16-SUP-ENM

TABLE NO. 17.

DAILY AMOUNT OF EXERCISE AND WORK ACCOMPLISHED BY ONE HUNDRED AND SEVENTY-SIX PATIENTS ON DISCHARGE, DURING THE BIENNIAL PERIOD ENDING JULY 31, 1916.

One hour and less than two hours.	40	Five hours and less than six hours.	19
Two hours and less than three hours	34	Six hours and less than seven hours	5
Three hours and less than four hours	48	Seven hours and over	2
Four hours and less than five hours	28	Total	176

TABLE NO. 18.

OCCURRENCE OF HEMORRHAGE IN PATIENTS DISCHARGED DURING THE BIENNIAL PERIOD ENDING JULY 31, 1916.

Patients having had hemorrhages prior to admission but not during residence	62	33	95	89	45	134
Patients having hemorrhages during residence	23	22	45	40	31	71
Patients having no history of hemorrhages at any time	59	68	127	113	85	198
No information	...	1	1	...	...	...
Total	144	124	268	242	161	403

TABLE NO. 19.

RESULTS OF SPUTUM EXAMINATION OF PATIENTS DISCHARGED.

	Bacilli Demonstrated During Residence.	Bacilli Demonstrated Prior to Admission, But Not During Residence.	No Bacilli Demonstrated at Any Time.	No Examination or No Sputum.	Total.
Year Ending July 31, 1915.					
Males	120	8	15	1	144
Females	72	7	34	11	124
Totals	192	15	49	12	268
Year Ending July 31, 1916.					
Males	196	20	18	8	242
Females	118	10	21	12	161
Totals	314	30	39	20	403

TABLE NO. 20.

METEOROLOGICAL REPORT.

Latitude, 47. Longitude, 94.30.

Date.	Mean Monthly Temperature.	Clear Days.	Cloudy Days.	Partly Cloudy Days.	Precipitation.
August, 1914	92.66	10	14	7	5.23
September, 1914	58.01	13	9	8	4.32
October, 1914	51.27	14	10	7	2.75
November, 1914	32.44	11	17	2	.37
December, 1914	2.96	19	8	4	13.50
January, 1915	14.06	18	6	7	1.70
February, 1915	21.35	13	12	3	.90
March, 1915	26.46	20	6	5	.30
April, 1915	51.23	18	8	4	.75
May, 1915	49.85	16	12	3	1.15
June, 1915	58.25	14	8	8	2.25
July, 1915	64.03	16	8	7	4.80
August, 1915	62.85	21	6	4	.98
September, 1915	56.85	12	13	5	2.01
October	47.30	16	7	8	1.58
November, 1915	28.43	10	14	6	.99
December, 1915	17.72	11	12	8	.48
January, 1916	8.41	13	13	5	1.32
February, 1916	11.70	20	6	3	.28
March, 1916	20.90	17	11	3	1.01
April, 1916	38.00	9	11	10	2.07
May, 1916	50.36	12	11	8	4.01
June, 1916	57.48	17	5	8	4.50
July, 1916	73.23	21	3	7	1.70

State Hospital for Crippled and Deformed Children

REPORT FOR BIENNIAL PERIOD ENDING JULY 31, 1916.

MISS ELIZABETH McGREGOR.....Superintendent
MISS MARIE D. HOPPE.....Superintendent of Nurses
MISS HILDA HOFF.....Steward

St. Paul, Minn., September 6, 1916.

State Board of Control, St. Paul, Minn.:

Gentlemen: I submit herewith report for the biennial period August 1, 1914, to August 1, 1916.

The addition and improvements to the hospital under construction at the end of the last biennial period have been completed. The capacity of the hospital has been doubled. All new cases have been received at the State Hospital during this period and all cases have been cared for since January, 1915, when the new wings were opened. The laundry work formerly done outside is now all done in the institution. An out patient department has been established. An operating room has been fitted up and thoroughly equipped A shop for bracemaking, an X-ray department, laboratory, and contagious ward have been added since last report. A refrigerator has been built in and the room formerly used as a boiler room has been made into dining rooms for the staff and employes. The library is on the second floor of the west wing. This room was furnished as a memorial to Mrs. A. R. Dalrymple.

Repairs and Betterments.—A vacuum line system has been put in the old part of the building. Steam pipes in the old part of the building have been covered.

