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MASSACHUSETTS GENERAL HOSPITAL

Memorial & Historical Volume

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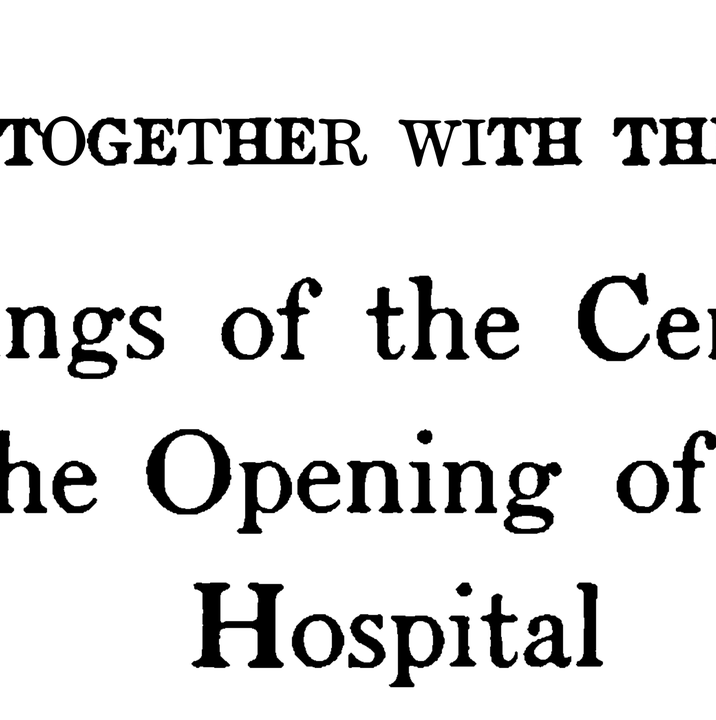
Proceedings of the Centennial of the Opening of the Hospital



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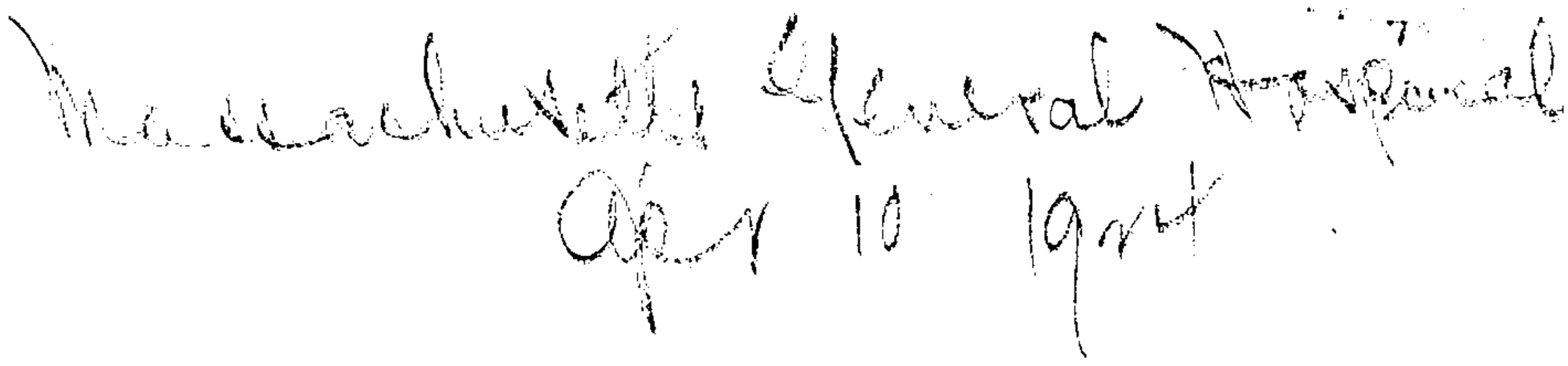
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PREFACE

THIS book is printed to put on permanent record the speeches delivered at the celebration of the centennial of the opening of the Hospital and the seventy-fifth anniversary of the first operation under ether. It includes also an account of the activities of the Hospital in the World War, and the dedication of the memorials to those who died.

The next section contains brief historical sketches of some of the departments of the institution. A history of the Massachusetts General Hospital by Nathaniel I. Bowditch was printed in 1851, and continued by Dr. George E. Ellis to 1872. At some future time it is hoped that this history will be brought up to date. This is not attempted here, except in a fragmentary way.

The next section contains a brief history of some of the financial affairs of the Hospital, and a detailed account of the subscriptions from the beginning.

The lists of officers from Bowditch's History have been brought up to date. A list of all members of the Staff from the beginning is now published for the first time. The list of past House Officers, which has appeared before, has been brought up to date and arranged chronologically. The addresses of active members of the Staff and of living alumni, arranged alphabetically, are printed in annual reports of the Hospital.

Massachusetts General Hospital

CENTENNIAL OF THE OPENING OF THE HOSPITAL

OPENING ADDRESS

Dr. Henry P. Walcott
President of the Corporation

The first patient was admitted to this hospital on the third of September, 1821. It has seemed to us that no better day for the commemoration of our centennial could be taken than that of our annual festival, a festival which we hold in honor of the supreme event in the history of the hospital, the day upon which in the room in the oldest building in this group of buildings, sulphuric ether was used publicly for the first time to produce surgical anæsthesia. On the walls of that room which remain unchanged (and so far as the accidents of time permit will be always unchanged, for it is a shrine in this hospital and should be a shrine to the medical profession and to the world), the simple, truthful and sufficient inscription tells, that on the sixteenth of October, 1846, William Thomas Green Morton administered ether to a patient who was to undergo a surgical operation, that John C. Warren performed the operation, and that the patient was Gilbert Abbott. That Abbott, when he recovered, declared he had felt no pain. Pain then was abolished; it has no greater existence than the tissue of a dream. The news of this discovery went from that room throughout the world and a new era in surgery began. This hospital has always awarded to Morton the foremost place in the great discovery, and it is a source of great satisfaction to us that a larger constituency than ours has ren-

dered a verdict, and that Morton's name now has a place among the few honored names of men who have deserved well of their country.

The hospital of that day thus established was not a large affair. It served the interests of the community, serving them so well that it was generously supported. How slight, however, the burden it imposed upon the public, may be shown by the fact which I find in the records of Mr. Josiah Quincy in 1832; when he met with some objection to the charge which the trustees expected paying patients to meet, he produced a group of figures showing that the weekly cost of a house patient at the Massachusetts General Hospital at that date amounted to $4.62 a week. In the last report of the trustees of this hospital, the cost of a house patient is stated to be $5.70 per day, and not a cent of that money is wasted.

The expense of maintenance in the hospital has many times outrun the high cost of living. This community has always generously supported the hospital. Our appeals have been met and one object of this meeting is to set before you clearly what the activities of this hospital are, and what its needs of necessity must be. There will never be a time, I hope, when a great charity will be able to say, "We appealed to the public for aid, but in vain."

This hospital extends its benefits to districts far outside the Metropolitan area. In the beginning it served a homogeneous population. How cosmopolitan it has become is pleasantly shown by the fact just communicated to me by the resident physician, that there has been established in the hospital an Italian free bed fund of $10,000 which we owe largely to the exertions of Dr. Balboni, a member of our Staff.

In 1810 an appeal was issued to the public in aid of a call for funds for the benefit of a General Hospital. That appeal, signed by James Jackson and John C. Warren, is a simple document. It appealed not only to the humanitarian interests of the community, but it also contained a statement regarding the place which should be occupied by a General Hospital, and it is only now that we have reached the limit as set forth in that statement.

It is useless to say much about James Jackson. His gracious memory still lingers here. He was a visiting physician of this hospital, a teacher in the Medical School, a prominent practitioner in the city of Boston. He gave dignity to his calling.

The first speaker this afternoon served also in this hospital. He was Jackson Professor of Medicine in the Medcal School, and has earned his place in the confidence and affection of the public. The announcement that he is Professor Emeritus may seem to indicate that he has retired from activities in medicine; but such men do not retire — he has simply changed the field of his operation. He may have ceased to be an attendant upon the sick, but he still labors in the unselfish interests of preventive medicine. It is useless for me to say more of Dr. Frederick C. Shattuck; he can always speak for himself.

THE PHYSICIANS OF THE FIRST CENTURY

FREDERICK C. SHATTUCK, M.D.

"FOR a thousand years in Thy sight are but as yesterday when it is past, and as a watch in the night."

To us, however, creatures of a day, obsessed by our sensory consciousness, and in a country as young as the United States, a hundred years looms large in the fog of time, and seems to serve as a natural milestone on the path of human progress.

The Massachusetts General Hospital has entered on the second century of its life, and has a past of which it may well be proud. It is very fitting that we gather here to celebrate at once the centennial of the Hospital and the diamond jubilee of anæsthesia. September 3d, 1821, the first patient was admitted to the Massachusetts General Hospital. Up to January 1st, 1822, there were eighteen admissions, one hundred twenty-two during the year 1822. I have been unable to find out with certainty the number of beds in 1821. It was probably sixty. In 1823, when the wings were finished, it was ninety-three. Admissions to the wards in 1920 were 6,185, 25,302 to the Out-Patient Department.

The Out-Patient Service was started October 16, 1846, the same day that the first operation was done under ether. The number of beds today is four hundred and fifty-six, including one hundred in the Phillips House. So much for cold statistics.

Let us think for just a passing moment of the tragedy, relieved now and then by some measure of comedy; of the pain and sorrow; of the joy and gladness which these walls have seen; of health and usefulness restored or prolonged; of home relieved from the burden of sickness! But I must condense one hundred years of medicine into twenty minutes. I shall, however, take time, even steal it, if necessary, to allude to the debt which the Hospital owes to those who have served it as trustees, always representative of the best citizenship of the community.

Their wisdom and sense of duty have been a stimulus and unfailing support to the determination of the professional staff to keep the Hospital in the forefront of the battle against disease and the human suffering which enures therein.

From the large number of Physicians to the Hospital — happily for you it falls on Dr. Cushing to tell the story of the surgeons and their deeds — it is possible here and now to mention only a few whose names seem to me of special significance.

James Jackson, 1817 to 1837, with John C. Warren, co-founder of the Hospital, commanded universal respect and confidence. Preëminent in wisdom and character, he clearly saw the importance, nay the necessity, for a first-rate hospital to combine medical teaching with the care of the patients. He first, in 1822, described alcoholic neuritis; in 1855, "painful tumor near the cecum," now known as appendicitis, and in the same year published the medical classic, "Letters to a Young Physician."

Walter Channing, 1821 to 1839, in 1843 published "Notes on Anhaemia" in special connection with the puerperal state. Therein are described cases of that grave form of anæmia we now call pernicious. Today it is easy of recognition, though its origin and cure are still beyond our ken.

John Barnard Swett Jackson, 1840 to 1864, single-minded, modest almost to a fault, a rarely accurate observer, devoted, was one of the foremost gross pathologists of his, or, indeed, of any day. He was Curator of the Cabinet of the Boston Society for Medical Improvement, and also of the Warren Museum. His catalogue of the former Cabinet, published in 1847, was characterized by a distinguished Philadelphia professor as "the most valuable contribution to pathological anatomy made up to that date in this country."

Jacob Bigelow, 1836 to 1855, was possessed of and by probably at once the broadest and keenest intellect in the history of New England medicine. He was a pupil of Benjamin Rush, whom he quotes as saying, "We can have no reliance on nature, gentlemen; we must turn her out of doors in our practice and substitute for her efficient

art." The pupil, by his Essay on Self-limited Diseases, dealt a staggering blow to the heroic treatment of the day, to the unholy trinity — bleeding, purging and puking. Of this oration, delivered before the Massachusetts Medical Society, 1835, Dr. Holmes said, "This remarkable essay has probably had more influence on medical practice in America than any similar brief treatise, we might say, than any work ever published in this country."

Mt. Auburn, the first rural cemetery in this country, was a child of his brain, and his interest in its welfare was maintained through his life.

In 1829 he published a 500-page octavo on the "Elements of Technology," and Worcester, in his dictionary, gives Dr. Bigelow as authority for the word "technology." Dr. Bigelow, himself, claims only that he revived and reapplied the word, which is now familiar to us in the great Massachusetts Institute of Technology, to the founding of which his writings and teachings notably contributed. He was, until that office was abolished, vice-president, and delivered the address at the opening of the new building in 1865.

Oliver Wendell Holmes, 1846 to 1849, high as he ranks as poet and wit, ranks yet higher for his clarion cry on the contagiousness of puerperal fever. It is more pleasing to think of the lives which he was thereby the means of saving than to recall the storm of abuse which fell upon him from some leaders in the profession.

It is noteworthy that Channing's paper on Anhaemia, Jacob Bigelow's on Self-limited Diseases, and Holmes' on Puerperal Fever, were all published in the *New England Quarterly Journal of Medicine and Surgery*, and in the same year, 1842.

John Ware was Visiting Physician only for one year, 1839. He was a foremost practitioner of his day, as high-minded as sagacious. He was the author of notable papers on Delirium Tremens and Croup.

Henry Ingersoll Bowditch, 1846 to 1864, fearless, public-spirited, in conjunction with Morrill Wyman was a pioneer in the treatment of pleural effusions by tapping. He was the first Chairman of the State Board of Health

of Massachusetts. To his enthusiasm was largely due the high place which that Board took and has ever since maintained in the promotion of public health.

Calvin Ellis, 1865 to 1882, was faithful in all things, even in bachelorhood. To him medicine took the place of wife and child. He played a conspicuous part in the advance in medical education inaugurated by the Harvard School, and, dying, left his whole property to the School, the largest single benefaction for years before or after it was made.

Henry K. Oliver, 1868 to 1873, while an undergraduate at Cambridge, saw the need of a medical friend for the students, and then and there resolved to provide for the need should it ever be possible for him to do so. Unmarried, a simple life, diligence and self-denial enabled him to found the Professorship of Hygiene at Cambridge which fitly bears his name. May the Lord long preserve Roger I. Lee, first and present occupant of this chair, also Physician to our Hospital!

James C. White, successively Chemist, Physician to Out-Patients, Visiting Physician, and from 1870 to 1903 Physician to the Department of Skin Diseases. He was a specialist evolved from the general practitioner; vigorous promoter of reform in medical education; a lusty and always fair fighter; a man of many interests and accurate knowledge in each. As a dermatologist he was equally eminent at home and abroad. He was President of the International Dermatological Congress when it met at New York in 1907.

Reginald H. Fitz, Pathologist and Physician, 1871 to 1908, was born into medicine just at the time that microscopic pathology was beginning its brilliant career. As a critic he had no superior. His masterly paper on "Perforating Inflammation of the Vermiform Appendix" was so convincing that it met with instant acceptance by the profession. He coined the word "appendicitis," of universal currency, as good in the household as in the hospital. Who can calculate the benign influence, past, present and future, of such work for humanity? Four years later he put forth a second classic on Pancreatitis, only less notable than that on appendicitis in that pancreati-

tis is a far less common disease, and less amenable, though not wholly rebellious, to treatment.

Walter James Dodd, Assistant Apothecary, 1892 to1894; Apothecary and Photographer, 1894 to 1900; then Roentgenologist to the Hospital until his death in 1916. In 1896 he began X-ray work. The danger of burns from the rays and the safeguards against them were not known in those early days. Whatever Dodd did he did with all his might, with no thought of self, and he was soon severely burned. Between this and 1916, when involvement of the lung proved fatal, the march of cancer was slow but inexorable. He underwent fifty operations and suffered grievous pain. Parallel with, but more rapidly than the disease, his knowledge advanced, and he became a recognized expert in the use and interpretation of the rays. The most wonderful thing about him, however, was the dominance of his spirit. Stoicism is passive and may have a sardonic tinge, more or less pronounced. Dodd's cheerfulness and zest in life were always on the surface. Almost as a bridegroom to his chamber he approached his death. A holy martyr of science, his story should be widely known and its lessons laid to heart.

Richard C. Cabot, Father of Hospital Social Service, is happily still with us, and has seen his child rapidly grow to maturity and travel 'round the world. Were I asked to name the three most conspicuous services which have been rendered humanity through the Massachusetts General Hospital, I should select Anæsthesia, Appendicitis and Social Service.

All those whom I have mentioned were full professors in the Medical School, with two exceptions, and they had teaching positions. This fact is a tribute to the wisdom and prescience of Warren and Jackson. The Hospital and the Medical School are as interdependent as capital and labor. Some marriages are happy, others less so.

Lack of time compels me to pass over in silence many who are worthy of mention, whose quiet daily performance of duty, whose clear heads, warm hearts, and deft fingers have helped to build up a priceless tradition. While the chief factor in the rank of a hospital is, of

course, its professional staff, the services rendered by trustees, superintendents, nurses, and personnel imbued with and stimulated by the tradition and spirit of the institution, are not for a moment forgotten, nor do we forget the long procession of internes who have gone forth to all parts of the country bearing their torches high, and in their lives making fruitful the training in character and professional knowledge they here received. The children of the Hospital rise up and call her blessed.

It remains to speak all too briefly of one man, a physician, though never on the Hospital staff. I brave his displeasure but am sure of your approval. For years a Trustee, President of the Board, now President of the Corporation, he was a founder, long a Trustee, and President also of the Cambridge Hospital; member and Chairman of the State Board of Health, Chairman of the Water and Sewerage Board, Fellow of Harvard College, he has filled — I say filled advisedly — a rarely conspicuous place in this community in particular, and also in the nation at large. Happy the people who can command such services! We are deeply, but cannot be too, grateful to Henry Pickering Walcott. The wisdom of Solomon is a tradition ; that of Walcott a living force.

Only a few minutes remain to me to allude to the advance of medicine as contrasted with surgery in the last fifty years, especially. The laity does not realize it, and we physicians are nothing if not modest.

Surgery is dramatic, leaves memorable scars on the person and sometimes on the purse. Painless surgery, born October 16, 1846, was followed by safe surgery about 1870. The bounds of surgery were thus enormously enlarged.

The same discoveries which entailed safety in surgery laid bare the principles of preventive medicine. There is no such thing as preventive surgery. Surgery in its very nature is individual, a retail business. Preventive medicine is wholesale.

Until within, say, fifty years smallpox was the only preventable infection. Now, malaria, the plague, typhus and typhoid fevers, tuberculosis, diphtheria, cholera, tetanus, yellow fever, hookworm diseases, to mention only

those best known, are practically largely, theoretically wholly, preventable. The mastery of malaria and yellow fever conditioned the building of the Panama Canal. The French had the money and the engineering talent, but could not stand the loss of life. With the prevention of yellow fever the name of Walter Reed, army surgeon, will ever be linked. As citizens of the richest country in the world, we hang our heads in shame when we remember that after Reed's death the pension provided by a grateful—Heaven save the mark!—country was so inadequate for the modest support of his widow and children that a private subscription was raised.

Preventive medicine is yet in its infancy, but its benefits, humanitarian and economic, are today incalculable.

What the developments of the next hundred years may be, it would be rash to try to predict. It seems, however, safe to say that cancer, the pneumonias, scarlet fever, pellagra, and perhaps influenza and other diseases, will become subject to prevention and cure, and we can have full confidence that the Massachusetts General Hospital will enter on its third century as vigorous and full of achievement as she now enters on her second.

In presenting the next speaker, Dr. Walcott said:

"I have often thought that we did not sufficiently appreciate the great courage with which John C. Warren ventured upon the great experiment of October 16, 1846. He was then approaching the end of his long and successful career and yet he put his reputation to the hazard of that experiment. Fortunately he won. But surgery is full of adventures. What to the public or to the medical profession seemed more hazardous than the search for disease in the very center of life and thought, the human brain? But the practised hand of the surgeon, obedient to the guiding mind, discovered the disease and removed it.

"The chief surgeon of the Brigham Hospital, Moseley Professor of Surgery, and some time officer in this hospital, can tell you all this and many other marvelous feats of modern surgery made possible by the discovery of anæsthesia."

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for hospitals as for men, some which may be thought old-fashioned will always possess a charm of association, and the "garb of stone and of that kind called Chelmsford granite" hammered out at the State Prison — "wrought with uncommon labour" — in accordance with the design supplied by Charles Bulfinch, was justly considered, a hundred years ago, to make of the Massachusetts General Hospital the handsomest edifice in the State. Well might John C. Warren and James Jackson, together with one thousand and forty-seven subscribers, whose great bounty made this famous institution possible, have felt pride in it then and have expected much from it for all time.

But, however well infant or institution comes to be adorned, the essential thing is what handsome does, and with this, apparel has little to do — unless, indeed, so much attention is paid to habiliments that they are a handicap to freedom, affect personality in the individual and limit personnel to the institution. They may actually prove an encumbrance if in this world of competitive effort others laboring in their shirt sleeves are not to pass them by. So it is not the externals nor the inherited wealth, social position or occupation of an institution any more than of an individual which give it renown, it is the character of the service it performs — the quality more than the quantity of its work which enables it to establish and to maintain leadership. For as age creeps on and movement becomes hampered by joints encrusted with tradition the more it feels the strain of competition.

But as hospitals go, the Massachusetts General for all its honorable century is young. One does not reckon the age of an institution in years so much as in adaptability to progress: nor for the matter of that, human beings either, especially in a community noted for its progressive and public-spirited octogenarians. On the contrary, there is a tragic malady known as progeria or premature senility which renders inelastic both mind and tissue and brings old age to certain unfortunate institutions and human beings alike, in their teens.

