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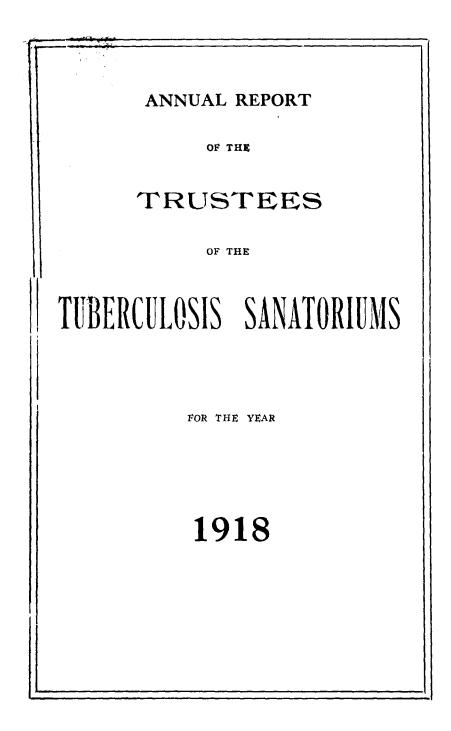
Annual Report of the Trustees of the Tuberculosis Sanatoriums for the Year 1918

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ANNUAL REPORT

OF THE

TRUSTEES

OF THE

TUBERCULOSIS SANATORIUMS

FOR THE YEAR

1918

WATERVILLE SENTINEL PUBLISHING COMPANY 1918

To His Excellency, Carl E. Milliken, Governor and the Honorable Executive Council:

Herewith is submitted the third annual report of the Trustees for Tuberculosis Sanatoriums with recommendations.

General.

The admitting office as in previous years has been maintained at the chairman's office in Waterville; to whom the admitting of all patients and fixing rates for treatment has been delegated. Under the original law all patients ill with tuberculosis and making application for treatment were admitted at a rate not to exceed \$5.00 per week. This method of rating seemed unfair as we were obliged to give treatment at \$5.00 per week to people who were perfectly able to pay the full cost of treatment.

Accordingly at the last session of the legislature the law was so amended as to allow the Board of Trustees to fix any rate from free treatment up to the cost of the treatment to the State. This cost to the State we have fixed a \$12.00 per week which, while it is a little less than the actual cost during the past year we believe will be fairly accurate for a series of years. By the provision of this amendment the Trustees are required to make an investigation of the financial circumstances of each applicant and to fix a rate in each case according to his or her ability to pay. This work has been done at the receiving office by Miss Shackford, secretary to the chairman. Each applicant is required to give a statement of their financial condition. All such information is on file at the receiving office. From the information so obtained a rate believed to be fair and just to all is made and the patient admitted after filing a bond guaranteeing the payment of this rate.

The statements of the applicants are always investigated either by correspondence or personal interview. As a whole we find this method works out very well. We have repeatedly checked up these ratings and believe that the patients in practically all cases are paying all they can afford to pay for treatment. Necessarily the number of patients who are unable to pay anything for treatment is very large. This will be well understood when we consider that tuberculosis is largely a disease of the poorer classes and that the period of treatment is a matter of months and years rather than days and weeks as is true of most disease. We have endeavored in making rates to deprive no one of needed treatment and a large number have been admitted absolutely free. Some have been rated as low as 50 cents per week as we believe it wiser to charge those able to pay even that small sum than to encourage absolute dependency. The rate in each case is only known at the receiving office and to the business management of each institution. This is done that the patients and their friends may feel that there is no discrimination made in treatment because of the rate paid.

In connection with the financial investigation inquiry is also made into the social conditions of each applicant and a careful record of these findings is kept on file. We also endeavor to get frequent reports on all discharged patients thus keeping in touch with their progress. The work has been of too short duration to make an estimate of its value but we believe if continued it will be of great worth in checking up progress and outlining future plans. We believe that funds should be provided for the employment of a follow-up nurse. Such a nurse should make frequent visits to discharged patients to observe their condition, advise and enourage them and also visit all homes from which patients have been admitted to the institutions to be sure that there are no other cases of infection in their families.

Another work done at the receiving office is the sending of reports on patients' condition and progress to the family physician, thus keeping him in touch with his patients while under treatment. We believe this is of value to the community in an educational way and is a source of much comfort to the patient's family and friends.

WESTERN MAINE SANATORIUM.

The work at this institution has gone on in the same satisfactory way as heretofore. It has been the policy of the Board to treat at this institution only ambulatory cases. It has been impossible to follow this plan absolutely but on the whole the condition of the patients here has averaged better than at any previous time. A fuller account of the methods and success of the treatment will be found in the superintendent's report which is appended. We have an average of about thirty patients of school age; for the benefit of these children we have conducted a school thus enabling them to continue their education while under treatment.

The medical staff here has been disturbed by the war; Dr. Frisbee entering the service early in the year and his successor being called later. The farm which came to us with this institution has presented vexing problems. The scarcity of labor and war conditions generally have made it difficult to show satisfactory returns. Whether it is wise to continue farming on a large scale here has been difficult for us to decide. The majority of the Board however favor further trial.

A new sewerage system has been installed and is working out satisfactorily. General repairs have been attended to and considerable concrete work has been done. Men's cottage which was cheaply constructed will soon require extensive repairs or replacement. Your Board feels that it would be wiser to replace this building with a new one and have asked for an appropriation to make the change. We have no suitable shed for the storage of farm implements. If farming is to be continued such a shed should be built. The piggery has been the most profitable department of the farm. The farm superintendent recommended better provisions or their care. An appropriation has been asked for this purpose.

CENTRAL MAINE SANATORIUM.

The capacity at the Central Maine Sanatorium has been increased during the past year from thirty-four beds to one hundred and twentyfive beds. Cottage A which we consider one of the most satisfactory buildings in New England for its purpose was erected at an expense slightly in excess of \$40,000, money available for that purpose.

Chase Memorial Building has been so remodelled as to provide a large and spacious dining room and kitchen sufficient not only for our present needs but any increased needs that may come. A perfectly satisfactory business office, suitable apartments for the medical staff, present nursing staff and help have been provided. Grounds have been graded and improved, the old shack used for dining room and kitchen in the past have been removed. An ice house located so as to be easily accessible to the kitchen has been erected, a sterilizer for disinfecting beds and bedding has been installed and proper laboratory equipped.

All these improvements have entailed a large expense for which only partial funds were available from the appropriation of the last legislature. Because of the great emergency Your Excellency and Council have made available money enough to meet these great needs and to provide maintenance for the large increase of patients we have been able to care for under the new conditions. For your generous attitude and co-operation the Board of Trustees wish to express their deep gratitude and appreciation.

This institution as heretofore is used as a receiving place for all patients entering either institution. Here they are observed, their progress noted and then transferred as their condition warrants. Our plan is to treat here those who are acutely ill and require bed treatment. This does not mean that this institution is used only for advanced hopeless cases as many of these acutely sick patients have only slight lung involvment and will make favorable progress. The institution is under the same medical management as heretofore. The increased number of patients made necessary the employment of an assistant physician which place was filled by Dr. Carl Sturgis. At the present time there is a vacancy because of Dr. Sturgis entering the service. We hope to fill this vacancy shortly.

The great need at the Central Maine Sanatorium is suitable provision for the treatment of children. About twenty per cent of applicants or treatment are of school age. For the past two years these children have been treated at Hebron in conjunction with adult patients. This is extremely unsatisfactory and should not be continued. Because of the more central location of the Fairfield institution it seems to the majority of the Board wiser to treat these children at this institution and we have asked the legislature for funds to erect a children's building equipped for school purposes, including domestic science and manual training departments. It has been fairly definitely established that all tuberculous infection occurs in childhood. If this is true the importance of equipment to give children proper treatment cannot be overestimated as the whole anti-tuberculosis campaign is centered here. We also recommend that the present law be so amended as to make it possible to receive and treat children in the so called pre-tuberculous stage, that is before active disease is developed. We trust that our recommendations will receive favorable support from the coming legislature. If a children's building is made possible it will be necessary to provide a second building to be used as a home for nurses. At the present time we are obliged to use one room for nurses which otherwise would be available for treatment of patients. Provision for any increase in the nursing staff which would be necessitated by the erection of the children's building will have to be made. Contingent on the erection of these new buildings is the problem of a central heating plant. In our estimates for the coming two years such a plant has been provided for also a vegetable cellar and storage house.