The basements under the solariums have been made into storerooms for storm windows and screens.

The walls in the library, schoolrooms, new and old wards, halls, stairways and the rooms occupied by the staff have been painted. Necessary painting has been done on the outside of the building.

Instruction and Amusement.—The supplies for the departments of domestic science, domestic arts, sloyd shop and the books and supplies for the grade school work has been provided from the fund. We have also purchased new books for the library and all magazines for the library and school department. An exhibit has been made each year at the state fair, at the conference of Charities and Correction held at Bemidji and New Ulm, at the Woman's Federation meeting held at Rochester, at orthopedic meetings held at Detroit, Michigan, and Lincoln, Nebraska, and at the National Conference of Charities and Correction held at Indianapolis.

Industrial Equipment—Until June, 1915, the jackets, braces and appliances were made to order or purchased from dealers. In June, 1915, we opened our bracemaking shop, employed a competent bracemaker who teaches the older boys the bracemaking trade. Some valuable equipment has been added to the hospital department from this fund.

Grading and Improving Grounds.—This work has been carried on under the direction of Morell and Nichols, landscape architects. A record survey was made with location and grading plans.

Grading around the buildings was done, a driveway for patients' entrance and delivery was built. The surface drainage from the building was provided for by tiling to the lowest part of the grounds. Beds for planting were prepared and the grounds seeded. The grounds near the building were sodded. Dead trees were cut down and low places filled in. Through the State Forestry Department we were able to get one thousand little pine trees. These were planted and the most of them are growing. We started a small garden this year.

Indigent Blind Babies—During this period we have furnished 2,103 days' board to eight blind babies Their clothing has been supplied and a nurse has been employed and paid from this fund. These children have had the attention of the eye specialists and whatever general treatment they have needed. Three responded to the eye treatment and operations and have returned to their homes cured. One was taken home by the parents, one died and three remain in the institution.

Educational Work.—Every child over five years of age who is physically able has some instruction either as a bed patient or in the school room. We employ three teachers. One teacher gives her time to the grade work in the school room for all children who are able to attend. This includes work from the kindergarten through the eighth grade. One teacher gives her time to the bed patients and the work beyond the eighth grade and has the library work for all the children. A child may work for ten minutes a day or for five hours, the amount of work depending entirely upon the ability of the individual. During the past year one of the older girls has assisted for a short time each day in teaching the younger children. Many of the children have never attended school before coming here. They are anxious for school work and frequently ask to have the teacher sent to them before they are permitted to study.

The industrial training given is an important factor in the education of the children. Training for thoroughness in whatever is undertaken is never lost sight of in the educational plan.

The library is the cultural center and has a definite place in our school work. Each child has four regular library periods each week and the work done during these periods is not optional. The attractive room and beautiful books and pictures afford an incentive that no one resists. Through the generosity of the Schubert club we have had concerts every two weeks during the winter months. Story telling has been a part of the library course for two years. Professional story tellers have contributed their time and alternate with the musical programs.

The children give programs appropriate to the special holidays and no holiday goes by without special recognition.

Religious Instruction.—The religious instruction of the Catholic children is under the direction of the city missionary. Father Donahue and Father Ryan hold services at the hospital and every Catholic child has some one to instruct him on every Sunday and Wednesday afternoon. The Protestant children are instructed in a general Sunday school from 3 to 4 p. m., every Sunday. During the past year we have had ten volunteer teachers who come regularly for this work. We are especially grateful to Mrs. C. H. Nichols and the young ladies from St. Clement's church for their faithful services. A number of the students from the German Lutheran seminary have assisted in Sunday school and drill the children in music for Sundays one hour each week. They have also prepared Lutheran children for confirmation.

Recreations—Every child who is able to be up is out of doors a part of every day. They have rats, rabbits, pigeons, guinea pigs and ponies. The children take care of these pets themselves. They have sand boxes, swings, a baseball diamond, croquet sets and we have a football team each year. The bed patients are rolled out on the porches every nice day and it is surprising to see how they adapt themselves. The bed patients make and fly kites, play catch, marbles, run their trains on the beds, make doll houses, sew, crochet, and tat. One child who has been in bed for over a year has spent many an hour learning to play a harp. Each ward has a small Victrola which is used almost entirely by the bed patients

During the winter skating, skiing, bob rides and snow fights are enjoyed by many as much as by well children. There is no limit to the indoor games. The hospital is a place where noise is not tabooed.

