

Forty-Fourth Annual Report

OF THE

Charles V. Chapin Hospital

Providence, R. I.

FOR THE YEAR ENDING

September 30, 1953



PROVIDENCE
THE OXFORD PRESS
1954

IN CITY COUNCIL

FEB 18 1954

READ:

AND WHEREAS IT IS CONSIDERED THAT
THE SAME BE RECEIVED.

D. Everett Whelan
CLERK

TABLE OF CONTENTS

	PAGE
Board of Hospital Commissioners.....	3
Administrative Staff	4
House Officers who served during the year ending Sep- tember 30, 1953.....	6
Consulting Staff	7
Visiting Staff	9
Historical Report	18
Report of Board of Hospital Commissioners.....	21
Report of Superintendent	24
Financial Report	34
General Statistics	42
Report on All Diseases.....	43
Cross-Infections	51
Infectious Diseases Among Employees.....	55
Report of the Business Administration.....	56
Report of the Neuro-Psychiatric Department	58
Report of the Superintendent of Nurses.....	66
Report of the Laboratory	70
Report of the X-Ray Department	75
Report of the Out-Patient Department	76
Report of the Dietary Department	78
Report of the Maintenance Department	79
Acknowledgments	82

BOARD OF HOSPITAL COMMISSIONERS

Chairman Ex-Officio

MAYOR WALTER H. REYNOLDS

JAMES H. FAGAN, M. D.	Term expires 1954
JOSEPH C. O'CONNELL, M. D.	Term expires 1955
HERMAN A. LAWSON, M. D.	Term expires 1956
JOSEPH SMITH, M. D., <i>Supt. of Health, Ex-Officio</i>	

Secretary

JOSEPH C. O'CONNELL, M. D.

Committee on Organization

Joseph C. O'Connell, M. D. James H. Fagan, M. D.
Herman A. Lawson, M. D.

Visiting Committee

James H. Fagan, M. D. Herman A. Lawson, M. D.
Joseph Smith, M. D.

Nursing Committee

James H. Fagan, M. D. Herman A. Lawson, M. D.
Joseph Smith, M. D.

ADMINISTRATIVE STAFF**October 1, 1952—September 30, 1953****Superintendent**

Hilary J. Connor, M. D.

Assistant Superintendent and Clinical Director

Edward J. West, M. D.

Assistant Superintendents

*Joseph T. Barrett, M. D. Stephen F. Lehman, M. D.

Business Manager

Ambrose J. Toner

Psychiatric Department**DIRECTOR**

Sidney S. Goldstein, M. D.

RESIDENT PHYSICIANS**Mario Nicotra, M. D. Taras Hanuszewskyj, M. D.
Juanito A. Crisologo, M. D.**Pathologist**

LeRoy W. Falkinburg, M. D.

Roentgenologist

Manuel Horwitz, M. D.

Assistant Director of Laboratories***Edmund G. E. Anderson, A. M.
(Vacant)**Superintendent of Nurses**

Carmela Salvatore, R. N.

*Resigned July 15, 1953.

**Resigned June 30, 1953.

***Resigned May 25, 1953.

Assistant Superintendents of Nurses

Elizabeth G. Regan, R. N.

Susan A. Tanzi, R. N.

Instructor of Nurses—Communicable Diseases

*Roberta J. Malley, R. N., B. S.

(Vacant)

Social Workers

**Hope Sullivan

Ruth F. Levy

***Lillian Klitzner

Barbara B. Josephson

Ann Maguire

Clinical Psychologist

Charles Devine

Matron

†Cecelia Moran

(Vacant)

Dietitian

Ruth Davidson

Pharmacist

Frank Colacci, Ph. G.

Engineer

James E. Kelly

Housemother—Nurses' Home

Albina R. Merrill

*Resigned August 23, 1953.

**Resigned January 26, 1953.

***Resigned March 2, 1953.

†Resigned August 31, 1953.

**HOUSE-OFFICERS WHO SERVED DURING YEAR
ENDING SEPTEMBER 30, 1953**

Residents in Pediatrics

Angela Duffy, M. D.
Simona C. Alikpala, M. D.
Juergen Nicolas, M. D.
Bertha W. Wainerman, M. D.
Alfredo Ayala, M. D.
Shafik Khoja, M. D.

*Affiliate Residents in
Pediatrics for Communicable
Disease Training*

**(From Rhode Island
Hospital)**

Stephen M. Frawley, M. D.
Edward S. Sherwood, M. D.

Affiliate Interns

(From Beth-Israel Hospital)

Jack H. Rubinstein, M. D.
Samuel L. Mogul, M. D.
Henry V. Grunebaum, M. D.
Eugene A. Bernstein, M. D.
Robert B. Berg, M. D.
P. Herbert Leiderman, M. D.
Jason L. Starr, M. D.

**(From Rhode Island
Hospital)**

Ernest Mennillo, M. D.
Albert F. Tetreault, M. D.

(No Affiliation)

William C. Luther, M. D.

CONSULTING STAFF**PHYSICIANS**

Edmund D. Chesebro, M. D.	Francis H. Chafee, M. D.
John E. Donley, M. D.	Jacob P. Warren, M. D.
George L. Shattuck, M. D.	Francis V. Corrigan, M. D.
Frank T. Fulton, M. D.	Morgan Cutts, M. D.
Halsey DeWolf, M. D.	Frank A. Merlino, M. D.
Albert H. Miller, M. D.	Prescott T. Hill, M. D.
James F. Boyd, M. D.	William H. Roberts, M. D.
William P. Buffum, M. D.	Kalei K. Gregory, M. D.
Hilary J. Connor, M. D.	Carl D. Sawyer, M. D.
Paul C. Cook, M. D.	Earl F. Kelly, M. D.
Frank H. Mathews, M. D.	Herman A. Lawson, M. D.
Roswell S. Wilcox, M. D.	Banice Feinberg, M. D.
Elihu S. Wing, M. D.	Ira C. Nichols, M. D.
Henry E. Utter, M. D.	Pasquale V. Indeglia, M. D.
Arthur H. Ruggles, M. D.	Edward A. McLaughlin, M. D.
Charles A. McDonald, M. D.	William A. Mulvey, M. D.
A. Roland Newsam, M. D.	Norman A. Johnson, M. D.
Julius G. Kelley, M. D.	Richard E. Haverly, M. D.
James Hamilton, M. D.	William H. Foley, M. D.
Harvey B. Sanborn, M. D.	Alfred C. Conte, M. D.
Niles Westcott, M. D.	John T. Monahan, M. D.
Robert M. Lord, M. D.	Lucy E. Bourn, M. D.
Meyer Saklad, M. D.	Edmund J. Sydlowski, M. D.
Alex M. Burgess, M. D.	Daniel D. Young, M. D.
Cecil C. Dustin, M. D.	Clarence J. Riley, M. D.
Edward T. Streker, M. D.	John C. Ham, M. D.

SURGEONS

George W. VanBenschoten, M. D.	Frank J. McCabe, M. D.
Roland Hammond, M. D.	Michael J. O'Connor, M. D.
John J. Gilbert, M. D.	Alfred L. Potter, M. D.
William A. Mahoney, M. D.	Francis B. Sargent, M. D.

Ralph Stolworthy, D. M. D.	Eliot A. Shaw, M. D.
Benjamin S. Sharp, M. D.	John G. Walsh, M. D.
Charles O. Cooke, M. D.	Daniel V. Troppoli, M. D.
Joseph C. O'Connell, M. D.	Rudolph W. Pearson, M. D.
John W. Sweeney, M. D.	Edward S. Cameron, M. D.
Vincent J. Oddo, M. D.	Mihran A. Chapian, M. D.
Francis V. Garside, M. D.	Anthony V. Migliaccio, M. D.
Henry J. Gallagher, M. D.	Nathan A. Bolotow, M. D.
Ira H. Noyes, M. D.	George F. Conde, M. D.
Frank E. McEvoy, M. D.	Mark Rittner, M. D.
Joseph C. Johnston, M. D.	James H. Fagan, M. D.
James A. McCann, M. D.	Joseph B. Webber, M. D.
Henry McCusker, M. D.	Lucius C. Kingman, M. D.
Edmond C. Laurelli, M. D.	Clarence E. Bird, M. D.
Raymond F. Hacking, M. D.	William M. Muncy, M. D.
Robert R. Baldrige, M. D.	Anthony Corvese, M. D.
Gordon J. McCurdy, M. D.	Walter J. Molony, M. D.
Frank W. Dimmitt, M. D.	Charles Potter, M. D.
Eske Windsberg, M. D.	Wilfred Pickles, M. D.
Lee G. Sannella, M. D.	

(The Board of Hospital Commissioners elects, at its October meeting, the staff which is to serve commencing the next January. Following is the staff elected to serve during 1953 and incorporated in it are changes made prior to October 1953.)

VISITING STAFF

DEPARTMENT OF MEDICINE

In-Patient Department

PHYSICIAN-IN-CHIEF

Louis I. Kramer, M. D.

VISITING PHYSICIANS

Earle H. Brennen, M. D.	William L. Leet, M. D.
Ezra A. Sharp, M. D.	Irving A. Beck, M. D.
Jacob Greenstein, M. D.	Robert G. Murphy, M. D.

ASSISTANT VISITING PHYSICIANS

Russell S. Bray, M. D.	John T. Keohane, M. D.
Frank D. Fratantuono, M. D.	William Fain, M. D.
David Litchman, M. D.	Joseph G. McWilliams, M. D.
William J. O'Connell, M. D.	

Cardiologist

Clifton B. Leech, M. D.

Out-Patient Department

PHYSICIAN-IN-CHARGE

Louis I. Kramer, M. D.

VISITING PHYSICIANS

Laurence A. Mori, M. D.	*Walter F. Fitzpatrick, Jr., M. D.
Richard Femino, M. D.	Bernard Rapoport, M. D.
George E. Kirk, M. D.	Robert E. Carroll, M. D.
Gustavo A. Motta, M. D.	Michael DiMaio, M. D.
Gustaf Sweet, M. D.	*Richard J. Martin, M. D.
Robert Maiello, M. D.	Jacob Stone, M. D.
Edwin B. O'Reilly, M. D.	Nicholas A. Pournaras, M. D.
Nathan J. Kiven, M. D.	Martin J. O'Brien, M. D.
John J. Lury, M. D.	James J. Sheridan, M. D.
Herbert F. Hager, M. D.	James F. Hardiman, M. D.

*Leave of absence

DEPARTMENT OF TUBERCULOSIS

In-Patient Department

DIRECTOR

Peter F. Harrington, M. D.

VISITING PHYSICIANS

James B. Moran, M. D.

Thomas H. Murphy, M. D.

Out-Patient Department

DIRECTOR

Peter F. Harrington, M. D.

VISITING PHYSICIANS

James B. Moran, M. D.

Thomas H. Murphy, M. D.

DEPARTMENT OF DERMATOLOGY AND SYPHILOLOGY

In-Patient Department

PHYSICIAN-IN-CHIEF

Vincent J. Ryan, M. D.

VISITING PHYSICIANS

William B. Cohen, M. D.

Bencel L. Schiff, M. D.

Francesco Ronchese, M. D.

Carl S. Sawyer, M. D.

Malcolm Winkler, M. D.

*Arthur B. Kern, M. D.

Out-Patient Department

PHYSICIAN-IN-CHARGE

Vincent J. Ryan, M. D.

VISITING PHYSICIANS

William B. Cohen, M. D.

Bencel L. Schiff, M. D.

Francesco Ronchese, M. D.

Carl S. Sawyer, M. D.

Malcolm Winkler, M. D.

*Arthur B. Kern, M. D.

*Leave of absence.

DEPARTMENT OF PEDIATRICS**In-Patient Department****PHYSICIAN-IN-CHIEF**

Harold G. Calder, M. D.

VISITING PHYSICIANS

Maurice Adelman, M. D. Frank J. Jacobson, M. D.
Reuben C. Bates, M. D. Reginald A. Allen, M. D.

Assistant Visiting Physicians

William P. Shields, M. D. Eric Denhoff, M. D.
D. William J. Bell, M. D. Herman B. Marks, M. D.
Isadore Gershman, M. D. Clara Loitman-Smith, M. D.
Maurice N. Kay, M. D.

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

Harold G. Calder, M. D.

VISITING PHYSICIANS

Bruno G. DeFusco, M. D. Briand N. Beaudin, M. D.
Richard K. Whipple, M. D. George H. Taft, M. D.
Earle F. Cohen, M. D. John T. Barrett, M. D.
Frank Giunta, M. D. Leonard B. Bellin, M. D.
Vincent P. Rossignoli, M. D. Hilary H. Connor, M. D.
Rudolf A. Jaworski, M. D. Gilbert Houston, M. D.
John P. Grady, M. D. Gerald Solomons, M. D.

Allergist

Stanley S. Freedman, M. D.

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

William N. Hughes, M. D.

VISITING PHYSICIANS

Nora P. Gillis, M. D. Himon Miller, M. D.
Kathleen M. Barr, M. D. Ernest A. Burrows, M. D.
Sarah M. Saklad, M. D.

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

William N. Hughes, M. D.

VISITING PHYSICIANS

Hugh E. Kiene, M. D.	David J. Fish, M. D.
Barry B. Mongillo, M. D.	Walter E. Campbell, M. D.
*Sidney S. Goldstein, M. D.	*Solomon L. Frumson, M. D.
Thomas L. Greason, M. D.	

DEPARTMENT OF UROLOGY**In-Patient Department****SURGEON-IN-CHIEF**

Howard K. Turner, M. D.

VISITING SURGEON

John F. Streker, M. D.

ASSISTANT VISITING SURGEONS

Wallace Lisbon, M. D.	Nathan Chaset, M. D.
Ralph V. Sullivan, M. D.	Ernest K. Landsteiner, M. D.
Arthur J. Clarkin, Jr., M. D.	

Out-Patient Department**SURGEON-IN-CHARGE**

Howard K. Turner, M. D.

*Leave of absence

VISITING SURGEONS

Wallace Lisbon, M. D. Nathan Chaset, M. D.
Ralph V. Sullivan, M. D. Ernest K. Landsteiner, M. D.

ASSISTANT VISITING SURGEONS

Genarino R. Zinno, M. D. Charles Zurawski, M. D.
Arthur J. Clarkin, Jr., M. D.

DEPARTMENT OF GYNECOLOGY

In-Patient Department

SURGEON-IN-CHIEF

George W. Waterman, M. D.

VISITING SURGEONS

Ralph DiLeone, M. D. Frank I. Matteo, M. D.

ASSISTANT VISITING SURGEONS

J. Merrill Gibson, M. D. Craig S. Houston, M. D.
Joseph Franklin, M. D.

Out-Patient Department

SURGEON-IN-CHARGE

George W. Waterman, M. D.

VISITING SURGEONS

J. Merrill Gibson, M. D. George E. Bowles, M. D.
Craig S. Houston, M. D. Thomas F. Fogarty, M. D.
Joseph Franklin, M. D. James P. McCaffrey, M. D.
Jarvis D. Case, M. D. Frederic W. Ripley, Jr., M. D.
Frank J. Honan, M. D. Gene A. Croce, M. D.
John J. Sheehan, M. D. Edward Cardillo, M. D.
Calvin M. Gordon, M. D.

DEPARTMENT OF SURGERY

In-Patient Department

SURGEON-IN-CHIEF

J. Murray Beardsley, M. D.

VISITING SURGEONS

Charles J. Ashworth, M. D.	David Freedman, M. D.
Adolph W. Eckstein, M. D.	Ralph D. Richardson, M. D.

ASSISTANT VISITING SURGEONS

Seebert J. Goldowsky, M. D.	Hannibal Hamlin, M. D.
Wilfred I. Carney, M. D.	Arnold Potter, M. D.
Thomas C. McOsker, M. D.	Thomas Perry, Jr., M. D.

DEPARTMENT OF ORTHOPEDICS

In-Patient Department

SURGEON-IN-CHIEF

William A. Horan, M. D.