NORTHERN MAINE SANATORIUM.

The last legislature appropriated \$20,000 for the erection and maintenance of a sanatorium in Aroostook county, provided a suitable site was furnished by the citizens of that county. Only one site deemed suitable by your Board has been offered. This site contained about twenty-five acres of land has been given by the citizens of Presque Isle and is situated just out of that town on the Caribou road. It is easily accessible with a splendid view. We have had the water supply which must be from artesian wells investigated and feel that it is sufficient. Because of the building restrictions imposed by the Federal Government nothing has been done on construction to date. We have asked for an appropriation to complete construction next year, also maintenance for forty patients.

In conclusion we wish to call your attention to the fact that there is no provision made in this state for the treatment of surgical tuberculosis, neither is there any provision for the proper care of pregnant women afflicted with tuberculosis. We believe that as soon as possible the State should provide for these two very great needs.

Respectfully submitted,

THEODORE E. HARDY, M. D., Chairman, C. H. BAYARD, M. D., STANLEY BISBEE, MRS. GEO. H. FRENCH, RALPH JEWELL.

SUPERINTENDENT'S REPORT

To the Board of Trustees of the State Sanatoriums:

GENTLEMEN:—Herewith is presented the superintendent's annual report of the Western Maine Sanatorium for the official year ending June 30, 1918. Full statistical and financial tables showing details and summary of the work for the year are appended. A brief outline of these tables is translated into words.

MOVEMENT OF POPULATION.

On July 1, 1918, there were 107 patients present in the sanatorium. During the year 114 patients were admitted including 15 re-admissions. Their condition on admission was as follows: Incipient 28, moderately advanced 70, far advanced 16. The number of patients discharged was 132 including 8 deaths in the institution. Two hundred twenty--one patients were treated during the year. On June 30, 1918, there were 89 patients remaining at the sanatorium. The greatest number present at any time was 107, the least number was 89. The daily average of patients for the year was 103.9 and the average length of residence of discharged cases was nine months.

TEMPORARY RESULTS.

Of the 132 patients discharged from the sanatorium during the year, 4 had their disease arrested, 13 apparently arrested, 46 were quiescent, 44 were improved and 25 were unimproved including 8 deaths. Eighty per cent of the cases discharged as unimproved were either far advanced on admission or moderately advanced Turban III. Two cases discharged as unimproved stayed less than two weeks.

END RESULTS.

The permanence of the results of treatment can be determined only by the condition of the discharged patients after they have been returned to their former mode of living for six months or longer. It is our aim to keep in touch with all ex-patients by letters of inquiry sent six months after their discharge and at intervals of six months thereafter. As the number of ex-patients increases, this work becomes more onerous and expensive but at the same time of more interest and value. There were 285 patients discharged from the institution from October 6, 1915, to January 1, 1918. Of this number, we have been able to trace and determine the condition of all but ten cases or 3.5% of the total number. Only one case has not been heard from at all since discharge. Two hundred eighteen cases or 76.4% of the whole are known to be living, while 147 or 51.5% are living and working. The number of deaths has been 57 or 20% of the discharged cases.

It is interesting to note the present condition of the discharged cases when grouped according to their condition on admission. Forty-three or 15% of the whole were classified as incipient. Of the incipient cases 4I or 95.3% are living and 33 or 76.7% are living and working. Only one case or 2.3% is known to be dead. The 215 moderately advanced (75.4% of the whole) show 166 or 77.1% living, 110 or 51.1% living and working and 4I or 18.1% dead. The 27 far advanced cases, as must be expected, do not show as good results. Forty and seven-tenths per cent are living and only 4 or 14.8% are living and working while 15 or 55.5% are dead.

Studying the series of 285 cases from their condition on discharge from the sanatorium, the subsequent histories of the three cases discharged as arrested show 100% or all of them now living, and 66.6% living and working. Twenty-one cases were discharged as apparently arrested. Eighteen or 85.6% are known to be living, and 16 or 76.1% living and working. Of the 86 cases discharged as quiescent, 83 or 96.4% are living and 63 or 73.2% are living and working. The 141 cases discharged as improved show 106 or 85.1% living, with 46.8% living and working. Thirty-four cases were discharged as unimproved. All of this group have been traced. Nine or 26.4% are living and only 1 or 2.9% is living and working. Twenty-five or 73.5% are dead.

SANATORIUM AS AN INVESTMENT FOR THE STATE.

The weekly earnings of discharged patients was determined in 29 cases. These earnings ranged from \$2.00 to \$28 a week or an average of \$13.25. If the average weekly earnings of the 147 discharged cases who were working had been the same during the past year they would have earned or produced \$101,283.00 which is nearly twice as much as the Western Maine Sanatorium cost the State for maintenance during this time. It is hardly fair to assume that all these cases would not have been restored to wage earners without sanatorium treatment. If one-third of this number had recovered without the sanatorium, the earnings of the remainder would have amounted to more than the cost of maintenance this year plus over 4% interest on the investment. The economic value of preventing the spread of the disease by isolation of the patients during their illness or of the education of the public through discharged cases is not estimated.

Residence-Counties.

The records show, as in other years, that the Western Maine Sanatorium treated patients from all counties in the State. Androscoggin and Aroostook counties sent 40 patients each, the greatest number from any county. Kennebec was next with 29 patients. Cumberland county, the largest in population, sent 22 patients, ranking fourth in the number of patients. Fifty-one or 23% of the patients treated were foreign born.

Ages of Patients.

The average age of the patients treated this year was 26.5 years. The oldest patient treated was 78 years old on admission, the youngest was 7 years old. Forty-three and one-tenth per cent of all the patients treated in the sanatorium since October 6, 1915, were between the ages of 20 and 30, or at the time in life when the individual passes from years of dependency to years of production.

ETIOLOGY.

A complete list of the occupations of the patients treated is tabulated elsewhere. Eighty-two and eight tenths per cent of the 221 patients gave a history of indoor occupations. Twenty-six patients worked in dusty places. In only 18 cases could a history of exposure to the disease be obtained except from relatives of the patient.

The time elapsing from the first symptom of tuberculosis till a physician was consulted averaged 6.9 weeks per patient. There was an average of 11.6 weeks from the consultation of a physician till the patient was told the name and nature of the disease. Our records show that the average duration of disease previous to admission was 26.8 months. Of the cases treated this year there was an average of 22.2 months between the diagnosis and the admission of the patient at the Western Maine Sanatorium. A glance at the table showing the present condition of discharged cases is sufficient proof of the importance of early and radical treatment.

LABORATORY.

Routine laboratory work has been maintained the same as last year. Nine hundred fifteen specimens of sputum were examined for acid fast organisms and the prevailing type of secondary organism noted. In addition, once a month, the 24-hour amount of sputum from patients who had expectoration, was weighed. This is an index to the progress of the disease and is a valuable guide in prescribing exercise. Three hundred fifty-five specimens of urine were examined. One hundred seventeeen or 52.4% of the patients treated have either no expectoration or no tubercle bacilli in sputum. For details of sputum examination of discharged patients see Table 31.

SANATORIUM OPEN-AIR SCHOOL.

The open air school began Sept. 3, 1917, and continued till June 28, 1918, with the exception of a recess during the severe winter weather from Dec. 21st to March 1st. Except for a few severe stormy days,

sessions were held regularly five days a week at the "open air shack" which was fitted out for a schoolroom last year. The school hours were from 9 to 12 A. M., and 3 to 4 P M. When the physical condition of the pupils permitted they attended both sessions. The average daily attendance was 24.

The work of the open-air school corresponds as nearly as possible with that of other graded schools. While, of necessity, there were many grades, the time spent with each grade could not equal that of a one grade room, yet the work was thoroughly done. Whenever it happened that two or three grades were studying the same subject, they were combined. A little time was devoted to nature study with good results as the pupils enjoyed their out-door life more by observing the things about them. Nature study correlated with English and Geography gave new zest to these lessons. During the spring term the three pupils in the ninth grade were given a general review in preparation for the high school entrance examinations, sent out by the State Superintendent of Public Schools. They passed the examination and were granted the certificate issued by the State. At the close of the spring term all the pupils except three little beginners, who came in near the end of the term, were given promotion cards with the feeling that they were fitted to do the work of their grade in any school. Miss Lois Piper taught the school from the time it opened Sept. 3, 1017, till March 30, 1018, when she resigned. Miss Bettie Marden of Farmington finished the school year and has been engaged to teach next year.