NEEDS OF THE INSTITUTION.

School Building.—The two rooms at the ends of the wards are entirely inadequate for our present needs as schoolrooms. The number cared for at the hospital has doubled during this period and there is every indication that the increase will continue. We need a new school building. We need the rooms now used as schoolrooms for ward purposes.

Additional Room for Babies.—Our baby wards are overcrowded. They occupy our recovery room and receiving ward. We need to extend the present baby ward to the west to provide at least twice our present capacity.

Heating Plant or Service Building—If we have additional buildings we will need a larger heating plant. The two boilers in the basement are taxed to heat the building as it is. We should have a separate building for heating plant, laundry, repair shop, paint shop, our own electric light plant and a well.

Repairs and Betterments—The interior of the building should be painted at least every two years. Beds and furniture in the wards need painting every year. This is needed for sanitary purposes. The fund should be large enough to meet this expense and to take care of the ordinary repairs needed to keep the building in proper condition.

Greenhouse.—The importance of having a small green house in connection with the hospital is generally conceded. The value of having one where the older children can work and get the beginning of a trade as well as to improve their health is not always considered. All the children have been much interested in the garden and in keeping the grounds in proper condition. We could raise green vegetables during the winter and supply flowers and plants for the wards throughout the year.

Library.—We have one of the best furnished and most attractive children's libraries in the state. Our book selection are good. We need to continue the work started in this department and need a fund to supply new books and magazines and keep in repair the books we have.

Current Expense.—The appropriation for support should be large enough to meet the upward trend of the cost of living and the increase in our population. An important part of the treatment of the children is the food they are given. Children on special diet are given whatever is ordered for them by the doctor and all children have either fresh fruit or fresh vegetables every day. The menu for all children is approved by the doctor.

Some provision should be made for a personal visit to the home of every child admitted to the hospital and an investigation of the home conditions. Some provision should be made for the discharged child who has not a proper home or who has no home to go to when discharged from the hospital.

Conclusion—No one away from the hospital can appreciate what the staff is doing. These specialists have been called at any time night or day and have never failed to come when needed. Gratitude is due them for their services. They make the institution possible.

Respectfully submitted,

ELIZABETH McGREGOR,
Superintendent.

POPULATION MOVEMENT.

JULY 31, 1914, TO AUGUST 1, 1916.

	Male.	Female.	Total.
Present August 1, 1914, at state hospital	35	39	74
Present August 1, 1914, at state ward	12	4	16
Admitted for first time	160	126	286
Readmitted	8	8	16
Received by transfer from state ward	5	3	8
Total	220	180	400
Discharged from state hospital	128	118	246
Discharged from state ward	7	1	8
Transferred to state hospital	5	3	8
Died	8	7	15
Present August 1, 1916	72	51	123
Total	220	180	400
Total attendance	220	180	400
Average attendance	61	51	113

Average time in hospital, 9 months, 7 days.

OUT-PATIENT DEPARTMENT.

Admitted as out-patients	70	82	152
Discharged to report to out-patient department	94	87	181
Died	1	3	4
Discharged out-patients, August 1, 1916	4	3	7
Total	158	164	322

TABLE SHOWING NATIONALITY OF PATIENTS IN HOSPITAL, 1914-1916.

American	81	Russian	7	English	1
Finnish	42	Norwegian	50	Scotch	6
German	56	Swedish	39	Canadian	2
Polish	9	Belgian	1	Assyrian	3
Colored	9	Austrian	9	Bohemian	3
Irish	14	Indian	2	Dutch	1
Italian	25	Hungarian	1	Danish	2
French	21				

TABLE SHOWING RESIDENCE BY COUNTIES OF PATIENTS IN HOSPITAL, 1914-1916.