Age, after all, is a relative matter. A year ago the Brigham Hospital — a youthful upstart in this commun-

ity — celebrated its eighth birthday. There happened to be staying with us at the time as my *locum tenens* an English surgeon representing a London hospital which was also about to celebrate its eighth birthday. The essential difference lay in the fact that St. Bartholomew's hesitatingly reckons its birthdays in centuries, for it was eight hundred years ago when the jester Rahere, to fulfill the vow made to St. Bartholomew, took holy orders and laid, just outside the wall of old London, the foundations of "Bart's," where, barely missed by the great fire, they still remain. Compared with that ancient hospital, the Brigham is mewling in its nurse's arms and the Massachusetts General barely in knickerbockers.

How brief, indeed, have been its hundred years! There are still living today those who were born before that September 1st of 1821, when the first patient, a medical case, was admitted to the east wing of the old Bulfinch building. My own contemporaries go back an exact quarter of the way, to 1895-1896, when we were house pupils here, and Dr. Shattuck beside me, goes back just halfway, to 1871, when he first began to walk these wards already so familiar to his distinguished father before him. What we are to celebrate today, therefore, is the birthday of a hospital ten decades young, not old — a hospital which has not slipped back from the ideals and enthusiasms of its founders nor shown any tendency to become hidebound in the course of years by the very past which ennobles it. Fortunate it has been alike in its traditions and in those who have passed them on. For nearly the full century there has been a John Warren, the first of whom, like Clotho, begat this hospital, and the second and third, like Lachesis, have done so much to keep the thread running smoothly from the spindle without a snarl. Except for the Bells and the four Munros of Edinburgh, possibly no community, certainly no hospital, has ever boasted such famous medical dynasties as ours with its Warrens, Jacksons, Bigelows, Shattucks and Cabots.

What are the elements that make a hospital what it comes to be as the years roll round? Given two institutions side by side in the same community with the same purpose, the same organization, the same initial endow-

ment, and starting at the same time, differing only in their personnel, how quickly, yet unconsciously, do they assume different characteristics and acquire differing personalities. Nothing should be more alike than two sister ships, yet in time how markedly different is the life aboard. How alike and yet how different are Andover and Exeter, twin offspring of a single brain; Harvard and Yale; Boston and New York; Massachusetts and Maryland. Each as an institution in which people combine for definite and similar objects has become a composite of many personalities,—some dominant, some less so,—all, living or dead, nevertheless discernible however faintly in the ultimate picture.

So of each of us whatever our station may have been, who have passed happy days in this beloved place, there remains some record, and I like to feel that I can discern even after twenty-five years a faint imprint of myself, and of my brother before me, shown in some trifling custom, or point of view regarding the making of observations or of recording them, or even the better pinning of a swathe or smoothing of a pillow. Obscured though one's personal record be in the composite of the hospital made up of the more enduring contributions of countless others, it nevertheless gives each of us who have been of the Massachusetts General Hospital a fractional right to speak on an occasion such as this in a somewhat intimate way.

A hospital may be likened to a hive. What gives it character is not its queen but its workers and producers. "We and the hive are one"; and as in Kipling's story of Melissa and the Wax Moth, if softness and content enter in through the reactionary influence even of a single individual, the effectiveness of the whole society may be altered. Better the independent life of a solitary bee than the social life of a hive which comes to subsist on itself. It is from flowers outside that honey must be gathered. The best may be found in the hollow of an old tree and the most tasteless in a patent hive arranged for the Ohs! and Ahs! of exhibit, with all modern improvements in glass and tile. The Bee Master, like a proper hospital trustee, does not gauge productiveness on this

basis. For a hospital must be something more than a well-kept boarding house for the indigent sick, and experience has long shown such a one too often becomes the plaything for politicians and a habitat for drones and weaklings.

Wise in their generation, the two founders of this great institution had very definite objects in view. It was eleven years before the event we are celebrating — the actual opening of the Hospital — that they circulated among their fellow townsmen that celebrated letter inviting subscriptions for the foundation of a hospital as something other than an almshouse, one of the chief collateral advantages of which were the facilities it would offer as a training ground for students.*

Though an Almshouse and a public Dispensary were already in existence and the nebular beginnings of a university medical department had for some years been apparent on the Cambridge horizon, the project formulated by these two farseeing young men, based on their experience abroad and set forth on August 20, 1810, may justly be regarded as the corner stone not only of the Massachusetts General, but of the Harvard Medical School as well.

The story of the relationship of the original Massachusetts Medical College, as the old Mason Street School was called, both to university and to hospital is too long and complicated a one to enter into here, important though it is in the chronicles of both institutions. A tripod cannot balance long on two legs, much less on one. A university medical department built on a course of theoretical lectures without laboratories and a clinic can have no permanent stability. No more can an independent school or independent hospital. A university and a school without hospital connection, a school and a hospital with-

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*Warren himself had had a three years' first-hand knowledge of the leading European Hospital Schools. First at Guy's in its greatest years under the two Coopers, William and Sir Astley — the latter one of the foremost figures in our surgical annals. Then a year in Edinburgh for his degree, where in the old Royal Infirmary he learned to know bedside instruction given at its best. That Infirmary, like the Massachusetts General Hospital, had been founded for this very purpose and with the traditions of Boerhaave brought home by the second Munro, Edinburgh had become the Mecca of medical students the world over. However, with the passing of Benjamin Bell and Alexander Munro, its star was now waning, as a rival one arose in Paris, whence Warren betook himself for his third year of foreign study under Dubois, Corvisart and the great Dupuytren. Jackson, too, had passed nine months as surgical "dresser" at Guy's and St. Thomas's when these two hospitals were "united" and had a common school. An interest aroused in Jenner's recent discovery of vaccination appears to have diverted him from surgery into medicine.

out the academic influence of university connection, may perhaps for a longer time stand on two legs with the other in the air, but the position is insecure and easily toppled over by the first rival unless all three supports are firmly planted.

The two founders were university professors and judging from the pamphlet issued by them in 1824,* shortly after both school and hospital were in operation, it is evident that they considered the two to represent a teaching unit, even though established under separate corporations. It would unquestionably have been better for permanent stability, as they doubtless foresaw, could the two institutions have been under one control, or at least have had an interlocking directorate and have been geographically adjacent, for it was obviously their original purpose to open the wards to students.

Their pamphlet reads:

"The administration of public infirmaries very properly embraces a two-fold object — the relief of the sick, and the instruction of medical students. With a view to the promotion of both these ends, the Massachusetts Hospital, while it gives accommodation to the full extent of its means to the sick poor, gives also admission, which was at first conditional, but is now *free*, to the students of the medical class, attending the lectures of the physicians and surgeons. . . . Students are admitted to the patients to enable them to become practically conversant with the symptoms of disease and the operation and influence of medicinal agents."

Could anything have had a more modern sound than this statement? It lacks but one note — the third great function, indeed obligation, of a hospital, the advancement of knowledge embraced in that much abused term, "research." But Warren and Jackson, being men of imagination, were fully aware of the best means of encouraging the spirit of progress: namely, a convenient medium of publication. The old *New England Journal of Medicine and Surgery* (1812-1828) had already been started as the official organ of the embryonic medical department five years before the school was erected and

*Some Account of the Medical School in Boston and of the Boston General Hospital, Boston, 1824, pp. 16.

nearly ten years before the hospital. But shortly after both were in running order this weekly magazine, as the *Boston Medical and Surgical Journal*, became the acknowledged mouthpiece of the combined institutions, which, if not officially interlocked, were to all intents and purposes so, as the professors in the school were likewise the appointees in the hospital. Indeed, the first page of each issue during 1828 actually carried a vignette of the Massachusetts General Hospital and in the first number it was expressly stated by the editors that "It is their intention to introduce the practice of the Massachusetts General Hospital, especially the surgical part, whenever anything interesting occurs in it." Accordingly, to the widespread renown of both institutions, the early numbers of the publication were devoted to this object.*

What happened to check the fulfillment of their ideals I do not know. It is a matter which concerns the hospital's composite personality of which I am speaking. I fear that even Jackson and Warren, as time went on, became somewhat lukewarm in the matter of having students about except by sufferance, and came to feel with the trustees that the hospital could stand alone and was sufficient unto itself. When, in 1846, the North Grove Street School was contemplated and the hospital trustees were approached in regard to the matter, they replied to the letter from the professors of the medical school with courtesy but with indifference, stating that:

> . . . in regard to the subject of building a Medical College in immediate proximity to the grounds of the Hospital, they cannot perceive any advantage to this institution to arise therefrom; but they think they can see that some disadvantages would be occasioned thereby.

True, students in a hospital, like children in a lodging

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*Nor did the founders stop here. Through the liberality of Ward Nicholas Boylston, student prizes were offered for the best medical dissertations. A student's society was established and the founder recommended preparatory studies to the students who should avail themselves of courses in natural philosophy (the biology of the day), botany, mineralogy, chemistry, the arts, belles lettres, ancient and modern languages, etc., in the university. Not until the end of the century, with the opening of the Johns Hopkins Hospital and Medical School, when Osler supposedly for the first time in this country actually took the students into the wards and put them to work there and made them attend society meetings and publish their observations in a school organ of publications, was anything done for the advancement of medical teaching on better and more imaginative lines than those proposed by the founders of this institution, whom we must recognize as men with a vision far ahead of their time.

house, are not an unmixed blessing, either to landlord or servant, and in those days the occasional Bob Sawyer and Ben Allen perhaps served to make the whole group seem rowdy and unruly. So, when we were internes here, fifty years later, I think everyone, from staff to orderly, felt an aristocratic aloofness and indifference to all students except a favored few, an attitude which their body as a whole was quick to feel, and though a few lectures were still held in the old North Grove Street building, the school ere this had definitely abandoned its old site and had begun its migration southward to warmer climes.

It was a misfortune, I think, for both institutions, for though not an actual divorce it was an agreement to live apart, and despite its present geographical separation as close a tie as possible with the school in accordance with the views of the founders is something the Massachusetts General Hospital will surely do everything in its power to foster. But all hospitals differ more or less in their attitude towards students as they do in other matters. Each reflects the superimposed reactions of the succession of officials, who have made their composite personality what it is. Nor was the reaction of which I speak at all peculiar to the Massachusetts General, for it was even more strongly developed in the great hospitals in New York, in many of which students were actually barred from the wards, to the harm of both school and hospital. In London, on the other hand, after the closure of the famous Windmill School started by the Hunters, the hospitals like St. Mary's, St. Bartholomew's, and the united Guy's and St. Thomas's, took a school unto their bosoms, for better or for worse, as an integral part of the hospital, and since then the student body, always present, has done much to color the life and affect the characters and keep the spirit of youth in these ancient foundations. And there is no question but that a hospital is safeguarded, so far as the care of its patients is concerned, if its attendants are under the constant fire and criticism of watchful students of the modern type, who are the best possible stimulus to industry, to punctuality and thoroughness on the part of the senior workers.

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a dislocation of the hip,* so that only four involved actual cutting operations. The first of these, on September 21st, as stated, was a simple ligation as for hæmorrhoids. The second was "for the stone," and the graphic recital of the procedure ends with the ominous statement that the patient was "untied and carried to bed." The third, a few days later, was for popliteal aneurysm, the ligatures on the artery being left long, to "come away," which they unfortunately did not do, so they finally were cut short, and the patient ultimately was sent home with a persisting sinus. The fourth operation was for fistula in ano.

The surgical treatment of these particular maladies reaches back as far as historical records permit us to go. Since the days when knights, weighted down by heavy armor, spent long hours in the saddle on the way to Palestine and back, the principles of treating ischiorectal abscess and "the fistula" had been known, and in those days, indeed, the disorder was so common that there were specialists for it like the celebrated John of Arderne, who wrote a treatise on the subject in colloquial Latin in the year when Edward the Black Prince "was taken to God." The operation of lithotomy, too, known to have been practised by the ancients, continued to be performed through the Middle Ages by itinerant "cutters for stone," just as cataract and hernia operations had been, and probably the skill and anatomical knowledge of John C. Warren was not greatly in excess of that finally acquired by the famous Franciscan lithotomist, Frère Jacques, three hundred years before. He it was who originated the lateral perineal operation with its "unerring thrust" and the removal of the calculus in a few seconds — fifty-four, I believe, was Cheselden's record in the century

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*The note of the preliminaries to "operation" in this case and its outcome read as follows:

"On the day of the admission of the patient — he was ordered to take Sulph. Magnes. oz. 1 Fol. sennae oz. 4 ss — and to live light. The next day a warm bath was ordered. At 2 o'clk. he began taking Tart Antimonia, gr. — every ten minutes — until the operation. — He took five grs. when vomiting was induced. At 3 o'clk. was bled to about 16 oz — but no faintness was produced. The operation was then immediately proceeded with; and after continuing it about an hour, the case was abandoned as hopeless."

There is a sequel to this story. It concerns a malpractice suit which was dismissed because the jury disagreed. The man died forty years later, and J. Mason Warren, having secured an examination, the specimen, showing a particularly rare form of dislocation which had not been recognized, remains to this day a feature of the Warren Museum. Patients often outlive their physicians, and a follow-up system — to the end — may overlap two generations.

before Warren. The only one of these first four operations, therefore, which involved a relatively new principle was that for aneurysm, which consisted in the ligation of the artery in the femoral canal well above the lesion — a procedure which had its origin in John Hunter's experiments of the century before.

During the second year twenty-one "important surgical cases" were recorded, and in 1823 just twice as many, all of them, as before, with but few exceptions involving procedures whose origin is lost in antiquity. There were amputations (twice of the breast), circumcisions, operations for broken and necrosed bone, for cataract,* for hæmorrhoids, for the removal of surface tumors. The only operation in this later list not known to history was performed on February 18, 1823, when Warren cut the facial nerve for *tic douloureux*, an evidence of the fact that the recent discoveries by Charles Bell and Magendie of the difference between motor and sensory nerves were yet to be fully interpreted. Naturally the pain was not relieved, and eight days later the inferior maxillary nerve was divided by trephining the jaw, a novel procedure at that time.† These nerve dividing operations and the Hunterian ligation for aneurysm may be regarded, therefore, as the only operations with a relatively modern aspect in the entire list, and it is worth pointing out, that without experimentation on animals, we would not have known that aneurysm could be so treated with safety to the limb, and also, that without it we might be still as confused as Warren was regarding the function of the nerves of the face.

These things are mentioned as a contrast to the amazing transformation which surgery was destined to undergo through the two great discoveries of the century, one of which burst on the world full blown in its effectiveness in a single day in these very halls. The full significance of the other, which came thirty years later, really the more important of the two, was less easy to comprehend,

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* A large proportion of these operations (23 to 33) were ophthalmological, for surgery had not as yet become subdivided into its specialties.

†These and subsequent operations performed here for neuralgia formed the basis of Warren's inaugural article in the first number of the BOSTON MEDICAL AND SURGICAL JOURNAL five years later.

and it made its way more slowly in the face of reactionary opposition.* For even though pain was abolished by anæsthesia during the immediate performance, surgery necessarily remained a last resort until the dangers and horrors of suppuration were eliminated. Despite the fortitude, resourcefulness and skill of those early surgeons, they were fighting an ambushed and, indeed, unimagined enemy; and the scene, the method and, alas, too often the outcome has been depicted in its imperishable pathos in such stories as that which tell of Alison Graeme and her devoted Rab.

Being a landmark in the history of medicine, naturally enough the culminating event of the century in the surgical history of this hospital was reached on October 16th, seventy-five years ago, when it was first demonstrated "that ether may be applied with safety, so as to produce insensibility during all surgical operations." So far as the Massachusetts Hospital is concerned, it has always seemed to me that it was of no consequence who discovered ether, who first learned of its anæsthetic qualities, who first made use of them to produce insensibility, who first conceived the idea that the drug might be utilized during major surgical procedures; for none of the central figures responsible for the subsequent unhappy controversy were in any way connected with the institution, nor, so far as is known, were ever within its walls till one of them, his secret drug in hand, made his way to the "Dome" on that eventful October day of 1846. But the onlookers could have told you that it took something other than the chemical knowledge of Jackson and the practical ideas and imaginative powers of Morton to complete that scene, and this something was the courage of the man who ventured to permit the crucial public experiment on a human being, no less than that of Gilbert Abbott who submitted to it. Lost in the altercation over the discovery, too little stress has been laid on this important feature of the historic episode.

Can any surgeon here imagine what his reactions would

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*Röntgen's discovery near the end of the century should be mentioned as a third, for it has already enormously affected surgical procedures and, what is more, the X-ray now bids fair to become a substitute for the knife in the treatment of many conditions which have come to be regarded as surgical.

be if an obscure dentist should come to him saying that he had a secret drug which would abolish all evidences of vitality necessary for the period not only of an operation, but for wound healing as well; that it would be a great boon to humanity and would he please try it on his next patient? A drug producing these effects would be far less remarkable to us today than was the abolition of sensation under ether to our predecessors of seventy-five years ago. Warren assumed a great responsibility and when it was over, his "Gentlemen, this is no humbug," if that is what he really said, must have been uttered with immeasurable relief. Patients have since been known to die under ether administered even by experienced hands. Suppose Gilbert Abbott with his trifling nævus of the neck and five-minute operation had succumbed to this strange gas.

But what robbed surgery of its terrors was not so much anæsthesia as Listerism, blessings to mankind as both have proved to be. Dexterity and speed were the essentials of operating before anæsthesia, and the momentary agonies incidental to such operations as were undertaken, dulled as they were by alcohol or opium, were as nothing compared to the tragedy and suffering of the almost inevitable infection. It was not anæsthesia which opened the belly, the chest, the joints, and the head to the surgeon; it was the control of sepsis nigh forty years later.

Between these two great epochs in the history of medicine, the outstanding figure in this Hospital was that brilliant individualist, Henry J. Bigelow. He had just been appointed in his twenty-eighth year, as full surgeon. He was present at the first ether administration. He wrote the first paper on the subject of anæsthesia, and from that time until his retirement nearly forty years later, he became so increasingly dominant in the activities of the Hospital that it came to take on largely the complexion of a surgical institute. To be sure, he had distinguished surgical contemporaries in Samuel Parkman and J. Mason Warren; while J. B. S. Jackson, Henry I. Bowditch, George Cheyne Shattuck, Jr., and, for a time, Oliver Wendell Holmes were his medical colleagues, but none of them have left their names so closely linked

with the Hospital, nor did any of them so enduringly stamp the place with their own personal hallmark.

Cheselden with St. Thomas's Hospital, Sir Astley Cooper and Guy's, Dupuytren and the Hôtel Dieu, Hunter and Brodie with St. George's, Pott, Abernathy and Paget with St. Bartholomew's, Robert Liston and University College, Lister and the Glasgow Royal Infirmary, just as in more recent times the elder Gross with the Jefferson Hospital, Horsley with Queen's Square and Halsted with the Johns Hopkins, so Henry J. Bigelow and the Massachusetts General are names the medical world will couple for all time. These examples come readily to mind, for the accomplishments of each of these outstanding figures has become merged with the institution which made their labors possible, and in each case the institution has justly taken unto itself a large portion of the individual's reputation.

In days gone by it was an association more often established between hospitals and their visiting surgeons than with their physicians, and though there are many notable exceptions like Louis and La Pitié, Bright and Addison with Guy's, Stokes and Graves at the Meath Hospital in Dublin, nevertheless the contact seems less intimate even in these examples, and perhaps Osler's name coupled with the Johns Hopkins is the most outstanding example of what I have in mind among the list of our great physicians.

This is a thing which I think hospital trustees are prone to overlook — that the attendants must be encouraged in every way to merge themselves more completely with the institution, for this goes on forever, whereas they are but creatures of the moment in its life. The hospital should not only hold itself responsible for the character of the work and protect the workers if necessary by insurance, but it should at the same time receive the chief credit for any outstanding and notable performance.

I do not mean to imply that such influences as this prevailed in Bigelow's time, but merely that they are the most favorable influences whereby something comparable may be encouraged to happen again. For Bigelow

himself was unique — not the product of an environment. It is given to few men to establish what may be called a School of Surgery, and in his day his school was undoubtedly the foremost in the land. Even long after Bigelow had passed, when surgery had risen high on the wave of Listerism and was beginning to invade the body cavities, and even though our existing chiefs at the time, Porter, Warren, Homans and Beach; Richardson, Cabot, Elliot, Mixter and Harrington, were men of unusual character and attainments, the Bigelow traditions still dominated, and those of us who had never seen him nevertheless felt the influence of his commanding personality. For was not the very amphitheatre named for him, his famous chair still in use, his lithotrite to get out, and James Mains, peace to his ashes! to tell us with what éclat things once were properly done?

Bigelow's dominance in the composite personality of the hospital is all the more remarkable when one considers the eminence in the profession of his even more distinguished father before him, and of the physicians I have mentioned who were his contemporaries. But there will always be a larger supply of well-trained physicians than of surgeons for a hospital to draw upon. To be acceptable, the physician requires a special combination of head and heart; the surgeon of head, heart and hand — a rarer combination which comes partly by gift and partly by training. I know of no better example of this combination at its best than my talented and lamented predecessor in the school, Maurice H. Richardson. In the days before Morton and before Pasteur and Lister, this disproportion in numbers between physicians and surgeons was even more true than now when it seems there may be successful surgeons with hands alone, and little heart and still less head — a dangerous kind of fellow to let loose in the community, either in or out of a hospital.