NURSES' TRAINING SCHOOL.

In the training school for nurses there has been a daily average of four pupil nurses on duty. Miss Lynch, a teacher of dietetics in the public schools of Lewiston and the Central Maine General Hospital Training School, gave 14 lectures and demonstrations on practical dietetics. The course of study was made to conform to the requirements of the Maine State Board of Registration of Nurses as outlined in the pamphlet (1918) published by the Board. The graduates, by taking six to eight months in a general hospital giving practical work in surgical and obstetrical nursing, are able to meet these requirements. The following nurses were granted diplomas:

* Ruth H. Shaw, Hartland, N. B.; Amanda Cosgrove, Lewiston, Me.; Fannie G. Thaxter, West Sullivan, Me.

TREATMENT.

The usual hygienic-dietetic treatment has been continued as in past years. The period of rest at the commencement of treatment was increased in all types of cases and in cases that showed some acute symp-

^{*} Has taken six months' practical surgical and obstetrical training at the Long Island College Hospital.

toms radical bed rest was continued longer than formerly. Tuberculin has been administered in carefully selected cases. A table showing the present condition of the patients treated with tuberculin during the years 1916 and 1917 is appended. This table compared with the one showing the present condition of all cases does not reveal any marked differences in results. The temporary results show a small percentage in favor of the tuberculin patients but this is open to many errors because of the difference in length of residence, etc., of the cases. There were an unusual number of surgical tuberculous complications that required dressings. Over 915 surgical dressings were done during the year. One case of empyema was opened and drained besides several cold abscesses.

Nebulizer treatments have been increased in frequency to relieve irritation of the upper air passages with cases having cough. There have been only three cases of tuberculous ulceration of the larynx and one of the epiglottis under treatment this year.

Graduated exercise has been continued as in former years. Owing to the scarcity of help, patient labor has been used with greater economic value to the institution than heretofore. Not over two hours work with a total of four hours exercise a day has been prescribed for a patient. If possible, all patients should remain till they are taking the same hours of exercise under observation as their occupation requires of them. The women patients worked 3,576¹/₂ hours and the men 3,659 hours during the year or an average of 19¹/₂ hours a day for both sexes.

FREE TREATMENT.

The financial status of 221 patients treated during the year ending June 30, 1918, was as follows:

Entirely free	135
Paying \$1.00 per week	2
Paying 2.00 per week	5
Paying 2.50 per week	I
Paying 3.00 per week	4
Paying 4.00 per week	3
Paying 5.00 per week	41
Paying 6.00 per week	• 4
Paying 7.00 per week	2
Paying 8.00 per week	2
Paying 9.00 per week	2
Paying 10.00 per week	3
Paying 12.00 per week	11
Admitted to pay \$1.00 per week but charged off with-	
out paying	I
Admitted to pay \$1.25 per week but charged off with-	
out paying	I

 Admitted to pay \$2.00 per week but charged off without paying
 3

 Admitted to pay \$3.00 per week but charged off without paying
 1

The total receipts for treatment of patients including laundry was \$10,364.95. The average income per patient was \$1.912 per week. The number of days treatment was 37.933.

Of the 89 patients remaining June 30, 1918, 24 or 26.9% are paying an average rate of \$6.10 a week for treatment. Sixty-five or 73.1% are entirely free or an average rate for all patients in the house of \$1.25.

PER CAPITA COSTS.

Comparison for the years ending June 30, 1917, and June 30, 1918:

	1917.	1918.
Average number of patients	102.3	103.9
Average gross weekly per capita cost Less miscellaneous income	\$12.859 1.764	\$14.103 1.424
Average weekly per capita expense Less income from patients	11.095 2.219	$12.679 \\ 1.918$
Average weekly per capita cost to State	8.876	10.761

DIETARY.

The dietary has been about the same as last year. More wheat substitutes were used than in previous years. Last year the dietary contained about 25% wheat substitutes but this year has been increased to over 40% by making "war bread." Great care has been exercised to prevent the waste of food. Special lunches were served as the condition of patients demanded. Routine lunches were issued as in previous years. (See report June 30, 1916.)

The average gain in weight of the patients this year was less because more patients remained longer at Fairfield Sanatorium where they reached their normal weight before being transferred to Hebron. A sample of one week's dictary is printed elsewhere.

Farm.

The farm has been conducted with the idea for a gradual improvement in stock, soil and fruit trees rather than to produce a maximum yield at the expense of future years. A total of 40 acres was planted this year which is five acres more than was planted last year.

The following farm produce was sold or used by the institution during the official year ending June 30, 1918:

Milk, quarts	1364
Cream, quarts	2864
Butter, pounds	15
Pigs sold	20
Pigs consumed	8496
Boar pig sold	I
Dressed fowl, pounds	555
Dressed chicken, pounds	358
Veal, pounds	1731
Calf skins	15
Beef hides	5
Beef	2678
Beef cows	5
Registered bull calf	I
Grade bull calves	2
Grade heifer calves	3
Apples, barrels	172
Plums, pecks	28
Sweet corn, ears	2685
Squash, pounds	458
Turnip, barrels	25
Rhubarb, pounds	40
Radishes, bunches	531
Lettuce, heads	1368
Cabbages, pounds	2446
Beet greens, bushels	8
Beans, pounds	694
Swiss chard, bushels	2
Green peas, pecks	153
Shelled beans, pecks	6
Kale, bushels	3
Cucumbers	1513
Beets, bushels	9
String beans, pecks	26
Carrots, bushels	6
Potatoes, bushels	619
Wood, cords	31

Improvements.

Cement floors were laid for the employes' smoking room, serving room, cellar at the "Cushman House," and a partial floor for the lower pavillion at Reception Cottage. A cement foundation was built for the garbage cooker. Repairs were made on the cement floor in basement porch of Administration Building. A walk at the kitchen door where the garbage cans are left was built of cement so that it could be easily eleaned. The driveway to the barn was replaced by cement. The subway to the Reception Cottage was repaired to keep it from leaking. A two-compartment septic tank for sewage disposal was built of reinforced cement. The cost of this tank including excavation and 400 feet of sewer pipe was \$2,014.59. The sum of \$2,500 was appropriated for this purpose.

Extensive repairs and replacements were made upon the heating system. In the power house a return flow tank was installed and the return flow cold water traps were changed over and repaired. All the flange joints over the boiler were repacked. Portions of 2-inch steam pipe were replaced in duct from power house to Administration Building. Two new blow-off cocks were installed on boilers. The automatic damper was repaired. In addition, one fire box was relined and a new set of grates was installed. An 80-gallon hot water copper tank and a water trap were installed for the laundry.

At the men's cottage a new trap on the hot water tank was installed. All valves were repacked on steam pipes and one radiator section was installed. The same repairs were made at the women's cottage. At the Reception Cottage, repairs were made to valves where necessary. A trap was installed on the steam table and the return flow trap was repaired. In the basement room a steam heating coil was installed. At the Administration Building all valves were repacked and the steam table in kitchen repaired.

The engine and dynamo of the lighting system were extensively repaired. The cylinder was rebored and a new piston made. The box on the crank shaft was rebabbited. The governor was repaired and brass collector rings on the dynamo were turned down. The total expense including labor was \$231.85. Over 240 feet of 2-inch water pipe was relaid between the men's and women's cottages.

A crescent electric dish washer was installed in the serving room at a cost of \$245. The serving room, dining room, and help's dining room were painted. Hardwood dish sink, tray rack and side table were built for the serving room and the wood floor replaced by cement. A hard wood top was made for the side table in the kitchen. The total expense for hard wood work was \$146.

One two-ton G. M. C. truck was purchased for \$2,431.51. A twohorse potato sprayer, sulky plow and cutaway harrow were purchased for the farm. The section of lawn east of Reception Cottage was plowed, reseeded and drained.

Nearly all the beds used by patients have been enameled. The porches at the Men's Cottage were painted and the kitchen and parts of Reception Cottage were painted.

An Empire milking machine consisting of three single units was purchased for the farm. This not only reduced the number of milkers by two but the milk is cleaner and the production greater.

RECOMMENDATIONS.

During the summer months the temperature of the large refrigerator is not low enough to keep the meats and milk in good condition. It is also in need of extensive repairs and is over crowded. The cutting and hauling of ice over two miles incurs a good deal of expense. An ammonia refrigerating plant or a new and larger refrigerator is recommended.