Aitkin	2	Itasca	1	Ramsey	73
Anoka	1	Jackson	1	Red Lake	2
Becker	4	Kandiyohi	1	Redwood	1
Beltrami	13	Koochiching	8	Renville	2
Big Stone	1	Lake	5	Rice	2
Blue Earth	3	Lyon	2	Roseau	5
Carlton	9	McLeod	2	Rock	1
Carver	1	Mahnomen	1	St. Louis	91
Cass	3	Mille Lacs	3	Sibley	1
Chippewa	1	Morrison	5	Stearns	9
Clay	5	Meeker	3	Steele	7
Clearwater	3	Mower	1	Swift	1
Cottonwood	1	Marshall	4	Todd	1
Crow Wing	6	Nicollet	5	Wabasha	2
Dakota	1	Norman	5	Wadena	1
Douglas	1	Nobles	1	Winona	3
Faribault	1	Olmsted	1	Waseca	2
Freeborn	1	Otter Tail	7	Wright	2
Goodhue	2	Pennington	3	Watonwan	1
Hennepin	41	Pine	5	Washington	3
Hubbard	5	Polk	7	Yellow Medicine	3
Isanti	2	Pope	2		

TABLE SHOWING AGES OF PATIENTS IN HOSPITAL—1914-1916.

Patients under 1 year	6	Patients 11 years	16	Patients 22 years	1
Patients 1 year	10	Patients 12 years	28	Patients 23 years	3
Patients 2 years	23	Patients 13 years	21	Patients 25 years	1
Patients 3 years	26	Patients 14 years	20	Patients 26 years	1
Patients 4 years	19	Patients 15 years	14	Patients 27 years	1
Patients 5 years	30	Patients 16 years	12	Patients 28 years	1
Patients 6 years	24	Patients 17 years	9	Patients 30 years	1
Patients 7 years	30	Patients 18 years	5	Patients 52 years	1
Patients 8 years	26	Patients 19 years	6	Average age	9.1
Patients 9 years	25	Patients 20 years	8		
Patients 10 years	23	Patients 21 years	1		

TABLE SHOWING RELIGION OF PATIENTS IN HOSPITAL—1914-1916.

Catholic	110	Congregational	16
Lutheran	126	Baptist	8
Protestant, no denomination mentioned	96	Salvation Army	2
Methodist	6	Jewish	9
Presbyterian	8	Episcopal	5

TABLE SHOWING GRADE IN SCHOOL OF PATIENTS—1914-1916.

Kindergarten	24	Sixth Grade	36
First Grade	64	Seventh Grade	7
Second Grade	35	Eighth Grade	10
Third Grade	44	High School	11
Fourth Grade	40		
Fifth Grade	22	Total	293

OCCUPATION OF DISCHARGED PATIENTS.

Babies too young to attend school	47	Livery	3
Attending school	139	Farm	6
Housework	15	Work in mines	3
Factory	11	Newsboy	1
Teacher	2	Unknown	1
Office	3	Died	4
Laborer	1	State public school	5
Elevator boy	1	School for feeble-minded	2
At home	5	State training school	1
Cobbler	3		

OUT PATIENT DEPARTMENT, JULY 31, 1914 TO AUGUST 1, 1916.

Out patients reporting August 1, 1916	322	Discharged	7
Readmitted during this period	16	Died	4
		Number of calls made	856

SUMMARY.

OCTOBER 27, 1897—AUGUST 1, 1916.

Admitted at hospital since opening of institution	1,255	Number of out patients	333
Cured	675	Discharged	7
Improved	302	Died	4
Unimproved	32	Reporting August 1, 1916	322
Untreated	32	Number of calls made	856
Died	91		
Present	123	Total number treated in hospital and out patient department	1,588

REPORT OF THE SURGEON-IN-CHIEF OF THE MINNESOTA STATE HOSPITAL FOR INDIGENT, CRIPPLED AND DEFORMED CHILDREN, TO AUGUST 1, 1916.

Minnesota State Board of Control, State Capitol, St. Paul, Minn.:

Gentlemen: A few years prior to 1897 the writer began the agitation of establishing a state hospital for indigent crippled and deformed children, and with much assistance from others succeeded in getting the state to appropriate ten ($10,000) thousand dollars (Laws of 1897, Chapter 289), with the object in view of caring for, educating and curing, as far as possible, the indigent crippled and deformed children of the state of Minnesota, who, if not treated, would be sure to become wards, if not already so, of the state.

Little did the originators of this plan realize how much more would be accomplished than was at that time even hoped for. This work was carried on so successfully that in 1905 the city of St. Paul and certain of its citizens presented grounds to the state of Minnesota with the understanding that the state would build thereon a hospital especially adapted

for the carrying on of the work of treating, educating and training the indigent crippled and deformed children of the state in order to make them healthy and self-supporting.