VISITING SURGEONS

William V. Hindle, M. D.	Vincent Zecchino, M. D.
--------------------------	-------------------------

Out-Patient Department

SURGEON-IN-CHARGE

William A. Horan, M. D.

VISITING SURGEONS

William V. Hindle, M. D.	Vincent Zecchino, M. D.
--------------------------	-------------------------

DEPARTMENT OF EAR, NOSE AND THROAT

In-Patient Department

SURGEON-IN-CHIEF

Herman A. Winkler, M. D.

VISITING SURGEONS

Linley C. Happ, M. D. Thomas L. O'Connell, M. D.

ASSISTANT VISITING SURGEON

Thomas R. Littleton, M. D.

Bronchoscopist

Linley C. Happ, M. D.

Out-Patient Department

SURGEON-IN-CHARGE

Herman A. Winkler, M. D.

VISITING SURGEONS

Linley C. Happ, M. D. Thomas L. O'Connell, M. D.

ASSISTANT VISITING SURGEON

Thomas R. Littleton, M. D.

DEPARTMENT OF OPHTHALMOLOGY

In-Patient Department

SURGEON-IN-CHIEF

F. Charles Hanson, M. D.

VISITING SURGEONS

H. Frederick Stephens, M. D. James H. Cox, M. D.
Morris Botvin, M. D. Milton G. Ross, M. D.
Linus A. Sheehan, M. D. Nathaniel D. Robinson, M. D.
Donald S. McCann, M. D.

Out-Patient Department**SURGEON-IN-CHARGE**

F. Charles Hanson, M. D.

VISITING SURGEONS

H. Frederick Stephens, M. D.	James H. Cox, M. D.
Morris Botvin, M. D.	Milton G. Ross, M. D.
Linus A. Sheehan, M. D.	Nathaniel D. Robinson, M. D.
Donald S. McCann, M. D.	

DEPARTMENT OF DENTISTRY**In-Patient Department****DENTAL SURGEON-IN-CHIEF**

Walter C. Robertson, D. M. D.

VISITING DENTISTS

J. Stafford Allen, D. D. S.	Harry Goldberg, D. D. S.
Nicholas G. Migliaccio, D. M. D.	Charles F. Cannon, D. M. D.

DEPARTMENT OF ANESTHESIA**In-Patient Department****PHYSICIAN-IN-CHIEF**

Elihu Saklad, M. D.

VISITING ANESTHETISTS

Nathan S. Rakatansky, M. D.	Cecil J. Metcalf, M. D.
Priscilla Sellman, M. D.	William B. O'Brien, M. D.
Americo J. Pedorella, M. D.	Samuel Pritzker, M. D.
Parker Mills, M. D.	Thomas A. Egan, M. D.
William A. McDonnell, M. D.	

Consulting Bacteriologist

Professor Charles A. Stuart

SERVING PROBATIONARY PERIOD

Department of Medicine

VISITING PHYSICIANS

Pasquale J. Pesare, M. D.

Jaroslav Koropej, M. D.

Department of Pediatrics

VISITING PHYSICIANS

Peter L. Mathieu, Jr., M. D.

Mario Vigliani, M. D.

Betty B. Mathieu, M. D.

Department of Gynecology

VISITING SURGEON

Robert C. Hayes, M. D.

Department of Urology

VISITING SURGEONS

Vincent I. MacAndrew, M. D.

Anthony J. Rotelli, M. D.

William S. Klutz, 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, reducing the number of beds to 41, making the total capacity of the hospital 253.

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 had 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 will be a reminder of the affections in which he was held in this community and will be a monument to his great talents in preventive medicine and public health measures.

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. He was well known to the medical profession of Rhode Island and had given many years of service to the citizens of the State, with his practice mainly limited to pediatrics. As its second superintendent, Dr. Hindle courageously led the hospital through trying war years and earnestly strove to improve and increase its services. 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.

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, 1953.

The reports of the Charles V. Chapin Hospital activities, as presented to us for consideration by the Hospital Superintendent and his Staff, tell a very interesting and complete story of the work being carried on by this institution. We shall not attempt any enlargement or repetition in our report.

The Commission has held its regular meetings during the year and has had a very high percentage of attendance on the part of all its members.

Our statistics show a slight decline in the number of patients treated during the year but an increase in the number of total days' treatment and in the average daily population, both of the latter apparently due to an increase in the average residence, 18.4 days as compared with 13.6 in 1952.

Our income for this fiscal year was greater than that of 1952 due, we believe, to the prompt payment of bills by the local Chapters of the Poliomyelitis Foundation, the Blue Cross, and other insurance groups. Our operational deficit was somewhat less than during the last fiscal year.

The latter part of the fiscal year was especially busy because of the very severe outbreak of poliomyelitis which taxed our facilities to the utmost and which required a great deal of ability and tact on the part of our Superintendent, Dr. Connor.

Through his efforts we were able to acquire, from the various agencies and nursing departments, an adequate staff of nurses and therapists to carry out the most intelligent care of these patients. It has been a pleasure to witness the benefits received from the modern methods of treatment and particularly to have seen children almost completely recovered after having spent some time in respirators after admission to the hospital. The epidemic has been very severe. We have had but few deaths and two of these patients were almost moribund on admission.

We would like to commend the work of the physiotherapists who have accomplished so much toward the rehabilitation of these patients.

The other departments of the hospital have had about the average number of patients. We were obliged to close our small private Surgical Department to supply beds for the poliomyelitis cases and we are as yet unable to determine when this department may be reopened. Fortunately the shortage of hospital beds in others hospitals has not been quite as acute as formerly and there has not been much delay in hospitalization of patients on this account.

Our Psychiatric Department is being very well conducted under our new Director, Dr. Sidney S. Goldstein, and the quality of the work in this department has improved by the addition of a psychologist, Mr. Charles Devine.

The work of our engineer, Mr. James Kelly, deserves commendation as a great deal of work, especially painting, carpentering and electrical work, has been done by members of his staff, thus relieving the necessity of employing outside contractors.

We have been greatly pleased by the excellent work of the Medical Staffs and nurses in all of our clinical departments.

The following changes occurred in the staff during the year :

Dr. F. Charles Hanson was appointed chief of the Department of Ophthalmology, filling the vacancy created by the death of Dr. Grossman.

APPOINTMENTS TO PROBATIONARY SERVICE

Robert C. Hayes, M. D.	Peter L. Mathieu, Jr., M. D.
William S. Klutz, M. D.	Vincent I. McAndrew, M. D.
Jaroslav Koropej, M. D.	Anthony J. Rotelli, M. D.
Betty B. Mathieu, M. D.	Mario Vigliani, M. D.

APPOINTMENTS TO REGULAR STAFF

Calvin M. Gordon, M. D.	Thomas Perry, Jr., M. D.
Gilbert Houston, M. D.	Arnold Porter, M. D.
Gerald Solomons, M. D.	

APPOINTMENTS TO CONSULTING STAFF

John C. Ham, M. D.	Clarence J. Riley, M. D.
Lee G. Sannella, M. D.	

RESIGNATIONS

Oswald D. Cinquegrana, M. D.	Francis E. Temple, M. D.
Edward Damarjian, M. D.	John Turner II, M. D.
Joseph A. Hindle, M. D.	Anthony C. Verrone, M. D.

In concluding our brief report, we wish to thank our Clinical and Administrative Staffs for their excellent cooperation, the Red Cross and Poliomyelitis Foundation and our affiliate nurses for their great assistance in the poliomyelitis epidemic, the Blue Cross for its help in increasing our income, and all who, through their loyalty and devotion, have helped to make the work of the hospital successful. We congratulate them on work well done.

Respectfully submitted,

HONORABLE WALTER H. REYNOLDS, *Mayor*
JOSEPH SMITH, M. D., *Supt. of Health*
JAMES H. FAGAN, M. D.
HERMAN A. LAWSON, M. D.
JOSEPH C. O'CONNELL, M. D., *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, 1953. The following tables, in condensed form, furnish information concerning the activities of the hospital.

STATISTICS FOR ALL PATIENTS

	1953			1952		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital Sept. 30, 1953	194	116	78	150	103	47
Number of patients admitted during the year	3,128	1,710	1,418	3,310	1,812	1,498
Number of patients in hospital October 1, 1952	145	98	47	90	51	39
Total number of patients under treatment	3,273	1,808	1,465	3,400	1,863	1,537
Number of patients discharged	3,084	1,695	1,389	3,251	1,763	1,488
Average daily population	158.0			121.1		
Average residence	18.4			13.6		
Largest number in any one day	197			170		
Smallest number in any one day	105			82		
Total days' treatment	56,667			44,337		
Total number of deaths	59			48		
Number of deaths within 48 hours	15			13		
Fatality for all cases	1.9			1.5		
Total visits to Out-Patient Dept.	9,451			10,769		

PEDIATRIC

	Total	1953	
		Male	Female
Number of patients in hospital Sept. 30, 1953	116	77	39
Number of patients admitted during the year	1,403		
Number of patients in hospital Oct. 1, 1952	59	38	21
Total number of patients under treatment	1,463		
Number of patients discharged	1,402		
Average daily population	64.3		
Average residence	16.7		
Number of deaths	17		
Number of deaths within 48 hours	8		
Fatality rate	1.2		
Days' treatment	23,473		

COMMUNICABLE

	Total	1953	
		Male	Female
Number of patients in hospital Sept. 30, 1953	130	82	48
Number of patients admitted during the year	916	518	398
Number of patients in hospital Oct. 1, 1952	58	38	20
Total number of patients under treatment	974	556	418
Number of patients discharged	850	475	375
Average daily population	65.5		
Average residence	28.1		
Number of deaths	19		
Number of deaths within 48 hours	4		
Fatality rate	2.2		
Days' treatment	23,903		

MEDICAL

	Total	1953	
		Male	Female
Number of patients in hospital Sept. 30, 1953.....	1	0	1
Number of patients admitted during the year.....	112	39	73
Number of patients in hospital Oct. 1, 1952.....	3	2	1
Total number of patients under treatment.....	115	41	74
Number of patients discharged.....	117	44	73
Average daily population.....	2.8		
Average residence.....	8.7		
Number of deaths.....	8		
Number of deaths within 48 hours.....	3		
Fatality rate.....	6.8		
Days' treatment.....	1,021		

TUBERCULOSIS, ALL FORMS

	1953			1952		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital Sept. 30, 1953.....	17	14	3	26	24	2
Number of patients admitted during the year.....	121	99	22	110	88	22
Number of patients in hospital October 1, 1952.....	26	24	2	20	17	3
Total number of patients under treatment.....	147	123	24	130	105	25
Number of patients discharged.....	131	110	21	105	83	22
Average daily population.....	27.6			23.7		
Average residence.....	76.9			82.6		
Number of deaths.....	7			10		
Number of deaths within 48 hours.....	0			0		
Fatality rate.....	5.3			9.5		
Days' treatment.....	10,076			8,672		

NEURO-PSYCHIATRY

	1953			1952		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital Sept. 30, 1953.....	42	18	24	43	25	18
Number of patients admitted during the year.....	841	414	427	829	442	387
Number of patients in hospital October 1, 1952.....	43	25	18	25	9	16
Total number of patients under treatment.....	884	439	445	854	451	403
Number of patients discharged.....	842	422	420	808	423	385
Average daily population.....	37.4			34.1		
Average residence.....	16.1			15.5		
Number of deaths.....	11			12		
Number of deaths within 48 hours.....	3			2		
Fatality rate.....	1.3			1.5		
Days' treatment.....	13,536			12,496		

SURGICAL

	1953			1952		
	Total	Male	Female	Total	Male	Female
Number of patients in hospital Sept. 30, 1953.....	0	0	0	7	6	1
Number of patients admitted during the year.....	460	221	239	678	338	340
Number of patients in hospital October 1, 1952.....	7	5	2	5	3	2
Total number of patients under treatment.....	467	226	241	683	341	342
Number of patients discharged.....	467	226	241	681	337	344
Average daily population.....	7.8			10.4		
Average residence.....	6.2			5.6		
Number of deaths.....	9			2		
Number of deaths within 48 hours.....	1			0		
Fatality rate.....	1.9			0.3		
Days' treatment.....	2,916			3,806		

During the period from October 1, 1952 through September 30, 1953, the average daily population was 158 compared to 121.1 in 1952. The largest number of patients in the hospital on any one day was 197 compared with 170 in 1952. The total number of patients under treatment in 1953 was 3,273 and in the previous year it was 3,400. The total days' treatment was 56,667 in 1953 compared to 44,337 in 1952. This marked increase was, for the most part, divided between scarlet fever and poliomyelitis patients. There was a marked increase in the number (422) of cases of scarlet fever. Up to October 1, 1953, there were 176 cases of poliomyelitis admitted, an unusually large number for that period and in all probability many more will be admitted before the end of the year.

The hospital has continued to perform certain services for the Department of Health and the Department of Public Welfare. These include the compounding of prescriptions, examination of a limited number of laboratory specimens, examination of food handlers, and the providing of facilities for examination and treatment, including X-ray examinations, for the Division of Tuberculosis of the Health Department. During the period from October 1, 1951 through September 30, 1952, 3,237 food handlers received physical examinations, including X-rays, and during the past year, the number was 3,203.

The total operating expense for the year was \$844,673.16. The previous year it was \$820,635.58, an increase of \$24,037.58. This increase is moderate and is due to the increase in salary which nearly all our employees received on August 10, 1953.

Income from all sources amounted to \$484,336.37 in 1953, compared to \$391,380.20 in 1952. The per capita cost for the fiscal year for all in-patients was \$13.99 and for the year 1952 it was \$17.14. The marked increase in revenue, \$92,956.17, and the lower per capita cost, \$13.99 compared to \$17.14 in 1952, are directly due to the marked increase in days' treatment (12,330) during the last year.

The hospital continues to operate efficiently. In spite of all the replacements of obsolete equipment and building repairs and additions which have been made in the last few years, it was again necessary last year to furnish additional equipment as well as to make further replacements.

One of the major improvements completed last year was the installation of a red quarry tile floor in the main kitchen. Our maintenance department is to be commended for making provision for food preparation without interruption by temporary connections during the installation of the flooring. Another major installation was that of a large hydrotherapy tank under West I. This necessitated considerable financial outlay as the room in which the tank was placed was completely renovated with tile walls and floor, stainless steel grilling and doors, and considerable new plumbing equipment. Three smaller hydrotherapy tanks were installed in three different buildings. These are portable and can be moved to different areas when necessary. The first floor in the West Building was completely renovated with a new asphalt tile floor installed in the ward. New floor covering was also laid in some of the smaller office rooms in the administration building.

We were fortunate in being able to increase our personnel in the painting department last year. As a result, our work has progressed much more rapidly and unless, for some reason, the painting has to be curtailed, it should be possible to cover the interior of most of the many hospital buildings during the next year.

Again, I would like to mention the excellence of work and the earnest, determined efforts of our resident staff, who are untiring in their duties. Physicians on the visiting staff, as always, have been most faithful.

RESEARCH FELLOWSHIP

During the last year, no research under the Charles V. Chapin Fellowship for Research in Contagious Disease was carried out.

However, changes have been made in the compensation allowed for next year which should make the Fellowship more attractive to applicants interested in scientific study.

BUSINESS ADMINISTRATION

Under the administration of Mr. Ambrose J. Toner, this department functions well.

The reader is referred to his report and to the financial statistics for detailed information.

PEDIATRIC

There were 1,403 patients admitted in 1953. The number of days' treatment was 23,473 and the average daily population was 64.3. As communicable diseases under 14 years of age are included in this statistical table, the average residence of 16.7 days reflects the result of the longer stay of the communicable disease cases.

No comparison can be made with the reports of previous years as this is the first time statistics for pediatrics alone have been published.

COMMUNICABLE

The statistical table under this heading represents all of the communicable diseases of all ages, with the exception of tuberculosis, which have been admitted to the hospital during the past year. The total number of patients admitted was 916. The average daily population was 65.5 and the total days' treatment was 23,903.

