetings with the Nursing Committee of the Board of Hospital Commissioners. On behalf of myself and my associates, I wish to express to them and to Dr. Edward J. West, Superintendent, our deep appreciation for their encouragement and constructive help.

*Respectfully submitted,*

(Mrs.) ELIZABETH R. MCKENNA, R.N.

*Director of Nursing Service and  
School of Nursing*

## Report of the Laboratory

During the fiscal year ending September 30, 1964, the laboratory carried out 45,450 tests of which 204 were done for the Health Department and of which 45,246 were done for the Chapin Hospital. This represents an increase of 3,411 in the number of tests over last year. The breakdown in tests is illustrated in Table I.

Twelve autopsies were done during the year, giving us a percentage of 46.2%. Table II compares our autopsy percentage this year with that of previous years, while Table III gives the principal causes of death in those cases coming to post mortem.

During this year, a very rare case of Toxic Epidermal Necrolysis was studied at autopsy and in the near future we hope to publish the findings pertinent to this case.

I wish to thank the hospital Superintendent, Dr. Edward J. West, for his cooperation with the laboratory. I wish also to thank the medical staff and officers of the City Health Department as well as the technical staff of the laboratory for their support and help.

*Respectfully submitted,*

LEROY W. FALKINBURG, M. D.  
*Pathologist*

Table I

	C.V.C.H. +	0	H.D. +	0	C.V.C.H. +	0	H.D. +	0	Total
1963-1964 Bacteriology:									
Cultures for Hemolytic Strep	328	2,802	7	26	3,130		33		3,163
Cultures for Diphtheria	10	3,120	1	32	3,130		33		3,163
Cultures for Staphylococcus	133	3,000		30	3,133		30		3,163
Blood Cultures	4	90			94				94
Stool and Urine Cultures	617	240	3	4	857		7		864
Stools for Ova and Parasites	3	27			30				30
Ear Cultures	18	2			20				20
Eye Cultures	45	3			48				48
Sputum Cultures	5				5				5
G. C. Cultures	5	30	4	24	35		28		63
Smears for Gonococci (G. U.)	4	24		12	28		12		40
Smears for Sputa for Tubercle Bacilli		21			21				21
Smears for Treponema Pallidum		1		1	1		1		2
Spinal Fluid Sediments and Cultures	13	271			284				284
Vaccines									
Animal Inoculations for "T. B."		3			3				3
Sensitivity Tests	474		6		474		6		480
N.P. Cultures									
Miscellaneous Cultures	81	53			134				134
Miscellaneous Examinations	397				397				397
Smears for Vincents Angina		1			1				1
Hanging Drop for T. Vaginalis	2	5			7				7
Total Bacteriology	2,139	9,693	21	129	11,832		150		11,982
Serology:									
Veneral Disease Research Laboratory	38	1,814	1	26	1,852		27		1,879
Agglutination tests for Typhoid		74			74				74
Agglutination tests for Undulant Fever		37			37				37
Agglutination tests for Proteus Ox-19		37			37				37
Sheep Cell Agglutination		207			207				207
Colloidal Gold		31			31				31
V I Antigen		37			37				37
R A Latex		15			15				15
Reiter Fixation Test		3			3				3
Total Serology	38	2,255	1	26	2,293		27		2,320