The antiseptic era came too late for Bigelow, for though the third Warren in 1870, after a visit with Lister in Glasgow, brought back with him some rolls of carbolized lac plaster, the adoption of Lister's first principles made their way somewhat slowly, for there were none here who had been actually trained under the master. The

carbolic spray of somewhat later date was, I believe, first used by John Homans, who, according to report, being not particularly pious, used to start his operations with "Gentlemen, let us spray."

Once introduced, however, antisepsis was equally hard to dislodge, and not until 1892 did C. A. Porter and Franklin Balch, as internes, purchase for the hospital its first Arnold sterilizer. Some years later, there still remained a crock of carbolic solution full of small sea sponges, used instead of gauze for sponging wounds except on special occasions; and I recall that our instruments of general use were still scalded rather than boiled, and, what is more, after use were scrubbed, wiped and put away by the lowest house officer — a most certain way of shortening their period of usefulness.

During Bigelow's era the advances in surgery were largely along mechanical lines. There have been few surgeons who could see through a mechanical problem more clearly than he, and his inventive genius reached its highest mark, possibly, with the invention of his evacuator, to express the purpose of which the word, "litholapaxy," was coined. The pathological era which followed had its beginnings in the '70's, when it was brought home by Warren *tertius*, the first of the Massachusetts General Hospital surgeons to break away from traditions and get his training elsewhere than in the anatomical dissecting room. Versed in the new technique of section-cutting and staining, after two years in Vienna, a session with Cohnheim, then Virchow's assistant in Berlin, and another with Ranvier in Paris, Warren, on his return, introduced here these new methods which have had such an important influence on the development of surgery. His studies on keloid, on the columnæ adiposae, on the classification of tumors of the breast, together with his Surgical Pathology, made him the James Paget of this hospital, as Warren *primus* had been the John Hunter.

But this new learning, which came from turning the microscope on disease, though first introduced by a surgeon, was not long to remain solely in the surgeons' hands. It was time for the hospital to have its own path-

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East side which had been his. But each of us felt his own service to be the best, and endeavored to make this assured by establishing traditions better, if possible, than those of the others. So with my contemporaries of the short-lived "South" I look back with an enduring sense of obligation to our four chiefs — to that resolute and picturesque pioneer, John Homans, who twenty years before had been privately advised not to do ovariotomies here, yet persisted in so doing; to C. B. Porter, master of operative technique; to Jack Eliot with his brilliant gifts and uncanny surgical instinct; and to the youngest of them, William Conant, most generous and considerate of his hard-working juniors. To place the time for a younger generation, we were just beginning to count the leucocytes in the blood, to operate for appendicitis in the interval, and hesitatingly to expose the gall-bladder through a small opening, for the upper abdomen was still largely a closed territory. Dr. Warren had just brought back from Röntgen's laboratory a small tube about the size of a goose's egg, and with it Codman and I ground out on the old static machine the first faint X-ray picture of a hand ever taken here.

A good deal of it, to be sure, in the retrospect appears somewhat old-fashioned and we were misled in many ways. We operated too much by the clock; the wealth of material was utilized in no way except for added experience; cases were insufficiently studied before operation; our fracture dressings were so neat and laboriously made we would hesitate to take them down to see if all was well beneath; we disdained the students, forgetting how recently we had been of them; there was rather too much display and operative rivalry at our Saturday morning public exhibition of skill; too much of the week's hard work was postponed for a prolonged Sunday morning visit which left us with no day of relaxation; there was no spur whatever to productiveness, no encouragement to follow up a bad result, whether to its home or to the dead-house.

But these things were merely an expression of the times: they were not peculiar to this Hospital alone, and if they were faults, we juniors, who reveled in the life

and its opportunities, were unaware of the fact. We controlled the staff, in our estimation, who by sufferance did such operations as we allowed, and the Almighty with our help cared for the patients afterward, and usually got them well. And the trustees? If they existed, we saw them not, though aware that they made all those wonderful things possible. They, we felt sure, were only interested in the cost of a bed and its occupant per diem, not why it was that Martha survived her operation while Mary didn't; that Patrick's hernia recurred while Michael's didn't — not how these things might be done better, but only in the numbers of Marthas and Patricks and others the hospital took in and evacuated each year. They were the Bee Masters, we the Workers, and it is little to be wondered at, therefore, that to us as to successive generations of house officers, the orderlies, the nurses, the servants and minor officials continuously here were what, even more than the staff, according to our view, gave personality to the hospital.

Opportunity was in our grasp. Each could add something if he would. Had not Herbert Moffitt just left the most perfect set of records as a standard for all to copy; was not Richard Cabot at work with a microscope in the small laboratory, engaged in that mysterious occupation called research? Was it not possible for any other of us to do something original, to leave some imprint of ourselves on the old place, to add our mite which would be remembered by others to come afterward and perhaps unconsciously influence them?

Who could have been that marvelous though anonymous scribe who a century ago penned those wonderful case histories in the first volumes of hospital records in the Treadwell Library, and which remain an example to all house officers, for they have never been excelled.* It would make for some historian an interesting study to trace in these and subsequent volumes the records of the generations of what have always been called "house pupils" and to see in how far the promise of their future life as there recorded came to be fulfilled. It would be

*"Dr. A. J. G. Marcet, an exact writer, in his Essay on the Clinical History and Medical Treatment of Calculous Disorders published in 1817, mentions that no great London hospital then kept any regular record of cases." (Norman Moore.)

interesting to learn in how far their failures as well as their successes are attributable to the encouragement or repressions which this succession of young men in their formative years received at the hands of the Massachusetts General Hospital — whether it is because of the character of their training or in spite of it, success, and of what kind, has come to them. Here lies opportunity for another kind of an end-result study, of interest and importance.

As I look back on those of my own generation it seems to me that there have been three outstanding contributions for which the hospital may take credit. One of them is represented by the writings of Mumford, who more than anyone who has served here since "The Autocrat," possessed a gifted pen. And though his essays cannot be claimed by us, that experience which enabled him to write the best surgical text-book of his day was purely received here. It was through his highly developed histrionic sense, furthermore, that Dr. Warren's suggestion that there be Ether Day anniversaries, was taken up and developed. Then, also, the credit of two great reforms belongs to our generation, both of which are identified with the Massachusetts General Hospital. They both concern the after-result of the patient's hospital sojourn. With the name of Richard Cabot, one will be forever linked, and it stands, I think, as the most significant accomplishment in the whole history of the hospital—more, even, than the introduction of anæsthesia, for in this case the idea, the man, and the fulfillment belong indissolubly to the institution. The other great reform, though of a different nature and launched with a different purpose, nevertheless also has its important sociological bearings. In this case, also, the idea originated here, but the man, a modern Luther, nailed his proclamation to the church door, preferring this method or martyrdom to the more persuasive ways which an Erasmus would advocate. This involved, too, a question of personality. Nevertheless the idea as well as the man was a product of the Massachusetts General Hospital, and a great nation-wide movement has been started which is bringing hospital boards everywhere to see that they have obligations

which not only concern numbers and cost of patients, but also of work performed and its outcome.

There are, indeed, ways open for every individual to make his personal contribution to the institution he serves, and in developing my theme I have been interested more in what those associated with the Massachusetts General Hospital have left here than in what they contributed to their profession beyond the hospital walls. Some of the surgeons have been inventive and have perfected new apparatus or instruments; some, like the Warrens, have written important surgical treatises, and J. Mason Warren's "Surgical Observations," dedicated to the trustees, is a work of high order, a Massachusetts General Hospital publication from cover to cover; some have originated novel surgical procedures, like the lamented Frank Hooper's operation for adenoids or S. J. Mixter's œsophageal operations, or have worked out the underlying cause of some imperfectly understood disorder, as E. A. Codman did for subacromial bursitis; some, like C. B. Porter, have influenced surgery less by the written word than by their example of technical skill and enthusiasm as clinical teachers; some have developed new fields of work leading towards specialization, as did John Homans and Arthur Cabot; and almost all, without exception, have been such dexterous and resourceful operators that one may hardly single out an individual unless, possibly, Maurice Richardson may be taken to represent the Massachusetts General Hospital ideal of later days.

But it is on the personality rather than on the personal accomplishments of these surgeons and of others who have been connected with the Hospital that I would dwell, for it is their combined individualities rather than their individual contributions which in the end have produced that complex which we recognize as giving to the Hospital its particular flavor, tone and color. It is an intangible thing — this distinctive character of one hospital which makes it differ from others of its kind. Like an old wine, it has acquired a certain quality which only comes with age and a new institution cannot imitate, for it represents the fusion of the countless personalities

of all those who have worked for it or in it, no matter how lowly — of a nurse or house officer or orderly, no less than of a trustee or superintendent or member of the staff.

I think the faithful Hugh McGee has the record for service, fifty years in fact, but James Mains with his Parkinsonian tremor was the mainstay of the Bigelow amphitheatre for nearly as long. Then there was Barry, inimitable mimic of surgeons who had gone before, Piper the night orderly, "Out-Patient" John, and Louis Brown, who first came a boy with osteomyelitis and died here thirty years later, from complications of his old malady, meanwhile having become, as a photomicrographic expert, a most useful and loyal servant of the Hospital. Strongly represented, too, is the personality of that beloved Walter Dodd, who grew from an apothecary clerk to have charge of one of the first and best X-ray departments in the country and, like the soldier he was, stood by his guns in the service of the Hospital to the end — "doubly dead in that he died so young." All these are represented no less than, perhaps even more than, those of greater fame who were given more prominent rôles and received the plaudits, but gave far less time to the performance.

Nor need the list be so restricted, for women—many of them — have done their part, even Nellie and Ellen in the Flat, dear old Maggie, the waitress, Bridget Gibbon in the laundry, who for thirty-four years has known better than anyone else which of the surgeons and their pupils, East or West, was the least tidy. Then, too, there have been women higher up who for hours have stood wearily handing things to imperious and impatient surgeons, or have for so many years spent unselfish hours, like Miss McCrae, in giving nurses the distinctive stamp of the Massachusetts General Hospital Training School. A woman, indeed, with vision and opportunity, may even be one of the outstanding figures, as has been true of St. Thomas's Hospital, in whose annals Florence Nightingale shares the honors with, if she does not even outshine such as Mead and Cheselden, whom Alexander Pope immortalized.

So let us remember that some one other than a visiting physician or surgeon may indelibly stamp his personality on the hospital he serves. In the old Blockly Hospital in Philadelphia, a tablet has been erected to Thomas Owen, who for some thirty years as head nurse of the men's medical floor was known to successive generations of attendants and residents, most of whom are forgotten or at least their association with that picturesque old hospital has been, while his will remain for all time. And why? Because he gave all that he had to the institution and it left him famous, whereas the others, a good many of them, used the old Philadelphia Hospital not infrequently for political or private ends and are buried in oblivion. Such a one as this Owen was Jim Skillen, originally a Massachusetts General Hospital ward tender, who came back here to die of an incurable malady after passing uncountable years as janitor of the Medical School. There he probably meant more to more students than did any individual teacher, for he at least knew us all by name and had very clear and forcefully expressed notions as to our individual worth, as well as to the worth of our many instructors.

Example has much to do with the perpetuation of traditions, especially when there is a succession of hero-worshipping and imitative juniors; and if a hospital's personality is, as I believe it to be, its chief asset, the thought should quicken the sense of responsibility of everyone, be he trustee or lowly servant, for it is in the power of any individual to modify this quality. He who is willing to do something more than follow a prescribed routine, and who merges himself most with the active indoor life of the institution, giving even at personal sacrifice the most time to the attainment of this end, is certain to be the best and longest remembered.

And here my theme must end. Every hospital recognizes more or less clearly its set obligations; what helps or hinders most in their fulfillment are the crystallized traditions which give an institution its particular individuality. In the development of this quality countless people, however unconsciously, have contributed — those whose charity has given comfort and peace of mind,

as well as those whose professional skill has brought physical well-being to the maimed and sick; those who have brought the greatest sympathy and understanding to the problems of the young people here to learn; those who may never have come in special contact with either patients or students, but, freed from the killing routine of the clinic, have applied themselves to the forwarding of knowledge; those who have managed the business affairs of the hospital and its relations to the outside world; those, too, who have made the beds, kept the books, answered the 'phone, cooked the food, done the wash, stoked the fires, scrubbed the floors, and killed the rat—in the Hospital Jack built.

DR. WALCOTT: There has been a certain amount of speculation in the mind of the public as to the relation of the McLean Hospital to the Massachusetts General Hospital. They are one and the same. The department for the care of the *insane*, owing to the fortunate act of the trustees, came into possession of one of the famous country seats in the vicinity of Boston. Few of the older people of this audience understand that the title "country seat" applies to that portion of Somerville now occupied by a collection of slaughterhouses. The McLean Hospital, then the Asylum, remained in Somerville until driven out by the increasing occupation of the neighborhood, when it was removed to Waverley and then properly renamed the McLean Hospital.

The trustees were enabled, therefore, to open this hospital somewhat earlier than the department in Boston, the first patient being received in November, 1818.

The trustees, in their search for a competent superintendent, were fortunate in finding in a country physician, Dr. Rufus Wyman, a well-educated man of superior intelligence and strength of character. Two illustrious physicians, his sons, later carried his work to an eminence equal to his own. Like the great physician, Pinel, he believed that the maniac should be treated with humanity. It is not my intention to repeat the sad story of the

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HISTORY OF INSANITY DURING THE PAST CENTURY WITH SPECIAL REFERENCE TO THE McLEAN HOSPITAL

C. MACFIE CAMPBELL, M.D.

"FEAR walks up and down in the Jungle by day and by night," Kipling tells us, and fear still plays a large part in the life of civilized man. Pain and death throw their shadow over his happiness, and mankind eagerly welcomes each step of progress in the alleviation of pain and the struggle with death.

There are some forms of sickness, which may neither involve pain nor endanger life; but which many hold more in dread than actual suffering or even death; I refer to those forms of sickness which touch the citadel of human reason, and which insidiously rob the individual of his social value. The issues raised by these disorders, so closely interwoven with other fundamental problems of humanity, have been confused by many cross-currents of human belief; our patients at different periods have been held to be inspired by God, possessed by devils, corrupted by sin. Only slowly have we come to the modern standpoint that a mental disorder is one form of sickness, that it is a biological problem. The problem, it is true, is one of great complexity, not always to be formulated in the simple categories of internal medicine, but in psychological terms which do justice to the high degree of organization of human nature. This view is far from being as yet thoroughly assimilated; the mediæval attitude still persists beneath the twentieth century veneer. Few individuals refer frankly to the fact that a relative has a mental disorder; in the minds of many, insanity has still a stigma attached to it. In the conversation of educated men insanity is often referred to in jesting or contemptuous terms; even physicians may refer to patients suffering from these disorders in the current slang.

McLean Asylum for the Insane, Somerville, Mass., 1844

Whoever uses such current terms, to that extent is living in an earlier stage of culture; he helps to perpetuate a prejudice which has very serious consequences; he postpones the early recognition and treatment of these disorders, favors treatment in ill-equipped but unknown institutions, increases the distress of the relatives.

Up to the end of the eighteenth century the condition of the insane in all countries was deplorable; fear was the keynote of their treatment. They were outcasts, not only from society, but from medical science; in the medical books superficial descriptions, naïve explanations, scholastic discussions abounded. The period of the French Revolution was the dawn of a new era for the insane. In 1792, Pinel, appointed physician at Bicêtre, struck the fetters off the insane patients, and when later transferred to the Salpêtrière, he instituted the same humane régime which he had found so successful at Bicêtre. For the first time it was possible to study the symptoms of mental disorder itself, uncomplicated by the artefacts due to hideous neglect or abuse. The literature of clinical psychiatry may be said to begin with Pinel's "Traité Médico-philosophique sur l'Aliénation Mentale" (1801). The pupils of Pinel, foremost among them Esquirol, soon contributed an important body of clinical information; deserving of mention are Falret, Calmeil, Bayle.

Pinel did not know until 1798 that William Tuke had in 1792 established the York Retreat, an asylum where the insane were treated on the same humane principles which had inspired his own work in France, nor did Tuke know of the work of Pinel till 1806. A great impetus was given to the humane treatment of the insane in England when Hill, in association with Charlesworth, introduced the same system into the Lincoln Asylum, the success of which system was further confirmed on a large scale by Connolly at Hanwell Asylum, where he went in 1839. Non-restraint soon became a dogma in the English public asylums, while it was still regarded with suspicion on the Continent.

In Germany, Reil had, in 1803, published his "Rhapsodies on the Psychic Treatment of Insanity," in which

he denounced existing abuses in Germany. The important period of German psychiatric literature begins with Griesinger's "Pathology and Therapy of Mental Disorders" (1845); in this work the study of mental disorders is placed on the same basis as the other medical disciplines.

American psychiatric literature of this period consists of the work published by Benjamin Rush in 1812, "Medical Inquiries and Observations upon the Diseases of the Mind"; the fine spirit of Tuke or Pinel does not breathe in the work of Rush, and as a clinical exposition it ranks far below that of Pinel.

The facilities for the care of the insane in the United States during this period was very limited; in 1754 the Pennsylvania Hospital for the insane was instituted with custodial aims; Virginia, in 1773, opened a hospital for the insane at Williamsburg; the Society of the New York Hospital in 1809 built a separate building for the insane which developed into the Bloomingdale Asylum. The Society of Friends opened an asylum at Frankford, Pennsylvania, in 1817. In 1824, the Connecticut Retreat for the Insane at Hartford was opened under the enlightened guidance of Dr. Eli Todd. It was 1832 before Massachusetts built her first State Hospital at Worcester. New York State followed with the Utica State Hospital built in 1843. Such were the hospital facilities for the insane in the United States during the period of the early history of the McLean Asylum.

In America, the interest of the public in the distressing condition of the insane at the beginning of the nineteenth century may be judged by the fact that out of the $93,969 subscribed during a week's canvass for the establishment of the Massachusetts General Hospital, $43,997.47 was subscribed specifically for the asylum. The branch for the insane, to which the name McLean Asylum was later given, was opened in 1818, three years before the opening of the General Hospital. "The first patient was admitted October 6, 1818, a young man whose father thought him possessed of the devil, which he had tried to exorcise with the rod."

A public institution for the management and care of the insane was a novelty; the public had to be reassured

and educated to realize that the old traditions, associated with the care of the insane, were altogether broken with; it was unlikely that for some time the early and most curable cases of mental disorder would be brought to the asylum. As a matter of fact, probably at no period in the history of the McLean Asylum was there such a large proportion of difficult and trying patients as during the first years; it received a larger proportion than ever since of patients from jails and almshouses, where they had had no proper care. Many of them, from years of neglect, had fallen into habits which made their care a matter of great difficulty. Later, as State Hospitals grew up and patients received earlier treatment, these products of human neglect became less numerous.

The institution had, first of all, to establish itself in the public confidence and give a practical demonstration of the care of the insane, which would place this branch of medicine on the same basis as the other branches. It was a great opportunity; an old dispensation was at an end, a new tradition had to be established. The choice of a superintendent for the asylum was most important. The trustees chose Dr. Rufus Wyman, and under his enlightened direction, the care of the insane was at once placed upon a basis thoroughly humane and of as high technical efficiency as the medical knowledge of the time admitted. Dr. Wyman was no psychiatrist in the modern sense of the term, he was a country doctor of good common sense, with a local reputation for handling the mentally afflicted. For seventeen years he carried on his work at the McLean Asylum without a vacation — for not until 1873 was it recognized officially that the physician required a vacation — and his whole aim was the comfort, happiness and the care of his patients; he shared the intimacy of his family life with those patients able to benefit by it, while for those severe and disturbed cases, whose symptoms necessitated their removal from any association with a group, he spent much time in designing suitable accommodations, and surrounded their treatment with every precaution and safeguard. He designed buildings, he carefully chose the attendants, he encouraged a great variety of occupations

and diversions. He grouped the patients in the buildings in accordance with their symptoms and their varied needs, and, in his careful attention to detail, he saw that the stone floors of the rooms of the most disturbed patients should be suitably warmed. The attendants were chosen on the basis of their character, and to insure to the patients a reasonable permanence of the personnel efforts were made to study the requirements of the attendants.

Occupational therapy plays an important rôle in a modern hospital, and Dr. Wyman fully realized the importance both of recreation and of occupation. It is pleasant to read in the hospital report for 1829 the items: Medicines, $32.79; Diversions, $1,089.68.

Dr. Wyman realized that he had not only to care for the patients but to relieve the distress of the relatives and to help to create an enlightened opinion with regard to insanity. "It is believed the public have much to learn respecting lunatics — that insanity is curable — that a few weeks or months are not sufficient for a reasonable trial, that absence from home is always indispensable — that whips and chains are forever banished from every well-regulated asylum for the insane." In his report for 1833 he says, "No person is ever allowed to strike a patient, even in self-defense." To twentieth century ears such a statement seems superfluous. We assume that from the time of Tuke and Pinel this has been the only possible attitude of the enlightened physician. We only give due credit to Dr. Wyman for his sensitiveness to human needs and broad humanity when we contrast his attitude with that of a more distinguished physician of the period, Benjamin Rush. Rush seemed to be insensitive to the miserable state of the insane in the Pennsylvania Asylum in Philadelphia. He accepted the coercion then in vogue. He apparently took it for granted that a whip was always available to punish an assault. Rush certainly protests against ever striking a patient, but with the ominous qualification, "a blow with the hand or a whip only in case of assault."