No comparison can be made with the reports of previous years as this is a new table pertaining to all communicable diseases with the exception of tuberculosis.

MEDICAL

There were 112 patients admitted in 1953. The number of days' treatment was 1,021. The average daily population was 2.8. This group comprises those cases admitted either for observation or with a provisional diagnosis of communicable disease. After observation and study, they were diagnosed as medical cases.

TUBERCULOSIS

There were 121 patients admitted in 1953 compared to 110 in 1952. The number of days' treatment was 10,076 compared to 8,672. These figures show little change from the previous year.

NEURO-PSYCHIATRY

The number of patients admitted during the last fiscal year was 841 compared to 829 in 1952. The average daily population was 37.4 compared to 34.1 the year before. The total number of patient days was 13,536 compared to 12,496 in 1952. These figures show very little change from the previous year.

SURGERY

This unit functioned only ten months of the year. It was closed on July 31 for renovation and on August 29 was reopened for the care of poliomyelitis cases instead of surgery because of the shortage of beds for communicable diseases, due to the poliomyelitis epidemic.

During the period when surgery was done, there were 460 patients admitted compared to 678 in 1952. The average daily population was 7.8 compared to 10.4 in 1952. The patient days numbered 2,916 in 1953 compared to 3,806 in 1952. The change in these figures was due to the curtailment of surgical admissions.

In previous years, part of the cost of the operating room and surgical unit was divided among the various other departments.

Beginning this past fiscal year, the entire cost was allotted to the operating room and surgical unit. This accounts for the marked increase in per capita cost shown in Exhibit 9 of the financial report.

OUT-PATIENT DEPARTMENT

The total number of visits during the past year was 9,819 compared to 10,769 in 1952. The decrease was general throughout all the various departments, most noticeable in the departments of syphilis, and accident and surgical cases.

NURSING DEPARTMENT

As in previous years, we have had some changes in our nursing personnel. However, in spite of the shortage of nurses, we were fortunate in maintaining a fairly high quota. Due to the epidemic of poliomyelitis and the large number of bulbar and respirator cases, and cases which were extensively involved with paralysis, it was necessary to appeal to our various nursing organizations for assistance. We were able to obtain some nurses from the State Department of Health, the Providence School Department, and the Providence Health Department immediately for a short period of time. In the meanwhile, we had applied to the National Foundation for Infantile Paralysis for Red Cross nurses who gradually replaced the nurses from the outside local organizations. It should be pointed out that it has always been our policy to provide special nurses, three nurses in every twenty-four hours, for our sicker patients with no added charge.

I wish to take this opportunity to thank all the outside nurses as well as our own nurses who, in many cases, worked overtime and gave up their vacations to assist in the emergency.

For further information, the reader is referred to the report of the Superintendent of Nurses.

LABORATORY

The number of examinations (59,932) made in the past year compared to 55,133 done the previous year shows a considerable increase. Of these tests, 1,355 were performed for the City Health Department.

Mr. Edmund G. E. Anderson retired during the last year after a lifetime of service to the hospital. He is well known to the medical profession of Providence and surrounding areas as the result of his diligent and faithful work as assistant director of our hospital laboratory. Making his home at the hospital, whether or not he was on duty he was always available to the staff in any emergency involving the laboratory. His loss will be felt for many years to come.

Details of the laboratory activities are given in the report of the Director.

X-RAY DEPARTMENT

The number of parts of the body X-rayed in 1953 was 5,138 compared to 5,244 in 1952. The number of individuals was 5,130 compared to 4,917 the year before.

For further information, the reader is referred to the report of the Roentgenologist.

PHARMACY

The hospital pharmacy continued to function satisfactorily.

PRESCRIPTIONS FILLED

Out-patient clinics	2,810
Employee clinic	1,949
City poor physicians.....	466
• Total	5,225

REVENUE

Out-patient clinics	\$600.70
Health department	85.40
City poor physicians.....	319.75
Total	\$1,005.85

DIETARY DEPARTMENT

The number of meals served shows a moderate increase over the previous year, due to the larger hospital population. The cost of raw food showed a drop from 34¢ in 1952 to 30¢ per meal in 1953. This compares to an increase of 7½¢ during the previous year.

For further information, the reader is referred to the report of the dietitian.

LAUNDRY

A total of 521,814 pounds of linen was processed during the past year compared to 532,199 in 1952. A new mangle was put into use early in the year, making it possible to turn out linen more rapidly.

AMBULANCE SERVICE

This service continued to function adequately. During the year, a new Cadillac ambulance was put into service. We now have two ambulances, a station wagon, and a truck which are all fairly new and in excellent condition.

The figures below show the number of trips and mileage:

	1953		1952	
	Trips	Mileage	Trips	Mileage
Ambulance No. 1	391	2,721	314	2,538
Ambulance No. 2	205	1,905	172	2,809
Station Wagon	960	7,383	1,264	6,157
Truck		3,487		2,178

PLANT MAINTENANCE

The maintenance department was very active during the last year. Some of the work accomplished has already been mentioned earlier in this report.

For more complete information, the reader is referred to the report of Mr. Kelly, plant engineer.

RESIDENT STAFF

Dr. Stephen F. Lehman, appointed second assistant superintendent on April 1, 1952, continued on in that capacity during the past fiscal year.

Dr. Joseph T. Barrett completed a year as third assistant superintendent on June 30, 1953. This position remained unfilled for the remainder of the year.

Residents in psychiatry, in pediatrics, as well as affiliate pediatric residents and interns, are listed elsewhere in this report. As in previous years, shortage of medical personnel prevented some of our affiliating hospitals from sending their interns and pediatric residents here.

Eleven fourth-year students from Tufts College Medical School were assigned here during the year for training in pediatrics.

RECOMMENDATIONS

1. New equipment for the various departments as the need arises.
2. Extensive painting in the various hospital buildings, as needed.

In closing, I wish to express my appreciation to the Board of Hospital Commissioners for their intense interest in the welfare of the hospital, and the city officials for their willingness and cooperation in improving the hospital as a whole.

Respectfully submitted,

HILARY J. CONNOR, M. D.

Financial Report

FOR YEAR ENDING SEPTEMBER 30, 1953

EXHIBIT 1

REVENUE RECEIPTS

In-Patient Department:		
Communicable, Pediatric and Other.....	\$206,724.55	
Tuberculosis.....	20,529.00	
Neuro-Psychiatric Diseases.....	108,842.73	
Surgical.....	36,659.00	
Operating Room.....	8,819.78	
X-Ray.....	3,641.50	
Laboratory.....	23,566.46	
Drugs.....	31,981.91	
Ambulance.....	144.00	
Shock Treatments.....	14,136.95	
Sundries.....	1,130.60	
Telephone.....	5.55	
		\$456,182.03
Out-Patient Department:		
Fees.....	\$ 621.50	
Examinations—Food Handlers.....	1,700.00	
		2,321.50
Wassermann Tests		
Examination		
Sheep Cells, Gold Curves, etc. }	\$ 430.42	
		\$ 430.42
X-Ray Service.....	\$ 287.22	
		287.22
Drug Room Service.....	\$ 986.35	
		986.35
Miscellaneous Earnings:		
Accident Room.....	\$ 17.00	
Refunds.....	1,743.69	
Telephone.....	295.50	
Abstracts.....	202.00	
Materials.....	368.09	
Meals.....	65.00	
Donations.....	1.00	
Birth Record.....	.50	
Salary Checks—Re-Deposited.....	54.75	
		2,747.53
Gross Revenue Receipts.....		\$462,955.05
Deduct:		
Refunds on Advance Payment.....		4,042.15
Net Revenue Receipts.....		\$458,912.90
Add:		
Revenue from Meals and Lodgings.....		25,423.47
		<u>\$484,336.37</u>

EXHIBIT 2

DEPARTMENTAL EXPENDITURES

Opening Inventories		\$ 37,893.01	
Meals and Lodgings.....	\$ 25,423.47		
Expenditures (Schedule A).....	818,272.55		
Closing Inventories		\$ 36,915.87	\$881,589.03
Communicable, Pediatric & Other.....	\$425,440.39		
Tuberculosis.....	73,583.10		
Neuro-Psychiatric.....	204,077.88		
Surgery.....	89,544.52		
Out-Patient.....	26,907.96		
City Health—Pulmonary Clinic.....	16,296.21		
City Health—Inspector of Milk.....	2,075.55		
City Health—Laboratory Examinations.....	1,609.77		
State Cardiac Clinic.....	1,415.57		
Other Non-Patient Cost	3,768.21		
(Schedule B)		844,719.16	
Deduct:			
Excess of Cost Distribution.....		46.00	\$881,589.03

EXHIBIT 3

STATEMENT OF INCOME AND EXPENSES

Income:			
Services Rendered:			
In-Patients.....	\$713,692.75		
Other.....	35,286.10		
Total Services		\$748,978.85	
Deductions:			
Contract Adjustments	\$ 7,031.86		
Tuberculosis Health Problems.....	64,636.70		
General Public Assistance.....	180,311.86		
Service to Employees and Trainees.....	7,756.75		
X-Ray (Incident to Shock Therapy).....	56.00		
Courtesy Services	2,712.75		
Research.....	23.00		
Total Services		\$262,528.92	
Net Services Rendered.....		\$486,449.93	
Add Other Income:			
Meals.....	\$ 18,675.81		
Lodgings.....	6,747.66		
Total Other Income.....		\$ 25,423.47	
Gross Income		\$511,873.40	
Expenses:			
Salaries.....	\$540,613.12		
Supplies Used	304,060.04		
Total Expense		844,673.16	
Net Operating Deficit.....		\$332,799.76	
Deduct:			
State of Rhode Island Grant.....		200,000.00	
Net Deficit for Period.....		\$132,799.76	

EXHIBIT 4

MAINTENANCE COSTS FOR ALL IN-PATIENTS.

	Operating Cost.	Receipts.	Net Expense.	Hospital Days.	Per Gross Capita Cost.	Per Net Capita Cost.
1910.....	\$33,720.66	\$1,328.13	\$32,392.53	22,052	\$1.52	\$1.47
1911.....	62,549.01*	3,271.66	59,277.35	35,939	1.74	1.65
1912.....	82,005.29*	5,270.95	76,734.34	43,320	1.89	1.77
1913.....	83,337.56*	4,040.81	79,296.75	44,974	1.85	1.76
1914.....	86,879.81	5,109.77	81,770.04	42,235	2.06	1.93
1915.....	92,401.57†	5,570.10	86,831.47	52,029	1.78	1.67
1916.....	99,483.85	8,121.27	91,362.58	52,364	1.89	1.74
1917.....	112,779.75	11,006.05	101,773.70	46,123	2.44	2.22
1918.....	119,685.05	10,577.13	109,107.92	46,675	2.56	2.34
1919.....	136,915.76‡	19,129.18	117,786.58	54,937	2.49	2.14
1920.....	171,700.14	18,096.85	153,603.29	49,516	3.47	3.10
1921.....	160,068.46	16,060.24	144,008.22	44,253	3.61	3.25
1922.....	152,749.51§	13,215.49	139,534.02	38,302	3.99	3.64
1923.....	162,682.64¶	17,567.56	145,115.07	44,505	3.65	3.26
1924.....	192,766.84	29,542.42	163,224.42	47,087	4.09	3.46
1925.....	189,294.45	19,806.11	169,488.34	39,771	4.76	4.26
1926.....	197,911.43	19,157.22	178,754.21	44,538	4.44	4.01
1927.....	209,427.48	25,997.75	183,429.73	46,076	4.55	3.98
1928.....	221,123.50	32,940.33	188,183.17	48,250	4.58	3.90
1929.....	237,062.99	34,368.34	202,694.65	46,213	5.13	4.39
1930.....	289,237.97	29,608.34	259,629.63	47,482	6.09	5.47
1931.....	328,464.09	44,470.78	283,993.31	70,045	4.69	4.05
1932.....	329,393.09	44,817.92	284,575.17	73,137	4.50	3.89
1933.....	289,002.01	29,736.84	259,265.17	73,595	3.93	3.52
1934.....	293,635.61	34,721.51	258,914.10	70,745	4.15	3.66
1935.....	299,648.73	37,600.20	262,048.53	71,245	4.21	3.68
1936**.....	300,566.47	45,241.46	255,325.01	75,514	3.98	3.38
1937**.....	291,595.01	52,618.02	238,976.99	78,923	4.01	3.69
1938**.....	314,049.60	53,170.83	262,731.21	68,357	4.59	3.84
1939**.....	331,284.40	61,042.10	272,307.21	67,328	4.92	4.04
1940**.....	360,772.06	80,906.21	279,865.85	67,182	5.37	4.17
1941.....	362,369.82	81,147.38	281,222.44	63,077	5.74	4.46
1942.....	347,275.15	101,495.73	245,779.42	57,197	6.07	4.92
1943.....	377,379.52	120,581.55	256,797.97	57,066	6.61	4.50
1944.....	371,786.26	158,902.31	212,883.95	55,154	6.74	3.86
1945.....	451,026.53	113,358.43	337,668.10	45,585	9.89	6.12
1946.....	517,988.52	145,793.47	372,195.05	48,608	10.66	7.66
1947.....	544,021.93	.....	.....	55,774	9.75	.....
1948.....	627,797.89	.....	.....	48,872	12.85	.....
1949.....	627,884.08	.....	.....	48,542	12.93	.....
1950.....	684,064.02	.....	.....	47,858	14.29	.....
1951.....	697,606.95	.....	.....	42,740	16.32	.....
1952.....	759,762.36	.....	.....	44,337	17.14	.....
1953.....	792,645.89	.....	.....	56,667	13.99	.....

* This includes the cost of the hospital proper and the smallpox hospital but not the day camp. † Purchase, repair and equipment of lot and buildings not included. ‡ Does not include purchase of three story dwelling for employees. § Does not include installing refrigerator plant, or passageway between administration building and service building. ¶ Does not include new mangle. ** Does not include receipts from Health Department for services rendered.

EXHIBIT 5

OUT-PATIENT DEPARTMENT.

	Operating Cost.	Receipts.	Net Expense.	Visits.	Cost Per Visit.
1918.....	\$9,287.46	\$6,695.53	\$2,591.93	17,415	\$0.53
1919.....	5,161.79	5,523.27	{ Surplus 361.48	24,497	.21
1920.....	11,318.41	11,335.60	{ Surplus 17.19	25,712	.44
1921.....	13,067.30	8,522.81	4,544.49	29,536	.44
1922.....	14,182.60	8,140.62	6,041.98	28,228	.50
1923.....	11,574.02	7,239.32	4,334.70	18,384	.62
1924.....	12,226.10	7,107.67	5,118.43	19,289	.63
1925.....	14,085.75	7,628.34	6,457.41	20,175	.70
1926.....	14,206.88	7,031.00	7,175.88	19,891	.71
1927.....	12,764.46	7,369.90	5,394.56	20,755	.62
1928.....	12,718.02	6,121.33	6,596.69	22,787	.56
1929.....	13,793.69	6,869.11	6,924.58	25,971	.53
1930.....	16,394.36	7,877.23	8,517.13	30,788	.53
1931.....	17,194.95	8,051.12	9,143.83	34,195	.50
1932.....	16,707.88	6,260.19	10,447.69	39,275	.43
1933.....	15,990.54	7,373.55	8,616.99	44,871	.36
1934.....	16,654.07	5,136.96	11,517.11	41,766	.40
1935.....	17,687.47	5,354.44	12,333.03	37,785	.47
1936*.....	17,640.41	4,120.73	13,519.68	35,345	.50
1937*.....	23,420.63	4,051.12	19,369.51	37,817	.66
1938*.....	18,976.65	3,762.08	15,214.57	37,700	.55
1939*.....	18,275.93	2,921.57	15,354.36	34,796	.53
1940*.....	16,686.74	3,031.58	13,655.16	29,828	.56
1941.....	16,701.66	4,001.93	12,699.73	27,716	.60
1942.....	19,188.09	3,733.60	15,454.49	26,439	.73
1943.....	13,252.79	3,522.35	11,752.79	18,273	.73
1944.....	17,150.57	3,367.10	13,783.47	14,622	1.17
1945.....	18,989.48	5,096.97	13,892.51	13,922	1.36
1946.....	17,723.45	4,154.50	13,568.95	13,401	1.32
1947.....	28,028.70	.....	.....	13,701	2.05
1948.....	27,810.89	.....	.....	12,239	2.27
1949.....	29,212.69	.....	.....	12,955	2.26
1950.....	28,476.41	.....	.....	13,131	2.17
1951.....	28,975.65	.....	.....	11,163	2.60
1952.....	35,281.67	.....	.....	10,769	3.28
1953.....	26,907.96	.....	.....	9,451	2.85

* Does not include receipts from Health Department or Department of Public Aid for services rendered.