Table I—Continued

	C.V.C.H. + 0	H.D. + 0	C.V.C.H. H.D.	H.D.	Total
1963-1964					
Hematology:					
Spinal Fluid Cell Counts	.....	.....	188	.....	188
Cell Counts and Differential Counts	.....	.....	7,023	.....	7,023
Blood Grouping	.....	.....	17	.....	17
Sedimentation Rate	.....	.....	131	.....	132
Hematocrit	.....	.....	3,432	.....	3,435
Special Hematology	.....	.....	294	.....	295
Hemoglobin	.....	.....	3,449	.....	3,458
Prothrombin Time	.....	.....	66	.....	66
Total Hematology	.....	.....	14,620	22	14,642
Chemistry:					
Blood Sugar & Spinal Fluid	.....	.....	2,189	.....	2,189
Non-Protein Nitrogen	.....	.....	1,983	.....	1,983
Creatinine	.....	.....	89	.....	89
Chloride Blood & Spinal Fluid	.....	.....	268	.....	268
Protein	.....	.....	177	.....	177
CO <sub>2</sub>	.....	.....	282	.....	282
Sodium	.....	.....	289	.....	289
Potassium	.....	.....	297	.....	297
Bilirubin	.....	.....	241	.....	241
Cephalin Flocculation	.....	.....	223	.....	224
Thymol	.....	.....	211	.....	212
Transaminase	.....	.....	214	.....	215
Icterus Index	.....	.....	202	.....	203
Alkaline Phosphatase	.....	.....	106	.....	107
Acid Phosphatase	.....	.....	39	.....	39
Calcium	.....	.....	28	.....	28
Phosphorus	.....	.....	28	.....	28
A/G Ratio	.....	.....	85	.....	86
Cholesterol, Total	.....	.....	60	.....	60
Cholesterol, Esters	.....	.....	28	.....	28
Gamma Globulin Level	.....	.....	21	.....	21
Uric Acid	.....	.....	17	.....	17
BSP	.....	.....	3	.....	3
Amylase	.....	.....	31	.....	31

Sweat Test	.....	.....	.....	.....
Gastric Analysis	.....	.....	.....	.....
Glucose Tolerance	.....	.....	.....	.....
PBI	.....	.....	.....	.....
Serum Iron	.....	.....	.....	.....
Iron Binding Capacity	.....	.....	.....	.....
Hemoglobin Electrophoresis	.....	.....	.....	.....
Vitamin C	.....	.....	.....	.....
Salicylate Level	.....	.....	.....	.....
Lead Level	.....	.....	.....	.....
Protein Electrophoresis	.....	.....	.....	.....
Barbiturate Level	.....	.....	.....	.....
Vitamin A Absorption	.....	.....	.....	.....
Urinanalysis	.....	.....	.....	.....
Biles & Urobilinogen	.....	.....	.....	.....
Miscellaneous Urinalysis	.....	.....	.....	.....
Total Chemistry	.....	.....	.....	.....
<b>Pathology:</b>				
Necropsy Sections	.....	.....	.....	.....
Total Pathology	.....	.....	.....	.....
Total Examinations	.....	.....	.....	.....
+ = Positive.				
O = Negative.				



**Table II**  
NECROPSIES, 1910 TO SEPTEMBER, 1964

Year	Number of Deaths	Number of Necropsies	Percentage
1910.....	86	16	18.6
1911.....	121	14	11.5
1912.....	152	20	13.1
1913.....	154	44	28.5
1914.....	157	40	25.4
1915.....	176	51	28.9
1916.....	249	60	24.0
1917.....	243	17	26.9
1918.....	297	9	3.0
1919.....	208	6	2.8
1920.....	171	13	7.6
1921.....	136	25	18.3
1922.....	125	13	10.4
1923.....	200	71	35.5
1924.....	122	29	23.7
1925.....	130	57	43.8
1926.....	141	72	51.0
1927.....	125	87	69.6
1928.....	163	92	56.4
1929.....	168	114	57.8
1930.....	159	81	50.9
1931.....	193	90	46.6
1932.....	179	91	50.8
1933.....	148	55	37.1
1934.....	118	61	51.6
1935.....	132	48	36.3
1936.....	163	61	37.4
1937.....	172	67	38.9
1938.....	124	56	45.2
1939.....	131	66	50.3
1940.....	134	84	62.6
1941.....	139	85	61.1
1942.....	126	65	51.6
1943.....	174	91	52.3
1944.....	140	66	47.1
1945.....	132	51	38.6
1946.....	106	53	50.0
1947.....	100	61	61.0
1948.....	89	41	46.1
1949.....	65	33	50.8
1950.....	64	39	60.9
1951.....	73	40	54.0
1952.....	48	23	47.9
1953.....	59	27	45.7
1954.....	18	11	61.1
1955.....	39	18	46.1
1956.....	31	15	48.3
1957.....	33	19	57.5
1958.....	26	16	61.5
1959.....	26	15	57.6
1960.....	35	22	62.8
1961.....	17	6	35.2
1962.....	21	12	57.1
1963.....	21	9	42.8
1964.....	27*	12	46.2
Total.....	6,659	2,430	36.5