The present accommodation for male employees is insufficient. The erection of a new cottage for help, or a new cottage for ambulatory patients is recommended so that part of the men's cottage may be used for male employees.

Treating children housed with adults is not satisfactory from the therapeutic standpoint, nor from the management standpoint. A special building for children should be provided. The heating plant at the Western Maine Sanatorium is adequate for heating a building large enough to accommodate thirty (30) patients.

Every severe shower washes our drives badly. Gutters should be built to take care of the overflow or the drives built of crushed rock similar to State roads.

The board walk to the men's and women's cottages should be replaced by cement. The piazza at the Administration Building is in need of extensive repairs. The floor timbers and boards should be replaced with new. The piazza at the farm cottage should be repaired.

A small incubator is recommended for the laboratory to be used in making autogenous vaccines and for other laboratory work.

The housing accommodations for the farming tools is not sufficient. A shed should be built back of the stables for this purpose.

Pigs are one of the best paying lines of the farm, because they are fed mostly from the garbage which would otherwise be wasted. At present, there are 101 pigs and we are greatly hampered by lack of suitable place to house them. A new hog house is needed to accomplish best results.

ENTERTAINMENTS.

Entertainments and diversion are a great help in treating tuberculosis. The money for entertainments, moving pictures, holiday celebrations, etc., is given chiefly by patients and employes. It has been very hard to secure enough money this year to maintain the moving picture machine. The income from the Brown Fund amounts to about \$60.00 a year and the income from the Stewart Fund is \$3,640.00 a year. The letter of bequest from D. E. Stewart, dated at St. Albans January 18, 1913, reads: "Enclosed is check for \$75,000.00 for the benefit of the Sanatorium at Hebron. I trust this gift may be helpful to the poorer class of sufferers in the Sanatorium for many generations." It is recommended that the income from the Stewart Fund be used for the entertainment and comfort of the patients similar to the way the Coburn fund is used at the Augusta State Hospital (see report 1916, p. 70).

RELIGIOUS SERVICES.

Through the efforts of Rev. Irad B. Hardy, one of the patients, a Christian Endeavor Society was organized among the patients and employees at the sanatorium.

Regular Catholic services have been held throughout the year by Rev. P. J. Bovin from the rectory at Norway, Me. Rev. T. M. Griffiths of the Baptist church at Hebron, has conducted services at the sanatorium whenever requested.

CHANGE IN OFFICERS.

Dr. Edward B. Frisbee resigned Dec. 8, 1917, to take the position of assistant surgeon at the Soldiers' Home at Dayton, Ohio. Dr. Charles N. Stanhope was appointed assistant superintendent and assumed his duties March 5, 1918.

Mr. Frank W. Goodrich, who has been storekeeper since February, 1917, and who has had many years of experience in handling supplies for state institutions, was appointed acting steward May 14, 1918.

Mrs. Clara Gage resigned as housekeeper Aug. 28, 1917. Miss Julia Malia was hired to fill this vacancy.

Mr. Walter H. Thyng, who was employed last year as general repair man was placed in charge of the power house as chief mechanic in addition to his other work.

Religious Services.

Rev. T. M. Griffiths, Hebron, Me.; Rev. P. J. Bovin, Norway, Me.; Rev. Irad B. Hardy, Sanford, Me.; Rev. Geo. G. Finnie and Choir, Lewiston, Me.

GIFTS.

Zion's Advocate, Waterville, Me.; Humane Review; Hon. Robert H. Gardiner, Gardiner. Me.

Acknowledgments.

A full list of those contributing to the entertainment and welfare of the patients is printed elsewhere. This list does not include the names of patients and employees who gave generously of their time in entertaining or helping to raise money for entertainment purposes.

I wish to express my appreciation to all employees for their co-operation and efficient service and again do I wish to thank the Board of Trustees for their continued confidence and counsel.

Respectfully submitted,

OLIN S. PETTINGILL, M. D.,

Superintendent.

June 30, 1918.

WESTERN MAINE SANATORIUM.

I-MOVEMENT OF POPULATION.

Patients.	Males.	Females.	Totals.
Number remaining July 1, 1917 Number admitted within the year Number treated during the year Number discharged during the year Number remaining June 30, 1918	48 94 62	61 66 127 70 57	$ \begin{array}{r} 107 \\ 114 \\ 221 \\ 132 \\ 89 \end{array} $

2-Monthly Admissions, Discharges and Averages.

	A	DMISSIONS	. Disc		ISCHARGES.		Daily	
Молтня.	Males.	Females.	Totals.	Males.	Females.	Totals.	average of patients.	
July	2	6	8	4	8	12	105.7	
August.	5	Š	10	3	3	6	106.1	
September	9	13	22	10	13	23	105.9	
October	6	8	14	6	9	15	104.5	
November	2	6	8	2	4	6	105.3	
December	7	6	13	7	7	14	105.1	
January	4	2	6	4	1	5	105.6	
February	1	1	2	1	2	3	106.6	
March	2	5		4	1 1	11	$105.9 \\ 102.7$	
April	9	10	19	9		16 13	102.7	
Мау	1	4	5	9	4	10	93.5	
June	-	- 1		3	3	0	93,5	
Totals	48	60	114	62	70	132	103.97	

3-NATIVITY BY STATES, ON NATIVE-BORN PATIENTS.

STATES.	Males.	Females.	Totals.
Florida Maine Massachusetts Minnesota New Hampshire New York Ohio Pennsylvania. South Carolina Vermont Missing	6		14
Totals	70	100	17

Countries.	Males.	Females.	Totals.
Austria Canada (English) Canada (French Greece. Ireland Italy. Russia Scotland Sweden. Syria	- 7 6 3 1 3 1 1 1 1 1	$ \begin{array}{c c} 1 \\ 10 \\ - \\ - \\ - \\ 2 \\ - \\ 1 \\ 1 \end{array} $	1 17 17 3 2 3 3 3 1 2 2
Totals	24	27	51

4-NATIVITY OF FOREIGN-BORN PATIENTS.

5-Residence-Counties.

	Males.	Females.	Totals.
Androscoggin	16		4(
Aroostook			4(
Cumberland	12	10	22
Franklin		1	1
Hancock	1	1	1
Kennebec	6	23	29
Knox	6	7	13
Lincoln	3	1	
Oxford,		3	1
Penobscot	12	6	1
Piscataquis	7	10	1
Sagadahoc	l		
Somerset	5	4	9
Waldo,		1 1	
Washington	1 2	5	
York	4	1	
Totals	94	127	22

6-Ages.

	Males.	Females.	Totals.
5 to 10 years. 10 to 15 years. 15 to 20 years. 20 to 30 years. 30 to 40 years. 40 to 50 years. Over 50 years. Totals.	$ \begin{array}{r} 4 \\ 8 \\ 9 \\ 34 \\ 22 \\ 14 \\ 3 \\ \hline 94 \\ \end{array} $	$ \begin{array}{r} 7 \\ 15 \\ 21 \\ 45 \\ 24 \\ 10 \\ 5 \\ 127 \\ \end{array} $	11 23 30 79 46 24 8 221

WESTERN MAINE SANATORIUM.

7-CIVIL CONDITION.

	Males.	Females.	Totals.
Single . Married . Widowed . Separated . Divoreed .	33		130 63 10
Totals	94	127	22

8-Education.

	Males.	Females.	Totals.
cademic	2	- 3 74 39 2 5 4 - 127	2
ollegiate	5		8
lementary	63		137
igh School	17		56
ble to "read and write"	1		3
literate	3		8
ormal school	-		4
ot given	3		3
Totals	94		221

9-Religion.