In nineteen years the Minnesota State Hospital for Indigent Crippled and Deformed Children has more than fulfilled its object and the good accomplished cannot be appreciated unless one reads carefully the detailed report which follows and which gives an idea of the actual practical good which is being accomplished, not to mention the greatest kindness of all, *the relief of suffering, kind care and education of the crippled and deformed.* One thousand five hundred and eighty-eight patients have been treated in this institution since its origin. Nine hundred eighty-four have been relieved of all active disease and suffering and are able to get about, fill occupations and be self-supporting. Thirty-two have been discharged unimproved; thirty-two untreated.

There are now 123 patients in the hospital and 322 are reporting at the out-patient department for treatment and inspection.

There have been only ninety-five deaths, which is a very, very small proportion when compared with well children and taking into consideration the fact that the entire number were very sick when admitted to the hospital. We feel that every indigent crippled child should be admitted if there is any chance whatever of relieving his suffering, and to lose only ninety-five out of so many surely is a testimonial as to the care and benefit which they receive.

We are very proud, also, that the medical department of the University of Minnesota feel that our staff of doctors are accomplishing so much in this work, that a course of lectures and demonstrations is given in the hospital and is demanded as a part of the medical course in the state university. Some of the medical students reside in the hospital where they have an opportunity to observe and assist in the actual treatment of the cases. Therefore this institution not only relieves and cures the crippled and deformed, but it is also teaching future medical men how to care for and treat such cases. Thus we are spreading our knowledge, and knowedge yet to be gained, as we progress in medicine and surgery, and, most important of all, young men are being trained to take the places of the present staff as age or death requires.

It is to be hoped that the present legislature will not fail to give us the appropriation which the State Board of Control feels we should have, and which we will surely need for the next two years, especially in view of the fact that this state has been unfortunate in having another epidemic of infantile paralysis. Naturally some poor people will be afflicted with the disease, and will undoubtedly, later, be admitted to the hospital for mechanical and orthopedic treatment.

We wish, also, to state herein that acute cases of infantile paralysis are never admitted to the state hospital until after all danger of contagion is passed for two reasons: first, we could not for a moment think of allowing any child to be admitted with any contagious disease; second, orthopedic treatment of infantile paralysis should not begin until after the acute stage has passed.

We are able, with the help of the instrument-makers, machinery and tools which you have supplied us with to make any form of mechanical device necessary t otreat and cure these children, and through this means have reduced our expenses, in comparison with former years, far beyond our calculations.

We wish to acknowledge the services which are rendered us by the physicians and surgeons throughout the state who make out the application blanks for the admittance of the crippled children in their immediate neighborhood. We are sorry that the questions on the application blanks are so in detail, but experience has taught us that it is absolutely necessary that they be answered, and especially more completely than they frequently have been in the past. Otherwise, we cannot arrive at any opinion as to the possibility of helping these cases. Then, too, we wish to know more about the general condition of the patient, as well as the disease, so as to help us decide whether or not the patient is amenable to treatment at the hospital, and these papers are of immense value for future reference and for statistical purposes. Last, but not least, they guide us in determining as to whether or not the patient is at the time of application suffering from any contagious disease.

Now that our patients are increasing so in number, and the reputation of the institution is such that many people, who are abundantly able to pay for treatment, will make efforts, and do so now, to have their children admitted, we feel that your Board should pay special attention to the financial condition of the applicants. Our appropriation is not large, and if children are admitted whose parents are able to pay for treatment, the amount we can spend on the poor children will necessarily be diminished, and it is not fair to the staff of physicians and surgeons who are serving without any salaries. The only compensation they receive is the interest in their work and knowing they are caring for the worthy poor. The staff give their time and unlimited attention and they do so with great pleasure, but they would not do so if they felt that your Board were calling upon them to give their time and professional services to children of people who were perfectly able to compensate them for their services.

I wish to take this opportunity to publicly express my appreciation of the work, the greatest amount of which is being done by my associates on the staff, the superintendent, nurses and teachers in the Minnesota State Hospital for Indigent Crippled and Deformed Children.

Respectfully submitted by

ARTHUR J. GILLETTE,
Surgeon-in-Chief.

OPERATIONS.

From July 31, 1914, to August 1, 1916.