\*One medicolegal autopsy

Table III

PRINCIPAL CAUSES OF DEATH AS DETERMINED AT  
POST MORTEM EXAMINATION

Causes of Death		
Autopsy Number		Age
<i>Nervous System</i>		
A-5-64	Acute Encephalitis .....	65 years
A-3-64	Acute Suppurative Leptomeningitis .....	2 weeks
A-2-64	Astrocytoma Grade III .....	56 years
A-10-63	External Hydrocephalus .....	5 months
<i>Miscellaneous</i>		
A-4-64	Bilateral Confluent Bronchopneumonia .....	39 years
A-9-63	Adenocarcinoma of Left Upper Lobe .....	80 years
<i>Skin</i>		
A-6-64	Toxic Epidermal Necrolysis .....	4 years
<i>Genito Urinary System</i>		
A-9-64	Nephrolithiasis with Abscess .....	84 years
A-11-63	Chronic Bilateral Pyelonephritis .....	67 years
<i>Liver and Biliary Tract</i>		
A-8-64	Portal Cirrhosis of Liver .....	49 years
A-9-64	Fatty Degeneration of Liver .....	84 years
A-1-64	Post Hepatitis Cirrhosis .....	18 years

## Report of the X-ray Department

The number and type of X-ray examinations during the past year have remained relatively constant in relation to previous years. During the past year, the difficulty that had been encountered with the image amplifier track has been resolved and the equipment is working satisfactorily. A dark-room drier will be required due to wear and tear on the old drier. With the help of the maintenance department the waiting room has been renovated with considerable improvement in space and appearance. Also new flooring and light fixtures and painting in various rooms have improved the general appearance of the department. The efforts of the technicians and stenographers have been greatly appreciated.

I wish to express my appreciation to Dr. Edward J. West, Superintendent, for his interest and cooperation throughout the year.

PARTS OF THE BODY X-RAYED			NUMBER OF CASES		
	1963	1964		1963	1964
Lungs, Pulmonary .....	2,764	2,562	Ward Patients		
Lungs .....	802	714	Neuro-Psychiatric .....	356	316
Bones:			Others .....	612	573
Spines .....	80	94	Out Patients .....	58	49
Skulls .....	219	180	Pulmonary Patients .....	2,764	2,562
Extremities .....	190	176	Student Nurses .....	43	19
Cardiac .....	62	0	Employees .....	141	143
Gall Bladder .....	10	7	State Rheumatic Fever		
Abdomen .....	18	25	Program .....	41	0
Intravenous Pyelogram .....	30	27	State Mental Retardation		
G.I. Series .....	20	27	Program .....	64	50
Barium Enema .....	4	11	Total .....	4,079	3,712
Sinuses .....	34	19	Electrocardiograms .....	178	169
Mastoids .....	18	11	Portable Examination .....	26	19
Encephalograms .....	1	0	Laminagrams .....	1	0
Dental .....	0	0	Cystograms .....	0	0
Fluoroscopy .....	36	38			
Miscellaneous .....	29	28			
Total (including portables)	4,317	3,919			

*Respectfully submitted,*

MANUEL HORWITZ, M. D.

*Roentgenologist*

## Report of Dietary Department

A total of 200,934 meals were served during the year ending September 30, 1964. The cost of raw food was 48¢ compared to 53¢ per meal last year.