To sum up the main factors in the régime of Dr. Wyman: detailed attention to the care, comfort and cure

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1842. It is interesting to note that this movement was bitterly opposed by many, who applied the term "fancy philanthropy" to the movement in this direction. At the present date there are other movements, dealing with the mental hygiene of the community, with regard to which kindred spirits may be tempted to apply the same term, but which may come to be accepted as a matter of course as fully as the responsibility of the State for the care of the insane.

In 1836 Dr. Bell was invited by the Trustees of the McLean Hospital to become Superintendent of the McLean Asylum, for Dr. Lee, the successor of Dr. Wyman, had died within a year of his appointment. The single report published by Dr. Lee is a striking document. In his brief period of office, he made a very definite contribution to the spirit of the institution. Occupation of useful type was to him the great therapeutic agent. Like his predecessor, he emphasized and defined the moral management of the patients. He was not satisfied with any perfunctory daily program nor occupation, merely for a selected few, but aimed to find some simple mechanical labor in which most patients could be engaged. With regard to the nursing personnel, his thought was "not with how small a number can we get along, but how many can be advantageously employed?" "We will not continue any male or female attendant whom we cannot invite into our family seat at our table, and with whom we could not confidently place our own wives, sisters and brothers. We do not consider their service as servile; they are the companions of the unfortunate; engaged in the same employments with ourselves, they shall command our friendship and respect." He laid stress on religious services, and 95 out of 136 patients voluntarily attended family worship. So much struck were the trustees with the principles and the practices of Dr. Lee that they requested his successor, Dr. Bell, to be guided by them.

Dr. Bell, however, needed no direction from others as to the spirit in which his work should be conducted. His record in New Hampshire had shown his humane standpoint with regard to the treatment of the insane.

He had already published various communications dealing with scientific topics, on dietetics, on the external exploration of diseases, and on smallpox. For twenty years he directed the McLean Asylum, and during this period the number of patients steadily increased; in 1847 only two-thirds of all who applied could be admitted, notwithstanding the increased accommodation supplied by a number of new buildings. Dr. Bell not only continued to show the same humanity in the care of his patients as his predecessors, he devoted himself to the detailed study of the symptomatology of insanity and of the principles underlying its treatment. In the early days of the Asylum we find many references in the treatment of patients to bleeding, blisters, setons, cathartics. The frequent blood-letting was largely due to the tradition so enthusiastically endorsed by Benjamin Rush, who bled his eldest daughter when she was six weeks old (though prevention of the overdose of laudanum would have been a greater tribute to the care of the children), and one of his sons twice before he was two months old. There were few conditions in which a good blood-letting was not claimed by Rush to be of considerable value.

These traditions had, however, been considerably weakened, among others by Dr. Wyman and Dr. Todd. In 1841 Dr. Bell writes, "The practice of bleeding, violent purgations, emetics, vesicatories, and derivatives has passed away before the light of experience." Moral means are for Dr. Bell the essentials of treatment, while with regard to drugs, their cautious use is recommended and an attitude on the part of the physician of "a wise expectation."

Dr. Bell not only brought the care and treatment of the individual patient to the highest level, he made useful contributions to the literature of his chosen branch of medicine; the most important of these was his paper "On a form of disease resembling some advanced stages of mania and fever, but so contradistinguished from any ordinarily observed or described combination of symptoms as to render it probable that it may be an overlooked and hitherto unrecorded malady" (*American Journal of Insanity*, October, 1849). In addition, he felt

that physicians, who had specialized in diseases of the mind, had a certain responsibility for guiding public thought in relation to kindred topics. A wave of interest in Spiritualism was sweeping through the country, and Dr. Bell devoted some time to the study of these elusive phenomena. He made these investigations in an open-minded spirit, although by nature conservative and not inclined to take up lightly any innovations. "And so in relation to all the new doctrines of our own art, I may say I was and am an ultraconservative, as in religion I hold to the Scotch Presbyterianism of my ancestors, Rouse's version of the Psalms of David and all, and in politics am an old fogy Whig." He felt that his influence had been of some use in promoting a sober attitude on these heady topics. "I always supposed I did as much as any man in New England to put a stop to that gigantic epidemic by demonstrating that its facts were only those of old mesmerism itself, and that the mediums never told what the inquirer did not know before." He makes interesting remarks as to the relation of the phenomena to dissociation. He comes to the far-reaching conclusion "that it is no evidence that views, feelings, reflections, which we do not recognize as at all ours or which we may spurn as being our thoughts or sentiments, still may not have come out of our storehouse as they certainly do in states of dreaming or of aberration." In this sentence Dr. Bell emphasizes a psychological principle, the further elaboration of which has been one of the main tasks of modern psychopathology. The conclusion of Dr. Bell's life was a worthy sequel to a distinguished professional career. He had, owing to the condition of his health, resigned from his position in 1857. At the beginning of the Civil War, he applied for a commission. He shared the hardships of his regiment during the campaign, was at the battle of Bull Run, and finally died in camp, with the rank of brigade surgeon.

Already during the life of Dr. Bell the McLean Asylum was being unpleasantly squeezed by different railroads encroaching upon its grounds, and by 1871 it was decided to move the Hospital to a more suitable site.

In 1879 Dr. Edward Cowles was appointed Superintendent of the Asylum, and under his direction the McLean Asylum was transformed into the McLean Hospital, and in 1895 it received a different local habitation as well as a new name, being transferred from Somerville to the new site at Waverley. In changing the name of Asylum to Hospital, Dr. Cowles was making no mere verbal alteration to spare the susceptibilities of the public. Around every name connected with this form of disorder there develops an incrustation, due to the precipitation from the public opinion of the time, a testimony to man's continued inhumanity to man. The term asylum, however, was only appropriate for an institution which offered a place of retreat to the handicapped and shipwrecked. The name may have been partly discredited because in many places it suggested a place of retreat, not only for handicapped patients, but for handicapped physicians, who had found a secure refuge from the trials of the outside world.

Both on its structure and on its spirit, Dr. Cowles impressed the hospital characteristics. Bars were taken off some of the windows, doors were unlocked, the number of women nurses for male patients was increased, a feature which Dr. Tuke, on his visit, regarded with some doubt, and visitors were admitted freely to the patients. In the reports of the previous superintendents, it is interesting to note the emphasis that was laid upon the evil consequences of visits, which were obviously sternly discouraged.

In 1882 a training school for nurses was established, the first formally organized training school in a hospital for the insane. In changing the name of attendants to nurses, here again it was no verbal change. It was the symbol of the new emphasis on the real function, and in order to perfect that function suitable training was organized. In establishing this training school, Dr. Cowles made a very important contribution to the whole movement of mental hygiene, and to the development of public opinion. He raised the prestige of the work; he emphasized the fact that nursing the mentally sick is simply one technical branch of nursing, as psychiatry is

one branch of medicine. As no physician can be considered adequately trained who has merely been taught to look after diseases of organs, and not diseases of the personality, so no nurse can be looked upon as fully trained who has been trained merely to nurse organs and systems, and who looks upon the disorders of the personality as negligible. The laboratory physician may find a career in his technical researches, which only occasionally bring him into contact with patients, but there is no room in the wards of a hospital for a laboratory and impersonal nurse, and the time is, I hope, at hand when every nurse will be required to spend a period of training on psychopathic wards. Dr. Cowles was one of the first to realize the importance of these principles.

He saw that progress in the study of mental disorders required the use of the most accurate methods supplied by the laboratories, and that merely descriptive psychiatry did not carry one far in relation to the underlying mechanisms of the different forms of psychosis. He established a pathological laboratory in which the researches were not limited to pathological anatomy, but to an analysis of the disordered functions. Dr. Noyes was at first in charge, but was succeeded in 1896 by Dr. Hoch, who at McLean Hospital began that work on the analysis of the underlying personal factors in mental disease which has done so much to influence recent psychiatric thought. A psychological analysis of somewhat different type was undertaken, when the laboratory of experimental psychology was opened by Dr. Franz in 1904. The careful researches of Dr. Franz were the first important contribution from America to a sound experimental psychopathology, and the researches carried on by his successor, Dr. Wells, applied the careful technique of the psychological laboratory to problems of the personality, intimately connected with mental disorders. Dr. Cowles was deeply impressed with the dynamic aspect of mental disorder, and not content with formulations of these dynamic factors in complex psychological terms, he wished to trace the disordered functions to the underlying physiological and biochemical factors. In 1900, Dr. Folin established at McLean Hos-

pital the chemical laboratory in which for the next eight years he carried out painstaking and fundamental researches with regard to this aspect of mental disorders.

The buildings of the McLean Hospital, as we see them, are a monument to Dr. Cowles, but a still greater contribution to the subject, in which he was so interested, was the placing of the study of this subject on as high a basis as that of the other medical disciplines, and of organizing in the Hospital medical research in mental disorders in the spirit of modern medicine.

The period of one hundred years has seen the public attitude towards mental disorders gradually modified, so that at the end of the century the humane attitude towards patients with mental disorders is widely disseminated, although it may not be always thoroughly assimilated. The spirit of humanity characteristic of the work in the McLean Hospital is a continuation of that humane attitude which was established in the McLean Asylum at Somerville, from its first institution under the régime of Dr. Wyman. The medical treatment of the patients in the hospital, after emancipating itself from the earlier drastic methods, has followed the same principles which Dr. Bell enunciated, namely, a cautious use of medical remedies and "a wise expectation." In only a small group of mental cases, and these of organic nature, is there any specific treatment by drugs; drugs in mental disorders are chiefly used for palliative and symptomatic purposes. While in the moral management of cases of mental disorder, the value of occupation and diversion have been adequately stressed from the beginning of the history of the McLean Hospital, the careful analytical researches of Dr. Hoch, later continued at Bloomingdale Hospital, contributed a great deal to show that moral management or psychotherapy has a very technical aspect. Dr. Hoch in many communications emphasized the fact that many apparently obscure mental upsets could be traced to very definite personal problems in the individual life, problems which could not be formulated in the simple terms of biochemistry nor in terms of a psychology dealing merely with reaction times and impersonal factors. In emphasizing the development of such

disorders and in estimating the emotional factors and the difficulty of the actual situation in each case, he contributed not only to the understanding of the individual patient, but indicated principles of treatment with important bearings on the question of the prevention of mental disorders. The advance made during the last century in medical thought with regard to mental disorders may be illustrated by a comparison of the naïve formulations of Benjamin Rush with the careful analysis of a nervous or mental patient at the present day. The underlying causes of the individual case now are studied in the light of the general condition of the metabolism, the state of the various organs, the hereditary endowment, the balance of the instincts and emotions, the influence of past experiences, the stress and strain of the present situation. The search for underlying causes was much less keen in the time of Benjamin Rush; he wrote that one of the causes which tend to produce intellectual derangement "is the frequent and rapid transition of the mind from one subject to another. It is said booksellers have sometimes become deranged from this cause."

Medicine is an exigent mistress, never satisfied, always with new tasks, the fulfillment of one task leading to the development of many others. The constant straining forward brings fatigue and a certain longing for finality, and one can appreciate the attitude of the weary sailor among the lotus eaters:

> "Let us alone. What pleasure can we have
> To war with evil? Is there any peace
> In ever climbing up the climbing wave?"

It is pleasant to rest and regard complacently the progress made. It is pleasant to review the disappearance of the gross inhumanity, the disappearance of offensive words which symbolized this inhumanity. It is pleasant to consider the asylum transformed into the hospital, and to think of all the apparatus of modern medicine being applied to deal with these most obscure diseases. The attitude of complacency, however, is dangerous, and we would have learned little from the spirit of predecessors like Wyman and Bell and Cowles, if we complacently

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aspect of the disorder, and a psychiatric survey of the case may be considered imperative. As we are surprised that the nineteenth century, although in general humane, enlightened, cultured, came by such slow steps to take up adequate responsibility for the insane poor, so may the twenty-first century regard us and our problems. There may be in the present community large numbers sadly handicapped by reason of mental difficulties, who find their way to no hospital, are recognized by none as sick and ailing, but to whom perhaps the twenty-first century will give comfort and technical advice.

After looking back, therefore, on the past progress, and being duly grateful to men like Wyman, Bell, and Cowles, who have left such a permanent imprint of their humanity and intelligence, it may be well to turn forward again and see whether contact with these minds has not rendered us more sensitive to some of the tasks which lie at our own door, but which we have singularly failed to notice.

DR. WALCOTT: In the year 1810, when Jackson and Warren issued the appeal for a hospital, the country was slowly drifting into the War of 1812, when for the last time a foreign enemy took possession of part of the territory of the United States. Dr. Warren was the son of a distinguished surgeon of the Revolution and a lifelong leader in the medical profession, yet neither in the appeal nor in any report of the Trustees during the building of the Hospital is there a hint of the possible idea of a medical service in time of war.

The quarrel with Mexico made little impression on this hospital, as it did upon New England generally.

In the great war, the Civil War, members of this Hospital and men connected with it gave their services to their country. But still there was not direct official relation between this Hospital and the medical service of the Army.

In the World War, that which stands the greatest of all wars, a change came over the policies of the Americans, and for the first time the country entered the war with

an adequate surgical and medical corps. In the beginning individuals connected with this Hospital, as with other hospitals, had already crossed the Atlantic and taken a worthy part in the struggle on the other side of the seas carried on by the Allies. But the entering of our country into the war led the Superintendent of the Hospital, Dr. Frederic A. Washburn, experienced in military matters, to suggest to the Trustees the expediency of joining the medical staff to the military service of the United States in case of war. His idea was accepted.

In July, 1917, Base Hospital No. 6, an organization within the Massachusetts General Hospital, left Boston, and went into service near Bordeaux, France. A hospital was established there, conspicuous for its good management and maintenance. Every man connected with that organization did credit to himself and brought renown to this institution.

A large share of the credit for the preparation of the country for that war is due to our guest of today. His remarkable service in the American Expeditionary Forces received the highest distinction.

THE PLACE OF THE CIVIL GENERAL HOSPITAL IN THE SCHEME OF MEDICAL PREPAREDNESS

MAJOR-GENERAL MERRITTE W. IRELAND
Surgeon General, U. S. Army

THREE-QUARTERS of a century ago today happened the great event which we are gathered to celebrate and which Weir Mitchell, with characteristic felicity termed "The Conquest over Pain." It is most appropriate that Ether Day should be marked by an annual celebration, and I am glad that the Medical Department of the Army has an opportunity to speak its gratitude for this beneficent gift which has done so much to allay the vast sum of human suffering which we are called upon to witness and to relieve as best we may.

I could not have brought myself to stand here, in the place of the great and gifted men who have, in past years, lent their eloquence to the celebration of this day, but for the fact that it gives me an opportunity to thank the Trustees of this great Hospital for the fine public service which it rendered to the Army during the World War. A century has passed since the first patient was admitted to this Hospital, and during that time our country has been engaged in five wars. The first, in 1812, secured for us the liberty of the seas. The second burst the bonds which would have held back the march of civilization to the Pacific. The third was the long and bloody operation which cut out the cancer of slavery from the vitals of our nation. The fourth rescued the fair islands of Cuba and Porto Rico, in which we had long and great and special interests, from the weak and cruel domination of Spain and awakened us to our long-neglected responsibilities as a world power which have been so magnificently met in the World War. For this last and mightiest war we are, as yet, too near it, and its ultimate results are too much shrouded in the

mists of the future for me to undertake to name them in a phrase.

The Massachusetts General Hospital is a civic institution which was founded and nourished by the generosity of your citizens of former days for benevolent and humane purposes which have nothing to do with war. It has, therefore, in these former wars, sat at home like a good mother, attentive to the duties of its house, sending forth, it is true, its children to serve their country and care for its armies, and, like a good mother, welcoming them when they return with the laurels of duty well performed. It has also never failed to open its doors to the sick and wounded soldiers. But in the last great conflict war laid its rude hands on every department of human activity and on the persons or products or entire populations, mobilizing nations for its own terrible purposes in a way that had never before been dreamed of. In mobilizing the medical profession for war, we went further than to call the children of the great medical institutions to come, one by one, to be incorporated into the medical service.

The horticulturists, when they find a fruit tree which produces a specially valuable and delicious fruit, do not take the time to reproduce it by the slow process of raising new plants from the seed. This, which is nature's process, has, in addition to the disadvantage of delay, the uncertainty as to what may come from a seed in which many atavistic qualities are struggling to assert themselves. The gardener takes, instead, cuttings of the tree itself, which have the property of breeding true and continuing in the new plant all the admirable qualities of its parent.

Many months before our country entered the war, an officer of the Medical Corps of the Army, who had been charged with the organization of the activities of the Red Cross having relation to our military service, saw an opportunity to use the horticultural method and, by cutting off bodily a military base hospital from the existing organizations of the great civil hospitals, to obtain a military unit which bred true to the parent stamp and carried into military life the noble traditions, the high

professional standard, the cohesion, discipline and orderly methods of the parent institution. No provision for such ready-made hospitals was contemplated by any law, but by the ingenious scheme of enrolling all of the personnel in the Army Reserve, these units were, by the act of calling them into service in time of war, lifted bodily from the Red Cross into the Medical Department of the Army. The Massachusetts General Hospital, by such an operation, furnished to the Army Base Hospital No. 6, which, organized and commanded by your distinguished Superintendent, Colonel F. A. Washburn, was among the first to join the A. E. F. in France, and created, in the suburbs of Bordeaux, a noble hospital which was a worthy daughter of this famous institution.

Base Hospital No. 6 found a home at Talence, a suburb of Bordeaux, in the buildings and fine park of the Petit Lycée, which was, however, already occupied by the French Hospital Complimentaire, No. 25. The French military authorities agreed to close this hospital as soon as the sick could be evacuated, but this was not at all in accordance with the views and desires of the chef, an old French physician of Bordeaux, who thought that it would be far more agreeable to retain his position and command both hospitals. Here, however, he came in conflict with the will of the Commanding Officer of No. 6, which had something elemental and glacial in its slow, resistless, forward movement which gradually shaped every tenacious root and removed him and his hospital from the scene.

The French have a great reverence for trees, and appreciate, in a way that, unfortunately, most Americans do not, that these beautiful creations of nature are the gifts of the decades and of the centuries and cannot be made to order by the hand of men. Therefore they were not willing to give up their trees, even to the stern necessities of war, and stipulated with the American authorities that the trees should not be cut down in expanding the hospital by temporary buildings from its original 500 beds to more than 4,000, which it sheltered at the time of the armistice. Accordingly the wards had to be placed here and there, wherever a sufficient space

among the trees could be found, and the ground plan of the hospital presented extraordinary outlines which resembled a Chinese idiograph rather than any architectural scheme. As the climate of France is rainy and its soil notoriously adhesive to the feet, the Commanding Officer provided corridors which would protect his nurses and patients from the rain and mud in the comings and goings between the wards and the administrative buildings. Lumber, however, was very scarce in France and most of the planks and beams from which our hospital centers were constructed were standing in the pine forests of the Landes when the American Expeditionary Force set sail for France. The General Staff was, therefore, constantly preaching economy in the use of lumber, and when several of them, in the spring of 1918, visited the sections of the S. O. S., and Bordeaux among them, to see how their injunctions as to economy and overcrowding were being carried out, they were scandalized to see these long and numerous corridors. "My God!" observed one of them, "the man is building a second Massachusetts General Hospital at Bordeaux." Little they knew how well these corridors would serve to accommodate the beds in the crisis expansion of the terrible October days when the crest of the epidemic of influenza coincided with the crest of the great wave of wounded which flowed back from the six weeks' battle in the Argonne and which strained the strength and resources of the Medical Department very nearly to the breaking point.

But at this time Colonel Washburn's transfer to England was ordered, where the hospitalization for American troops had been dragging and going badly and where the Chief Surgeon, who knew his value, felt a man of his qualifications and administrative ability was needed. There he remained, to be promoted later to the position of Chief Surgeon of the Base Section and the rank of colonel, to which the English Government added the decoration of the Order of St. Michael and St. George. Surely our government at no distant date will recognize the distinguished service of this officer.

I regret that I cannot go with some detail into the operations of the several departments of this splendid

hospital; the good work of Colonel Babcock, the next Commanding Officer; the medical service under Colonel R. C. Cabot; the surgical service under Colonel Lincoln Davis, and the fine nursing service under their admired leader, Miss Sara E. Parsons. Suffice it to say that in their work they maintained the fine traditions of this great Hospital. The cutting brought forth fruit true to stock. I did not know how Colonel Cabot would like transplantation into military atmosphere and, therefore, I was greatly pleased to hear him say, in a speech at a dinner in Paris, that he considered the practice of medicine in a base hospital to be ideal in its conditions for the attainment of the best results, as there all specialties were represented, all worked together without rivalry, without any intrusion of the spirit of gain, for ends which were entirely noble, patriotism and the alleviation of human suffering.