	Males.	Females.	Totals
Catholics. Hebrews Mohammedan. Protestants.	29 1 1 63		75 3 1 142
Totals	94	127	221

	Males.	Females.	Totals.
A migulturists	1		
Agriculturists	i		i
Barbers	1 1	-	
Blacksmith	1		
Bookkeepers	-	3	
Canvasser	-	1	
Chocolate dipper		1	
Clergyman	1		
Clerks	6		1.
Cooks	1	1	
Dentists	1		
Dressmakers		1	
Flectricians		(– i	
Farmers	6		
Housemaids	- 1	13	1
Housewives	-	39	3
Laborers	8		
Loom fixers	1) - '	
Lumberman	1	-	
Machinists.	5	-	
Mechanic	1	{ _	(
Mill operatives	7	3	10
No occupation	1 –	1	
Nurses.	<u> </u> _	7	
Painters	3	[_ ·	;
Paper makers	1 1	- 1	
Porters.	l ī	- 1	
Painters	1	- 1	
Railroading	4	i –	i .
Salesmen	3		
Sardine packers	Ĭ		
School teachers.			1
	22	_ *	
Di la montra da la construcción de la const		3	1
Shoemakers.	l ĭ		
Snowshoe Makers.	_ 1	2	
Stenographers	- 2		i ·
Stone cutters	17	35	
Students	1 14		0
Student nurses	/ - ,	2	
Teamsters	3		
Textile workers	2		1
Typists	l – .	1	
Waiters	2		5
Waitresses		3	
Watchmakers	1 1	1	
Weavers	1	1	
Totals	94	127	22

10-OCCUPATIONS.

II-ETIOLOGY.

1Sources of Infection.	Males.	Females.	Totals.
Family: Mother, father, sister or brother Other relatives Associations, other than relatives Marked exposure to infection *Doubtful		$34 \\ 4 \\ 10 \\ 1 \\ 16$	56 7 18 1 29
2CONTRIBUTORY CAUSES.		((
Store, stone or office dust. Wool or cotton dust. Shoe or machine dust. Box or Paper mill.	1	5 3 1 ~	10 4 8 4

*Many patients were children who knew little of their history. Columns cannot be totalled on account of patients having exposure from more than ne source.

12-PRESUMABLE DURATION OF DISEASE BEFORE ADMISSION.

	M les	Females.	l'otais.
From 0 to 3 months. From 3 to 6 months. From 6 to 12 months. From 1 to 2 years. From 2 to 5 years. From 5 to 10 years. From 5 to 10 years.	$13 \\ 24 \\ 22 \\ 24 \\ 24 \\ 5$	22 28	4 27 46 50 58 20
Over 20 years	2	5	-

Average duration by months, 26.82.

13-PROMINENT SYMPTOMS PREVIOUS TO ADMISSION.

	Males.	Females.	Totals.	Percentage
Hoarseness. Cough Expectoration Chills. Fever.	18 39 36 22 25	$32 \\ 51 \\ 48 \\ 24 \\ 46 \\ 25$	50 90 94 46 71 55	43.8 78.8 82.4 40.3 62.4 48.2
Night Sweats Haemoptysis Pleurisy	23 32	$ \begin{array}{r} 23 \\ 31 \\ 46 \end{array} $	54 78	40.47.68.4

Columns cannot be totaled as most patients had more than cne symptom. Four patients gave no history of prominent symptoms.

	FROM TO J	JUNE 30, JULY 1, 19	1917. 18.	PREVIO	оив то Ji 1917.	JLY 1,
	Males.	Females.	Totals.	Males.	Females.	Totals.
Incipient. Moderately advanced. Far advanced. Non-tuberculous. Totals.	12 27 - - 4°	16 4 - 66	2 · 70 16 - 114	11 98 13 - 122	27 10 20 1 156	38 206 33 1 278

14-PHYSICAL CONDITION ON ADMISSION,

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15-TABLE SHOWING TIME LOST IN DETERMINING PRESENCE OF TUBERCULOSIS.

	0-3 wks.	3–6 wks	6–10 wks.	10 wks. to 3 mos.	3–6 mos.	6 mos. to 1 yr.	1-2 yrs.	2-5 yrs.	Five and over.	Practically no time lost.
*Number of patients who lost time between first symptom and consulting physician	ŝ	IJ.	9	ũ	2	4	3	1	I	80
TNumber of instances in which time was lost by physician in making a diagnosis of the consultation	1	5	9	80	13	61		ŝ	1	74

*Average loss of time 6.9 weeks. †Average loss of time:11.6 weeks.

,

16-Average Number of Bed Patients, by Months.

	Males.	Females.	Totals.
July. August. September October. November December January. February. February. April March. April June.	9.3 9.7 9.5 10.2 10.6 9.2	$\begin{array}{c} 13.2\\ 14.7\\ 13.4\\ 13.9\\ 13\\ 16.6\\ 18.1\\ 18.1\\ 16.1\\ 12.5\end{array}$	$\begin{array}{c} 20.5\\ 22.5\\ 24.4\\ 23.4\\ 23.2\\ 27.2\\ 27.3\\ 27.3\\ 26.6\\ 24.4\\ 19.9\end{array}$
Daily average	9.6	14.6	24.25

17—DURATION OF RESIDENCE. PATIENTS IN SANATORIUM JUNE 30, 1918.

	Males.	Females.	Totals.
Under 3 months 3 to 6 months 6 to 12 months 12 to 18 months 18 to 24 months Over 2 years	3 9	14 6 20 7 3 7	23 9 29 12 7 9
Totals	32	57	89

18-DURATION OF TREATMENT OF DISCHARGED PATIENTS.

	Males.	Females.	Totals.
Under 1 month 1 to 3 months 3 to 6 months 6 to 12 months 12 to 18 months 18 to 24 months Over 2 years	11 15 15 12 2	2 8 22 21 10 7	6 19 37 36 22 9 3
Totals Average duration of treatment by months 9.	62	70	132

WESTERN MAINE SANATORIUM.

19-CAUSES OF DISCHARGE.

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	Males.	Females.	Totals.
Left with consent Left against advice. Infraction of rules. With consent to go to another institution. Died.	31 3 4		46 60 3 15 8
Totals	62	70	132

20-Reasons Given for Leaving Against Advice.

	Males.	Females.	Totals.
Homesickness. Support or care of family. To continue treatment at home. To return to work No good reason given.			4 24 20
Totals	31	29	60

21-PHYSICAL CONDITION ON DISCHARGE.

	Males.	Females.	Totals.	Per cent.
Arrested. App rently arrested. Quiscert. Improved. Unimproved. Died.	23	2 6 23 28 9 2	4 13 46 44 17 8	3.03 9.84 34.84 33.33 12.87 6.06
Totals	62	70	132	<u>99.97</u>

22-SUMMARY OF PRESENT CONDITION OF ALL CASES DIS-CHARGED PREVIOUS TO JANUARY I, 1918, GROUPED ACCORDING TO THE CONDITION ON ADMISSION.

CLASS.	No.	Per cent.	Condition June 30, 1918.	No.	Per cent.
Incipient	43	15.1	Living and working Living, not working Dead Unknown	33 2 1 1	76.7 18.6 2.3 3.3
Moderately advanced	215	75.4	Living and working Living, not working Dead Unknown	110 56 41 8	51.1 26.0 19.1 3.7
Far advanced	27	9.4	Living and working iving, not working Dead Unknown	4 7 15 1	$14.8 \\ 25.9 \\ 55.5 \\ 3.7$

One case tabulated as unknown, reported twice as living and working. One case, non-tuberculous, not traced. One case not traced at all.

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23-Summary of Present Condition of All Cases Discharged Previous to January 1, 1918, Grouped According to Their Condition on Discharge.

CONDITION ON DISCHARGE.	No.	Per cent.	Condition June 30, 1918.	No.	Per cent.
Arrested	3	1.0	Living and working Living, not working Dead. Unknown	2 1 -	66.6 33.3
Apparently arrested	21	7.3	Living and working Living, not working Dead Unknown	$\begin{array}{r}16\\2\\1\\2\end{array}$	76.1 9.5 4.7 9.5
Quiescent	66	32.3	Living and working Living, not working Dead Unknown		$73.2 \\ 23.2 \\ 1.1 \\ 2.3$
Improved	141	49.4	Living and working Living, not working Dead Unknown	66 40 30 5	46.8 28.3 21.2 3.5
Unimproved	34	11.9	Living and working Viving, not working Dead Unknown	1 8 25	2.9 23 5 73.5