EXHIBIT 6

MAINTENANCE COST OF OTHER NON-PATIENTS

1947.....	\$3,927.73	(Schedule B)
1948.....	3,911.49	(Schedule B)
1949.....	3,682.46	(Schedule B)
1950.....	4,109.21	(Schedule B)
1951.....	3,931.85	(Schedule B)
1952.....	4,476.17	(Schedule B)
1953.....	3,768.21	(Schedule B)

EXHIBIT 7

MAINTENANCE COST OF INFECTIOUS, PEDIATRIC AND OTHER DISEASES

	Operating Cost	Receipts	Net Expense	Hospital Days	Per Gross Capita Cost	Per Net Capita Cost
1932.....	\$231,231.42	.....	.....	57,600	\$4.01	.....
1933.....	205,937.93	\$23,765.36	\$182,172.57	58,592	3.51	\$3.11
1934.....	201,555.51	23,098.61	178,456.90	55,460	3.63	3.22
1935.....	202,946.00	26,171.92	176,774.08	53,838	3.77	3.28
1936.....	192,756.12	32,984.95	159,771.17	54,751	3.52	2.92
1937.....	187,762.02	40,443.76	149,318.26	59,089	3.21	2.53
1938.....	195,847.85	33,947.07	161,900.78	48,931	4.00	3.31
1939.....	212,690.47	37,977.19	174,713.28	49,852	4.26	3.50
1940.....	202,047.64	30,111.91	171,935.73	47,462	4.27	3.62
1941.....	205,109.66	27,499.83	177,609.83	43,882	4.67	4.05
1942.....	2010,495.41	49,805.18	160,690.23	40,046	5.26	4.01
1943.....	239,885.74	75,631.89	164,253.85	40,894	5.87	4.02
1944.....	286,302.32	104,446.63	181,855.69	40,845	7.01	4.45
1945.....	368,412.95	93,172.51	275,240.44	37,828	9.74	7.28
1946.....	348,520.24	94,902.43	253,617.81	35,958	9.69	7.05
1947.....	356,426.62	.....	.....	38,733	9.20	.....
1948.....	424,807.71	.....	.....	33,117	12.83	.....
1949.....	428,456.83	.....	.....	33,135	12.93	.....
1950.....	469,237.48	.....	.....	33,771	13.89	.....
1951.....	477,110.69	.....	.....	28,908	16.50	.....
1952.....	490,831.28	.....	.....	28,035	17.51	.....
1953.....	499,023.49	.....	.....	40,215	12.41	.....

EXHIBIT 8

MAINTENANCE COST OF NEURO-PSYCHIATRIC PATIENTS

	Operating Cost	Receipts	Net Expense	Hospital Days	Per Gross Capita Cost	Per Net Capita Cost
1932.....	\$98,161.67	.....	.....	15,537	\$6.32	.....
1933.....	83,064.08	\$5,971.48	\$77,092.16	15,003	5.54	\$5.14
1934.....	92,080.10	11,622.90	80,457.20	15,285	6.42	5.65
1935.....	96,702.73	11,428.28	85,274.45	17,407	5.55	4.89
1936.....	110,529.77	12,256.51	98,355.51	20,763	4.36	3.75
1937.....	111,832.99	12,174.26	99,658.72	19,834	5.64	5.03
1938.....	118,201.75	17,371.32	100,830.43	19,426	6.09	5.19
1939.....	118,593.10	20,324.63	98,268.47	17,476	6.79	5.62
1940.....	119,889.67	23,153.21	96,736.46	19,720	6.08	4.91
1941.....	122,895.70	27,474.83	95,420.87	19,195	6.40	4.97
1942.....	136,779.74	32,277.69	104,502.05	17,151	7.98	5.44
1943.....	137,493.78	32,814.23	104,679.55	16,172	8.50	6.47
1944.....	85,483.94	40,950.47	44,533.47	14,309	5.97	3.11
1945.....	82,613.58	20,185.92	62,427.66	7,757	10.65	8.05
1946.....	149,365.82	41,568.54	107,797.28	11,284	13.24	9.55
1947.....	146,469.58	.....	.....	13,901	10.54	.....
1948.....	164,666.47	.....	.....	12,197	13.50	.....
1949.....	161,590.76	.....	.....	11,928	13.55	.....
1950.....	173,135.07	.....	.....	10,754	16.10	.....
1951.....	175,268.81	.....	.....	10,570	16.58	.....
1952.....	208,932.34	.....	.....	12,496	16.72	.....
1953.....	204,077.88	.....	.....	13,536	15.08	.....

EXHIBIT 9

MAINTENANCE COST OF SURGICAL PATIENTS

	Operating Cost	Receipts	Net Expense	Hospital Days	Per Gross Capita Cost	Per Net Capita Cost
1946*.....	\$20,102.46	\$9,322.50	\$10,779.96	1,366	\$14.72	\$7.89
1947.....	41,125.73	.....	.....	3,140	13.10	.....
1948.....	38,323.71	.....	.....	3,558	10.77	.....
1949.....	37,836.49	.....	.....	3,479	10.88	.....
1950.....	41,691.42	.....	.....	3,333	12.51	.....
1951.....	45,227.45	.....	.....	3,262	13.86	.....
1952.....	59,998.74	.....	.....	3,806	15.76	.....
1953.....	89,544.52	.....	.....	2,916	30.71	.....

*New Department opened April 1, 1946.

EXHIBIT 10

MAINTENANCE COST OF CITY HEALTH DEPARTMENT ACTIVITIES

	Pulmonary Tuberculosis Clinic	Inspector of Milk	Laboratory Examinations	Total City Health Activities
1947.....	\$7,022.43	\$1,860.42	\$7,736.63	\$16,619.48
1948.....	10,604.10	2,104.12	3,008.65	15,716.87
1949.....	11,842.66	1,956.14	2,831.63	16,630.43
1950.....	12,584.44	1,884.03	1,446.88	15,915.35
1951.....	14,033.38	2,296.88	2,988.54	19,318.80
1952.....	14,467.30	2,213.95	3,269.31	19,650.56
1953.....	16,296.21	2,075.55	1,609.77	19,981.53

EXHIBIT 11

MAINTENANCE COST OF STATE HEALTH DEPARTMENT ACTIVITIES

	Cardiac Clinic	Total State Health Activities
1947.....	\$1,254.59	\$1,254.59
1948.....	1,439.44	1,439.44
1949.....	1,288.38	1,288.38
1950.....	1,312.28	1,312.28
1951.....	1,343.43	1,343.43
1952.....	1,372.11	1,372.11
1953.....	1,415.57	1,415.57

SCHEDULE A

ANALYSIS OF APPROPRIATIONS AND EXPENDITURES

Item	Description	Appropriations	Expenditures	Unencumbered Balances
0	Personal Services	\$519,168.40	\$515,189.65	\$3,978.75
1	Services Other Than Personal.....	56,752.00	56,300.12	451.88
2	Materials and Supplies.....	232,975.00	232,686.92	288.08
3	Special Items	125.00	125.00	.....
5	Equipment Replacements and Additions	14,050.00	13,970.86	79.14
		\$823,070.40	\$818,272.55*	\$4,797.85

*Does not include \$25,423.47 payroll deductions for meals and lodgings.

SCHEDULE B

DEPARTMENTAL COST DISTRIBUTIONS

NEURO-PSYCHIATRIC DEPARTMENT:

Professional Care:

Medical.	\$ 19,546.75
Nursing.	25,103.36
Other (Soc. Wkrs. Psychom. Ther.).....	13,861.64
Laboratory.	4,602.44
Pharmaceuticals.	5,913.89
X-ray.	1,033.56
	<u>\$ 70,061.64</u>

Non-Professional Care:

Ambulance.	\$ 5,198.50
Dietary.	24,720.04
Laundry.	4,619.42
Medical Records	2,414.23
Attendant Service	24,646.57
General Administration	34,261.22
Housing:	
Utility Services	2,371.03
Maintenance.	8,371.96
Heat, Hot Water and Steam.....	5,063.54
Housekeeping.	17,240.09
Materials and Supplies.....	5,082.35
Equipment Replacement	27.29
	<u>134,016.24</u>
	204,077.88

TUBERCULOSIS DEPARTMENT:

Professional Care:			
Medical.	\$ 4,224.01		
Nursing.	20,674.29		
Laboratory.	4,406.35		
Pharmaceuticals.	4,899.26		
X-ray.	1,363.11		
		\$35,567.02	
Non-Professional Care:			
Ambulance.	\$ 549.17		
Dietary.	16,092.84		
Laundry.	4,809.62		
Medical Records.	337.28		
General Administration.	2,410.63		
Housing:			
Utility Services.	679.59		
Maintenance.	1,944.58		
Heat, Hot Water and Steam.	2,614.43		
Housekeeping.	5,663.97		
Materials and Supplies.	2,771.07		
Equipment Replacement.	142.90		
		38,016.08	73,583.10

COMMUNICABLE, PEDIATRIC AND OTHER:

Professional Care:			
Medical.	\$ 33,053.18		
Nursing.	130,515.09		
Anesthesia and Operating Room.	980.66		
Laboratory.	44,125.92		
Pharmaceuticals.	31,965.80		
X-ray.	2,861.20		
		\$243,501.85	
Non-Professional Care:			
Ambulance.	\$ 2,868.15		
Dietary.	44,940.52		
Laundry.	23,850.36		
Medical Records.	4,902.16		
Attendant Service.	3,374.91		
General Administration.	16,133.24		
Housing:			
Utility Services.	3,454.57		
Maintenance.	12,467.72		
Heat, Hot Water and Steam.	11,439.95		
Housekeeping.	29,840.70		
Materials and Supplies.	16,540.50		
Equipment Replacement.	12,125.76		
		181,938.54	425,440.39

SURGICAL DEPARTMENT:

Professional Care:			
Nursing.	\$15,613.61		
Anesthesia and Operating Room.	19,793.17		
Laboratory.	1,888.03		
Pharmaceuticals.	6,845.17		
X-ray.	182.07		
		\$ 44,322.05	
Non-Professional Care:			
Dietary.	\$ 4,982.67		
Laundry.	13,618.54		
Medical Records.	1,268.97		
Attendant Service.	2,599.75		
General Administration.	7,085.69		
Housing:			
Utility Service.	843.56		
Maintenance.	3,225.09		
Heat, Hot Water and Steam.	1,739.90		
Housekeeping.	7,360.71		
Materials and Supplies.	2,400.29		
Equipment Replacement.	97.30		
		45,222.47	89,544.52

OUT-PATIENT DEPARTMENT:

Professional Care:		
Medical.	\$ 1,890.92	
Nursing.	4,928.07	
Laboratory.	9,020.82	
Pharmaceuticals.	851.50	
X-ray.	867.86	
	<u>\$ 17,559.17</u>	
Non-Professional Care:		
Laundry.	\$ 196.50	
General Administration	5,148.18	
Housing:		
Utility Services	904.64	
Maintenance.	741.36	
Heat, Hot Water and Steam.	1,012.70	
Housekeeping.	1,008.58	
Materials and Supplies.	308.14	
Equipment Replacement	28.69	
	<u>9,348.79</u>	26,907.96

CITY OF PROVIDENCE HEALTH DEPARTMENT
PULMONARY TUBERCULOSIS CLINIC:

Professional Care:		
Other.	\$ 156.00	
Laboratory.	153.78	
Pharmacy.	181.38	
X-ray.	14,336.06	
	<u>\$ 14,827.22</u>	
Non-Professional Care:		
Housing:		
Utility Services	\$ 272.92	
Maintenance.	494.23	
Heat, Hot Water and Steam.	675.15	
Materials and Supplies.	26.69	
	<u>1,468.99</u>	16,296.21

CITY OF PROVIDENCE HEALTH DEPARTMENT
INSPECTION OF MILK:

Non-Professional Care:		
Housing:		
Utility Services	\$ 290.32	
Maintenance.	754.58	
Heat, Hot Water and Steam.	1,030.65	
	<u>\$ 2,075.55</u>	2,075.55

CITY OF PROVIDENCE HEALTH DEPARTMENT
LABORATORY EXAMINATIONS:

Laboratory.	<u>\$ 1,609.77</u>	1,609.77
---------------------	--------------------	----------

STATE DEPARTMENT OF HEALTH
CARDIAC CLINIC:

Professional Care:		
X-ray.	\$ 676.54	
	<u>\$ 676.54</u>	
Non-Professional:		
Utility Services	\$ 154.33	
Maintenance.	247.12	
Heat, Hot Water and Steam.	337.58	
	<u>739.03</u>	1,415.57
Cost of Other Non-Patients Pharmaceuticals.	<u>\$ 3,768.21</u>	3,768.21
TOTAL DEPARTMENTAL COST DISTRIBUTIONS.		<u>\$844,719.16</u>

B. General Statistics

(October 1, 1952-September 30, 1953)

Table B 1. Population, March 1, 1910-Sept. 30, 1953

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	37.9	.....	.....	82.4	.....	.....	21	.....	702
1912.....	1,004	44,770	122.3	34.1	.....	.....	131.8	.....	.....	48	.....	846
1913.....	1,010	44,245	120.6	38.7	.....	.....	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	46,344	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	7.7	8.7	76.9	16.1	6.2	1,320	9,451	596

*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-Sept. 30, 1953

DISEASES	Oct. 1, 1952- Sept. 30, 1953			Oct. 1, 1951- Sept. 30, 1952			March 1, 1910- Sept. 30, 1953		
	Cases.	Deaths.	Fatality.	Cases.	Deaths.	Fatality.	Cases.	Deaths.	Fatality.
Chickenpox.....	25			22			909	14	1.5
Diphtheria.....	0			1			5,741	688	12.0
Diphtheria Carrier.....	0			0			729		
Encephalitis, acute, all forms..	25			8			202	51	25.2
Erysipelas.....	1			2			927	86	9.3
Gonorrhea.....	0			1			2,229	6	0.3
Gonorrheal conjunctivitis.....	0			0			180	5	2.8
Impetigo.....	4			6			537		
Influenza.....	0			1			1,046	81	7.7
Laryngitis, negative cultures.....	3			1			569	13	2.3
Leprosy.....	0			0			2		
Measles.....	3			149	3	2.0	3,936	232	5.9
Meningitis, cerebrospinal, men- ingococcus.....	9			26			799	141	17.6
**Meningitis, tuberculous.....	3	1	33.3	4	3	75.0	103	86	83.4
Meningitis, other forms.....	24			38			346	120	34.7
Mumps.....	36			38			596		
Pneumonia, all forms.....	96			128	2	1.6	2,410	265	11.0
Polio-myelitis, acute.....	176	15	8.5	31	3	6.4	1,442	99	6.9
Rabies.....	0			0			3	3	100.0
Rubella.....	10			63			757	1	0.1
Scabies.....	1			2			328		
Scarlet Fever.....	422			197			10,333	218	2.1
Syphilis, congenital.....	0			0			165	18	11.0
Syphilis, all other forms.....	1			5			3,414	32	0.9
*Tonsillitis.....	166			236			4,315	11	0.3
Tonsillitis, hemolytic strepto- coccus.....	1			8			517	4	0.8
Tuberculosis, pulmonary.....	128	7	5.5	108	10	9.3	5,758	2,197	38.6
Tuberculosis, all other forms...	5	1	20.0	1			305	106	34.8
Typhoid Fever.....	3			3			172	20	11.6
Vincent's Infection.....	0			0			244	10	4.9
Whooping Cough.....	28			14			2,569	179	7.0
No diagnosis.....	8			16			800	12	1.5
Other diseases.....	597	15	2.5	671	12	1.8	14,836	984	6.6
†Diseases of the nervous sys- tem.....	842	11	1.3	808	12	1.5	15,930	568	3.7
‡Surgery.....	467	9	1.9	681	2	0.3	4,537	25	0.6
Total.....	3,084	59	1.9	3,251	48	1.5	87,686	6,275	7.6

*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.