As regards the laboratory service, I might mention, as something novel and interesting, that when a very fatal epidemic broke out in great Remount Depot at Souge which the veterinarians were not able to check, and which seriously depleted the supply of horses which were depended on to draw the cannon at the front, the Chief Surgeon of the Bordeaux section, Colonel Shaw, a graduate, by the way, of this Hospital, took charge in person and took with him, from the laboratory section of No. 6, Drs. Moss and Binger as laboratory experts. Although they were not able to identify the causative organism, by the strict application of the well-known rules of epidemiology, they were able to bring the epidemic promptly to an end.

On January 14, 1919, Base Hospital No. 6 closed its records. The highest number of patients which it had sheltered at one time was 4,300. The number of cases received in the surgical service was more than 17,000, and 3,442 operations were performed. The total number of patients cared for in the hospital during the sixteen months that it was in operation was more than 26,000. On February 14, 1919, the staff and nurses set sail from Bordeaux and received a fitting welcome on their return home.

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War, and which has so well maintained its best traditions?

The action of the Massachusetts General Hospital in giving to the Army Base Hospital No. 6 is the best answer as to the place of civil hospitals in our scheme of medical preparedness to meet a national emergency.

The Hospital in the World War

BASE HOSPITAL No. 6

As one of the few large American hospitals to prepare for military action long before the United States declared war on Germany, the Massachusetts General Hospital was ready to take the field when the call came in April, 1917. In May, the enlisted men were ordered out for drilling and throughout the month of June the Unit of Base Hospital No. 6 — physicians, nurses and enlisted men — waited impatiently for the order to embark for France. On July 9, 1917, the order at last came and under the command of Major F. A. Washburn, Superintendent of the Hospital in time of peace, the unit quietly entrained for New York and sailed for England on the *Aurania*, an excellent ship, destined on a later trip to be torpedoed and sent to the bottom of the sea.

Twenty-eight officers, one Red Cross chaplain, sixty-four nurses, six secretaries, one dietitian, and one hundred and fifty-three men made up the strength of the Base Hospital in these early days. They were a small bit of the greatest crusade in all history and a few pages are here consecrated to their work.

On July 21, the unit arrived at Queenstown, two days later at Liverpool. From Liverpool dock to Southampton dock was the next stage of the journey, then across the Channel to Havre on the Australian hospital ship, *Warilda*, also later a victim of the German submarines. Headed east from the coast, the troop train just missed Paris and instead of continuing to the front turned sharply away and traveled hour after hour toward Spain. The destination was Talence, a little town three miles south of Bordeaux. Here with many exasperating delays the French Military Hospital No. 25 was taken over, almost completely rebuilt, and enlarged many times. The French army, in its turn, had taken over the

large building of a boarding school with its extensive grounds on which to develop their hospital No. 25, when the war began for them. This school, called the Lycée de Talence, was rather attractively located in the environs of Bordeaux and on the edge of the enormous vineyard country of the Medoc and the Grave. Throughout the summer and autumn of 1917 the members of U. S. Base Hospital No. 6 went ahead with their program of building, collecting supplies, paper work and care of patients. The building program never ceased, and even when the armistice was signed, over a year later, the hospital was still growing, both in number of wards and in number of patients. From very modest beginnings, in that short time the institution grew to the tremendous size of nearly 100 wards and nearly 5,000 beds, all occupied.

The personnel, in large part, remained the same throughout the existence of Base Hospital No. 6 in France—always there was a large nucleus of Massachusetts General Hospital doctors, nurses and orderlies. Frequently, and usually for short periods, medical officers were added to the roster, generally as the so-called "casuals." Two notable and permanent additions to the original unit should, however, be noted: first, in March, 1918, Unit O, of Charlotte, North Carolina—a group of medical officers, nurses and enlisted men, about one-half the number of the original Massachusetts General Hospital Unit; and, second, later in the spring, a group of nurses from the Presbyterian Hospital in Chicago. Both of these groups were of great help to Base Hospital No. 6.

Other changes that took place were the permanent detachment of Lieutenant Colonel Washburn, Captain Means and Captain Mixter from the hospital in the spring of 1918 for service in England, Lieutenant Colonel Babcock becoming Commanding Officer at that time. Captain Adams and Lieutenant Aub were also permanently detached later, for service elsewhere. In addition to these changes among the officers there were temporary assignments here and there of practically all in the unit, often for long periods of time, such as the mission of many months of Lieutenant Colonel Davis and Captain Irving

on the Italian Front, and of Major Vincent and Lieutenant Clark on the French Front. Short periods for work and instruction elsewhere were frequently arranged in the case of all the medical officers. Incidentally these changes and the few leaves of absence broke the monotony of the ceaseless grind at Talence. The dullness of this grind, in the mud and chill of the first winter, is well illustrated by the joy with which a trip to Savenay was welcomed by the writer in February, 1918, even though it consisted in sitting up all night in a stuffy French train to prevent several psychopathic patients from committing suicide before their delivery to a psychiatric hospital at Savenay.

U. S. Base Hospital No. 6 was officially opened to receive patients on August 21, 1917. On October 1, 1917, there were 160 patients, and on December 31, 1917, there were 325. From then until November 12, 1918, there was steady and marked growth to the grand total of 4,319 patients the day after the armistice was signed. The early patients were among the first American soldiers in the vicinity of Bordeaux, engineers, stevedores, medical men and nurses. Some of the Canadian foresters were also among the earliest patients. Pneumonia and exanthematic diseases abounded during the first winter. In the late spring, when American military activity at the front began, wounded and gassed American troops began to appear. Their numbers rose by leaps and bounds through the summer and fall of 1918, convoy after convoy coming down from the hospitals at the front, often quite recent casualties straight from dressing stations. On April 3, the first large convoy of patients came into Bordeaux by ambulance train, and from that time on, the trains increased in number. Finally, in the fall of 1918, the burden of the care of the wounded, gassed, and sick was shared with newly formed American base hospitals at a near-by center, Beau Desert.

In September the influenza epidemic hit Base Hospital No. 6, and for weeks there was ceaseless work day and night, about half of it devoted to the wounded, as the Argonne struggle began, and half to the victims of the influenza, scores of whom died. One or two entire wards

were devoted to the care of those beyond hope — crowds of delirious dying patients, a hideous nightmare now to all who attended them.

Parallel, of course, with the building of hospital wards, administration quarters, and warehouses was the development of other resources: a pathological and bacteriological laboratory under Captain Kinnicutt; an X-ray department under Captain Merrill; operating rooms under Majors Davis and Brenizer; convalescent resources under Lieutenant White; nursing organization under Miss Sara E. Parsons; Red Cross Hut, chapel, and post office under Chaplain Henry K. Sherrill and others. Lieutenant Colonel Richard C. Cabot added much to the morale of the hospital by his zealous development of entertainments of all kinds for nurses, enlisted men, and officers. His talks on the progress of the war to hundreds of men grouped about the outdoor stage of the Red Cross Hut in the summer of 1918 were memorable events.

Fortunately the Base Hospital was situated in pleasant vineyard country with much of historic interest within cycling distance. Throughout the eighteen months of residence there were frequent expeditions by members of the unit on foot or on bicycle to visit old castles, historic towns, famous vineyards and châteaux and beautiful viewpoints. There was even occasional opportunity to play golf at the Bordeaux Club a few miles away, and to attend the opera in the city. Bordeaux shops and restaurants helped to make life more pleasant in hours off duty, and even the little Square at St. Génes, only a mile from the hospital, will be remembered gratefully by those who relished a glass of cold beer on a hot afternoon.

Friendships gradually sprang up between the members of the unit and some of the best of the French families with estates near the hospital. Some of these friendships have persisted to this day. Those who took advantage of these opportunities of meeting the French people became quite proficient in the language before they left for home.

As the summer of 1918 drew to a close there was but little time for play or even for rest. The pace grew hotter and hotter until that memorable day, November 11,

appeared. Quickly things changed after that, and in a few weeks the hospital was nearly half empty. Everyone had time to think once more, and to grow restless in the wait for orders to be relieved of duty and to start for home. On January 14, 1919, the Base Hospital No. 6 Unit was relieved by U. S. Base Hospital No. 208. During the active duty of the hospital in France, the unit took care of 24,122 sick and wounded soldiers. The long grind was over, but still there were the restless days to wait before the return home. Some of the unit left Talence at the end of January and beginning of February, to continue their work in the Balkans, in Poland, and in France itself. The remainder of the unit finally sailed for America from Bordeaux on the transport *Abangarez* on February 14, reaching New York after a stormy voyage on March 2. The end of Base Hospital No. 6 came with its demobilization at Camp Devens in March, 1919.

Built up on the structure of old Base Hospital No. 6, a new military hospital is now in existence — a paper unit as yet, but definitely listed in the Army Reserve Corps — to carry on, if need be, the traditions of the past.

Paul D. White, M.D.

BASE HOSPITAL No. 55

THE formation of Base Hospital No. 55 was started in 1917. It was an army base hospital, and therefore more restricted in its personnel than if it had been a Red Cross organization.

Acting as assistant to the Surgeon General, Dr. F. G. Balch, who was appointed its Chief Surgeon and later its Commanding Officer, nominated the majority of the surgical and medical personnel. Most of the surgeons were Massachusetts General Hospital graduates. Drs. Wayland A. Morrison, James R. Torbert, Kenneth L. Dole, George F. Dwinell, Kemp P. Neal, Arthur M. Jackson, Thomas H. Lanman, Albert J. Scholl, Jr., Horace K. Sowles and Neil A. Fogg were former Massachusetts General Hospital surgical house officers.

The chief nurse was also a Massachusetts General Hospital graduate, and a majority of the nurses of the unit were either graduates of this Hospital, or from training schools having Massachusetts General Hospital nurses as superintendents.

The organization left for overseas August 30, 1918, arriving at Brest September 12. After a week at Pontenzen Barracks it moved on to Mesves sur Loire, where about a quarter of its nurses, who had been distributed to other hospitals, joined it. It was long before it got its full complement of nurses; they had been scattered wherever there seemed to be greatest need for their services.

Its stay in Mesves was only forty-eight hours, when it was ordered on to Toul. It arrived there September 28, and established itself in a French barracks. Unsuitable as the buildings were, it soon became a real hospital, which functioned satisfactorily until March 25, 1919, when the last patients were evacuated.

Franklin G. Balch, M.D.

BASE HOSPITAL No. 5

Base Hospital No. 5, organized as a Red Cross Unit by Dr. Harvey Cushing in February, 1916, officially represented the Harvard Medical School and its affiliated hospitals. At the time of its mobilization 13 of the 25 members of its medical staff were members of the staff or graduates of the Massachusetts General Hospital. On April 29, 1917, the organization was ordered ready for immediate service overseas and sailed from New York on May 11. The hospital was assigned to service with the British Army, taking charge of an 1,800 bed hospital at Dannes Camiers on June 1, 1917. After a service of five months at this place, the organization was transferred to Boulogne, where it functioned for the remainder of the war. It suffered the first casualties of the American Army at the hands of Germany. During its service of nearly two years 45,837 patients passed through the hospital. The unit returned to the United States April 19, 1919.

Arlie V. Bock, M.D.

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RECEPTION HELD AT THE HOSPITAL JUNE 9, 1919, TO THOSE WHO SERVED IN THE WAR

Address of Dr. Henry P. Walcott

Two most memorable years have passed since the Massachusetts General Hospital Unit went forth after the solemn exercises in Trinity Church, to enter upon medical service in France. It may have been a disappointment to some of the members that the unit was destined to remain in the vicinity of Bordeaux. In the end, however, the hospital established there won golden opinions from all in authority.

Let me read the following note from Dr. Winter. The competence of his opinion cannot be questioned.

I am in receipt of an invitation from the Trustees of the Massachusetts General Hospital, inviting me to be present on the afternoon of Monday, June 9, to meet the members of Base Hospital No. 6 and other persons who have served in the army after service in your hospital.

I beg to thank the Trustees for the invitation, and I can't forego a word of regret that I shall be unable to be present at any function which in any way comprehends a tribute to the personnel of Base Hospital No. 6.

The actuation which I have in this matter, is, of course, abundantly known to you; but I shall be very grateful to you if you will express for me to the members of the unit my very substantial and abiding appreciation of the splendid work they all did in the trying days of the situation of Bordeaux. It is my judgment that the accomplishment there was a great one, and certainly no institution in the Lines of Communication in France carried forth its work to a more effective and entirely satisfactory result than Base Hospital Unit No. 6 accomplished at the Talence Hospital.

I shall appreciate it very much if you will convey to all the personnel of the unit my very deep sense of gratitude for the fine work they did for the Medical Department, and I also hope that it may be my good fortune to encounter such splendid people should another emergency put us in the position we were in in 1917.

With best wishes for yourself, please believe me

Very sincerely yours, (Sd) F. A. Winter,

Colonel, Medical Corps, U.S.A., Formerly Chief Surgeon, Lines of Communication.

Dr. Washburn's great abilities soon won for him promotion to fields of larger activities, and for the latter part of the unit's stay abroad he was in charge of the American hospitals in England.

This unit does not by any means represent the whole of the contribution of this ancient Hospital to the fearful struggle from which we at last, let us hope, have emerged. Even before the United States formally entered upon the war many of our graduates and present staff had joined the various organizations which were undertaking the merciful work of the physician's calling in the fever-haunted regions of unfortunate Serbia, on the battle fronts of France and Italy, and on the stormy and fateful waters of the north ocean, and everywhere with credit.

This Hospital enjoys an inheritance not usual among its fellows. It was dedicated under the leading of two wise men more than a century ago to purposes far wider than those of a mere asylum for the disabled sick. It has never forgotten the pledges given to its generous benefactors, and I am fain to believe that its successes of these recent days are due to the wider conceptions of the scope and obligations of medicine than those which usually prevail.

I believe that our representatives have succeeded in their most trying services because they have been largely trained in a school with a more generous outlook, and have not been content with a merely routine performance of certain prescribed activities.

Your return differs widely from that of those whom we have so gladly been receiving back into civil life in these recent days. They hope to have seen the last of war and to forget many of its incidents. You are to devote yourselves with undiminished zeal to the attempt to conquer disease.

The governments of the world may indeed close the doors of their temple of Janus with better prospect of success, let us hope, than the Romans had, for they were only able to do so three times in seven hundred years. But for you the doors must be forever open. Peace has for us no respite from a war that never ends, and horrible as are the cruelties of the battlefields, they may be

matched by some of the experiences which our hospitals offer. For a full-grown man in all the vigor of his manhood to be deprived of sight by some catastrophe of the battlefield is indeed a tragedy. What shall we say of the infant, otherwise sound in body, deprived of sight by the ignorance and neglect of those who should have protected it, and left it to linger on in its dark prison house through the heavy years?

Let us realize that preventable disease has destroyed more lives than all the accursed inventions employed for that purpose on the battle-front.

You, who are so familiar with the results of the physical examination of the men of this country for the purpose of procuring soldiers and sailors fit for service, know too well how great are the defects of physical condition of those subject to examination, many of which can, and ought to be, remedied.

"Peace hath its victories no less renowned than war," and to these we welcome you back.

Dr. Washburn, your foresight, knowledge, and energy brought our unit to a high state of efficiency before any similar organization; you have had an unusually varied experience and can speak with authority. You do not need an introduction here.

Address of Colonel Frederic A. Washburn, Commander, Base Hospital No. 6

The great war is ended. It is true that the Treaty of Peace is not yet signed, but Germany is in a position where she cannot renew hostilities. It is time to review the field and see what part the Massachusetts General Hospital has taken. We find it, I venture to say, worthy of her glorious traditions. Our records show that its alumni and staff have furnished 238 commissioned officers. Two hundred and twenty-eight women nurses, and 80 male nurses and employees, have served in the armies of the United States or the allied nations, a total of 546. Of the officers there were two brigadier generals and six colonels, and a considerable number attained the rank of lieutenant colonel. We

supplied three Chiefs of Professional Services in the American Expeditionary Forces and one such Chief in the United States. From our alumni were selected two Chief Surgeons of Base Sections of the American Expeditionary Forces, three Commanding Officers of Base Hospitals, one Commanding Officer of a British General Hospital, and many Commanders of Camp and Evacuation hospitals. Wherever one went in France or England one found our graduates rendering valuable and much appreciated professional services. We were well represented in that band of one thousand doctors with American commissions who were loaned to the British. The Orthopedic group working in large British hospitals in London, Edinburgh, Oxford, Liverpool, and elsewhere in England, was composed largely of our men. They made a very definite reputation for themselves in England and reflected much credit upon our Hospital. Base Hospital No. 5, which served with the British with such effectiveness, was officered very largely by our men. British General Hospital No. 22 was commanded and largely officered by us. United States Army Base Hospital No. 55 had Massachusetts General Hospital men for most of its officers and one of our visiting surgeons as its Director. Base Hospital No. 204 was commanded by one of our Out-Patient Surgeons. Base Hospital No. 6, our distinctively Massachusetts General Hospital Unit, had its original staff almost entirely composed of our alumni and staff. No one ever directed a more efficient, high-minded, loyal group than was this unit which I had the high privilege to command.

Our nurses acquired an enviable reputation for hard, efficient work and set an example of true womanly conduct of which we may well be proud.

The part taken by our employees was necessarily a less conspicuous one. Some of them obtained commissions and many reached noncommissioned rank as a reward for excellent service.

We have lost by death five doctors, seven nurses, and one member of the Ladies' Visiting Committee. One surgeon was killed in action, one died of wounds received in action, the others died of disease.

It is the concensus of opinion of the leading medical officers of the army that the Base Hospitals organized at our civil hospitals and ready for this war saved the situation for the American Expeditionary Forces. The Medical Department would have been lost without them. This is readily admitted by all in a position to know. It is a source of satisfaction to us that our hospital was one of the first to appreciate the situation, and began its preparation more than a year before the United States entered the war.

What a splendid illustration all this is of the value of our Hospital to the community. How it shows the wisdom of its founders in making it an institution for the training of our youth as well as for the care of the sick.

What greater asset can New England have than this glorious old institution, which not only cares for the sick and trains doctors and nurses for its needs in normal times, but can make such a showing in time of war or national calamity. Let the faint-hearted doubt and fear because of the expense to take the necessary steps to meet the demands of the times and have the Massachusetts General Hospital lead, as she always has done. Those of us who are her true children are confident that when the Trustees really make New England understand the Hospital's needs, it will receive a support worthy of the place it holds in the affection and esteem of our people.

It is a peculiar pleasure to me, Dr. Walcott, that you represent the Hospital on this occasion. I have served under you as Chairman of the Board of Trustees for sixteen years. I have seen the Hospital grow under your leadership, and I have been in a position to know that you have always stood for progress and development, for the training of our young men and women, teaching and investigation as well as for the care of the sick.

These flags stood for twenty months in the Administration Building of Base Hospital No. 6 in Talence, Bordeaux. They saw our hospital there grow from modest beginnings to where it cared for forty-three hundred patients at one time. They stood for the Massachusetts General Hospital in France during the Great War. I hand them to you, sir, with the request that the Trustees

place them in the Treadwell Library of this Hospital and preserve them with the care which we believe their history warrants.

The flags were then presented by the colorbearers to Dr. Walcott, who received them with these words:

"In the name of the Massachusetts General Hospital I receive these flags, and assure you that they shall be carefully preserved here."

In explanation of the efficiency to which American Base Hospital No. 6 attained, Lieut. Col. Richard C. Cabot said: "We were on the ground long before American casualties began. We had months in which to equip it with every device of a modern hospital. There was absolutely nothing lacking in our equipment. It was not necessary to wait hours for the attendance of a specialist at a consultation, as is the case sometimes at hospitals on this side. A consultation over a serious case could be called in five minutes.

"Every sitting at the officers' mess was a potential consultation on the most severe cases in the hospital."

Address of Lieutenant Colonel Franklin G. Balch, Commander Army Base Hospital No. 55

Perhaps it is fitting that I should explain why we, an Army Base Hospital, feel that we should like to place the nurses' flag of Base Hospital No. 55 in the Treadwell Library.

We were not, as was Base Hospital No. 6, a Red Cross Unit, and in consequence had no flag presented to us. Our nurses subscribed for and bought the flag which they carried.

At the time the hospital was organized, Colonel Moncrief gave me permission to pick the personnel, both officers and nurses. Naturally I turned to the Massachusetts General Hospital, and our whole surgical staff were graduated from there. The men in the Medical and Special divisions were chosen, with very few exceptions, in consultation with the heads of the special departments in Washington.

Miss Jessie E. Grant, a Massachusetts General Hospital graduate, was our Chief Nurse. With the exception of fifteen who were sent to us by the A.N.C., she passed upon the fitness of all our nurses. Ten came from the Faulkner Hospital, which is affiliated with the Massachusetts General Hospital, and had been trained under Miss Cox, herself a Massachusetts General Hospital graduate. Two came from the Anna Jacques Hospital, where they had been trained under the Chief Nurse. Ten came from the Newton Hospital, the high standard of whose training needs no word of praise from me. One from the Boston Homeopathic Hospital I wanted because of her excellent work at the time of the Halifax disaster. There were four from the Baptist, trained under Miss Anderson, another Massachusetts General Hospital graduate; one from the Children's; three from the City Hospital. One came from the Deaconess. One from the Peter Bent Brigham, and twenty-nine, far the largest proportion from any one hospital, from our own training school. When you consider that the Massachusetts General Hospital had already supplied the nurses for Base Hospital No. 6, some for Base Hospital No. 5, many for the British General Hospital No. 22, besides many to other organizations for both home and foreign service, you can appreciate how wonderfully the nurses of this institution have responded to the call. Base Hospital No. 55 was often spoken of as a Massachusetts General Hospital Unit, and much of what we were able to accomplish was due to what we had acquired within these walls. What more fitting resting place could we find for our flag than this spot? I believe none, and it gives me great pleasure to transfer to the care of the Massachusetts General Hospital the flag of the nurses of Army Base Hospital No. 55.