Class.	of phy- grasse- g to n.	banol .9mit	TYGIENIC-DEI	TETIC TREATM 90 DAI	ENT WITH ANI 'S OR MORE.	REEATMENT WITH AND WITHOUT TUBERCULIN. 110 PA 90 DAYS OR MORE. AVERAGE RESIDENCE, 295 DAYS.	BERCULIN. 1 HDENCE, 295	I'YGIENIC-DELTETIC TREATMENT WITH AND WITHOUT TUBERCULIN. 110 PATIENTS WHO STAYED 90 DAYS OR MORE. AVERAGE RESIDENCE, 295 DAYS.	WHO STAYED
	Extent sical sical cordin redin Turba	T. B. at any	Cases.	Arıested.	Apparently arrested.	Quiescent.	Improved.	Unimproved.	Died.
Incipient Incipient Incipient Moderately advanced Moderately advanced Moderately advanced Moderately advanced Moderately advanced Far advanced		00+0+0+0+++	$\begin{array}{c} 8 & = 7 \\ 16 & = 14 \\ 2 & = 19 \\ 2 & = 19 \\ 2 & = 19 \\ 2 & = 18 \\ 2 & = 10 \\ 3 & = 21 \\ 3 & = 21 \\ 3 & = 23 \\ 16 \\ 3 & = 16 \\ 3 \\ 16 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 2 \\ 1 \\ 1$	2 = 25.0 1 = 6.2 1 = 50.0	2 = 25.0 $6 = 37.5$ $1 = 5.0$ $2 = 16.6$ $1 = 6.8$ $1 = 7.1$	$\begin{array}{c} 2 = 25.0 \\ 6 = 37.5 \\ 6 = 37.5 \\ 10 = 83.3 \\ 8 = 50.0 \\ 10 = 55.5 \\ 10 = 55.5 \end{array}$	$\begin{array}{c} 2 &= 25.0\\ 1 &= 65.0\\ 1 &= 650.0\\ 1 &= 650.0\\ 1 &= 50.0\\ 4 &= 26.6\\ 4 &= 26.6\\ 4 &= 22.2\\ 4 &= 22.2\\ 2 &= 28.55 \end{array}$	1 = 6.2 $1 = 5.0$ $2 = 13.3$ $3 = 16.6$ $5 = 35.7$	1 = 6.2 $1 = 5.0$ $1 = 5.0$ $1 = 5.5$ $4 = 28.5$
In this summary, 15 cases which had tubercle bacilli in the sputum previous to admission, are counted as * as well as those which had tubercle bacil- li at any time during residence.	d tubercl	e bacil	li in the sputı	um previous to	o admission, a	re counted as +	as well as tho	se which had to	ubercle bacil-

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WESTERN MAINE SANATORIUM.

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25—Summary.

Days with fog.	©©©©⊢ ⊣40	17
Days with snow.	- +++++++++++++++++++++++++++++++++	33
Days with rain.	いてのに」 4 の日の	29
Mean temperature. Clear days. cloudy days. Cloudy days.	0101000000401 40	39
Partly cloudy days.	00-1-0-1-011	12
Clear days.	61992885555555555555555555555555555555555	223
	$\begin{array}{c} & 71\\ & 72\\ & 72\\ & 53\\ & 53\\ & 53\\ & 53\\ & 60\\ & 60\\ & 60\\ \end{array}$	
Minimum Maximum temperature.	247252852628888 2472528528888888888888888888888888888888	1
Minimum temperature.	25225845 882258 882258 89758 89758 8	
Months.	July August August September October Docember December January March March May Junay	Totals

Reports for May and June not complete.

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WESTERN MAINE SANATORIUM.

WESTERN MAINE SANATORIUM.

Hebron, Maine.

Fiscal statement for the year ending June 30, 1918:

Assets and Liabilities.

Assets:	
State of Maine, auditor's balance	\$47,1 <i>2</i> 0 10
Patients' accounts	4,943 33
Inventory, equipment and supplies	42,302 42
Plant	186,092 22_
Trust funds invested	76,100 00

\$356,558 07

.

Liabilities :

Appropriations,			
Personal services	\$1,2,552	58	
Food supplies	16,794	24	
Repairs and equipment	3,846	05	
General expense	10,914	23	
1917 Balances	243	61	
			44,350 71
Audit vouchers			3,203 81
Income, due State			4,943 33
Trust funds,			
Levi M. Stewart Fund	\$75,000	00	
W. W. Brown Fund	1,000	00	
Hebron's Home Tel. stock	100	00	
			\$76,100 00
Surplus			227,960 22
		-	\$356,558 07

INCOME AND EXPENSES.

INCOME.

Care and treatment of patients	\$9,488 37	
Laundry	876 58	
· · · ·		10,364 95
Dividend, W. W. Brown Fund	\$30 00	
Interest, Levi M. Stewart Fund	3,640 00	
-		3,670 00
Transients	\$221 03	
Store	159 98	
Training school	3 83	
Rebate on liability insurance	73 94	
-		458 78

Farm :		
Dairy	\$7,525 03	
Swine	2,706 13	
Poultry	620 63	
Fields and orchards	1,899 50	
Stable	1,065 66	
Rent of house on Nichol's farm	142 96	
		13,959 91
		\$28,453 64
Increase in inventory	\$6,459 39	+ /1 50 -1
Increase in plant	2,014.59	
Increase in plant		\$8,473 98
Appropriation		87,219 16
TYDENCE		\$124,146 78
Salaries and Pay Roll:		
Trustees	\$540 00	
Steward	288 93	
Investigator	401 58	
Institution salaries	17,554 45	`
Institution subarres		18,784 96
Food supplies		33,583 84
Renewals and Equipment: ,		
Labor	\$1,847 06	
Auto truck	2,431 51	
Materials for buildings and grounds	1,681 27	
Team work	300 00	
Household fittings and furnishings	1,089 85	
Office furniture and equipment	141 88	
Surgical instruments	7 12	
Machinery and tools	615 00	
Insurance	481 45	
Pipe and fittings	. 15 14	_
		8,610 28
General Expenses:	¢060 10	
Range coal	\$262 13	
Water	300 00 506 75	
Electricity	1,602 69	
Household supplies	44 94	
Auto truck supplies	721 25	
Office supplies and expense		
Medical supplies and expense Trustees, expenses	3,054 44 631 41	
Transportation, traveling expense		
Laundry	395 52	
School supplies	395 52 89 25	
Unclassified	385 87	
Unclassified		8,674 94
		/-/ - / -

Heat, Light and Power: Coal, including freight and hauling Salaries Machinery and tools Pipe and fittings Supplies Electrical supplies	\$11,662 1,188 36 58 390 238	38 49 27 48	13,575 13
Farm: Labor Equipment Grain Seeds and fertilizer Pasture General expenses	\$2,810 716 5,913 149 70 178	41 34 10 00	
			9,837 70 \$93,066 85
Sewerage tanks, construction		-	2,014 59
			\$95,081 44
Cash sent to State treasurer			13,307 11
Credits			3,908 24
Charged off			1,371 27
Increase in income			104 51
Increase in surplus		-	
			\$124,146 78
Per Capita Cost.	-0		·
July I, 1917, to June 30, 19			
Average number of patients for year	•		103.9
Total maintenance appropriation expenditures	82,655	10	
Less increased inventory			
	\$76,195	71	
Average gross weekly per capita cost Less miscellaneous income	- 60-	~	14.103
Less miscenaneous income	7,695		I.424
Average weekly per capita expense for support	\$68,500	44	
of patients and maintenance of property			12.679
Less income from patients		95	1.918
	\$58,135	49	
Average weekly per capita cost to State			10.761

30

CENTRAL MAINE SANATORIUM

THIRD ANNUAL REPORT.

June 30, 1917 to June 30, 1918.

To the Honorable Board of Trustees for Tuberculosis Sanatoriums:

I have the honor to submit the third annual report of the Central Maine Sanatorium.

The number of treatment days provided was 29,646, an increase of 14,028 over last year. The highest daily census was 111 and the lowest 42. The daily average of patients was 81.2 as compared with 42.8 last year. The average length of stay was 80.1 days.

The average gain in weight was 41 lbs. and the greatest individual gain 32 lbs.

Of the 370 patients admitted 44 or 11.62% were incipient, 184 or 49.72% were moderately advanced, 133 or 35.94% were far advanced, 7 or 1.89% per non-tuberculosis and 2 or .54% were surgical tuberculosis.

Officers.

Karl B. Sturgis, M. D., was appointed assistant superintendent March, 1918. Miss Dorothy Wells was appointed matron but has resigned. Miss Elizabeth Marco has been retained as superintendent of nurses.

MEDICAL REPORT.

It is noted with much gratification that although the number of hospital days is nearly doubled, the number of deceased patients is one less than last year. The reason is found in the closer co-operation of physicians and more and better work by the State, district and county nurses.