Forcible correction of knee for deformity due to tuberculous disease	7
Forcible correction of subluxed knee for deformity due to tuberculous disease	2
Forcible correction of hip for deformity due to tuberculous disease	5
Forcible correction of hips for deformity due to tuberculous disease	2
Forcible correction of deformity of knees, hand and feet due to chronic multiple arthritis	1
Forcible correction of congenital club foot	2
Forcible correction of congenital club feet	2
Forcible correction of congenital dislocation of hip	6
Forcible correction of congenital dislocation of hips	6
Forcible correction of traumatic dislocation of hip	1
Tenotomy of Tendo Achilles for deformity of both feet due to anterior poliomyelitis	4
Tenotomy of Tendo Achilles and osteotomy of right femur for deformity due to anterior poliomyelitis	1
Tenotomy of Tendo Achilles and forcible manipulation of foot for deformity due to anterior poliomyelitis	1
Tenotomy of Tendo Achilles and forcible correction of feet for deformity due to anterior poliomyelitis	3
Tenotomy of Tendo Achilles and forcible correction of foot for deformity due to anterior poliomyelitis	6
Tenotomy of Tendo Achilles and arthrodesis of ankle joint	1
Tendo Achilles lengthened and correction of flexed hip deformity due to cerebral spastic paralysis	1
Tendo Achilles lengthened for correction of deformity due to anterior poliomyelitis	1
Tendo Achilles lengthened for deformity due to cerebral spastic paralysis	2
Tendo Achilles lengthened and forcible correction of congenital club feet	2
Plantar fascia divided and forcible correction of foot due to anterior poliomyelitis	1
Tendon transference and Tendo Achilles lengthened for deformity of feet due to anterior poliomyelitis	1
Tendon transference and Tendo Achilles lengthened for deformity of foot due to anterior poliomyelitis	1
Tendon transference, Tendon Achilles lengthened and forcible correction of deformity of feet due to anterior poliomyelitis	2
Tendon transference and tendon fixation for correction of deformity of foot due to anterior poliomyelitis	2
Tendon transference and plantar fascia divided for deformity of feet due to anterior poliomyelitis	1
Tendon transference for deformity of feet due to anterior poliomyelitis	4
Tendon transference for deformity of foot due to anterior poliomyelitis	1
Plantar fascia divided and forcible correction of club feet due to anterior poliomyelitis	1
Tendon fixation for correction of deformity of feet due to anterior poliomyelitis	2
Tendon fixation for correction of deformity of foot due to anterior poliomyelitis	1
Phelps' operation for congenital club foot	3
Phelps' operation for congenital club feet	5
Phelps' operation for club foot due to anterior poliomyelitis	7
Phelps' operation for club feet due to anterior poliomyelitis	4
Phelps' operation for club foot due to cerebral spastic paralysis	1
Astragalectomy for deformity of foot due to anterior poliomyelitis	2
Astragalectomy and arthrodesis of knee joint for deformity due to anterior poliomyelitis	1
Arthrodesis of ankle for deformity due to anterior poliomyelitis	3
Arthrodesis of knee for deformity due to anterior poliomyelitis	1
Osteoclasis of both tibia for correction of deformity due to rickets	6
Abscesses opened under anesthetic	6
Excision of elbow for correction of deformity due to injury	1
Albee operation, bone graft for tuberculous disease of vertebrae	1
Hernotomy inguinal	2
Tonsillectomy	7
Tonsillectomy and adenoidectomy	1
Adenoidectomy	2
Gants' operation for deformity of hip due to tuberculous disease of hip	5
Appendectomy	1
Cleft palate	5
Hare lip	4
Hare lip and cleft palate	2
Torticollis, division of sterno mastoid muscle for congenital deformity	2
Curettement of ankle for tuberculous disease of ankle	1
Curettement of astragalus due to acute infection	1
Curettement of ankle and removal of sequestrum due to acute infection	1
Curettement of ankle and removal of sequestrum due to tuberculous disease of ankle	1
Currettement of hip sinuses due to acute infectious arthritis	2