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GREENWOOD, ARTHUR MOSES, Lieutenant Colonel	M.C., U.S.A.
GREGG, ALAN, Captain, B.G.H. 22	R.A.M.C. (British)
GULLIFER, WILLIAM H., First Lieutenant B.H. 6	D.C., U.S.A.
HALL, CUSTIS LEE, Major	M.C., U.S.A.
HALL, FRANCIS COOLEY, First Lieutenant	M.C., U.S.A.
HAMMOND, JOHN WILKES, Jr., Lieutenant	M.C., U.S.N.R.F.
HARKISS, WILLIAM J., Captain	M.C., U.S.A.
HARMER, TORR, W., Major	M.C., U.S.A.
HARTWELL, HARRY FAIRBANKS, Captain, B.G.H. 22	R.A.M.C. (British)
HARTWELL, JOHN BRYANT, Captain	M.C., U.S.A.
HATCH, RALPH A., Captain, B.H. 6	M.C., U.S.A.
HATT, RAFE NELSON, First Lieutenant	M.C., U.S.A.
HILL, GEORGE HILLARD, Captain	M.C., U.S.A.
HODGSON, JOHN SPRAGUE, First Lieutenant	M.C., U.S.A.

HOLBROOK, CHARLES ALBERT, Captain — M.C., U.S.A.
HOLLINGS, C. BYAM, Major — M.C., U.S.A.
HOMANS, JOHN, Major — M.C., U.S.A.
HORRAX, GILBERT, Major, B.H. 5 — M.C., U.S.A.
HOYT, CHARLES WENTWORTH, Major — M.C., U.S.A.
HUBBARD, JOSHUA CLAP, Lieutenant Colonel — M.C., U.S.A.
IRVING, FREDERICK CARPENTER, Major, B.H. 6 — M.C., U.S.A.
JACKSON, ARTHUR MORISON, First Lieutenant, B.H. 55 — M.C., U.S.A.
JACKSON, SUMNER WALDRON, Captain — M.C., U.S.A.
JANES, BENJAMIN FRANKLIN, Captain — M.C., U.S.A.
JENNINGS, ALPHEUS FELCH, Major — M.C., U.S.A.
JOHNSON, HAROLD ABBOTT, Captain — M.C., U.S.A.
JONES, BASIL BRADBURY, First Lieutenant — M.C., U.S.A.
JONES, DANIEL F., Lieutenant Colonel — M.C., U.S.A.
JOSLIN, ELLIOT PROCTOR, Lieutenant Colonel — M.C., U.S.A.
JOUETT, FREDERIC ROBERT, Major — M.C., U.S.A.
KELLER, ERNEST VICTOR, Lieutenant Colonel — M.C., U.S.A.
(Died in Military Service)
KERR, WILLIAM JOHN, Major — M.C., U.S.A.
KIDNER, FREDERICK CLINTON, Major — M.C., U.S.A.
KILGORE, ALSON RAPHAEL, Lieutenant — M.C., U.S.N.R.F.
KILGORE, EUGENE STERLING, Lieutenant Colonel — M.C., U.S.A.
KINGMAN, LUCIUS COLLINWOOD, Lieutenant (S.G.) — M.C., U.S.N.R.F.
KINNICUTT, ROGER, Major, B.H. 6 — M.C., U.S.A.
KNOWLES, WILLIAM F., Major — M.C., U.S.A.
KRAMER, JAMES G., First Lieutenant — M.C., U.S.A.
LACEY, WALTER HAMER, Captain, B.H. 55 — M.C., U.S.A.
LANGNECKER, HARRY LESLEY, First Lieutenant — M.C., U.S.N.R.F.
LANMAN, THOMAS HINCKLEY, First Lieutenant, B.H. 55 — M.C., U.S.A.
LAWRENCE, CHARLES H., Jr., First Lieutenant — M.C., U.S.A.
LEE, ROGER I., Lieutenant Colonel, B.H. 5 — M.C., U.S.A.
LEE, WILLIAM GEORGE, Major — M.C., U.S.A.
LELAND, GEORGE A., Jr., Captain, B.H. 6 — M.C., U.S.A.
LEVEK, JOSEPH ARTHUR, Lieutenant — M.C., U.S.A.
LINCOLN, MERRICK, Major — M.C., U.S.A.
LORING, ROBERT G., Captain — M.C., U.S.A.
LOUGEE, JOHN L., Captain — M.C., U.S.A.
LUND, FRED BATES, Lieutenant Colonel — M.C., U.S.A.
LUNT, LAWRENCE KIRBY, Major — M.C., U.S.A.
LYON, ARTHUR BATES, Captain, B.H. 55 — M.C., U.S.A.

MABON, THOMAS MCCANCE, First Lieutenant	M.C., U.S.A.
MACAUSLAND, ANDREW ROY, Captain	M.C., U.S.A.
MACOMBER, DONALD, Captain	M.C., U.S.A.
MANTON, WALTER WILLIAMSON, Major	M.C., U.S.A.
MARBLE, HENRY C., Major, B.H. 6	M.C., U.S.A.
MARVIN, FRANK W., First Lieutenant	M.C., U.S.A.
MAY, WILLIAM ROPES, Major	M.C., U.S.A.
MCIVER, G. A., Major	M.C., U.S.A.
MEANS, JAMES H., Major, B.H. 6	M.C., U.S.A.
MERRILL, ADELBERT S., Major, B.H. 6	M.C., U.S.A.
METCALF, CARLETON RAY, Lieutenant Colonel	M.C., U.S.A.
MILLER, RICHARD H., Major	M.C., U.S.A.
MIXTER, CHARLES GALLOUPE, Major	M.C., U.S.A.
MIXTER, SAMUEL, Major	M.C., U.S.A.
MIXTER, W. JASON, Lieutenant Colonel, B.H. 6	M.C., U.S.A.
MOORE, GEORGE ALBERT, Captain	M.C., U.S.A.
MORRILL, GORDON NILES, Captain	M.C., U.S.A.
MORRISON, WAYLAND AUGUSTUS, Major, B.H. 55	M.C., U.S.A.
MORTON, JOHN J., Jr., Captain, B.H. 5	M.C., U.S.A.
MOSHER, HARRIS P., Lieutenant Colonel	M.C., U.S.A.
MURPHY, FRED TOWSLEY, Colonel	M.C., U.S.A.
NEAL, KEMP PRATHER, First Lieutenant	M.C., U.S.A.
O'FERRALL, JOHN TOLSON, Captain	M.C., U.S.A.
O'KEEFE, EDWARD S., First Lieutenant	M.C., U.S.A.
OLIVER, E. LAWRENCE, Major, B.H. 6	M.C., U.S.A.
O'NEIL, RICHARD F., Major, B.H. 6	M.C., U.S.A.
OSGOOD, HOWARD, Captain	M.C., U.S.A.
OSGOOD, ROBERT B., Lieutenant Colonel, B.H. 5	M.C., U.S.A.
OTIS, WALTER JOSEPH, Major	M.C., U.S.A.
PACKARD, GEORGE BYRON, Jr., Captain	M.C., U.S.A.
PAINTER, CHARLES F., Lieutenant (S.G.)	M.C., U.S.N.R.F.
PALFREY, FRANCIS WINSLOW, Major	M.C., U.S.A.
PARK, JAMES HOWARD, First Lieutenant	M.C., U.S.A.
PARKER, WILLARD STEPHEN, Major	M.C., U.S.A.
PARMENTER, DERRIC CHOATE, First Lieutenant	R.A.M.C. (British)
PEABODY, CHARLES WILLIAM, First Lieutenant	M.C., U.S.A.
PEABODY, FRANCIS WELD, Major	M.C., U.S.A.
PORTER, CHARLES A., Lieutenant Colonel, B.G.H. 22	R.A.M.C. (British)
PORTER, CHARLES T., Captain	M.C., U.S.A.
POTTER, ALEXANDER CARLETON, Captain	M.C., U.S.A.
PRATT, J. H., Major	M.C., U.S.A.
QUACKENBOSS, ALEXANDER, Major, B.G.H. 22	M.C., U.S.A.

Rackemann, Francis M., First Lieutenant	M.C., U.S.A.
Reid, William D., Captain	M.C., U.S.A.
Richardson, Edward P., Major	M.C., U.S.A.
Riley, Augustus, First Lieutenant	M.C., U.S.A.
Robertson, Oswald Hope, Major, B.H. 5	M.C., U.S.A.
Robinson, Samuel, Major	M.C., U.S.A.
Rockey, Eugene Watson, Captain	M.C., U.S.A.
Rogers, Mark H., Major	M.C., U.S.A.
Rogers, Orville Forrest, Jr., Major	M.C., U.S.A.
Rosser, Curtice, Lieutenant	M.C., U.S.N.R.F.
Sadler, Roy Angelo, First Lieutenant	M.C., U.S.A.
Sanford, Henry Lindsay, Captain	M.C., U.S.A.
Sawyer, Wilbur Augustus, Major	M.C., U.S.A.
Schnack, Adolph George, First Lieutenant	M.C., U.S.A.
Scholl, Albert John, Jr., Captain, B.H. 55	M.C., U.S.A.
Schwartz, Abraham Bernard, Captain	M.C., U.S.A.
Sellards, A. W., Major	M.C., U.S.A.
Seymour, Malcolm, Captain	M.C., U.S.A.
Shattuck, George C., Major, B.G.H. 22	R.A.M.C. (British)
Shaw, Henry Alden, Colonel	M.C., U.S.A.
Sheahan, George Maurice, Captain	M.C., U.S.A.
Sheldon, Russell Firth, First Lieutenant	M.C., U.S.A.
Silverman, Abraham Clement, First Lieutenant	M.C., U.S.A.
Simmons, Channing C., Major, B.G.H. 22	R.A.M.C. (British)
Sisson, Warren R., First Lieutenant	M.C., U.S.A.
Smith, George G., Captain	M.C., U.S.A.
Smith, Harold Wellington, Lieutenant Commander	M.C., U.S.N.R.F.
Sowles, Horace Kennedy, Captain, B.H. 55	M.C., U.S.A.
Spear, Lewis Mahon, Captain	M.C., U.S.A.
Spooner, Lesley H., Major	M.C., U.S.A.
Stern, Newton Samuel, First Lieutenant	M.C., U.S.A.
Stevens, Harold Wentworth, Major	M.C., U.S.A.
Stevens, Horace Paine, Lieutenant	M.C., U.S.N.R.F.
Stoddard, James L., Major, B.H. 5	M.C., U.S.A.
Stone, James Savage, Major	M.C., U.S.A.
Strauss, Arthur Edgar, Captain	M.C., U.S.A.
Strong, Richard P., Colonel, B.H. 5	M.C., U.S.A.
Sweet, Clifford D., First Lieutenant	M.C., U.S.A.
Taylor, John Houghton, First Lieutenant	M.C., U.S.A.
Thaxter, Langdon Thom, Captain	M.C., U.S.A.
Thayer, William Sydney, Brigadier General	M.C., U.S.A.
Tobey, George L., Jr., Captain, B.H. 6	M.C., U.S.A.
Tobey, Harold G., Captain	M.C., U.S.A.

TORBERT, JAMES ROCKWELL, Major — M.C., U.S.A.
VAN NUYS, FRESENIUS, Lieutenant (S.G.) — M.C., U.S.N.R.F.
VAN STONE, LEONARD MATHEWS, Captain, B.G.H. 22 — R.A.M.C. (British)
VICKERY, EUGENE AUGUSTUS, Lieutenant Commander — M.C., U.S.N.R.F.
VINCENT, BETH, Major, B.H. 6 — M.C., U.S.A.
VOSE, ROBERT H., Major — M.C., U.S.A.
WALCOTT, WILLIAM WRIGHT, Captain — M.C., U.S.A.
(Died in Military Service)
WALKER, MELVIN HARVEY, Jr., Captain — M.C., U.S.A.
WASHBURN, FREDERIC A., Colonel, B.H. 6 — M.C., U.S.A.
WEBSTER, HARRISON BRIGGS, Major — M.C., U.S.A.
(Killed in Action)
WETHERELL, BRYANT DAVIS, First Lieutenant — M.C., U.S.A.
WHITE, PAUL DUDLEY, Captain, B.H. 6 — M.C., U.S.A.
WHITESIDE, GEORGE SHATTUCK, Lieutenant (J.G.) — M.C., U.S.N.R.F.
WHITNEY, JAMES LYMAN, Major — M.C., U.S.A.
WIGGIN, WILLIAM I., Captain — M.C., U.S.A.
WILSON, PHILIP DUNCAN, Major — M.C., U.S.A.
WOOD, JAMES AUGUSTUS, Captain — M.C., U.S.A.
WRIGHT, J. H., Captain — M.C., U.S.A.
WRIGHT, WADE, Captain, B.H. 6 — M.C., U.S.A.
YOUNG, ERNEST BOYEN, Captain — M.C., U.S.A.

The following names are recorded of officers of U.S.A. Base Hospital No. 6, in addition to the above alumni:

BASNETT, DOUGLAS, First Lieutenant — S.C., U.S.A.
BOGAN, EDWARD H., Captain — Q.M.C., U.S.A.
CHICK, GEORGE R., First Lieutenant — S.C., U.S.A.
CLOUDMAN, FRANCIS H., First Lieutenant — S.C., U.S.A.
CONNORS, HARRY, First Lieutenant — S.C., U.S.A.
EVERBERG, GUSTAVE W., Second Lieutenant — Q.M.C., U.S.A.
HEARD, RALPH P., First Lieutenant — S.C., U.S.A.
HOLMES, ROBERT W., Major — M.C., U.S.A.
MCAFEE, LARRY B., Colonel — M.C., U.S.A.
MOSS, WILLIAM L., Lieutenant Colonel — M.C., U.S.A.
ROUNDY, EDWARD C., First Lieutenant — S.C., U.S.A.
SHERRILL, HENRY K., First Lieutenant — C.C., U.S.A.
SHERBURNE, WILLIAM H., First Lieutenant — D.C., U.S.A.
WALKER, REVELLO M., First Lieutenant — S.C., U.S.A.

DEDICATION OF A MEMORIAL TABLET IN THE TREADWELL LIBRARY, OCTOBER 18, 1921, IN MEMORY OF THE ALUMNI OF THE MASSACHUSETTS GENERAL HOSPITAL WHO DIED IN THE WAR.

WORLD WAR HONOR ROLL

*Major Howard Walter Beal	M.C., U.S.A.
*Lieut. William Henry Buffum	M.C., U.S.A.
*Capt. William Wright Walcott	M.C., U.S.A.
*Major Harrison Briggs Webster	M.C., U.S.A.
*Major Ernest Victor Keller	M.C., U.S.A.
*Lieut. Walter James Dodd	R.A.M.C.

THESE BRAVE AND DEVOTED MEN,

MEMBERS OF THE ALUMNI ASSOCIATION OF THIS HOSPITAL

DIED IN THEIR YOUTH, OR PRIME, FOR THE HONOR

OF THEIR PROFESSION AND THEIR COUNTRY

AND FOR THE UNIVERSAL CAUSE OF

LIBERTY, JUSTICE, AND GOOD

WILL AMONG MEN

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that serving with the United States or with the Allies during the war there were of our Alumni 223, with 5 deaths.

Staff, not Alumni, 38, with 1 death.

Nurses, female, 214, with 7 deaths.

Nurses, male, 16.

Employees, 19.

Total, 510.

To these are added those of the McLean Hospital, a part of the Massachusetts General Hospital Staff No. 5.

Nurses, female, 26, plus 23 included in the Massachusetts General list.

Nurses, male, 24.

Employees, 20. — Total, 75. Complete total, 585.

The tablet in honor of the nurses who gave their lives is already on the wall of this room.

Is it to be wondered at that we who have served and loved the old Hospital nearly all our lives are proud of her. May she never lack able, patriotic men with knowledge, quick brains and skillful hands to carry on her good work, and friends who are able and willing to supply the means that will enable her to live and grow.

These are the men who have honored us and to whom we pay our tribute of respect today:

Howard Walter Beal.
William Henry Buffum.
William Wright Walcott.
Harold Briggs Webster.
Ernest Victor Keller.
Walter James Dodd.

Howard Walter Beal

Born November 26, 1869, at Bangor, Maine.

Harvard Medical School, M.D., 1898.

Massachusetts General Hospital House Officer, South Surgical, 1899.

Practised surgery in Worcester, and was on staff of Memorial Hospital, Worcester.

Married Henrietta Hobbs.

Military record: After leaving M. G. H., surgeon in the U. S. Army for nearly four years, first in transport service between New York, Porto Rico and Cuba, then in field and hospital in Philippines. Resigned June, 1903. Sailed with first Red Cross ship from this country in 1914. Chief Surgeon American Women's War Hospital, Paignton, England. Early in 1915 returned to United States owing to ill health. Went overseas again when the United States went into war, as Major, M.C. Later consulting surgeon to first Division. While on duty near Montdidier received wounds on July 18, 1918, of which he died July 20, 1918.

We all remember this splendid, big fine man with a military carriage and a love for army life, a man who was ready and trained for military duty by his service in the Philippines, before the real summons came, who, not content to wait for an official call, went to England with the first Red Cross ship and did splendid work there until illness forced his return to this country. From the time of his return until our entrance into the war, he lost no opportunity to impress upon the sluggish minds of his fellow countrymen the need of preparedness for the inevitable conflict. He was mortally wounded by a bomb from an airplane on July 18, 1918. I have seen a letter from one of his fellow alumni, speaking of his mortal injuries and the little that could be done for him, and later we were told of his courage in the face of certain death. An abstract of the letter reads as follows: "I operated the other night on Howard Beal, a very bad chest wound from a bomb, that I did under local anæsthesia, but it was too much for him and he passed out in almost twenty-four hours." An honor to his adopted city, where he did so much good work, to the army and to us all. Of his work in Worcester, his friend and colleague, Dr. Homer Gage, writes:

"His professional skill, his industry, and his good judgment made him an exceedingly valuable man to the community and to the institutions which he faithfully served, but to all who had the privilege of enjoying his friendship it was the character and personality of the man that can never be forgotten. His modesty and gen-

tleness, his kindliness, and eager willingness to do for others, made him always a delightful companion. His fine presence, charming manners, and a thoughtfulness that never lapsed, insured him a welcome in every circle. To these charms he added a keen interest in his profession, a great capacity for work, and a patience with details that peculiarly fitted him for the work in which he was most interested. As a colleague on the Hospital staff, as a wise consultant, and as a faithful servant to his patients, he will be sadly missed; as a sincere and faithful friend and charming companion, he leaves a place that can never be filled in the memory of those who knew him best."

William Henry Buffum

Born June 25, 1877, at Providence, R. I.

Graduate Brown University, 1898.

Harvard Medical School, 1902.

Massachusetts General Hospital, East Medical House Officer, 1902-1903.

Medical externe at Rhode Island Hospital, Out-Patient Department, 1903.

Visiting physician, Out-Patient Department, Rhode Island Hospital for Diseases of Children, 1906.

Physician to Clinical Department for children affected by diseases of the digestive organs, Rhode Island Hospital, from 1912, to death.

Visiting staff of Providence Lying-in Hospital at time of death.

Married Edith Campbell, November 1, 1904. She survived him with one son.

Military Record: Commissioned Lieutenant Senior Grade, M.C., U.S.N. Served with Navy Base Hospital No. 5. Died at Liverpool, England, October 13, 1918, of influenza-pneumonia.

A colleague writes: "William Henry Buffum may best be characterized as essentially dependable, well-born, well-educated, a gentleman. He was honest in his work, as a gentleman would be in all things. He had a scientific type of mind which demanded satisfactory proof, and

his conclusions, given only after he was convinced, were soon found to be accurate and reliable. Buffum was never spectacular, he was always trustworthy, and from the beginning of his connection with this Hospital, to the day of his death, he remained to his friends the same steady, likable and dependable fellow."

William Wright Walcott

Born June 1, 1879, Natick, Mass.
Newton High School.
M. I. T., S. B., 1901.
Harvard Medical School, 1905.
Massachusetts General Hospital, South Surgical, 1905-1906.
Practised in Natick, District Health Officer, Department of Health.
Not married.

Military Record: Medical officer of the First Corps of Cadets, M.V.M. Went overseas as First Lieutenant, M.C., with the 101st Engineers. Made Captain, M.C., summer of 1918. He was in battles of Château-Thierry, Chemin des Dames, St. Mihiel and Verdun. Wounded by shell and gassed, but recovered. Died in France of military tuberculosis, March 16, 1919.

At about the time of finishing his service as House Officer at the Hospital, Walcott was attacked by tuberculosis, and though he recovered and did splendid work the rest of his life, he was somewhat handicapped physically. His service to the community in which he lived was wonderfully fine, both as physician and health officer. After good work in the Army, having been gassed and wounded by shell, he apparently recovered, only to die of acute tuberculosis in Paris, a victim to his devotion to duty and country.