Medical treatment has been along the lines used in former years. I believe that our method of treatment has improved much in that the patient is treated more individually. At the first examination the patient is told in a general way and frankly, the extent of involvment and why rest or prolonged treatment is necessary, impressing on him the necessity of his complete intelligent co-operation.

Our greatly increased capacity has allowed a greater range in classification. Wards 5, 6, 7, top floor, Cottage A are reserved for bed patients. Wards 2, 3, 4, for those cases allowed sitting up exercise and Ward I for male ambulatory cases. The Chase Building is used for female ambulatory cases only, at present. The north ward of this building can be used for male or female patients according to the preponderance of either sex on the waiting list.

It is a matter of regret that the average duration of residence is not more lengthy. Six months is necessary in all cases and the average case should undergo at least one year of treatment. It is necessary in order that treatment bear fruit that some provision be made at the sanatorium to prepare the patient for his position in society. Patients on discharge, owing to the short length of stay, have little idea of their capacity for work, or better, of their limitations. It will be impossible for many of these to resume their former avocation, particularly those of the laboring class. For this reason it would seem advisable to have a manual training school under competent management where patients could be tested out as to their working capacity and also where they could be taught new trades which would not interfere with a continuance of good health nor impair their earning power. (I recommend that provision for the erection of such a building be included in the estimates for the next two years.)

No table on condition on discharge is included in this report. Owing to the great number of discharges being far advanced cases and also the greater number of favorable cases being transferred to Hebron, the work done here appeared in a light not justified by the facts.

TRAINING SCHOOL.

Three have been graduated during the past year. There are 4 pupil nurses in the training school at present.

RECOMMENDATIONS.

Consulting Staff. A consulting staff of physicians, consisting of surgeon, internist, and laryngologist, should be appointed.

Vegetable Cellar. A separate building for the proper care of vegetables, and also flour is needed, and should be built this fall if possible.

Defective Heating. The corridor Ward 1, Cottage "A," is heated by open supply pipe which is inadequate. Radiators should be installed ata once.

Road. The building of a road from the pump house to the kitchen with connecting service roads is recommended.

Moving Picture Machine Booth. As we have the machine i,t would seem advisable to purchase a booth as soon as possible. The site of installation of this booth presents some difficulty but I believe some slight changes could be made in the dining room which would conveniently take care of the booth and at the same time not be detrimental to the good appearance of the room.

Weigh Scales. These should be installed for the proper checking of coal, potatoes, etc.

Vacuum Cleaners. As both new buildings are piped, the installation of machines would be an advantage.

Under-Ground Passage. An underground passage from Cottage A to the main dining room would be a great comfort to the patients and of great value in the conveyance of food.

Children's Pavilion. A special building for the care of children is a necessity. If this is built as contemplated it will necessitate the erection of a nurses' home. It is hoped that both these buildings can be built next year.

X-ray Machine. The installation of a good machine would aid greatly in the diagnosis of many doubtful cases and is earnestly recommended for consideration.

Acknowledgments. During the year, we have received many donations of magazines, books, papers, clothing and flowers and for which we are sincerely grateful.

I wish to express my thanks to the Protestant and Catholic clergy for religious services performed.

To our heads of departments, nurses and employees I wish to express my appreciation for loyal service rendered.

To the Board, I am indeed grateful for your continued confidence.

Respectfully submitted,

JOHN F. SHAW,

Superintendent.

FINANCIAL STATEMENT.

STATEMENTS OF ASSETS AND LIABILITIES.

ASSETS.

State of Maine account, consisting of auditor's ba	lance, viz.	
Appropriation for maintenance 1918 unused	\$19,479 63	
Appropriation for Chase Mem. equipment	2,899 31	
Appropriation for new pavilion (1917)	<i>2</i> 8 16	
Appropriation for sewerage and water main	57 50	
	\$21,464 60	
Appropriation for Remod. Chase Mem	10,340 47	
(Overdrawn)		11,124 13
Patient's Account:		
Amount due from various private means		3,259 29
Plant Account:	,	
Consisting of building and land purchased by	order of	
Governor and Council, Sept. 29, 1915, under cl	hapter 351,	
Public Laws 1915 and known as Chase Memo	rial Build-	•
ing		15,000 00
Remodeling Chase Memorial Building		25,840 49
New pavilion, known as Cottage A		46,573 23
Sewerage and water mains		
Inventories:		5,5 70
Consisting of supplies and equipment		30,489 44

\$138,333 31

LIABILITIES.

Appropriation Accounts:	
Consisting of balance appropriation unexpired,	
Personal services	\$3,405 17
Food supplies	10,339 17
General expenses	5,151 58
Chase Mem. equipment	2,899 31
New pavilion	28 18
Sewerage and water main	57 50

\$22,080 89

•

•				
Repairs and equipment				
(Overdrawn)	\$4.202 85			
Remodeling Chase Mem.				
(Overdrawn)	\$10.340 40			
(Overlai awii)		14,632 82		
		14,032 02	7,448 07	,
A did a d. Marsahaman			7,440 07	
Audited Vouchers:			14 170 15	
Unpaid vouchers June 30, 1918	• • • • • • • • • • • • • • •		13,179 15	,
Income due State:	-	A		
Being patient's account Ledger A	••••	\$1,023 42		
Being patient's account Ledger B	••••	2,235 87		
	-		3,259 29	,
Surplus: :				
Consisting of buildings, grounds, an	d inven-			
tory, etc		114,386 80		
			138,333 31	l
Income and Ex	PENSE.			
Incomo				
Income: Appropriation accounts	đ	510 622 60		
Board of patients				
Increase in inventory				
Increase in plant	•••••		-(()- ()	~
			<i>2</i> 61,682 64	2
Expenses:		•		
Salaries and pay roll				
Subsistence				
Clothing		59 55		
Renewals and equipment		14,816 46		
Sundry expenses		20,712 65		
Remodeling Chase Memorial		25,840 49		
Equipment Chase Memorial		4,153 97		
Cottage A		46,573 <i>2</i> 3		
Sewerage and water main		5,986 73		
Income to State		8,365 04		
Surplus increased		94,029 48		
-			261,682 62	2
MAINTENANCE APPROPRIATIO	N EVDEN	DITUDEC		
WAINTENANCE APPROPRIATIO		-		
	1917	1918	Tota	
Personal services				
Food supplies				
Renewals and equipment				
General expenses	9,543 62	11,948 42	21,492 0	4
-				
Expended from 1917 appropriation	\$31,037 25			
		¢.0.6.6		
Expended from 1918 appropriation		\$48,696 43		
Total expended for year			\$70,800 6	- 8
Total expended for year			\$79,833 6	0
•				

CENTRAL MAINE SANATORIUM.

Ho	ospital days			29,	646
	eekly per capita cost			12	88
	come (actual cash received)			7,506	45
	eekly per capita income			I	75
We	eekly expenses to State	• • • • • • • •	•••••	11	13
	LIABILITIES.				
7.	Appropriation accounts			\$7.448	07
8.	Income due State			3.259	29
	Maintenance expenses			5.179	14
	Land, buildings, etc			8,000	
9.	Surplus (or net assets)		• • • • • • • •	104.130	98
10.	Total		\$	128,017	49
	CENSUS OR POPULATION R	ETURN.			
1.	Number brought forward from last return	1:			
	In-Patients.	Males.	Female	s. To	tal.
	(a) Present	21	25	4	б
2.	Number of admissions during the period	153	171	32.	4
				<u>.</u>	
3.	Number of withdrawals:			37	0
3.	(a) By discharge, etc	96	117		
	(b) By death	90 27	20	26	0
4.	Number remaining at midnight on last	-,	20		0
	day of period	53	57	11	0
				<u> </u>	-
				370	C
5.	Average number of patients during period (daily)				
	period (dany)	Paid.	Free	. To	to1
	(a) Present	3I.3	46.8		8. 1
6.	Largest number of patients present on	51.5	40.		
	any one day during the period			113	I
7.	Number of beds for patients (normal				
	capacity)			122	2
		0	ut-Patier	ıt.	
			epartmer	t	
			istrict		
	In-Pati		urse	m i	
_	Employees. Departm		ervice.	Tot	al.
12.	Daily average number of employees o				
	pay roll or receiving allowances such a	.5			
	board, room, etc.: (a) Physician	2			
		5			
	(-,	~			

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	(c) Pupil nurses	4	
	(d) Attendants	I	
	(e) Paid solicitors and collectors		
	(f) Other employees	21	33
13.	Of the total of item 12, the number		
	provided by the institution with,		
	(a) Board and room, was	32	32
	(b) With board only		

I, John F. Shaw, certify that the foregoing schedules contain a true statement of the income, expenses, assets, and liabilities of the abovenamed institution for the year indicated; that the same agrees with the books of account kept by the financial officer of the institution or under his direction; that these accounts have been audited by Geo. H. Bangs, special auditor, and that all items of income have been properly accounted for and all items of expense properly avouched.