Curettement of great toe due to tuberculous disease of great toe	1
Curettement of astragalus and oscalsis	1
Curettement of femur due to old compound fracture	1
Curettement of tibia due to osteomyelitis	3
Curettement of first phalanx of second digit due to osteomyelitis	1
Removal of wire from femur	1
Bone graft of tibia for ununited fracture	1
Bony tumor removed from knee	1
Reduction of fracture of femur due to osteomalacia	1
Reduction of fracture of femur	1
Silk suspension for deformity of foot due to anterior poliomyelitis	3
Silk suspension for deformity of hand and arm due to anterior poliomyelitis	2
Correction of congenital flat feet	1
Correction of flexion of hips due to anterior poliomyelitis	3
Correction of flexion of hips and thighs due to anterior poliomyelitis	5
Correction of flexion of knees due to anterior poliomyelitis	4
Correction of flexion of knees due to cerebral spastic paralysis	1
Circumcision	3
Manipulation of wrists and ankles for deformity due to chronic infectious arthritis	1
Manipulation of hips, knees and ankles for deformity due to chronic infectious arthritis	1
Skin graft	2
Lengthening of hamstrings for deformity of knee due to tuberculous disease	1
Lengthening of hamstrings for deformity of knees due to cerebral spastic paralysis	1
Lengthening of hamstrings for deformity of knee due to cerebral spastic paralysis	1
Capsulotomy for congenital cataracts	2
Osteotomy for deformity of femur due to congenital dislocation of hip	11
Osteotomy for deformity of femurs due to rickets	2
Total	197

PERIOD—JULY 31, 1914, TO AUGUST 1, 1916.

LABORATORY AND X-RAY REPORT.

Wasserman's Blood Reaction	92	Examinations of sputum	18
Luetin's Skin Reaction	48	Urine analyses	317
Von Pirquet, Human and Bovine Skin Reaction	252	Inoculation of guinea pigs	4
		X-rays	366

CASTS.

Knee casts	256	Leg splints	28
Spicas	336	Knee splints	18
Body and hip	41	Foot splints	49
Abbot jackets	3	Elbow casts	4
Plaster beds	5	Hand and arm casts	10
Plaster models	14	Hand splints	12
Body casts	39	Hand casts	8
Shoulder and head	1		
Foot casts	604	Total	1721
Leg casts	293		

BRACES AND APPLIANCES.

Knee braces	5	Back brace and jury mast	5
Leather jackets	15	Leather foot casing	2
Ankle braces	47	Arm and hand casing	1
Leg braces	57	Knee casing	1
Back braces	15		
Jacket and jury mast	2	Total	150

TREATMENTS AND DRESSINGS.

Abscesses opened	35	Dry dressings	17573
Suspensions	839	Moist dressings	2034
Ear irrigations	1032	Medicated dressings	1790

REPORT OF DENTAL WORK.

Fillings	118	Cleaned	47
Treatments	109	Extractions	178
Examinations	213		

CONTAGIOUS DISEASES.

During Period July 31, 1914, to August 1, 1916.

Measles	57	Erysipelas	1
Chicken-pox	35		
Diphtheria	14	Total	147
Whooping cough	40		

TABLE SHOWING CAUSE OF DEATH OF PATIENTS—1914-1916.

Miocarditis General Edema due to Potts' Disease, complete Paraplegia	1	General Debility due to Potts' Disease Psoas Abscess	1
Rickets	1	Endocarditis	1
General Rachitic Condition	1	Pneumonia following whooping-cough	1
Tubercular Meningitis	3	Uremic poisoning	1
General Debility resulting from Potts' Disease	1	Acute Nephritis	1
Chronic Nephritis and Miocarditis	1	Congenital Lues	1
		Pneumonia	1

REPORT OF SCHOOL WORK.

The school has an average attendance of ninety pupils which include all children who have reached the age of five and some of the children four years of age. The class work extends from the kindergarten through the eighth grade and is continued throughout the entire year.

The children are in the schoolroom for four hours every day besides their industrial and library work.

For those children who are obliged to remain in bed, there is special instruction given, which not only prevents the pupils from falling behind in their classes but also gives them something to do to occupy their minds.

The same textbooks are used as those in the St. Paul public schools, and the course of study corresponds with that of the city schools. Frequent tests are given in each class and examinations are held at the end of each term.

In the kindergarten the children are taught to use their hands by making sewing cards, weaving mats, molding clay, stringing beads, etc. They are also taught to memorize poems and songs appropriate for the seasons and suggestive of the study of nature.

In the primary classes which include the first, second and third grades, special stress is laid on learning to read correctly and smoothly. Spelling is also taught and drills are given in arithmetic in the first two grades while in the third grade arithmetic textbooks are used.