Harold Briggs Webster

Born January 26, 1884.
Prepared for college at Noble and Greenoughs School.
Harvard College, A.B., 1905. Cum laude, Phi Beta Kappa.
Harvard Medical School, 1909. Alpha Omega Alpha.

Massachusetts General Hospital. East Surgical House Officer, July 15, 1909-November 30, 1910.

Spent nearly three years with Dr. Grenfell in Newfoundland and Labrador.

In 1912, settled in Castine, Maine.

May 1, 1913, married Margaret Isabel Gleason, of Northampton, by whom he had three children, a boy and two girls.

Military Record: In Battery A, while in the Medical School, and later went to Plattsburg.

Commissioned First Lieutenant M.C., June, 1917.

Active service Fort Benjamin Harrison, July, 1917.

Command of Ambulance Company No. 14.

November, 1917, Camp Greenleaf, Georgia, made Adjutant, Ambulance Battalion.

Sailed overseas May 26, 1918.

Director of Ambulance with 4th Division.

Regimental Surgeon to 47th Regiment, August, 1918.

Promoted Captain July, 1917.

Promoted Major March 14, 1918.

Killed in action, October 13, 1918, at Bois de Septsarges (near Cuisy sur Meuse).

An able man, strong in mind and body, he was one that made it his life's work to help "the other fellow," as was early shown by the work he did in Newfoundland and Labrador. A lover of country life and thoroughly appreciating the need of trained medical men in the smaller towns, he settled down in that most beautiful place, Castine, where he established a much needed hospital, again "for the other fellow," and lived a useful and happy life with his wife and little family till the call came. His promotion was a matter of course with his ability, all-round experience, and previous military training. He died, as he lived, helping "the other fellow," for he was killed by a shell while trying to push an ambulance out of the mud.

Ernest Victor Keller

Born, Missouri, 1884.

M.D. Atlanta, Georgia, School of Medicine, 1911.

Massachusetts General Hospital, House Officer Orthopedic Service, 1914.

Military Record: Commissioned in British Army, Lieutenant R.A.M.C., and was on duty on the Orthopedic Staff in Edinburgh War Hospital, Bangour, West Lothian, Scotland.

Commissioned Captain M.C., U.S.A., April 27, 1918. Loaned to the British Army and continued service at the same hospital.

Returned to the United States, March 30, 1919.

On duty U. S. General Hospital No. 6, Fort McPherson, Georgia.

Later at Base Hospital, Camp Gordon, Georgia, then again at No. 6, Fort McPherson.

Promoted Major M.C., October 14, 1918.

Died June 3, 1919, at Fort McPherson.

Dr. R. B. Osgood, who knew Dr. Keller better than most of us, writes the following: Dr. Victor Keller was as much called to medicine as any apostle of the Faith. Born in the middle West, without financial resources back of him, he became early in his education determined to study medicine. He surmounted great difficulties, and became an expert telegraph operator. Later in life than most men think of entering the profession, he accumulated sufficient funds to put him through the medical school, and started on a career in Atlanta. He soon became attracted to orthopedic surgery, stimulated by Dr. Michael Hoke, by whom he was advised to come North and enter the Massachusetts General Hospital, which he did in 1914. As orthopedic House Officer he was acquisitive to a marked degree. He was meticulous in his care of the patients, to whom he endeared himself in a peculiar manner. His devotion to his work was untiring.

Many months before America entered the war, Keller was so stirred by the world cataclysm that, at a very large professional sacrifice, he responded to the call of Sir Robert Jones for American orthopedic surgeons to serve the British soldiers. Just started in the practice

of orthopedic surgery in Atlanta, he packed his trunk and set off at his own expense, landing as a civilian on the Liverpool docks in 1917. Through the agency of Sir Robert Jones he received a commission in the British Army, and reported at the Edinburgh War Hospital. The hospital was large — three thousand beds. A man of Keller's attainments was just what the wounded men were crying for, and forthwith he was put in charge of a large service.

I quote from a personal tribute of a British surgeon closely associated with Keller in his work at the Bangour Hospital:

"It was not long before his qualities as a man and a surgeon endeared him to all his colleagues and associates. The British Tommy whose good fortune landed him in Keller's wards always expressed his wholehearted confidence in the 'American Doctor.' To hear the Jocks sing his praises was something well worth hearing, and was Keller's reward for his unselfish devotion to duty. Keller's was an outstanding personality, and he was beloved by many of his friends in Scotland. I know more than one who shed a tear when the news of Vic Keller's death reached Auld Keekie."

Keller was later transferred to the American Expeditionary Forces, and received well-merited promotion to the rank of Lieutenant Colonel.

Walter James Dodd

Born in London, April 22, 1869.

Came to America when ten years old, attended the public school for a few years; then went to work to earn his own living. Attended Harvard Medical School for one year, 1900. Later he went to the Medical School of the University of Vermont, where he received his degree in 1908.

In 1909 he was appointed Instructor in Roentgenology at the Harvard Medical School, which appointment he retained to the time of his death in December, 1916.

Massachusetts General Hospital Record: Appointed Assistant Apothecary in 1892; appointed Apothecary in 1896; appointed Roentgenologist in 1908.

Married Margaret Lea, 1910.

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ACCEPTANCE OF MEMORIAL TABLET

MR. WIGGLESWORTH: In accepting this Memorial Tablet, the Hospital feels that it is receiving a gift whose influence will be felt through the coming time. It has been said that a surgeon should be actuated by pity as a motive, not as an emotion. Herein lies a truth which is at the foundation of all that is noblest in the medical profession. Back of all the skill and knowledge of surgeon, physician, or nurse must be the ideal of service and self-sacrifice. The nobility of the profession is in its consecration to the relief of suffering humanity. If this ideal did not exist in the community, hospitals would never be established, and if this same feeling were not the basis of the work done within the hospital, the workers there would never attain the best results. It is this spirit, this ideal, which has been nobly shown in the lives of those whose memorial you have today here established. Carlyle has said that everywhere in life the true question is not what we gain but what we do. These men have offered their all to duty. We may say of them in the words of Milton, "Faithful hath been your warfare, and of God accepted, fearless in his righteous cause." The tablet not only honors them, but will be an incentive and an inspiration to others. The Hospital gratefully accepts your gift with a full realization of all it symbolizes and means, and will preserve it as one of the Hospital's sacred and inspiring possessions.

Memorial

DEDICATION OF A MEMORIAL TABLET IN THE TREADWELL LIBRARY, SEPTEMBER 10, 1920, IN MEMORY OF THE GRADUATES OF THE MASSACHUSETTS GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES, WHO DIED IN THE WAR.

1914 1918

IN MEMORY OF

FRANCES E. BARTLETT

MARY F. EMERY

LUCY N. FLETCHER

JESSIE BROWN JAGGARD

CONSTANCE M. SINCLAIR

NELLIE J. WARD

ANNA B. WEST

GRADUATES OF THE

MASSACHUSETTS GENERAL HOSPITAL

SCHOOL FOR NURSES

THEY GAVE THEIR LIVES

IN THE SERVICE OF THEIR COUNTRY

IN THE GREAT WAR

MR. WIGGLESWORTH: We come here this afternoon to dedicate this memorial and to express our deep sense of gratitude and admiration for our nurses who died in the great war. When we look back to the time of Florence Nightingale and reflect that from that time to this is less than an ordinary lifetime, and then consider the enormous development of the work which she started and its influence on the world (both in war and in peace), the contrast is almost overwhelming. When we think of the needless loss of life and suffering from disease before women, as nurses, devoted their lives to the Christ-like work of caring for such suffering, the fact is one to make us shudder. To this work these nurses devoted their help, their strength, and their unwavering devotion. They faced danger without flinching, hardship without complaining, and sealed their service with their lives.

We cannot express to them what we feel, but it is fitting that there should be dedicated this memorial tablet as a sound and enduring evidence of the heroism of these women, and of the splendid example which they gave of the spirit which belongs to and abides in a great hospital.

REV. MR. SHERRILL: An occasion like this is one which is almost too deep to express in words, because as we think of these seven women who gave their lives in this great cause, I presume each one of us has his own memories and his own associations with each one who made the supreme sacrifice. On this occasion we might sum up all in the words, "Greater love hath no man than to lay down his life for his friend." I am sure that these words of the Master apply more truly to nurses than to anyone else who had anything to do with the World War. Somehow I cannot imagine the Master with a rifle in his hand; but I can imagine the picture of a nurse going from bed to bed, making a patient comfortable, and doing the hundred other little things which all make up a nurse's life.

I feel that the nurses who served in this war have not been given their full reward by the public — not that they are asking for any reward. We hear a great deal of all the battles and of the work of the Red Cross and

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DEDICATION OF A MEMORIAL TABLET IN THE TREADWELL LIBRARY, DECEMBER 11, 1919, TO MISS HELEN HOMANS.

IN MEMORY OF

HELEN HOMANS

BORN IN BOSTON

JANUARY 26TH, 1884

DIED AT PONTOISE, FRANCE

NOVEMBER 5TH, 1918

A VISITOR

AND SOCIAL WORKER

AT THIS HOSPITAL

IN 1915 SHE VOLUNTEERED

FOR WORK IN THE

FRENCH HOSPITALS

DIED IN SERVICE TO THE

ARMIES OF FRANCE

DR. WASHBURN: We have assembled today to pay tribute to the memory of Helen Homans. She gave her life for France in the World War just as truly as though she had been killed upon the field of battle.

The blood that is within the veins of a man or woman, the family heritage, traditions, and teaching are what determine the conduct of an individual when the time comes for great decisions.

An examination of the antecedents and background of Helen Homans' life furnishes the clue to her actions.

Her family has been noted for its connection with medical work and for its patriotic response to the call of the nation in the time of peril. With the exception of a few years at the beginning of the nineteenth century, an interval between the death of one ancestor and the maturity of his son, there has been a John Homans practicing medicine in this vicinity since 1775. Helen Homans' great-grandfather, Dr. John Homans, was a surgeon in the Continental Army during the Revolutionary War. From this descent her eldest brother Robert is a member of the society of the Cincinnati. Her grandfather, Dr. John Homans, was a practicing physician. Her father, again the same name, Dr. John Homans, is well remembered by most of us in this room.

He was graduated as house pupil of this Hospital in 1861, joined the regular navy upon graduation, served with it for one year, and resigned to accept a commission in the Medical Corps in the United States Army. He was on duty with the Army until the close of the Civil War, from 1862 to 1865. His service was conspicuous and distinguished, well illustrated by the fact that he was medical director upon General Sheridan's staff during the Shenandoah campaign of 1864. None but an able man of initiative and courage would have been chosen for such a position. Uncle John, as we house officers called him, served this Hospital from 1876 to 1899 actively, and as consulting surgeon until his death in 1903. We remember him affectionately for his humor, quick appreciation, impatience with pretense, and underlying warm-heartedness. His chief claim for distinction here, and that a great one, is that he forced the Hospital to permit abdominal surgery to be done within its walls against the opposition of a too conservative board of directors and staff.

Miss Helen Homans' cousin, another Dr. John Homans, was a house officer of this Hospital. One of her brothers, again a surgeon, and a graduate of the Massachusetts General Hospital, is the present representative of the name. Three of her brothers were commissioned officers of the United States Army, serving with the American Expeditionary Forces.

Helen Homans herself was connected with the Massachusetts General Hospital upon the Board of Visiting Ladies, from 1912 to 1917. She was a volunteer in the Social Service Department, working especially with tuberculosis patients during this same period, the latter part of the time working here in the short intervals between the periods of her service in France.

I have gone into some detail of the ancestry of Helen Homans and her previous hospital work to show how naturally she would come to connect herself with medical activities in a military emergency.

She had lived in France for a number of months at one time and grown to love the country. When the brutal attack was made by Germany and all civilization was imperiled, when her beloved France was writhing under the tortures, the agony and death of her children, Helen Homans suffered with her, and longed for the chance to help. The opportunity came when the first Harvard Unit went abroad; and she went with it. She performed the work of a nurse at l'Hôpital de L'Alliance, No. 41, bis Yoetot Seine Tuferience from May to September, 1915, and again from February to December, 1916. Then for a short period she was in another French hospital. From January to September, 1917, she served in l'Hôpital Auxiliare 109 at Pont Audemes, Eure; and from September, 1917, to February, 1918, she was with l'Hôpital d'Evacuation, No. 18, as a member of the Ambulance Automobile Chirurgicale Nos. 21 and 22, Vasseny, Aisne. Her last position was with l'Hôpital de l'Armée 65 at Pontoise, Seine et Oise, where she served from July to November, and where she died of pneumonia following influenza in the terrible epidemic of that fall.

When taken sick she was in charge of a ward of French wounded. The hospital had been under bombardment and the service was hard and hazardous.

Her services were appreciated by the French authorities, and she was awarded the Croix de Guerre with Palm, in a citation signed by the great French General, Petain, himself. Translated it reads as follows:

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I take this opportunity to pay my tribute to the wonderful courtesy, kindness, and hospitality shown the Americans by both English and French. In England the houses of the people were thrown open to our convalescent soldiers. Several thousands of our men upon leaving the hospitals went into British homes and stayed for a week or ten days before rejoining their organizations. This was allowed with some hesitation, but there were surprisingly few instances where difficulties ensued. Thousands of our men became better acquainted with their British brothers, and they in turn learned to know the Yankees.

In those trying days of October, 1918, when we in England were receiving into our hospitals the American wounded from Flanders, and at the same time transport after transport arrived from America with many cases of influenza and pneumonia, the Chief Surgeon had a conference with General Sir John Goodwin, Director General R.A.M.C., as to the disposition of our sick and wounded when our own hospital capacity should be exceeded. General Goodwin's reply was, "While there is a bed in England it shall be at the disposal of the Americans." This was when the British casualties were coming into England at the rate of 3,000 to 4,000 daily, and ours at the rate of 300 to 400 daily. Our hospital capacity in England at that time was 15,000 beds, limited to that number, because we were not allowed additional medical personnel, which was needed more desperately in France at the moment.

Our hospitals in England were visited by the King and Queen, and Princess Mary, and many distinguished citizens and high officers of the army and navy. Dances, theatrical performances, prize fights, and many other forms of amusement were arranged for our soldiers on leave in England, and there seemed no limit to what the British tried to do for us.

Americans living in England did much. Lady Harcourt ran a small hospital for us in Lancaster Gate, London. Mrs. Spender Clay conducted an officers' Convalescent Home at Ford Manor, Lynnfield. Sir William and Lady Osler kept open house for American Medical

Officers at Oxford. Those who partook of their delightful hospitality will never forget it. Sir William made American and British physicians know each other as they never would have done without him.

In France there was the same spirit. It is harder for a Frenchman than for an Englishman to take an American into his home, but it was done in thousands of instances. In Bordeaux many of us made firm friendships and delightful acquaintances. The appreciation of the French for what America was doing was great. This was more openly shown by the humble peasants. It was touching and embarrassing to those of us who thought we should be doing more, and that our help should have come much sooner.

I remember that upon the anniversary of the sailing of Rochambeau from Bordeaux, on his way to Newport, the school at Talence closed early and the children brought a basket of flowers decorated with French and American colors to the American Hospital in their midst.

We who have lived among them know the sincere and earnest desire of the British and French peoples to live in harmony and union with us, and with us to bear the burdens of this distressed world, and solve its mighty problems. When we think of this, and contemplate the sacrifice of the noblest and best youth of these nations, one is tempted to offer a prayer that the gift may have its complete reward; that having frustrated the foul designs of Germany, we may succeed in forming a Union of Nations which will endure and make war more and more difficult. Politics and obstinacy delay the making of a peace and the establishment of some form of a League of Nations. Can we look upon our dead and tolerate that such motives should stand between the civilized world and the consummation of its victory?

Helen Homans' life was one of service. The gift of this life to France was cheerfully and gladly made.

May this tablet commemorate these qualities of hers and be an inspiration to the coming generations of young men and women who shall use this library.

Historical

HISTORICAL NOTES

Extracts from the History of the Hospital to 1852 by N. I. Bowditch, and to 1872 by Dr. Ellis, with additions to date

1810. A circular letter was issued by Drs. James Jackson and John C. Warren, August 20, inviting subscriptions "for a hospital for the reception of lunatics and other sick persons." This letter may be regarded as the corner-stone of our institution. It contains a perspicuous statement of the advantages which a hospital would extend to all classes of society, and closes as follows:

"Hospitals and infirmaries are found in all the Christian cities of the Old World; and our large cities in the Middle States have institutions of this sort, which do great honor to the liberality and benevolence of their founders. We flatter ourselves that in this respect, as in all others, Boston may erelong assert her claim to equal praise."

1811. Charter obtained from the Legislature, February 25. It incorporates James Bowdoin and fifty-five others of the most distinguished inhabitants of the various towns of the Commonwealth, by the name of the Massachusetts General Hospital. A grant was made of the Province House Estate, so called, with authority to sell the same and use the proceeds at pleasure, provided that within five years an additional sum of one hundred thousand dollars should be obtained by private subscriptions and donations. On April 1, 1817, the Hospital leased this estate to David Greenough, Esq., for ninety-nine years, at an annual rent of two thousand dollars, or an outright sum of thirty-three thousand dollars, at his option; and on October 1, 1824, he elected to pay this latter sum.

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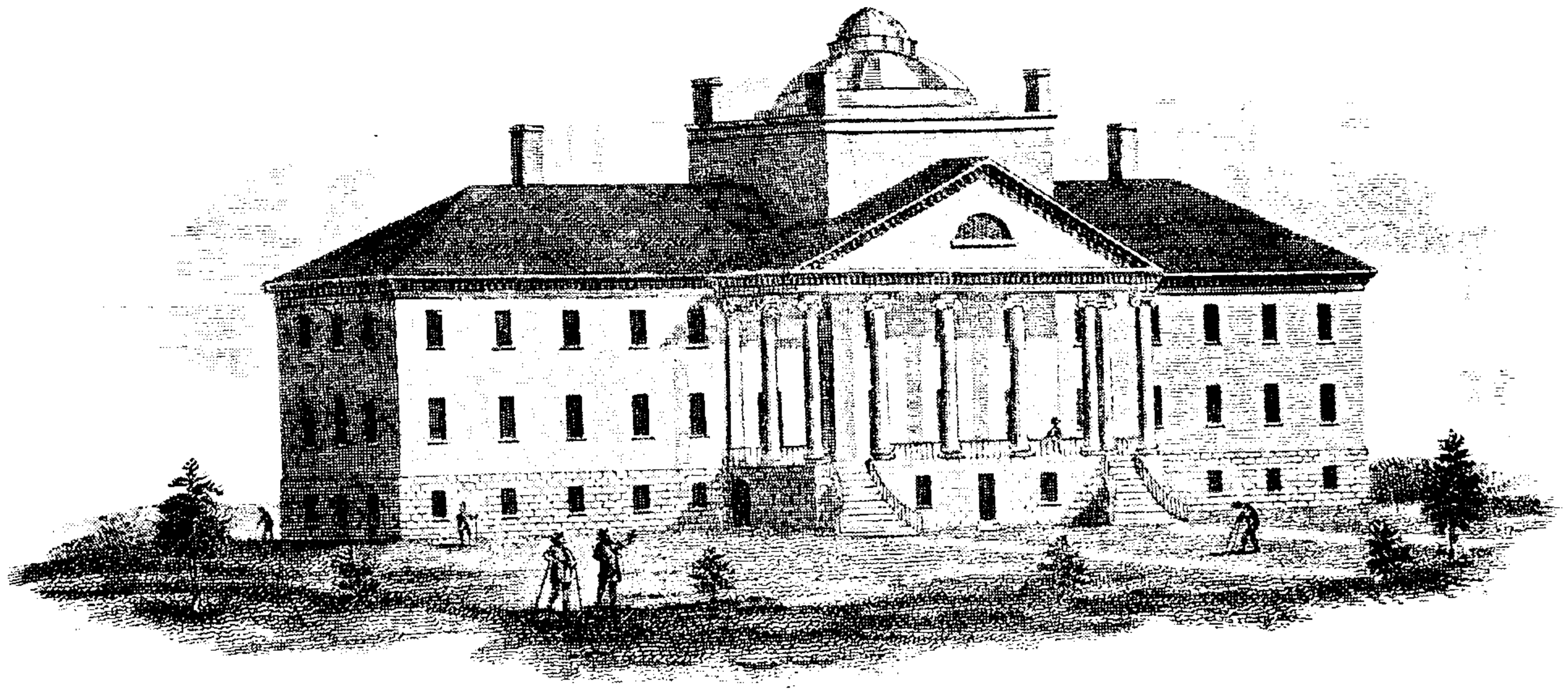

THE GENERAL HOSPITAL, 1821

1811. The first meeting of the Corporation was held April 23. The Corporation was organized by (the choice of) a President and Vice-President, Treasurer and Secretary; the Secretary being *ex officio*, Secretary of the Board of Trustees.

1813. Trustees first chosen February 2. At first, the President always attended the meetings of Trustees, and presided; but since 1818, the Trustees have acted by a Chairman, who presides at all their meetings; the duty of the President or Vice-President being merely to preside at the annual meetings of the Corporation.