The following table shows the distribution of meals served:

MEAL COUNT						
Month	Dining Rooms		Pedi- atrics	Patients		Total
	Doctors	Employees		Psycho	Commun- icable	
October 63 .....	400	6,989	411	6,998	2,000	16,798
November .....	410	6,729	422	6,986	2,014	16,561
December .....	403	6,899	400	6,977	2,012	16,781
January 64 .....	409	6,932	415	6,932	2,114	16,802
February .....	387	6,810	384	6,924	2,001	16,506
March .....	392	6,796	391	7,012	2,111	16,702
April .....	391	6,664	383	7,189	2,100	16,727
May .....	396	6,712	389	7,211	2,000	16,708
June .....	381	6,696	380	7,227	2,102	16,786
July .....	387	6,599	379	7,312	2,104	16,781
August .....	362	6,602	374	7,371	2,110	16,819
September .....	359	6,681	399	7,403	2,121	16,963
Total .....	4,677	81,109	4,727	85,542	24,879	200,934

The only major improvement made in the dietary department during the year was the painting and remodeling of the pastry kitchen.

Mrs. Margaret Desjarlais, assistant dietitian for five years, resigned in June to enter the field of teaching. Miss Eileen Izzi, a graduate of Nasson College, Maine, replaced her.

To Dr. Edward J. West, Superintendent, I wish to express my appreciation for his interest and understanding throughout the year.

*Respectfully submitted,*

DOROTHY KELLY  
*Dietitian*

## **Report of the Maintenance Department**

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Plans and specifications for the renewal of the hospital electrical system were completed. It is the scope of this project to replace all of the electric facilities in eleven hospital buildings and the following items are included: high voltage service entrance from utility company to six locations; stepdown transformers; emergency generators; building distribution of power and light; panel boards; branch circuit wiring; lighting fixtures and lamps; receptacles and other wiring devices wiring to all power equipment; nurses' call system; private inter-communication and alarm system; fire alarm system; and wiring to X-ray equipment, operating room, therapy room, formula room, boiler room panels, and elevators. The work is laid out to allow for five separate phases of construction, with as little inconvenience to the hospital as possible.

A new paging system was installed this year as parts could not be obtained for repairs to the old system.

Installation of fire sprinklers in the lofts of Richardson, East, and West Buildings was completed this year.

The exterior of each building was painted by the Public Buildings Department and painting of the interiors continues, as the need arises, by our own staff. The X-ray and laboratory departments were painted and new tile floors and light fixtures were installed. The pastry kitchen was completely renovated, including a new stainless steel sink and formica tables.

The doctors' quarters in the administration building were painted. Also, a new shower and water closets were installed.

Much of the old plumbing in various locations was removed and replaced with new facilities.

Work on the hospital grounds continues and the improvements are pleasing to view.

*Respectfully submitted,*

JAMES E. KELLEY  
*Superintendent of Plant  
Maintenance and Operation*

## Acknowledgments

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BOOKS, MAGAZINES, SCRAPBOOKS, TOYS, CARDS,  
HOLIDAY FAVORS, CANDY, FLOWERS, CIGARETTES, ETC.

American Jr. Red Cross, sponsors :

Willow St. School  
Monroe's Corners School  
Brown Ave. School  
Sarah Dyer Barnes School  
Almy St. School  
St. Charles School  
Needles & Pins Club, URI Extension Service  
Brownie Troop 100  
Henry Barnard School

American Association of University Women  
Ladies' Auxiliary, Providence Alliance Church  
Brownie Troop 163  
Mt. Pleasant Lions Club  
Mr. Ralph Hartman  
Cub Scouts, Den 4, Pack 76  
Cub Scouts, Pack 1  
8th grade, St. James School  
Beneficent Church  
Lt. Leonard Bloom Auxiliary #284  
6th grade, Henry Barnard School  
Mrs. Joseph A. Walsh  
Mangione Family  
Girl Scout Troop 323  
Jane Adams Guild  
Joyful Bluebirds, Cranston Campfire Girls  
Dr. Joseph Smith  
Sackett St. School  
Alfred Williams School  
B Z Blue Birds  
Simmons ville School  
Miss Rose Famigliette