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

Living Dead		Living Dead	
Abscess, buttock.	1	Gastroenteritis, acute	32
Abscess, cerebellum.	2	Gingivitis, acute	3
Abscess, ischio-rectal.	1	Glomerulonephritis, acute	4
Anemia, hereditary leptocytosis.	1	Gout.	2
Anemia, hereditary spherocytosis.	1	Grand and petit mal.	2
Anemia, hypochromic, microcytic	2	Heat prostration	1
Anemia, idiopathic, hypoplastic.	1	Hematoma, of septum.	1
Anemia, normocytic, hypoplastic,	1	Hemorrhage, cerebral	1
due to infection.	1	Hemorrhage, gastrointestinal tract	1
Anemia, pernicious.	1	Hemorrhage, subarachnoid	2
Anxiety reaction	1	Hepatitis, infectious (epidemic).	21
Arthritis, knee	1	Herpes, ophthalmicus	1
Arthritis, rheumatoid	1	Herpes Zoster	2
Arteriosclerosis, general	1	Hodgkin's Disease	1
Arteriosclerotic heart disease.	1	Hydrocele, congenital, of tunica	1
Asthma.	5	vaginalis.	1
Bacteremia, due to Pneumococcus	1	Jaundice of newborn.	1
Bacteremia, due to Staph. Albus	1	Lacerations.	1
Brain syndrome, acute, associated	1	Laryngotracheitis, acute	113
with systemic infection (tu-	1	Lymphadenitis, cervical.	13
berculosis).	1	Lymphadenitis, inguinal.	1
Brain syndrome, chronic, associ-	2	Lymphadenitis, mesenteric	1
ated with convulsive disorder.	2	Malnutrition, in child under 2	3
Bronchiolitis, acute	7	years.	3
Bronchitis, acute	35	Meningococcemia.	2
Calcification of joints, generally.	1	Mononucleosis, infectious	9
Calculus in common duct.	1	Multiple sclerosis	1
Carcinoma, embryonal, of testis.	1	Myocardial infarction, due to ar-	1
Carcinoma, epidermoid, of larynx	2	teriosclerotic coronary throm-	1
Cardiac decompensation	1	bosis.	2
Cardiovascular disease, hyperten-	1	Myocarditis, interstitial, acute.	1
sive.	1	Myositis, acute	16
Carrier state, hemolytic strepto-	5	Neuritis, acute	3
coccus.	5	Observation.	9
Cellulitis.	2	Orchitis, due to mumps.	2
Cholecystitis, acute	1	Osteomyelitis, acute	1
Colitis, acute	1	Otitis media, non-suppurative.	12
Conjunctivitis, acute	1	Otitis media, suppurative.	8
Convulsive disorder due to un-	3	Periarticular fibrositis of hip.	1
known cause	3	Pityriasis rosea	1
Cystitis, acute	2	Purpura, non-thrombocytopenic.	1
Dead on arrival.	1	Pyelitis, acute	4
Defect of tracheal rings.	2	Pyelonephritis, acute	7
Dermatitis, due to undetermined	4	Pylorus hypertrophic stenosis,	2
cause.	4	congenital, of	2
Dermatitis, gluteale	1	Respiratory infection, acute, dif-	11
Dermatitis, medicamentosa	2	fuse.	11
Dermatitis, venenata	3	Rheumatic fever	8
Dermatophytosis.	1	Rheumatic heart disease.	1
Diabetes mellitus	2	Septicemia, acute	1
Diarrhoea, due to infection.	1	Septicemia, due to S. Sonnei.	1
Diarrhoea, due to undetermined	20	Septicemia, unassociated with	1
cause.	20	bacteremia.	1
Disease none	2	Sinusitis, acute	10
Dysentery, bacillary	32	Stomatitis.	2
Eczema.	6	Symphaticogonioma with meta-	2
Edema, angioneurotic	1	stases.	3
Empyema, general	1	Synovitis, acute	1
Encephalomyelitis, acute	1	Tetanus.	1
Encephalopathy, due to remote	1	Thrombophlebitis, acute	2
trauma.	1	Tinea capitis	1
Endocarditis, subacute	2	Tracheitis, acute	1
Enteritis, acute	2	Trauma of knee.	1
Erythema nodosum	1	Tuberculosis, pulmonary, sus-	4
Exanthema subitum	10	perted.	4
Feeding, improper, in child un-	5	Undiagnosed disease of the ner-	1
der 2 years.	5	vous system	1
Fever of unknown origin.	11	Urethritis, acute	1
Fibrocytic disease of pancreas.	1	Urticaria.	1
Fibrosis, pulmonary, due to un-	1	Virus infection, due to unknown	43
known cause	1	etiology.	43
Fracture.	2	Vomiting, cyclic	1
Furuncle of cheek.	1	Vulvovaginitis, acute	1

Table C 2. Operations: October 1, 1952-September 30, 1953

BRAIN:	Craniotomy.	5
	Subdural tap	1
EYE:	Advancement.	1
	Exc. of cataract.	2
	Iridotaxis.	1
	Recession.	1
	Resection.	1
NOSE		
MOUTH, PHARYNX		
LARYNX:	Alveolectomy.	1
	Bronchoscopy.	4
	Submucous resection	1
	Teeth extractions	6
	Thyroidectomy.	6
	Tonsillectomy.	1
	Tracheotomy.	2
CHEST:	Exc. of breast tumor.	17
	Inc. and drn. of breast abscess.	1
	Mastectomy, radical	7
ABDOMINAL:	Abdomino-perineal resection	1
	Cholecystectomy.	29
	Cholecystotomy.	3
	Choledochogastrostomy	1
	Choledochotomy.	2
	Exploratory laparotomy	5
	Freeing of adhesions.	9
	Omental graft	1
	Paracentesis.	2
	Pyloromyotomy.	1
	Resection of omentum.	1
	Resuture of abdominal wall.	1
GASTROINTESTINAL:	Appendectomy.	48
	Colostomy.	2
	Gastrectomy.	3
	Gastroenterostomy.	2
	Ileocolostomy.	2
	Resection of colon.	1
	Revision of colostomy.	4
HERNIOTOMY:	Epigastric.	1
	Femoral.	3
	Inguinal.	70
	Umbilical.	6
	Ventral.	7
GENITOURINARY:	Circumcision.	10
	Cystoscopy, all types.	9
	Cystotomy.	1
	Exc. of varicocele.	1
	Hydrocelectomy.	4
	Ligation of vas deferens.	3
	Nephrectomy.	3
	Nephropexy.	1
	Orchidectomy.	3
	Orchioplasty.	1
	Orchiopexy.	1
	Prostatectomy.	4
	Urethroplasty.	1
	Urethroscopy.	1
	Urethrotomy.	1
	Vasectomy.	2

GYNECOLOGICAL:

Amputation of cervix.....	1
Cauterization of cervix.....	1
Closure of vesico-vaginal fistula.....	1
Dilatation and Curettage.....	9
Exc. of Bartholin's cyst.....	2
Exc. of cervical polyp.....	1
Exc. of cyst of vagina.....	2
Hysterectomy, supra-cervical.....	6
Hysteropexy.....	4
Myomectomy.....	1
Oophorectomy.....	6
Panhysterectomy.....	27
Perineoplasty.....	1
Perineorrhaphy.....	4
Repair of cystocele and rectocele.....	11
Repair of rectocele.....	1
Salpingectomy.....	4
Salpingo-oophorectomy.....	27
Trachelorrhaphy.....	2

RECTAL:

Dilation of anal sphincter.....	1
Exc. of anal fissure.....	1
Exc. of anal fistula.....	8
Exc. of rectal polyp.....	3
Hemorrhoidectomy.....	37
Inc. and drn. ischio-rectal abscess.....	5
Inc. and drn. peri-rectal abscess.....	1
Proctoplasty.....	3
Sphincterotomy.....	1

ORTHOPEDIC:

Coccygectomy.....	1
Neurectomy.....	1
Sympathectomy.....	1

MISCELLANEOUS:

Amputations: Thigh.....	1
Biopsy.....	3
Exc. of abdominal scar.....	1
Exc. of aneurysm.....	1
Exc. of benign growths.....	77
Exc. of bursa.....	1
Exc. of ganglion.....	5
Exc. of glands.....	3
Exc. of lymphnode.....	2
Exc. of malignant growths.....	8
Exc. of pelvic viscera.....	1
Exc. of pilonidal cyst or sinus.....	11
Exc. of toenail.....	3
Exc. of ulcer of leg.....	2
Fasciotomy.....	6
Inc. and drn. of abscess.....	7
Inc. and drn. of bursa.....	1
Ligation of veins.....	26
Phlebectomy.....	8

Table C 4. Diphtheria: Number of cases uncomplicated by other diseases and fatality by ages, March 1, 1910-September 30, 1953:

Ages	Living Cases			Dead Cases			Fatality		
	Oct. 1, 1952	Oct. 1, 1951	Mar. 1, 1910	Oct. 1, 1952	Oct. 1, 1951	Mar. 1, 1910	Oct. 1, 1952	Oct. 1, 1951	Mar. 1, 1910
	Sep. 30, 1953	Sep. 30, 1952	Sep. 30, 1953	Sep. 30, 1953	Sep. 30, 1952	Sep. 30, 1953	Sep. 30, 1953	Sep. 30, 1952	Sep. 30, 1953
	1953	1952	1953	1953	1952	1953	1953	1952	1953
Under 1.....	99	.....	.....	45	.....	.....	45.5
1.....	233	.....	.....	90	.....	.....	38.6
2.....	370	.....	.....	90	.....	.....	24.3
3.....	449	.....	.....	70	.....	.....	15.6
4.....	459	.....	.....	80	.....	.....	17.4
5.....	403	.....	.....	66	.....	.....	16.4
6.....	422	.....	.....	50	.....	.....	14.2
7.....	368	.....	.....	37	.....	.....	10.1
8.....	318	.....	.....	30	.....	.....	9.4
9.....	200	.....	.....	18	.....	.....	9.0
10-14.....	644	.....	.....	45	.....	.....	7.0
15-19.....	226	.....	.....	5	.....	.....	2.2
20-29.....	453	.....	.....	6	.....	.....	1.3
30-39.....	1	154	.....	.....	8	.....	.....	5.2
40-49.....	38	.....	.....	5	.....	.....	13.2
50-59.....	19	.....	.....	2	.....	.....	10.5
Over 60.....	5	.....	.....	.....	.....	.....	.....
Total.....	1	4,860	.....	.....	657	.....	.....	13.5

Table C 10. Scarlet Fever: Number of cases uncomplicated by other diseases and fatality by ages, March 1, 1910-September 30, 1953:

Ages	Living Cases			Dead Cases			Fatality		
	Oct. 1, 1952	Oct. 1, 1951	Mar. 1, 1910	Oct. 1, 1952	Oct. 1, 1951	Mar. 1, 1910	Oct. 1, 1952	Oct. 1, 1951	Mar. 1, 1910
	Sep. 30, 1953	Sep. 30, 1952	Sep. 30, 1953	Sep. 30, 1953	Sep. 30, 1952	Sep. 30, 1953	Sep. 30, 1953	Sep. 30, 1952	Sep. 30, 1953
	1953	1952	1953	1953	1952	1953	1953	1952	1953
Under 1.....	1	5	57	.....	.....	6	.....	.....	10.5
1.....	6	3	184	.....	.....	1	.....	.....	5.4
2.....	27	17	442	.....	.....	18	.....	.....	4.1
3.....	48	20	688	.....	.....	14	.....	.....	2.0
4.....	63	28	743	.....	.....	30	.....	.....	4.0
5.....	61	31	744	.....	.....	20	.....	.....	2.7
6.....	59	29	899	.....	.....	9	.....	.....	1.0
7.....	40	13	804	.....	.....	13	.....	.....	1.6
8.....	24	11	740	.....	.....	10	.....	.....	1.4
9.....	23	5	544	.....	.....	9	.....	.....	1.7
10-14.....	56	9	1,484	.....	.....	12	.....	.....	0.8
15-19.....	6	3	563	.....	.....	9	.....	.....	1.6
20-29.....	1	2	819	.....	.....	15	.....	.....	1.8
30-39.....	.....	1	276	.....	.....	7	.....	.....	2.5
40-49.....	.....	.....	71	.....	.....	4	.....	.....	5.6
50-59.....	.....	.....	14	.....	.....	.....	.....	.....	.....
Over 60.....	.....	.....	2	.....	.....	1	.....	.....	50.0
Total.....	415	177	9,074	.....	.....	188	.....	.....	2.1

Table C 12. Scarlet Fever: Average length of stay in days of cases uncomplicated by any other disease, March 1, 1910-September 30, 1953:

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.....	4 "	36.6	13.0	35.4
1915.....	4 "	36.4	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 weeks	30.2	21.7	30.0
1938.....	4 weeks	27.8	....	27.8
1939.....	4 weeks	29.6	....	29.6
1940.....	4 weeks	31.1	....	31.1
1941.....	4 weeks	25.3	....	25.3
1942.....	4 weeks	25.9	....	25.9
1943.....	4 weeks	27.8	....	27.8
1944.....	4 weeks	30.6	....	30.6
1945.....	4 weeks	25.3	....	25.3
1946.....	4 weeks	21.7	....	21.7
1947.....	3 weeks	25.3	....	25.3
1948.....	3 weeks	26.7	....	26.7
1949.....	3 weeks	19.7	....	19.7
1950.....	2-3 weeks	21.0	....	21.0
1951.....	2-3 weeks	18.2	....	18.2
1952.....	2-3 weeks	18.4	....	18.4
1953.....	2-3 weeks	17.5	....	17.5

Table C 15. Scarlet Fever: Duration of stay in hospital of patients having Scarlet Fever alone with relation to infecting and return cases, March 1, 1910-September 30, 1953:

Year.	Average stay of living cases.	Average stay of all infecting cases.	Infecting Cases.		Return Cases.	
			Number.	Per Cent.	Number.	Per Cent.
1910.....	40.4	40.0	3	2.3	3	2.3
1911.....	49.6	58.6	5	2.4	8	3.8
1912.....	45.9	36.3	14	5.4	15	5.8
1913.....	41.0	42.3	13	5.5	15	6.4
1914.....	36.6	30.5	10	3.9	13	5.1
1915.....	36.4	37.4	33	8.7	42	11.1
1916.....	32.2	35.6	19	5.4	34	9.0
1917.....	40.5	32.2	4	2.1	7	3.3
1918.....	36.0	33.0	11	6.7	17	8.0
1919.....	40.9	48.5	7	4.1	13	7.2
1920.....	38.4	42.2	10	4.1	14	5.0
1921.....	37.9	39.3	11	5.9	16	8.4
1922.....	37.4	36.0	1	.1	1	.1
1923.....	32.2	32.8	10	5.9	7	4.1
1924.....	31.2	30.3	14	2.3	15	2.5
1925.....	30.4	27.0	1	0.7	1	0.7
1926.....	29.9	28.3	3	2.9	4	3.9
1927.....	32.0	35.1	14	5.8	22	9.2
1928.....	30.1	36.0	11	3.7	20	6.7
1929.....	29.4	27.5	6	2.7	8	3.6
1930.....	30.7	32.1	11	5.1	17	7.9
1931.....	30.4	29.8	22	5.2	30	7.1
1932.....	30.9	31.2	15	3.4	20	4.6
1933.....	33.5	32.2	12	4.1	25	8.8
1934.....	34.3	28.7	3	1.7	7	4.0
1935 (9 months).....	33.2	26.3	8	6.7	8	6.7
1936.....	30.2	26.0	8	2.8	10	3.5
1937.....	30.2	26.9	16	2.9	26	4.8
1938.....	27.8	26.5	5	2.4	8	3.5
1939.....	29.6	30.0	2	1.4	3	2.1
1940.....	31.1	0	0	0	0	0
1941.....	25.3	22.8	5	8.2	6	9.9
1942.....	25.9	30.2	5	5.5	9	9.9
1943.....	27.8	30.5	2	1.5	2	1.5
1944.....	30.6	43.0	2	1.7	6	5.2
1945.....	32.3	30.5	2	.9	4	2.6
1946.....	21.7	0	0	0	0	0
1947.....	25.3	0	0	0	0	0
1948.....	26.7	0	0	0	0	0
1949.....	19.7	0	0	0	0	0
1950.....	21.0	21.0	1	0.7	1	0.7
1951.....	18.2	0	0	0	0	0
1952.....	18.4	0	0	0	0	0
1953.....	17.5	21.0	1	0.2	1	0.2