JOHN F. SHAW,

Superintendent.

SPECIAL REPORT REQUIRED BY STATE BOARD OF CHARITIES AND CORRECTIONS.

Fiscal statement of the Central Maine Sanatorium for the year ending June 30, 1918:

SUMMARY.

І. 2.	Surplus (or net assets) as reported to the State Board of Charities and Corrections at the end of the previous fiscal year Income for the year as per Schedule A	\$20,367 3 2 251,426 80
3.	Total to be accounted for	\$271,794 12
4. 5. 6.	Maintenance expenses incurred during the year as per Schedule B Special expenses as per Schedule C Surplus (or net assets) at the end of this year as per Schedule D	\$80,897 65 86,765 49 104,130 98
7 .	Total accounted for (same as item 3)	\$271,794 12
	SCHEDULE A-INCOME.	
Ι.	Board and care paid by the State, by counties, by municipalities, and by persons cared for or their relatives and friends	\$7,506 45
2.	Other income:	Ψ 7 ,3°° ч 3
	(a) Increase in value of land and buildings	78,400 45
	(b) Increase in inventories	14,866 30
3.	State, county or municipal appropriations (except pay- ments for board and care—see item 2)	150,653 60
4.	Total income	\$251,426 80
	Schedule B-Maintenance Expenses.	
I.	Personal services: (a) All other employees, except as noted under item 4	\$13,207 94
2.	Food supplies	27,947 08
 3.	Clothing	59 55
4 .	Repairs and equipment:	
	(a) Salaries and wages, furniture, equipment, mate-	2
	rials and insurance	18,970 43

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5.	General expenses:		
	(a) Heat, light and water	3.955	91
	(b) Other maintenance expenses and supplies	16,756	74
6.	- Total maintenance expenses	\$80,897	65

Schedule C-Special Expenses.

	Land, buildings and attached fixtures Income sent State	
3	Total special expenses	\$86,765 49

Schedule D-Assets and Liabilities.

Ι.	Land, buildings and attached fixtures, used for insti-	
	tution purposes	\$93,400 45
2.	Furniture and equipment	12.591 38
	Supplies	
4.	Accounts receivable	3,259 29
5.	State of Maine account	11,124 13
6.	Total	\$128,017 49

STATISTICAL TABLES.

MOVEMENT OF POPULATION.

	Male.	Female.	Total.
Patients in Sanatorium June 30, 1917	21	25	46
Patients admitted	153	171	324
			370
Patients transferred	45	66	III
Patients discharged	51	51	102
Patients deceased	27	20	47
Patients in Sanatorium June 30, 1918	53	57	110
			370
Voluntary discharges			95
Discharged as non-tuberculous			7

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CENTRAL MAINE SANATORIUM.

TABLE I.

Admittance by Months.

	Male.	Female.	Total.
July, 1917	18	15	33
August, 1917	II	14	25
September, 1917	14	15	29
October, 1917	8	8	16
November, 1917	5	9	14
December, 1917	14	17	31
January, 1918	8	14	22
February, 1918	12	10	22
March, 1918	13	23	36
April, 1918	22	22	44
May, 1918	15	10	25
June, 1918	13	14	27

TABLE 2.

HOSPITAL DAYS.

July	1,756
August	2,060
September	2,061
October	2,106
November	1,992
December	2,199
January	2,475
February	2,237
March	3,000
April	2,933
May	3,061
June	3,036
	28,916

TABLE 3.

Admissions by Counties.

`	Male.	Female.	Total.
Androscoggin	18	19	37
Aroostook		32	58
Cumberland	33	27	60
Franklin	4	3	7
Hancock			5
Kennebec	2 6	21	47
Knox	II	7	18

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Lincoln	3	0	3
Oxford	õ	6	12
Penobscot	7	20	27
Piscataquis	13	II	24
Sagadahoc	4	7	II
Somerset	15	15	30
Waldo	I	3	4
Washington	9	9	18
York	6	4	10
	174	19б	37 0

TABLE 4.

CONDITION OF PATIENTS ON ADMISSION.

	Male.	Female.	Total.
Incipient	10	34	44
Moderately advanced	79	105	184
Far advanced	80	53	133
Surgical T. B	0	2	2
Non T. B	5	2	7
	174	196	370

TABLE 5.

CIVIL CONDITION OF PATIENTS.

	Male.	Female.	Total.
Married	57	87	141
Single		98	201
Widowed		13	24
Divorced	3	I	4
	174	196	370

TABLE 6.

NATIVITY OF PATIENTS.

United States	292
Albania	4
Canada	51
England	3
Greece	I
Ireland	3
Italy	4
Russia	4
Scotland	2
Spain	2
Sweden	2
Syria	2

TABLE 7.

AGE AND SEX.

ADMITTANCES.

AgeUnder	10	10-19	20-29	30-39	40-49	50-59	60	70-79	Total
Male	5	25	64	37	<i>2</i> 9	12	2	0	174
Female	14	39	74	36	24	7	0	2	196
	19	64	138	73	53	19	2	2	370

TABLE 8.

Age and Sex of Deceased Patients.

AgeUnder	10	10-19	20-29	30-39	40-49	50-59	60-69	Total
Male	0	6	5	8	6	2	I	28
Female	I	3	8	3	4	0	0	19
						—		
	I	9	13	11	10	2	I	47

TABLE II.

DEATHS, DURATION OF RESIDENCE AND CAUSE OF DEATH.

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C N	Duration	Cause of Death
Case No.	of Residence.	Cause of Death.
263	66 weeks	Pulmonary T. B.
095	134 weeks	Pulmonary T. B.
477	14 weeks	Pulmonary T. B.
510	14 weeks	Nephritis and Pulmonary T. B.
429	33 weeks	Pulmonary T. B.
449	12 weeks	Laryngeal and Pulmonary T. B.
80	25 weeks	Pulmonary T. B.
443	49 weeks	Pulmonary T. B.
250	77 weeks	Pulmonary T. B.
516	15 weeks	Laryngeal and Pulmonary T. B.
619	11 weeks	Pulmonary T. B.
6,27	23 weeks	Pulmonary T. B.
799	3 weeks	Pulmonary T. B.
767	5 weeks	Laryngeal and Pulmonary T. B.
727	3 weeks	Pulmonary T. B.
783	4 weeks	Pulmonary T. B.
638	12 weeks	Pulmonary T. B.
738	12 weeks	Hemorrhage and Pulmonary T. B.
761	3 weeks	Pulmonary T. B.
755	6 weeks	Pulmonary T. B.
651	3 days	Pulmonary T. B.

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589	2 weeks	Pulmonary T. B.
857	4 weeks	T. B. Enteritis and Pulmonary T. B.
734	5 days	Pulmonary T. B.
563	11 days	Pulmonary T. B.
537	33 weeks	Pulmonary T. B.
540	24 weeks	Pulmonary T. B.
539	39 weeks	Pulmonary T. B.
577	45 weeks	Pulmonary T. B.
559	18 weeks	Pulmonary T. B.
583	39 weeks	Pulmonary T. B.
576	26 weeks	Pulmonary T. B.
620	6 weeks	Gassed and Pulmonary T. B.
592	3 weeks	Pulmonary T. B.
594	35 weeks	Hemorrhage and Pulmonary T. B.
593	3 weeks	Pulmonary T. B.
644	3 weeks	Pulmonary T. B.
775	9 weeks	Pulmonary T. B.
781	9 weeks	Pulmonary T. B.
817	2 weeks	Pulmonary T, B.
696	11 weeks	Hemorrhage and Pulmonary T. B.
584	27 weeks	Pulmonary T. B.
872	5 weeks	Pulmonary T. B.
394	29 weeks	T. B. Adenitis, Pott's and Pulmonary
		Т. В.
567	6 weeks	Pulmonary T. B.
616	2 days	Pulmonary T. B.
416	12 weeks	Pulmonary T. B.
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