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OTHERS

Ed Drew Orchestra, Christmas music  
Kaman Employees Charity Fund, money  
Les Gaix Chanteurs, male choristers  
Mrs. Irving Winsor, piano concert  
Brown University, hootenanny  
Jim Gagliardi Trio, concert  
The Nomads, band concert  
Al Sims, piano concert  
Ermete Maiani, violin concert  
Marino Trio, entertainment  
Frank Pallotti Trio, entertainment





CHRISTMAS AT CHARLES V. CHAPIN HOSPITAL



1965-1

## CITY OF PROVIDENCE MILK DEPARTMENT

JOSEPH SMITH, M. D.  
Superintendent of Health  
Inspector of Milk, ex-officio  
Health Dept., 161 Fountain St.

RICHARD S. MCKENZIE, B.S.  
Deputy Inspector of Milk  
Laboratory and Office at  
Charles V. Chapin Hospital

### QUARTERLY REPORT OF THE QUALITY OF MILK SOLD IN PROVIDENCE BY RETAIL DISTRIBUTORS

The following table gives the results of the average of analyses made by this department during the first quarter of the year 1965.

No distributor's name is listed under a particular grade of milk unless at least four samples of that grade were analyzed during the quarter. The standard plate count of colonies of bacteria is obtained by using the logarithmic average set forth in the United States Public Health Service Milk Code.

#### CERTIFIED MILK

The legal standards for Certified Milk are those adopted by the American Association of Medical Milk Commissions, Inc. and in effect at the time of production.

Unless otherwise indicated on the label it shall contain an average of 4.0% of butter fat with a minimum of 3.5% for individual samples and a minimum of 12% of total solids.

The average bacterial count of Pasteurized Certified Milk shall not exceed 500 colonies of bacteria per cubic centimeter.

#### GRADE A MILK—PASTEURIZED

Grade A Pasteurized milk is produced on farms scoring not less than 85% using the dairy score card of the U. S. Department of Agriculture. The butter fat shall average not less than 3.50% for any four samples taken in a period of not less than 30 days or more than 90 days. The bacteria count shall have a logarithmic average of not greater than 5,000 for any 4 consecutive samples.

The Milk Solids Not Fat shall average 8.50%.

NAME OF DEALER	BUTTER FAT	SOLIDS Not Fat	*Standard Plate Count, Colonies of Bacteria in One Cubic Centimeter
	Per Cent	Per Cent	
Arrow Lakes Dairy, Inc. ....	3.97	8.90	95
Barber, H. C., Dairy, Inc. ....	4.00	8.76	5,000
Brown, W. B., & Sons, Inc. ....	3.84	8.67	425
Christiansen Dairy Co. ....	4.03	9.02	70
Crandall, E. S., Dairy, Inc. ....	3.78	8.94	100
Cranston Farms, Inc. ....	3.81	8.71	225
De Ciantis Bros. Dairy, Inc. ....	3.98	8.81	100
Farmers' Dairy, Inc. ....	3.76	8.76	375
Federal Dairy Co., Inc. ....	3.68	8.60	125
Harwood Dairy ....	3.91	8.38	250
Hennessey Dairy Co. ....	3.93	8.69	850
Hillside Farms, Inc. ....	3.85	8.86	60
Hill View Dairy ....	4.00	8.82	45
Hood, H. P., & Sons ....	3.87	8.77	325
Mt. Pleasant Dairy, Inc. ....	3.85	8.77	300
Munroe, A. B., Dairy, Inc. ....	4.05	8.91	225
Pippin Orchard Dairy, Inc. ....	3.82	8.86	1,000
Read's Dairy, Inc. ....	4.18	8.98	150
Remington's Dairy, Inc. ....	4.21	8.74	275
Salois Sanitary Dairy ....	4.18	9.07	275
Turner-Lees Dairy, Inc. ....	3.85	8.85	100
Winsor, S. B., Dairy, Inc. ....	4.36	9.06	200

## PASTEURIZED MILK

The average bacteria count of pasteurized milk at the time of delivery to the consumer shall not exceed 10,000 per cubic centimeter and the average per centum of butter fat shall be not less than 3.25 per centum by weight.