Table C 16. Measles: Number of cases uncomplicated by other diseases and fatality by ages, March 1, 1910-September 30, 1953:

Ages	Living Cases			Dead Cases			Fatality		
	Oct.1, 1952	Oct.1, 1951	Mar.1, 1910	Oct.1, 1952	Oct.1, 1951	Mar.1, 1910	Oct.1, 1952	Oct.1, 1951	Mar.1, 1910
	Sep.30, 1953	Sep.30, 1952	Sep.30, 1953	Sep.30, 1953	Sep.30, 1952	Sep.30, 1953	Sep.30, 1953	Sep.30, 1952	Sep.30, 1953
	1953	1952	1953	1953	1952	1953	1953	1952	1953
Under 1.....	.....	4	162	.....	.....	36	.....	.....	22.8
1.....	1	3	295	.....	.....	59	.....	.....	20.0
2.....	.....	5	348	.....	.....	31	.....	.....	8.9
3.....	1	5	317	.....	.....	14	.....	.....	4.4
4.....	.....	9	321	.....	.....	9	.....	.....	2.8
5.....	1	16	304	.....	.....	2	.....	.....	0.7
6.....	.....	10	311	.....	.....	5	.....	.....	1.6
7.....	.....	11	222	.....	.....	3	.....	.....	1.4
8.....	.....	5	169	.....	.....	.....	.....	.....	.....
9.....	.....	2	87	.....	.....	.....	.....	.....	.....
10-14.....	.....	2	173	.....	.....	4	.....	.....	2.3
15-19.....	.....	4	142	.....	.....	.....	.....	.....	.....
20-29.....	.....	1	236	.....	.....	1	.....	.....	0.4
30-39.....	.....	.....	42	.....	.....	1	.....	.....	2.4
40-49.....	.....	.....	9	.....	.....	3	.....	.....	33.3
50-59.....	.....	1	7	.....	.....	.....	.....	.....	.....
Over 60.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total.....	3	78	3,145	.....	.....	168	.....	.....	5.3

Table C 17. Whooping Cough: Number of cases and fatality by ages, March 1, 1910-September 30, 1953:

Ages	Living Cases			Dead Cases			Fatality		
	Oct.1, 1952	Oct.1, 1951	Mar.1, 1910	Oct.1, 1952	Oct.1, 1951	Mar.1, 1910	Oct.1, 1952	Oct.1, 1951	Mar.1, 1910
	Sep.30, 1953	Sep.30, 1952	Sep.30, 1953	Sep.30, 1953	Sep.30, 1952	Sep.30, 1953	Sep.30, 1953	Sep.30, 1952	Sep.30, 1953
	1953	1952	1953	1953	1952	1953	1953	1952	1953
Under 1.....	17	9	718	.....	.....	88	.....	.....	12.3
1.....	6	1	442	.....	.....	45	.....	.....	10.2
2.....	0	.....	330	.....	.....	21	.....	.....	6.4
3.....	1	1	243	.....	.....	7	.....	.....	2.9
4.....	0	3	190	.....	.....	8	.....	.....	4.0
5.....	2	.....	139	.....	.....	2	.....	.....	1.4
6.....	0	.....	90	.....	.....	2	.....	.....	2.2
7.....	1	.....	82	.....	.....	1	.....	.....	1.2
8.....	0	.....	40	.....	.....	.....	.....	.....	.....
9.....	1	.....	23	.....	.....	1	.....	.....	4.3
10-14.....	.....	.....	17	.....	.....	.....	.....	.....	.....
15-19.....	.....	.....	4	.....	.....	1	.....	.....	25.0
20-29.....	.....	.....	8	.....	.....	.....	.....	.....	.....
30-39.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
40-49.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
50-59.....	.....	.....	2	.....	.....	.....	.....	.....	.....
Over 60.....	.....	.....	1	.....	.....	.....	.....	.....	.....
Total.....	28	14	2,329	.....	.....	176	.....	.....	7.6

Secondary Diseases Among Patients: Oct. 1, 1952-Sept. 30, 1953

By the term "secondary diseases" is meant diseases developing in the hospital after admission or soon after the discharge of the patient with 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 develop 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.

The old method of calling each floor a "ward" has been discarded and new designations are West I & II (formerly Wards A & B), Richardson I & II (C & D), and East I & II (E & F). There are side rooms and small wards in each of these buildings. 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, 1,775 patients were cared for in the wards for acute communicable diseases. Patients cared for in wards for neuro-psychiatry and tuberculosis are not included in estimating cross-infection rates. It includes patients discharged from the infectious disease wards during the year and the number of patients in these wards at the end of the year.

There were seven cross-infections, as follows:

GROUP I

Chickenpox

A two-year-old girl, #85957, was admitted to West II on October 22, 1952 with tuberculosis of the lungs. While in the same unit with ten other children being treated for various stages of tuberculosis and tuberculous meningitis, she developed a very mild case of chickenpox on January 25, 1953. As there had been no case of chickenpox on this ward, the source was unknown and the case not diagnosed on the first day of the rash.

Consequently, on February 10, 1953, four more cases of chickenpox developed (#85477, #85955, #86290, #85956)

from this source. These cases were promptly transferred to East II.

On February 23, 1953, another case, #85364, developed from the same source.

One more cross-infection, also from the same source, became apparent when on January 13, chickenpox developed in a five-year-old girl, #86078, who had been admitted November 6, 1952 with poliomyelitis and transferred to West II on January 13, 1953.

GROUP II

Chickenpox

A boy, #86482, three years old was admitted on December 25, 1952 to Richardson II with a diagnosis of scarlet fever. On the eleventh day of his hospital stay, January 4, he developed chickenpox, obviously not the result of cross-infection.

Mumps

On December 7, 1952, a six-year-old girl #86331 was admitted to East II with scarlet fever. Mumps developed on December 20, the fourteenth hospital day. It is clearly apparent that this is not a cross-infection since the incubation period for mumps is three weeks and furthermore, there had been no cases of mumps on East II.

Table C 19. Infectious Diseases Among Employees, October 1, 1952-September 30, 1953:

EMPLOYEES.	Scarlet Fever.		Measles.		Vincent's Gingivitis.		Mumps.		Rubella.		Epidemic Cerebro-spinal Meningitis.		Chicken Pox.		Whooping Cough.		Diphtheria.		Total Number.	Per Cent.	Warded for Other Diseases.		Infectious Diseases Contracted Mar. 1, 1910-Sept. 30, 1913.
	Number.	Per Cent.	Number.	Per Cent.	Number.	Per Cent.	Number.	Per Cent.	Number.	Per Cent.	Number.	Per Cent.	Number.	Per Cent.	Number.	Per Cent.	Number.	Per Cent.					
Student Nurses . . .	416	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	.5	15	..	1,270
Graduate Nurses . .	39	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	..	81
Attendants & Aides . .	24	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	..	0
Physicians,	9	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	..	46
Utility Workers and Dietary Staff	70	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	107
Office Employees . .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Psychologist, Psycho- metrist, X-ray Technicians and Social Workers . . .	39	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	31
Laundry Workers . .	25	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	7	..	0
Housekeeping Staff .	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	0
Laboratory Staff . .	11	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	..	21
Engineer's Staff . .	19	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	..	11
Ambulance Staff . .	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	..	12
Druggists,	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	0	..	4
Total	668	..	..	..	..	..	..	..	..	..	..	..	..	2	0.3	..	..	..	2	0.3	28	..	1,703

Report of Business Administration

Revenue Receipts

For the year ending September 30, 1953, receipts from all sources amounted to \$484,336.37 (Exhibit 1), showing an increase over the previous year of \$92,956.17.

During this period, we experienced a scarlet fever and a poliomyelitis epidemic which increased the patient days 12,330 over the 1951-1952 census. Prompt payment of bills by the local chapters of the Poliomyelitis Foundation, Blue Cross and the various medical insurance groups was also a big factor in our increased receipts over the previous year.

Operating Cost

The cost of operation amounted to \$844,673.16 (Exhibit 2), and included a deduction of \$25,423.47 from personnel for meals and lodging. This amount was distributed to the various cost centers throughout the hospital.

Income and Expense

Accumulated gross income for the period amounted to \$511,873.40 (Exhibit 3). Deductions from operating expenditure of \$844,673.16 (Exhibit 2) left a deficit of \$332,799.76. The State of Rhode Island through its grant of \$200,000.00 reduced this deficit to \$132,799.76. This amount was a decrease of \$37,520.07 over the previous year.

The following is a brief summary of our increased expenditures during the fiscal year: 1. The purchase of new equipment and replacements to meet the patient needs and medical advances. 2. Substantial increase in wages on August 10, 1953.

Welfare Cases

General Public Assistance cases for free service amounted to \$180,311.86. This accounted for 54% of our deficit.

Free Service to Employees and Trainees

Services rendered to employees and trainees amounted to \$7,756.75.

Outside Agencies

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

1. City Health Pulmonary Clinic	\$16,296.21
2. City Health Inspection of Milk	2,075.55
3. City Health Laboratory Examinations	1,609.77
4. State Cardiac Clinic	1,415.57

The administrative division graciously thanks Dr. Connor, Superintendent, for his helpful interest and support.

Respectfully submitted,

AMBROSE J. TONER,

Business Manager

Report of the Neuro-Psychiatric Department

In reporting the activities of this department for the past twelve months, we shall endeavor to describe here some of the scope of the work as well as its role in the community.

While in many hospitals all over the country the discussion is still alive as to whether a Neuro-Psychiatric Department shall be made a part of a general hospital, this department has been functioning as an integral part of our hospital since 1930. Considering its capacity of sixty beds and its annual admission rate (1953) of 842 patients, its important role in the hospital network of this city and state is obvious.

Most admissions consist of acutely ill psychiatric cases referred by private physicians for observation, study, diagnosis, and treatment. Many were transferred from general hospitals (117 in 1953) because of sudden outbreak of mental illness, especially cases following delivery or post-operatively. The City Police have referred patients (92 in 1953) who were in need of study to determine the degree and the nature of their illness. Hospitalization in such cases is required for the patients' own safety as well as that of the community.

There was also a growing number of voluntary applications (38 patients in 1953) which perhaps signify the growing public consciousness of need for treatment of abnormal mental states.

The team approach, namely that of the psychiatrist, psychologist, and social worker is being used in the diagnosis, treatment and disposition of patients. In our goal for the best possible psychiatric care of the mentally ill, we are constantly mindful

of strengthening the work of this team by active participation of the nurse and psychiatric aide. The teamwork of the doctor, nurse, and attendant is especially valuable in cases where mentally sick patients are also suffering of a co-existent physical illness. On such occasions the services of consultants of various specialties comprising the visiting staff are being used to advantage.

To make the hospital wards more attractive and neat, the wards were freshly painted during this year, and other changes toward modernization were made. As a result the atmosphere of the wards is tidy, attractive, and pleasant.

Contemporary, well-recognized methods of psychiatric treatment were utilized. We are pleased to report that in reviewing the discharges during the last five years, a reversal of the trend was noticed: for the first time there were more patients discharged with conditions improved or recovered than those with conditions unimproved. It is felt that among contributing causes of such a gain was the improvement in the morale of the entire personnel taking a more active part in the care and treatment of the patients.

<i>Condition on Discharge</i>	<i>Unimproved</i>	<i>Improved</i>
1949	527	313
1950	487	285
1951	529	282
1952	484	316
1953	396	436

Educational activities in the form of formal and informal talks and conferences were kept up. Lectures on psychiatry and psychology were given. Nurses and attendants have participated in discussions pertaining to treatment of patients. We hope that in the future we shall be able to give more attention to lectures and conferences for attendants.

A Journal Club was organized. Our visiting staff took an active part in these meetings which were open to staff members of other institutions.

Bi-weekly grand rounds and conferences with the members of the visiting staff were held. On such occasions the condition, treatment and disposition of each patient in the hospital was discussed.

There was one change in personnel of our resident staff. Dr. Mario Nicotra successfully completed his year of residency in psychiatry. He is at present a senior physician at the Exeter School for Feeble-Minded at Lafayette, Rhode Island.

Dr. Taras Hanuszewskyj, after successfully completing his year of residency, has chosen to remain with us for another year. We are pleased with his decision and hope that his second year will be a fruitful one.

Dr. Juanito Crisologo, a graduate of the College of Medicine and Surgery of the University of Santo Tomas, Manila, Philippines, joined our resident staff on July 1, 1953.

SOCIAL SERVICE DEPARTMENT

As in the past years, Social Service continued to take responsibility for obtaining social histories, gathering collateral data, and preparing summaries and abstracts for both the House and the Out-Patient Department. With the continued high rate of admissions making it impossible to obtain the desired full histories on all patients, the brief form history instituted last year has proved most valuable.

As part of the psychiatric hospital team, members of Social Service Department worked closely with the resident staff, relatives, and community agencies. The data obtained was often extremely important in our plans for treatment as well as for our plans for new adjustments of the patient in the community.

Social Service has actively participated in bi-weekly staff rounds and conferences, as well as in various educational activities.

There was one change in personnel. Mrs. Lillian Klitzner resigned on February 1, 1953, after six years of loyal, faithful and efficient service. On May 20, 1953, Miss Ann Maguire, a graduate of Emmanuel College and formerly a social worker in the Rhode Island Department of Social Welfare, Division of Public Assistance, joined the staff.

The following is a statistical report for the year (House and Clinic) :

Full histories	73
Brief form histories.....	166
Interval histories	30
Abstracts	357
Summaries	171
Letters	78

Sixty-two social service calls were made. There were no new cases open to social service. None were reopened, and none closed. Fifty-eight new patients were admitted to the Neuro-Psychiatric Out-Patient Clinic.

PSYCHOLOGY DEPARTMENT

In March 1953 Mr. Charles A. Devine was appointed clinical psychologist. With the acquisition of a permanent psychologist, more varied services and a wider variety of psychological tests were administered including the ever-increasingly important projective techniques.

Rather than restricting interest to the patient's intellectual level of functioning we now became more concerned with the way an individual personality organizes experience in order to disclose or at least gain insight into the individual's private world of meanings, significances, patterns and feelings. Through psychological testing we were able to obtain a sensitive, dynamic understanding of the patient and his problems in a shorter period of time.

Interpretation of findings was oriented toward the problem of diagnosis, prognosis, dynamics and treatment possibilities.