In the intermediate classes arithmetic, reading language, geography, spelling and writing are taught, besides supplementary reading connected with the geography work is given.

In the seventh and eighth grades grammar, geography, arithmetic, reading, spelling, writing and United States history are taught.

In connection with the reading the works of well-known authors such as Evangeline by Longfellow, Snowbound by Whittier, Tennyson's Enoch Arden, etc., are studied to make the pupils familiar with and appreciative of good literature.

There are two classes in singing, the primary and kindergarten and the intermediate and higher classes.

When any pupil has been unable to attend school regularly and as a result has fallen behind in his work, he has an opportunity of making up extra grades while at the hospital and special help is given him to do so.

The children are as a whole very eager and quick to learn and enjoy their school work, and their bodily ills have made them if anything more alert and keen mentally.

AGNES KENNEDY, Grade Teacher.

REPORT OF INDUSTRIAL DEPARTMENT.

The industrial arts department includes in its courses, industrial handwork for the primary and intermediate grades; sewing and cooking for the girls and shipwork for the boys, including woodwork and basketry. The average class attendance found to be most satisfactory is twelve pupils as the work is individual.

The industrial arts work is given to both girls and boys from the first to the sixth grades. They should have by this time an elementary knowledge and appreciation of the means and methods of living and surrounding industries. This is taught to the children by stories, pictures, handwork, tableaux and little plays, all illustrating some of the processes. From the sixth grade on the girls take up elementary cooking and sewing and the older girls take up the vocational work in household arts. The general aim in this course is to give the girls an ideal to work toward. This ideal includes greater loyalty to the home and family and an appreciation of work. The specific aim is to teach the girls how to make, mend and care for their clothes; to teach them how to plan and prepare menus and to cook foods suitable to their homes. As the classes are shifting, no one group of girls completes any course. So a short series of lessons, each series comprising a course, has been found to work to the best advantage . An ambitious girl may go on from one series to the next and is not held back by the rest of the group.

A girl entering the sewing department is taught the elementary hand stitches which are applied directly to a bag to be used to hold her materials. No model work is done After this comes the garment making, which brings in pattern cutting and machine work. Following garment making is elementary dressmaking. When a girl has completed these courses a series of lessons on mending and renovating of clothes is given. The removal of stains occurring in the ordinary household is taught by such methods as the girl can and will use in her home. A complete course in the making of children's and infants' clothing is given to the girl who has finished the above courses.

In connection with these classes is the textile work. Here an understanding of the names and qualities of materials is given; the widths and prices studied and testing of materials for fading, shrinkage and adulteration.

There is no special domestic science room so the girls use the main kitchen of the hospital. Here the large range and ovens are placed at their disposal. Consequently family size recipes as well as larger amounts are cooked. Care of food; disposal of waste food; cleanliness of utensils; contrivances for the protection of food are brought into the course. Prices of food and the amounts to be bought and cooked for the family are studied and carried out by actual practice.

A more intensive study of household science and management, costume design and home furnishings will be added to the household arts course. A regular class of young girls from eight to eleven years will be taught the cooking and elementary housework. This class was started last spring and worked out successfully.

In both the household arts and shopwork of the boys, the academic subjects can be correlated. The measuring of lumber, the planning of dimensions for specified projects and the gauging for tucks, hems and planning of budgets can be taught in the arithmetic class. Geography and history can be correlated with textile work and many subjects dealing with all phases of sewing and cooking and woodworking will furnish materials for work in English.

Boys from the sixth to the eighth grade have a prevocational course in woodworking which gives to them an elementary knowledge and appreciation of the theoretical and practical side of the shop work. The older boys take up the reed work which gives them a basis for such reed work as is found in commercial life.

Outside activities must be met with in order that the girl and boy may have a broad idea of civic and social life. A bird house contest under the direction of the St. Paul school resulted in two of the boys winning a prize. Christmas sales conducted by the boys and girls, tableaux and little plays all give opportunity for responsibility, self-reliance, quickness and fairness. The cooking, sewing and assuming the responsibility of parties by the girls for different groups bring in the social life.

At the present time a girl finishing the vocational course is trained to enter any dressmaking shop as an apprentice at fair wages. When a resident school is established where these girls and boys may be in the shop the greater part of the day to gain efficiency as well as the doing then trade work can be established. A survey of trades suitable to the person and to the locality should be made.

MARY R. CLARK, Industrial Teacher.