The Milk' Solids Not Fat shall average 8.25%.

NAME OF DEALER	BUTTER FAT	SOLIDS NOT FAT	*Standard Plate Count. Colonies of Bacteria in One Cubic Centimeter
	Per Cent	Per Cent	
Arrow Lakes Dairy, Inc. ....	3.72	8.81	100
Barber, H. C., Dairy, Inc. ....	3.69	8.86	1,725
Brown, W. B., & Sons, Inc. ....	3.54	8.69	600
Burgess Dairy .....	3.32	8.69	925
Cassidy's Dairy .....	3.40	8.65	600
Cherry Valley Dairy .....	3.51	8.67	875
Christiansen Dairy Co. ....	3.95	8.95	80
Crandall, E. S., Dairy, Inc. ....	3.65	8.79	225
Cranston Farms, Inc. ....	3.69	8.77	225
Cumberland Farms, Inc. ....	3.52	8.77	275
De Ciantis Bros. Dairy, Inc. ....	3.79	8.79	150
East Greenwich Dairy Co. ....	3.43	8.67	425
Farmers' Dairy, Inc. ....	3.50	8.80	300
Federal Dairy Co., Inc. ....	3.60	8.71	175
First National Stores, Inc. ....	3.79	8.82	275
Garelick Bros. Dairy, Inc. ....	3.71	8.60	375
Harwood Dairy .....	3.65	8.65	550
Hennessey Dairy Co. ....	3.57	8.51	1,250
Hillside Farms, Inc. ....	3.73	8.87	125
Hill View Dairy .....	4.04	8.85	50
Hood, H. P., & Sons .....	3.68	8.73	600
Hoogasian Dairy .....	3.45	8.45	225
Mello's Dairy .....	3.35	8.59	1,725
Mt. Pleasant Dairy, Inc. ....	3.62	8.72	375
Munroe, A. B., Dairy, Inc. ....	3.78	8.85	150
Old Village Dairy .....	3.41	8.84	275
Pippin Orchard Dairy, Inc. ....	3.80	8.90	1,000
Read's Dairy, Inc. ....	3.87	8.81	150
Remington's Dairy, Inc. ....	3.54	8.65	225
Salois Sanitary Dairy .....	3.75	9.04	500
Souza's Dairy .....	3.66	8.67	300
Stop & Shop, Inc. ....	3.87	8.77	250
Sunnybrook Farm, Inc. ....	3.50	8.54	525
Turner-Lees Dairy, Inc. ....	3.86	8.89	70
Whiting Milk Co. ....	3.92	8.69	375
Winsor, S. B., Dairy, Inc. ....	4.26	9.03	200

\* STANDARD PLATE COUNT—The counts as listed are not all in accord with the "Standard Methods for the Examination of Dairy Products" as at present in force. Inasmuch as Standard Methods tries to overcome human errors as much as possible, only plate counts between 30 and 300 are to be tabulated. Inasmuch as direct plating, without dilution, would render the plate difficult to count through the milk cloud, most dilutions are 1:10 or 1:100. As most of the plates show a count under 30, Standard Methods insists that such plates be listed and averaged as less than 300, (30 times 10), organisms per millilitre. It is our feeling, however, that our method serves as a goal and greater incentive towards purer milk. This heading should preferably read PLATE COUNT.

Respectfully submitted,

JOSEPH SMITH, M.D.

*Inspector of Milk*

**IN CITY COUNCIL**

**AUG 16 1965**

READ:

WHEREUPON IT IS ORDERED THAT  
THE SAME BE RECEIVED.

*Committee Clerk*  
CLERK