	Years of age.....	18.....	17.....	16.....									
	Number admitted	6.....	4.....	7.....									
	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Total
Admissions	73	68	73	74	69	67	60	74	72	67	69	76	842
Discharges	77	70	69	75	67	80	56	64	81	64	70	70	843
First Admissions													637
Second Admissions													123
Third Admissions													49
Fourth Admissions													17
Fifth Admissions													7
Sixth Admissions													5
Seventh Admissions													4
Total.....													842

CONDITION

Unimproved.....	396	Recovered.....	91
Improved.....	345	Dead.....	11
		Total.....	843

DISPOSITION

Home.....	408	Boston.....	1
Home, Against Advice.....	66	Montrose, New York.....	1
Own Custody.....	24	Rhode Island Hospital.....	6
A.W.O.L.....	1	Saint Joseph Hospital.....	1
State Hospital (D.S.W.).....	287	General Hospital.....	1
State Hospital (6th D.C.).....	1	Murphy General Hospital.....	1
Butler Hospital.....	9	Other Wards of Charles V.....	1
Fuller Sanatorium.....	2	Chapin Hospital.....	1
State Infirmary.....	1	Lying-In Hospital.....	1
Quonset Infirmary.....	2	Convalescent Home.....	1
Exeter School.....	1	Juvenile Court.....	2
V. A. Hospitals:		St. Elizabeth's Home, Boston...	1
Bedford.....	5	Dead.....	11
Davis Park.....	8		
		Total.....	843

DISCHARGE DIAGNOSES

Schizophrenic Reaction.....	325
Manic Depressive Reaction, manic type.....	16
" " " depressive type.....	16
" " " other.....	1
Psychotic Depressive Reaction.....	9
Paranoid State.....	24
Involuntary Psychotic Reaction.....	51
Chronic Brain Syndrome.....	
associated with central nervous system syphilis.....	7
" " brain trauma.....	1
" " cerebral arteriosclerosis.....	19
" " circulatory disturbance other than cerebral arteri-	
osclerosis.....	3
" " convulsive disorder.....	15
" " senile brain disease.....	12
" " other disturbances of metabolism, growth or nutri-	
tion.....	2
" " intracranial neoplasm.....	1
" " diseases of unknown or uncertain cause.....	1
Chronic Brain Syndrome.....	
drug or poison intoxication.....	1
alcohol intoxication.....	4
brain trauma, gross force.....	1
of unknown cause.....	9

Acute Brain Syndrome.....	1
associated with intracranial infection	1
" " circulatory disturbance	2
" " convulsive disorder	2
Acute Brain Syndrome.....	7
drug or poison intoxication.....	107
alcohol intoxication	1
with disease of unknown or uncertain cause.....	3
with metabolic disturbance.....	6
of unknown cause.....	
Psychoneurotic Disorders:	
Anxiety reaction	32
Dissociative reaction	15
Conversion reaction	8
Phobic reaction	2
Obsessive compulsive reaction.....	4
Depressive reaction	88
Psychoneurotic reaction, other.....	1
Personality Disorders:	
Personality pattern disturbance	
Inadequate personality	1
Schizoid personality	2
Personality trait disturbance	
Emotionally unstable personality.....	10
Passive-aggressive personality	2
Sociopathic personality disturbance	
Sexual deviation	1
Addiction	
Alcoholism.....	9
Drug addiction	1
Transient Situational Personality Disorders:	
Transient situational personality disturbance.....	1
Adult situational reaction.....	2
Adjustment reaction of childhood	
Neurotic traits	1
Adjustment reaction of late life.....	1
Psychophysiological gastrointestinal reaction.....	1
Psychophysiological nervous system reaction.....	2
Question of dissecting aneurysm of aorta due to unknown cause.....	1
Mental deficiency, idiopathic, mild	2
Mental deficiency, moderate.....	1
Mental deficiency, idiopathic, severe.....	1
Starvation, inanition	1
Diagnosis deferred	4
Observation, psychiatric	2
Total.....	843

CAUSES OF DEATH

Infarction of myocardium due to unknown cause.....	1
Bronchopneumonia.....	3
Fatty liver due to alcohol poisoning.....	2
Rheumatic heart disease, active.....	1
Nephritis, interstitial acute (acute exudative nephritis).....	1

Intracranial neoplasm, glioblastoma multiforme (spongioblastoma polare).....	1
Strangulation.....	1
Heat prostration.....	1
Total.....	11

In concluding this report I wish to thank the visiting staff for their continued interest and help, and the personnel of this department for their cooperation, enthusiasm and loyalty.

I also would like to express my sincere appreciation to Dr. Hilary J. Connor for his continued interest and support of our endeavors.

Respectfully submitted,

SIDNEY S. GOLDSTEIN, M. D.,

Director

Report of the Superintendent of Nurses

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

SUPERINTENDENT OF NURSES

Miss Carmela Salvatore, R. N.

ASSISTANT SUPERINTENDENTS OF NURSES

COMMUNICABLE DISEASE DIVISION
Miss Elizabeth G. Regan, R. N.

PSYCHIATRIC DIVISION
Miss Susan Tanzi, R. N.

INSTRUCTOR (COMMUNICABLE DISEASES)

Miss Roberta Malley, R. N., B. S.*

SUPERVISORS

Miss Anna Zammareli, R. N., Night Supervisor**
Miss Barbara Radican, R. N., Night Supervisor***
Mrs. Marion Brown, R. N., Operating Room Supervisor
Mrs. Barbara Harrington, R. N., Ward Supervisor
Miss Dorothy Bienkowski, R. N., Tuberculosis Supervisor†
Miss Barbara Ferguson, R. N., Tuberculosis Supervisor††
Mrs. Grace Cannon, R. N., Out-Patient Supervisor

GRADUATE NURSE PERSONNEL

COMMUNICABLE DISEASE DIVISION

Miss Barbara Moriarty, B.S.	Miss Kathleen Potter
Miss Vilma Coia	Mrs. Mary Reilly
Miss Josephine Gemma	Miss Theresa Zuchowski
Miss Muriel Guillette	Miss Patricia O'Mara
Miss Barbara Waugh	

SURGICAL DEPARTMENT

Mrs. Anna Mann	Miss Ida McKinley
Mrs. Sally Hopkins	Mrs. Vivian Wells
Mrs. Ethel DiGrado	Miss Helene Schwartz
Miss Pauline Bergeron	

*Resigned August 1953.

**Resigned August 1953.

***Appointed August 1953.

†Resigned July 1953.

††Appointed September 1953.

PSYCHIATRIC DIVISION

Mrs. Josephine Aldrich	Mrs. Margaret Rostron
Mrs. Mayre Massenzio	Miss Irene Sowa
Miss Lorraine Estes	Miss Helen Ueding
Mrs. Anne Hall	Mrs. Barbara Thooft
Miss Eva Munro	

OUT-PATIENT DEPARTMENT

Mrs. Angelita Colacci (Part Time)

COMMUNICABLE DISEASE DIVISION

<i>Appointments</i>	<i>Resignations</i>
Miss Vilma Coia	Miss Roberta Malley
Miss Catherine DeCubelis	Miss Anna Zammarelli
Miss Lucille Bugbee	Miss Dorothy Bienkowski
Miss Barbara Waugh	Miss Theresa Kane
Miss Patricia O'Mara	Miss Catherine DeCubelis
	Miss Lucille Bugbee

PSYCHIATRIC DIVISION

Mrs. Phyllis Wright	Mrs. Ella Henaire
Mrs. Anna Hall	Mrs. Brettia Davitt
Mrs. Josephine Aldrich	Mrs. Esther Caduto
Miss Helen Ueding	Mrs. Phyllis Wright
Miss Eva Munro	Mrs. Catherine Manz
	Mrs. Josephine Aldrich

SURGICAL DIVISION

Mrs. Dorothy Costanzo	Miss Theresa DeGuillo
Mrs. Margaret O'Keefe	Mrs. Antonette Calabro
Miss Ida McKinley	Mrs. Meridith Raymond
Miss Barbara Smith	Mrs. Ruth Leo
Miss Pauline Bergeron	Mrs. Dorothy Costanzo
	Mrs. Margaret O'Keefe
	Miss Joan Crowley
	Miss Barbara Smith

STUDENT NURSE PERSONNEL AND GEOGRAPHICAL DISTRIBUTION

In the School of Nursing October 1, 1952.....	95
Henry Heywood Hospital, Gardner, Massachusetts.....	9
*St. Luke's Hospital, Pittsfield, Massachusetts.....	6
New England Baptist Hospital, Boston, Massachusetts.....	6
Sacred Heart Hospital, Manchester, New Hampshire.....	14
Framingham Union Hospital, Framingham, Massachusetts.....	18
Sturdy Memorial Hospital, Attleboro, Massachusetts.....	7
Cooley Dickinson Hospital, Northampton, Massachusetts.....	4
St. Joseph's Hospital, Providence, Rhode Island.....	12
Elliot Hospital, Manchester, New Hampshire.....	25

*Affiliation discontinued—February 1953.

Union Hospital, Fall River, Massachusetts.....	24
**Bishop de Goesbriand Hospital, Burlington, Vermont.....	4
Central Maine General Hospital, Lewiston, Maine.....	42
***Maine Medical Center, Portland, Maine.....	49
Salve Regina College, Newport, Rhode Island.....	3
St. Luke's Hospital, New Bedford, Massachusetts.....	35
St. Vincent's Hospital, Worcester, Massachusetts.....	21
St. Anne's Hospital, Fall River, Massachusetts.....	33
Mercy Hospital, Springfield, Massachusetts.....	28
St. Mary's Hospital, Lewiston, Maine.....	20
Laconia Hospital, Laconia, New Hampshire.....	9
Boston College, Boston, Massachusetts.....	14
Milford Hospital, Milford, Massachusetts.....	8
Pawtucket Memorial Hospital, Pawtucket, Rhode Island.....	20
****Burbank Hospital, Fitchburg, Massachusetts.....	5
<hr/>	
Total.....	416
Diplomas Awarded	346
In the School of Nursing October 1, 1953.....	66
<hr/>	
Total number of students since 1910.....	11,023

As the fiscal year draws to an end, we find ourselves in the midst of a polio emergency. Although we have been able to maintain a fairly stable staff and a full quota of nurses, we have had to ask for help during this acute period. We are extremely grateful to the Providence Chapter of the American Red Cross and the Rhode Island Infantile Paralysis Foundation for their efforts in recruiting nurses and physical therapists. I would like to take this opportunity to thank the entire graduate staff, the student body, the Rhode Island Department of Health, the City Health Department, the Department of Public Schools, and the many volunteers who have given so many nursing hours during this emergency.

Mrs. Carrie Howe, an attendant in our psychiatric division, received an award from the Rhode Island Society for Mental Hygiene for being one of the most "outstanding psychiatric aides."

A new series of lectures has been added to the neuro-psychiatric educational program. These conferences are conducted by

**Affiliation discontinued—December 1952.
 ***Formerly Maine General Hospital.
 ****Affiliation started—September 1953.

the members of the house staff, the visiting staff, and invited guests and have enlarged the scope of the program so that it now covers all phases of neuro-psychiatry.

All oxygen and suction equipment has been moved to a centrally located area. New equipment has been purchased and the old repaired and replaced as needed.

Through re-evaluation of the nursing service and educational programs, adjustments have been made to meet the needs of the patient and the student.

In closing, may I take this opportunity to thank my assistants and the graduate staff for their efforts throughout the year. I would also like to wish our pupil nurses every success. On behalf of my assistants as well as myself, I would like to thank the heads of all the departments and their personnel for their cooperation; the medical staff for giving so freely of their valuable time by participating in the educational programs of the communicable and neuro-psychiatric divisions; the Board of Hospital Commissioners for their continued interest in the welfare of the nursing department; and Dr. Connor for his unfailing interest, wise counseling, and never-ending patience.

Respectfully submitted,

CARMELA SALVATORE, R. N.,
Superintendent of Nurses

Report of the Laboratory

At the close of the fiscal year ending September 30, 1953, the laboratory had performed a total of 59,932 tests, of which 1,355 were done for the Health Department, and 58,577 for the C. V. Chapin Hospital. In Table I the variety of these examinations may be appreciated.

In Table II are tabulated, yearly, from 1910, the necropsy percentage, deaths, and number of necropsies obtained. During the last fiscal year there were 59 deaths with 27 autopsies, giving a percentage of 45.7%.

In Table III one can see the cause of death subdivided according to organic systems, in those patients coming to autopsy. This year well over one-half of these cases fell into the category of neurological disease. Of these cases, seven died of acute anterior poliomyelitis, reflecting the severe epidemic of this disease this year.

In closing, I would like to take the opportunity of thanking the Superintendent, Dr. Connor, for his help and interest. I would also like to thank the Medical Staff of the Hospital, Officers of the City Health Department, and the Technical Staff of the Laboratory, for their help, interest, and co-operation.

Respectfully submitted,

LEROY W. FALKINBURG, M. D.,

Director of Laboratories

Table I

	C. V. C. H.	?	+	H. D.	?	C. V. C. H.	H. D.	Total
Bacteriology:								
Cultures for hemolytic strep.....	12,356	3	565	134	...	12,924	172	13,096
Cultures for diphtheria.....	12,237	4	...	168	...	12,241	168	12,409
Blood and Spinal fluid cultures.....	...	...	...	...	...	285	1	286
Feces and Urine cultures.....	340	...	7	7	...	678	14	692
Eye Cultures.....	...	...	...	...	...	15	...	15
Ear Cultures.....	...	...	...	...	...	70	3	73
Sputum Cultures.....	...	...	...	...	...	6	1	7
G. C. Cultures.....	121	...	40	...	...	161	...	161
Spinal fluid sediments and cultures.....	...	...	...	...	...	996	...	996
Smears of sputa for tubercle bacilli.....	884	10	193	55	...	1,087	58	1,145
Smears for gonococci (G. U.).....	166	...	25	6	...	191	0	197
Smears for Vincent's Angina.....	...	...	...	...	...	7	1	8
Smears for Treponema pallidum.....	...	...	...	...	...	3	3	6
Stools: ova and parasites, occult blood.....	146	...	48	1	...	194	4	198
Hang. drop for Trichomonas vaginalis.....	4	...	...	...	...	4	...	4
Animal inoculations for "T. B.".....	37	...	7	...	...	44	...	44
Sensitivity Tests.....	...	...	...	...	...	185	8	193
N. P. Cultures.....	...	...	...	...	...	131	10	141
Miscellaneous examinations.....	...	...	...	...	...	20	1	21
Total Bacteriology.....						29,242	450	29,692
Serology:								
Wassermann tests.....	1,952	223	46	2	313	2,221	374	2,595
Hintons.....	2,203	112	75	5	341	2,390	364	2,754
Agglutination tests for typhoid.....	...	...	...	...	...	66	...	66
Agglutin. tests for undulant fever.....	...	...	...	...	...	64	...	64
Agglutin. tests for proteus Ox-19.....	...	...	...	...	...	65	...	65
Sheep cell agglutination.....	...	...	...	...	...	129	...	129
Total Serology.....						4,935	738	5,673

Table II

NECROPSIES, 1910—SEPTEMBER, 1953

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
Total.....	6,292	2,285	36.3

Table III

PRINCIPAL CAUSES OF DEATH AS DETERMINED AT
POSTMORTEM EXAMINATION

Causes of Death			
Autopsy Number		Age	
	<i>Respiratory</i>		
A-21-52	Acute Interstitial Pneumonitis.....	2	years
A-2-53	Bronchogenic Carcinoma and Bilateral Pulmonary Tuberculosis.....	55	years
A-9-53	Chronic Bilateral Fibrocaseous Pulmonary Tuberculosis.....	61	years
A-12-53	Chronic Bilateral Fibrocaseous Pulmonary Tuberculosis.....	63	years
	<i>Cardiovascular Renal System</i>		
A-5-53	Acute Interstitial Myocarditis.....	6	mos.
A-7-53	Arteriolonephrosclerosis.....	73	years
	<i>Gastro-intestinal System</i>		
A-22-52	Acute Ulcerative Enteritis.....	6	wks.
A-10-53	Acute Bacillary Dysentery (Sonnei).....	5	years
	<i>Nervous System</i>		
A-18-52	Acute Anterior Poliomyelitis.....	31	years
A-19-52	Acute Meningo-encephalitis.....	46	years
A-20-52	Acute Meningo-encephalitis.....	11	mos.
A-21-52	Residual Acute Anterior Poliomyelitis.....	2	years
A-23-52	Acute Encephalomyelitis.....	32	years
A-1-53	Brain Abscess.....	24	years
A-3-53	Acute Diffuse Meningo-encephalitis.....	39	years
A-4-53	Tuberculous Leptomenigitis.....	2½	mos.
A-6-53	Spongioblastoma Polare.....	52	years
A-8-53	Tuberculous Meningitis.....	22	years
A-13-53	Acute Anterior Poliomyelitis.....	31	years
A-14-53	Acute Anterior Poliomyelitis.....	11	years
A-15-53	Acute Anterior Poliomyelitis.....	5	years
A-16-53	Acute Anterior Poliomyelitis.....	13	years
A-18-53	Acute Anterior Poliomyelitis.....	33	years
A-20-53	Acute Anterior Poliomyelitis.....	8	years
	<i>Reproductive System</i>		
A-11-53	Acute Suppurative Panmetritis.....	39	years
	<i>Miscellaneous</i>		
A-24-52	Fatty Degeneration of Liver.....	40	years
A-8-53	Acute Miliary Tuberculosis.....	22	years
A-17-53	Fatty Degeneration of Liver.....	46	years
A-19-53	Fatty Degeneration of Liver.....	34	years

Report of the X-Ray Department

The number of examinations of hospital, ward, and out-patient cases has been maintained at approximately the same level during the past several years, and continued the same for 1952. There were no equipment changes in the department, except for replacement of materials due to ordinary wear and tear.

The work of Miss Margaret Keenan, our technician, is greatly appreciated. Miss Betty Goldsmith was replaced by Mr. Frederick T. Pansera. She resigned because of her recent marriage.

Respectfully submitted,

MANUEL HORWITZ, M. D.,

Roentgenologist

NUMBER OF CASES			PARTS OF BODY X-RAYED		
	1953	1952		1953	1952
Ward Patients	1,140	971	Lungs, Pulmonary Dept...	3,122	2,918
Out-patients.	179	216	Lungs.	1,077	1,523
Pulmonary patients	3,042	2,909	Bones.	588	433
Student Nurses	462	563	Cardiac.	140	110
Employees.	180	133	Gall Bladder	12	15
State Rheumatic Fever Pro- gram.	127	125	Cholangiograms.	3	7
Total.....	5,130	4,917	Abdomen.	44	30
Electrocardiograms.	75	88	I. V. Pyelogram	20	16
			Gastrointestinal.	22	35
			Barium Enema	10	24
			Sinuses.	15	24
			Mastoids.	16	17
			Encephalograms.	1	3
			Dental.	5	2
			Fluoroscopy.	47	90
			Miscellaneous.	13	....
			Total.....	5,138	5,244
			Cystograms.	2	4

Report of the Out-Patient Department

The total number of visits in the Out-Patient Department during the past fiscal year was 9,819, a decrease of 950 from last year.

Decreases were noted by the Departments of Syphilis, Neurosyphilis, Gynecology, Urology and Ear, Nose and Throat. A significant decrease in the number of patients receiving pneumothorax was noted. This probably represents a change in medical opinion concerning the treatment of tuberculous patients.

Increases were evident in the Department of Orthopedics and the State Rheumatic Fever Clinic. The recent epidemic of poliomyelitis and the follow-up care of polio patients has enlarged the Orthopedic clinic. The past epidemic of scarlet fever and related organisms, with their complications, was probably responsible for the present increase in the Rheumatic Fever Clinic.

The nursing staff remains the same, with Mrs. Grace Cannon as supervisor, assisted by Mrs. Colacci. Miss Ann Lambias is the new secretary, having replaced Miss Ellen Guertin who resigned in July, 1953.

I wish to express my appreciation to the visiting staff for their fine attendance, also the nurses, secretary and laboratory workers for their cooperation during the past year.

Respectfully submitted,

STEPHEN F. LEHMAN, M. D.

Out-Patient Department 1953

MAIN HOSPITAL.	New Patients	First Visit (1952) Old Patients	Total Individuals	Revisits	Total Visits (1953)	Total Visits (1952)
Dept. of Syphilis.	6	44	50	237	287	481
Dept. of Neuro-Syphilis.	0	2	2	26	28	73
Dept. of Dermatology.	177	55	232	777	1,009	922
Dept. of Gynecology.	47	15	62	86	148	233
Dept. of Urology.	38	13	51	87	138	220
Dept. of Neuro-Psychiatry.	46	9	55	317	372	416
Dept. of Pediatrics.	222	50	272	457	729	938
Pedia. Allergy	0	0	0	0	0	0
Dept. of Tuberculosis.	831	1,158	1,989	3,314	5,303	5,111
Dept. of Pneumothorax.	3	0	3	218	221	407
Dept. of Medicine.	112	48	160	531	691	987
Dept. of Ophthalmology.	6	0	6	2	8	5
Dept. of Orthopedics.	70	18	88	147	235	194
Dept. of Ear, Nose and Throat.	1	0	1	0	1	21
V. D. Penicillin Rx.	115	0	115	0	115	160
V. D. Examination.	111	0	111	0	111	159
State Rheumatic Fever Clinic.	33	..	33	331	364	197
Minor Accident and Surgical Cases.	23	4	27	32	59	245
Total.	1,840	1,416	3,257	6,562	9,819	10,769

Report of the Dietary Department

A total of 378,089 meals were served during the year ending September 30, 1953. This is an increase of more than 26,000 over the number served the year before. The cost of raw food was approximately 30¢ per meal, compared to 34¢ in 1952. The lower cost is partly due to the drop in beef prices. Government surplus commodities such as butter, cheese, eggs, turkeys, and bacon have also helped in lowering food costs.

The following table shows the distribution of meals served:

MEAL COUNT								
	Dining Rooms				Wards			Total
	Doctors'	Nurses'	Employees'	Surgical	Tuber- culous	Psychi- atric	Commun- icable	
October 1952	947	10,303	5,883	1,038	2,510	4,601	6,927	32,209
November	853	9,731	5,494	1,234	2,564	4,221	7,224	31,321
December	899	9,813	5,574	852	2,745	3,993	7,248	31,124
January 1953	955	10,024	5,550	1,209	2,632	4,314	8,209	32,893
February	870	9,497	5,336	888	2,368	3,948	7,994	30,901
March	950	10,737	5,975	1,044	2,748	4,071	6,446	31,971
April	919	9,873	5,789	1,059	2,689	3,513	8,138	31,980
May	941	9,356	5,708	996	2,797	4,242	8,408	32,448
June	848	8,958	5,359	786	2,799	3,909	6,934	29,593
July	1,231	9,637	5,385	852	2,427	3,946	4,670	28,148
August	1,269	9,561	5,676	....	2,632	4,338	6,951	30,427
September	1,282	10,093	5,679	....	3,212	4,206	10,602	35,074
	11,964	117,583	67,408	9,958	32,123	49,302	89,751	378,089

General painting together with the installation of a red quarry tile floor in the main kitchen and adjoining rooms have greatly improved their appearance and simplified cleaning procedures.

It has been possible to maintain a full quota of employees in the department with very little turnover during the past year.

I would like to express my appreciation to my assistant and to the dietary employees for their assistance and cooperation; also to Dr. Connor for his interest and help.

Respectfully submitted,

RUTH E. DAVIDSON,

Dietitian

Report of the Maintenance Department

The total number of routine calls for minor repairs this past year increased to approximately 33,000. The emergency night calls also increased, but this was due to the many types of electrical and mechanical apparatus used in the treatment of poliomyelitis.

Improvements to the hospital physical plant continue and we tried to reduce the cost by using our own maintenance crew whenever possible. However, such projects as the new Hydrotherapy Room and Electric Generator Room were given to private contractors through the Public Building Department.

West I, the surgical unit, was painted, papered, floors and furniture refinished, new electric wall fixtures were installed, and an asphalt tile floor was laid in the ten-bed ward. North I and II, the neuropsychiatric units, were completely renovated, also the Douglas Avenue and Service Building Dormitories. The appearance and cleanliness of the Main Kitchen were greatly improved with the installation of a red quarry tile floor.

The following is a list of some of the work accomplished by the Maintenance Department:

PAINTED

Douglas Avenue Dormitory
Service Building Dormitory
North I and II
West I (also papered)
All tunnels
Boiler and pump rooms
Main kitchen and hallways
East II, 7 rooms (also papered)

Richardson I, 2 large rooms
 Richardson II, formula room
 Medical Library
 Doctors' coat room

CARPENTRY

60 Window screens
 3 Screen doors
 2 Tables for outside use
 60 Polio bed boards
 60 Polio foot boards
 10 Stands for oxygen tanks
 3 Wood cabinets for drug supplies
 Formica table tops, North I and II
 Rubber tile floor, Doctors' Coat Room
 Asphalt tile floor, Medical Library
 Asphalt tile floor, West I
 Installed wood floor, Laundry

MAINTENANCE REPAIRS

Installed new mangle in Laundry
 Installed wall fixtures, West I
 Installed electrical outlets for hydrotherapy units, West II, Richardson
 I and II, East I and II
 Installed wall fixtures, East II and Richardson II
 Installed Electric outlet and stove, Hindle Building
 Repaired 36 steam leaks
 Relocated steam kettles, Main Kitchen

NEW EQUIPMENT

1 Chair, Superintendent's office
 1 Chair and desk, Main Office
 1 Chair, Out-Patient Department
 1 Cadillac ambulance
 1 Refrigerator, East II
 1 Sewing machine
 1 Electric stove, Superintendent's house
 18 Baby cribs
 1 Mop truck
 1 Floor polishing machine
 1 Bathroom scale
 3 Portable rotary compressors
 1 Castle specialist light
 1 Electro surgical unit
 1 Autoclave sterilizer
 1 Blood apparatus
 1 Respirator
 1 Resuscitator with connections
 2 Stretchers with cushions

- 14 Combination windows, Superintendent's house
- 5 Detention Screens, North II
- Hot water heater, Superintendent's house
- Hot water heater, Service Building Dormitory
- Steam heater units in elevators, West and Richardson Buildings

To Dr. Connor, I wish to express my sincere appreciation for his cooperation. To the department heads and personnel of the hospital, my sincere thanks for their cooperation throughout the year.

Respectfully submitted,

JAMES E. KELLY

Acknowledgments

BOOKS, MAGAZINES, SCRAPBOOKS, TOYS, CARDS, ETC.

Church Periodical Club, Grace Church
Mr. V. Buffinton
Mr. A. B. Greene
Lively Blue Birds
Miss Frances C. Chisholm
Mrs. Alton W. Gardiner
Providence-Cranston Girl Scouts #61
Miss Linda W. Smith
Cranston Rainbow Girls
Mrs. Albert C. Rider
Mr. A. B. Allardice
Gibson Greeting Cards
Mrs. D. A. Brown
Miss Carol Cohen
West Greenwich P. T. A.
Chapel Girls' Club
Mrs. Elizabeth Dyson
Cranston Rainbow Alumni
Mr. John Fagrelus
Mr. C. E. Kennedy
Friendly Blue Birds
Sons and Daughters of Liberty
Master Vincent Martucci
Miss Alice G. Dunn
Mrs. Grace Loring
Dr. I. Gershman
Miss Alice F. Carr
Miss Mary Farley
Miss Adrienne Waldman
Miss Barbara Richter
Mr. Harry C. Nicholson
R. I. Academy of General Practice
Brownie Troup 11
St. Andrews Methodist Church

MISCELLANEOUS

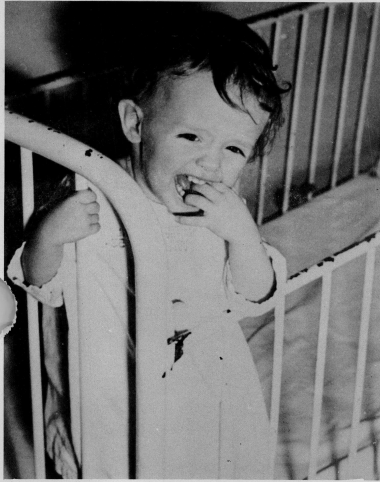
Merry Camp Fire Girls of North Providence, candy tray favors
Cranston Rainbow Alumni, Hallowe'en and Easter tray favors
Mrs. Edmund Doherty, candy favors
Federal Auto Body Works, flowers

Mr. Martin F. Noonan, flowers
Primary Dept., Beneficent Congregational Church, Thanksgiving tray
favors
Junior Red Cross, candy and tray favors on several occasions
Needlework Guild of America, garments
Mr. William McDermott, plans
County 4-H Club, Newport Cooperative Extension Work, favors and tray
nuts
Cranston Brownie Troop 102, Christmas tray favors
Dr. M. Adelman, Christmas candy
Nathaniel Greene Jr. High School, tray favors with nuts
Ezek Hopkins Jr. High School, candy
Providence Gas Company, Christmas caroling
Peoples Church of Naarene, Christmas caroling
R. I. Federation of Music Clubs, group singing
Mr. Morris Malatta, television set
Osoha Camp Fire Girls and Happy Blue Birds, Easter favors
Hope High School Red Cross Club, Easter cookies
Judge John C. Burke, table model radio
Grade 3, Pleasant St., School, Seelunk

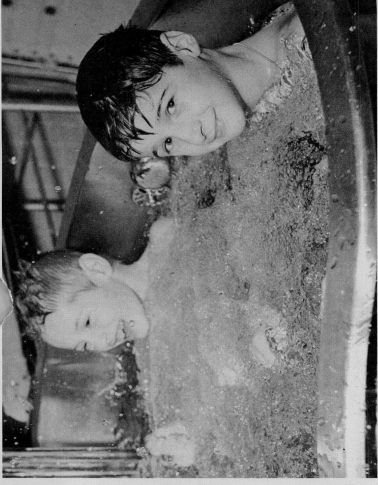




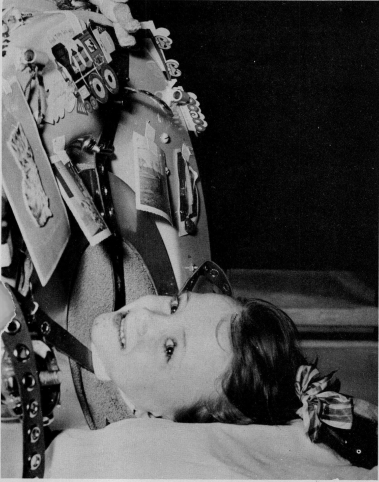
Maurice Hurteau and mother, Mrs. Albert Hurteau



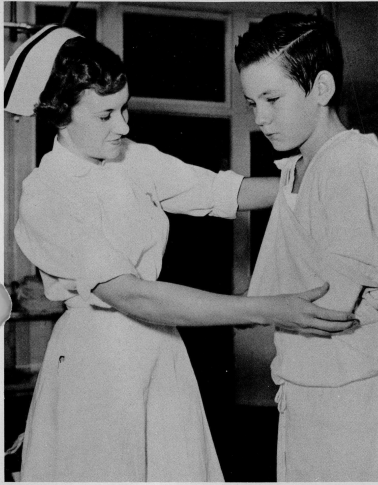
James Huling



Donald Rockleau and Real Verrier



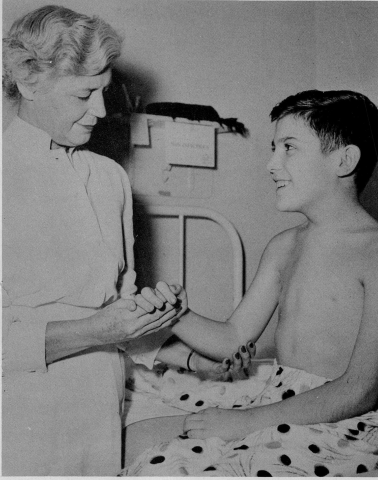
Jeanne Campbell



Miss Ida McKinley and Lawrence Hickey



Charles Bishop



Miss Gladys Barron and Richard Lunaro