1814. By act of Legislature the Corporation was authorized to grant annuities on lives. In a charter, subsequently granted to the Massachusetts Hospital Life Insurance Company, a proviso was inserted, by which one-third of its whole net profits from insurance on lives is made payable to the Hospital.

An additional act, passed January 17, 1824, sanctions a most important agreement between these two Corporations, by which the Hospital, in lieu of all former rights, became entitled to one-third of all the earnings of said Insurance Company, over and above six per cent.

1816. The Board decided to purchase part of Mr. Joy's land, the old Barrell estate in Somerville (site of McLean Hospital).

1817. The Committee reported that they had examined several sites (for a General Hospital), and were pleased with one in North Allen Street, and arranged that the Board should visit it. Charles Bulfinch sent in a plan for a General Hospital.

The Committee for building an Asylum reported in favor of two wings or buildings, seventy-six feet by forty, three stories high instead of one, and of brick instead of stone. Authority was given to buy the Allen Street Estate at twenty thousand dollars, if the offer should be accepted in six days.

By a resolve passed by the Legislature, June 12, it is provided that the stone for the erection of the Hospital should be hammered and fitted for use by the convicts in the State Prison. The work thus done is estimated at over thirty thousand dollars.

A common seal was ordered to be prepared; and, on November 30, Colonel May laid it before the Board — the device being an Indian with his bow in one hand, and an arrow in the other; and on his right, a star, being encircled with the inscription, "MASSACHUSETTS GENERAL HOSPITAL, 1811"; and it was accepted accordingly.

1818. Several plans were received by the Board, and on January 11, referred to a Committee. On Jannary 25 the Committee reported that the plan of a Hospital by Mr. Bulfinch deserved the premium; and on February 1, Mr. Bulfinch's plan (with slight modifications suggested by the Committee) was adopted, and immediate measures were directed for getting stone hammered at the State Prison.

The corner-stone of the Hospital in North Allen Street was laid July 4, in Masonic form, by the Grand Lodge of Massachusetts.

The Visiting Committee report nine patients received at Asylum.

1821. Notice was ordered to Drs. Jackson and Warren that the Hospital will be ready for patients on September 1. One patient was admitted September 1; and, until September 20, not a single other application was made for admission.

1822. Six free beds were established; three for medical, three for surgical patients.

Committee appointed December 1, to wait on Hon. William Phillips (President of the Corporation and Donor of $20,000), to request him to sit for his portrait. This portrait by Stuart is, it is needless to say, a fine painting and an excellent likeness.

1823. A mummy from Thebes was presented by Bryant P. Tilden and Robert B. Edes, in behalf of Jacob Van Lennep and Company, of Smyrna (the Hospital paying two hundred dollars out of the proceeds of its exhibition to the Boston Dispensary), which was gratefully accepted. The Committee reported October 7, that they had leased the mummy one year for exhibition in other cities.

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view to a "thorough purification by fumigation or otherwise;" and that the Rev. Dr. James Freeman has very liberally and readily offered his dwelling house in Vine Street, near the Hospital, for the accommodation of the patients. January 21, twelve patients were reported as removed to Dr. Freeman's house, and twenty-one discharged. January 28, the Hospital was reported to be entirely clear of patients, and "cleansing, fumigation, and alteration of fireplaces, etc., in progress." February 4, the patients from Dr. Freeman's house were received back into the Hospital. March 25, Dr. Robbins was appointed a Committee to return to Dr. Freeman the key of his house, with thanks.

1828. The Superintendent was directed not to buy any more "domestic coffee." The nature of this "vilainons compound" is not stated on the records; but it was probably a preparation of rye.

Colonel May was requested March 9 to prepare a list of all donations to the Massachusetts General Hospital, and one hundred dollars was appropriated to that object. This vote is the origin of the "Donation-book," decidedly the most important of all the records of the institution.

Mr. Greenough applying to buy the reversionary interest of the Corporation in the Province House Estate, Messrs. Francis and Lawrence were appointed a Committee to ascertain its value. The Hospital declined making the proposed sale.

1839. Messrs. Shaw and Brimmer were instructed to report as to the expediency of rejecting syphilitic patients, or of charging them extra board; and this Committee subsequently reported that such patients should be received only in urgent cases, and should always be charged double the usual rates of board.

1841. Dr. (John C.) Warren transmitted a letter enclosing one thousand dollars as a fund for the purchase of religious and moral books to be given to patients on leaving the Hospital.

1846. On October 16, "Sulphuric Ether was first used for the prevention of pain to a patient undergoing a serious operation at the Massachusetts General Hospital.

This application was made by Mr. W. T. G. Morton. "The experiment was a success."

1847. A communication from Dr. Henry I. Bowditch, as to the formation of a Medical Library at the Hospital, was referred to Messrs. Rogers and Amory, who subsequently recommended an appropriation of two hundred and fifty dollars for that purpose.

1848. The Building Committee reported that the new west wing cost $29,500; east wing, $28,000; furnishing, $19,000; repairing center, rebuilding old east wing cellar throughout, three reservoirs, copper gutters, old kitchen, outside painting, $24,000; new kitchen, $16,500; autopsy room, sheds, chains, roads, sodding, fences, $3,000; total, $120,000.

1849. Gas was ordered to be introduced into the Hospital under the superintendence of Mr. Dexter.

1854. The Physicians and Surgeons offered a communication to the Board recommending the establishment of a Pathological Museum at the Hospital, and the Visiting Committee were instructed to report upon the subject. November 19, the Visiting Committee reported that it was expedient to establish a Pathological Museum at the Hospital.

1855. In the annual report for 1854, it is stated that the urgent need that had long been felt of a separate ward for cases of a foul and dangerous nature, to relieve and secure other patients from discomfort and risk, had during the year been supplied. At the cost of $12,000, including that for a necessary sea wall, a commodious building of two stories ("the Brick," 1899), west of the main edifice, had been erected, containing sixteen rooms, with every needful convenience.

1861. The Secretary was directed to communicate to His Excellency, Governor Andrew, the following vote, passed in view of the pending Civil War: "That the Trustees of the Massachusetts General Hospital assure the Executive of the Commonwealth that, in the event of any diseased or wounded soldiers being returned to this city, they shall consider it their duty and privilege to extend to them all the succor and relief that may be within their power."

1862. It was — "*Voted*, That the subject of proper accommodations in this Hospital for the sick and wounded of the United States Army be referred to Drs. Dale and Howe; and in the meantime that Dr. Dale shall have authority to place for treatment in the Hospital any invalid soldier for whom there is suitable room, the rate of their board being $4.50 per week."

Dr. Dale reported at the next meeting, March 23, "That, unless some extraordinary exigency should occur, the accommodations now afforded by this institution are ample for the present.

1863. Leave was granted to Dr. Shaw to accept the appointment of Commissioner, or Examining Surgeon, under the authority of the United States Pension Office — his services to be rendered at the Hospital. This office was to be held by him in accordance with documents communicated to the Board relative thereto.

1872. Out-Patient Departments for Diseases of the Nervous System and Diseases of the Throat were established.

1873. The Training School for Nurses was established.

The Warren Ward (A) and Jackson Ward (B) were built. They were both one-story buildings of corrugated iron.

An Out-Patient Department for Diseases of the Eyes was established.

1874. The Allen Street House for Pathology and the Bigelow Ward (C) were built.

1875. The Townsend Ward (D) was built. Land in that part of Belmont called Waverley was purchased for the future site of the McLean Asylum.

1882. Convalescent Home in Waverley opened.

The Training School for Nurses at the McLean Asylum was organized.

1883. The Thayer Building for Nurses was opened and the Gay Building for Out-Patients was built.

1888. The Bradlee Ward (E) for aseptic surgery was built.

1891. A house for the Resident Physician was built.

1892. The name McLean Asylum was changed to

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A Department of Syphilis called the South Surgical Department was established.

1916. The Moseley Memorial Building, containing the Administrative Offices, Treadwell Library, Emergency Ward and rooms for House Officers and others, was opened.

The nucleus of a Base Hospital, organized under the Red Cross, was established.

1917. Base Hospital No. 6, the Massachusetts General Hospital Unit, departed for France on July 9.

The work of the members of the Staff who remained behind was made lighter by the return of several past members of the Staff as volunteers.

The Phillips House was opened and the Medical Laboratory was established.

ALLEN STREET

THAYER BUILDING

ALLEN ST. HOUSE

PATHOLOGICAL BUILDING

POWER HOUSE

SUP'T. HOUSE

BLOSSOM STREET

LAUNDRY

BULFINCH BUILDING

TUNNEL

BRADLEE WARD E.

TOWNSEND WARD D.

BIGELOW WARD C.

DOMESTIC BUILDING

PHILLIPS HOUSE

PRIVATE WARD

GARDNER WARD F.

WARREN WARD A.

OPERATING BUILDING

OLD OUT PATIENT BUILDING

STREET

CHARLES

ORTHOPEDIC WARD

WELD WARD

THE MOSELEY MEMORIAL BUILDING ADMINISTRATION BUILDING

MASS. CHARITABLE EYE AND EAR INFIRMARY

OUT PATIENTS BUILDING

TUNNEL

STREET

NURSES' HOME

FRUIT

N. GROVE ST.

N.

GENERAL HOSPITAL

SCALE OF FEET

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with power to hold real and personal estate yielding an annual income not exceeding $30,000, the same to be placed under the care of 12 trustees, four of whom were to be chosen by the Board of Visitors, which was composed of the Governor, Lieutenant Governor, President of the Senate, Speaker of the House and the chaplains of both houses of the Legislature. A grant was made by the commonwealth of the "Province House Estate" (then valued at $20,000), upon the condition that within ten years an additional sum of $100,000 should be raised by private subscriptions. In return for the grant of this property by the State, the charter imposed upon the corporation the obligation of supporting a number "which shall at no time exceed 30" sick or insane persons chargeable to the commonwealth. This condition was afterwards modified to make the number of such patients depend upon the actual income derived from the Province House property, and finally, in 1816, was repealed because such provision tended to make of the Hospital a pauper institution.

Province House had an interesting history. Built in 1679 by Peter Sargeant, nearly opposite the Old South Meeting-House on Washington (then Marlborough) Street, in Boston, it was purchased in 1716 by the Provincial Legislature for the residence of the royal Governors, and was used as such until the Revolution. After the separation of the colonies from England it became "Government House," and was held by the State until 1811, when it was presented to the Massachusetts General Hospital Corporation. In 1813 plans were made to remodel the house for a hospital and asylum, and a Mr. Hornby, of Newport, R. I., was selected to have charge of the proposed institution. This project was found to be impracticable, however, and in 1817 the estate was leased to David Greenough for a term of 99 years. He erected stores in front of the house and converted it to uses of trade. It later became a tavern, and figures in Hawthorne's "Twice-told Tales." In 1864 it was destroyed by fire.

The war of 1812 delayed the plans for building the Hospital, but in 1816 the Board of Trustees instituted a

house-to-house canvass and received such liberal responses that within a week $93,969 was subscribed, $43,997.47 of which was contributed specifically for the asylum. There were 1,047 original subscribers.

Negotiations were at once opened for the purchase of a site suitable for an asylum for the insane, the need of which branch of the proposed hospital was considered to be more urgent than a general hospital. In December of 1816 the Joy, or Barrell, estate (known also as Poplar Grove and Cobble Hill) at Charlestown, was bought for $15,650.

This estate contained approximately 18⅓ acres. Here on Cobble Hill, in 1775, General Putnam and Colonel Knox laid out a fort, which received the name of "Putnam's Impregnable Fortress." At the foot of the hill flowed a small stream, Miller's River, a tributary of the Charles, and for some years to come McLean Asylum did nearly all its transportation by water. Upon this hill, surrounded by trees and gardens, stood a colonial dwelling house built in 1792 by Joseph Barrell. Charles Bulfinch designed this mansion, which, enlarged and altered, was used as the administration house of the asylum for 77 years. In 1817 two three-story brick houses known as the East Houses, accommodating 30 patients each, were built adjacent to this mansion, but on diverging lines from it. The Joy estate and the additional buildings and alterations prior to 1818 cost $89,821.16. The first patient was admitted October 6, 1818 — a young man whose father thought him possessed with a devil which he had tried to exorcise with the rod. The Trustees spent three hours discussing his case, but finally decided to receive him. It is recorded that he made a complete recovery, became a pedlar, and acquired a property of $10,000 or $12,000. At the end of the first year 13 patients had been admitted.

Until 1826 the Charlestown branch of the Massachusetts General Hospital was known simply as the "Asylum," to distinguish it from the "Hospital," which was opened for patients in 1821. It was officially named The McLean Asylum for the Insane on June 12, 1826, and as such was known until 1892, when it was rechris-

tened McLean Hospital. The name of McLean was given to it in honor of John McLean, a Boston merchant, who in 1823 left the corporation $25,000 and naming it as his residuary legatee. Eventually the corporation received nearly $120,000 from the McLean estate. To further perpetuate his memory, the Trustees commissioned Gilbert Stuart to paint his portrait, which was finished in 1825, and now hangs in the library at Waverley.

The first superintendent of the asylum was Dr. Rufus Wyman, elected March 23, 1818. During the 17 years of Dr. Wyman's superintendency several changes were made in the asylum. There was of necessity much pioneer work to be done and much remodeling of buildings to suit the peculiar needs of this asylum. Rooms for "the occasional seclusion of refractory boarders" were required, and accordingly, in 1822, five "strong rooms for raging female patients" were constructed, which were removed in 1836 when the new "cottage" for "female patients in seclusion" was erected. A similar addition to the men's department was built in 1826. This was the "lodge," or "retreat," a brick building of two stories, costing $22,700. During 1826-29 still further additions and improvements were made, to the amount of $91,822.33. These included the "lodge" referred to above; a new five-story building for men, called the North Building, costing $65,000; a new roof for the mansion house, with an additional story in the middle and extensive repairs throughout; improvements in ventilation; the addition of a laundry and a new kitchen. No further additions appear to have been made until 1835, when $28,000 was voted to be used for a new building for women known as the Belknap House, named in honor of Miss Mary Belknap of Boston, who, in 1832, left the asylum a sum of nearly $90,000.

In the matter of the treatment of patients, from the first great stress was laid upon the "system of moral management" under which the asylum was conducted. The attendants were carefully chosen and were instructed to treat their patients with kindness and gentleness. In 1833 Dr. Wyman writes that "chains or strait jackets have never been used or provided in this asylum" and

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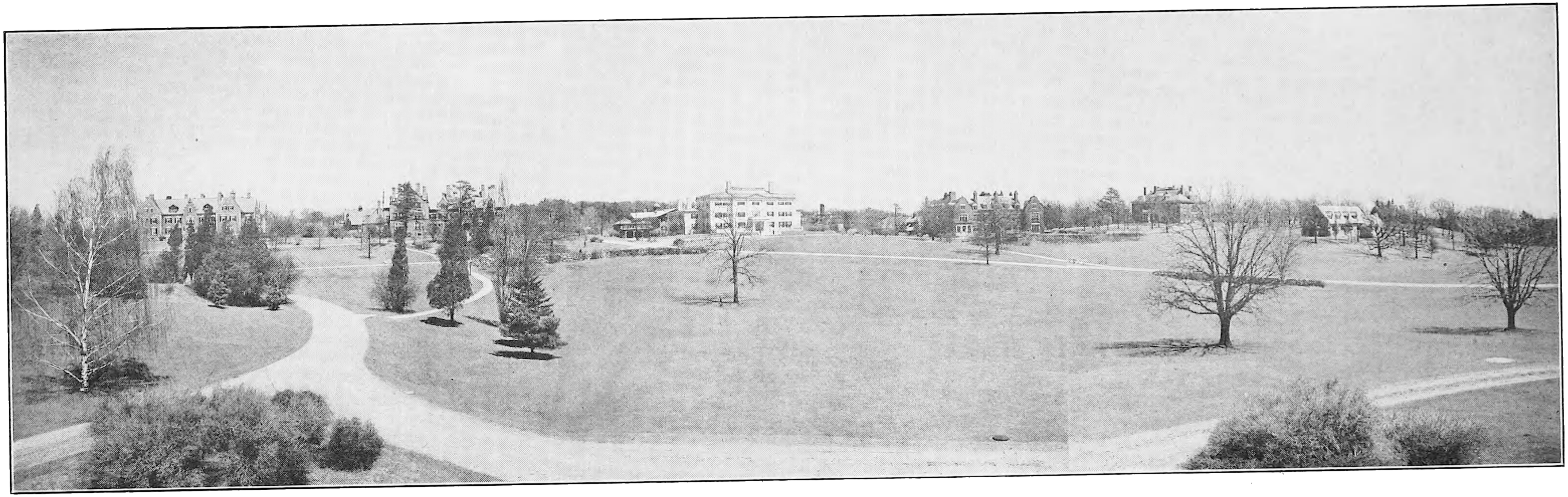
in all directions. The Belknap House was finished in 1837, 12 new rooms were finished in the North Building in 1838, and billiard rooms and attendants' rooms were converted into quarters for patients, making accommodations for 61 men patients in all; new rooms were built into the fourth story of the Belknap House in 1839, increasing the capacity of the whole asylum to 145 patients.

By 1840, owing to the opening of the various State hospitals in New England, the social status of the patients in McLean Hospital had changed, making it necessary to provide more commodious and luxurious quarters for them in order that they might not miss their home surroundings. Therefore carpets, wall paper, mirrors, mantels and better furniture were introduced, and in order that still further luxuries might be available, in 1850 William Appleton, president of the corporation, donated $20,000. To this gift was added the bequest of $20,000 received in 1839 from Joseph Lee, of which a separate investment had been made and which in 1851 exceeded $45,000. With these two gifts two houses for men and women, accommodating eight persons each and providing a suite of sitting room, bedroom and bath for each patient, were begun in 1850 and finished in 1853. By the desire of the Lee family Mr. Appleton's name was given to these houses, and at their suggestion the North Building, for which the name of Lee had been proposed, was officially changed to Dix Ward, in honor of Miss Dorothea Dix.

The ventilating and heating plants were completely made over in 1848, hot-water heating being introduced. According to Dr. Bell, McLean Asylum was the first institution for the insane in the country to try this method. Cochituate water from Boston was brought into the asylum under the railroad tracks in block tin pipes in 1851 and gas was introduced in 1854. New bowling alleys and billiard rooms for men and women were provided in 1855; also in the same year, six rooms and a corridor below the dome in the North Building were removed and made into one large dormitory for 10 or 12 patients.



THE McLEAN HOSPITAL, LOOKING EAST, 1921

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former. Should a surplus occur at the end of the year it is devoted to the other department of the corporation (the Massachusetts General Hospital) to help meet the expenses of its non-paying patients.

Of the 170 patients in the asylum at the end of the year 1847, 153 paid $5 a week or less; the expenses for that year are reported as being $32,500. In 1864 the cost per patient is computed at $9.77 and the rates were again raised. In 1875 the average cost was $21.07, with the expenses increased to $165,000. In 1912 the average cost per patient was reckoned as $25 and the expenses for the year amounted to $359,038.15.

The different railroads now merged into the Boston & Maine system began to encroach upon the asylum grounds in 1837. Various lawsuits resulted, and from 1837 until the removal of the Hospital in 1895 to Waverley, when the entire property was sold to the Boston & Lowell Railroad, there were frequent struggles with the railroads. In 1871 the Boston & Lowell took a strip of land through the front of the asylum grounds across the main avenue. The final result was that the asylum was virtually situated in the midst of a large freight yard, being entirely surrounded by tracks. Moreover, the neighborhood grew further undesirable because of adjacent factories, pork-packing establishments and cheap tenements.

After his first visit to Europe in 1840 Dr. Bell was more than ever interested in the new science of psychiatry. In 1843 he wrote an analytical summary of his experience during the preceding eight years from a medical point of view, in which his discussion of the causation, classification and treatment of insanity was well abreast of his time.

His ideas on restraint and non-restraint are set forth in this report and also in the earlier one of 1840 and the later one of 1855. Although not a believer in absolute non-restraint, he says in 1840 that very little restraint is used at McLean and that "for some years the average number of patients under the restraint of leather mittens has not exceeded one per cent, and often week after week elapses without a single instance."

In those early days the superintendents and assistant physicians devoted themselves to a greater extent to the entertainment of their patients than they do at present. They ate with them, drove with them, worked and played with them; they rarely absented themselves from the asylum. No vacations were given till 1873, when it was voted that each member of the staff should be allowed two weeks during the year. Previous to this, upon very rare occasions, leave of absence for a week or two was asked and granted. The Visiting Committee of the Trustees also took a serious view of their duties and made it a point to see personally each patient in the asylum once a week, checking his name off a prepared list.

The nurses of that time were for the greater part school-teachers. In 1843, with 150 patients, 25 nurses were considered "a very liberal number of attendants."

In his report for 1848, Dr. Bell mentions the fact, not generally recognized at that time but since become of national importance, that other countries were sending over their vagrants, paupers and insane, and casting them upon our shores to rid themselves of their care.

By 1847 the asylum was full, with 173 patients, and only two-thirds of all who applied could be admitted. In his report for 1848 Dr. Bell states that there are 184 patients in the asylum and that "the architecture is hopelessly inadequate" to accommodate that number. Accordingly in 1852 he began to advocate building another asylum and using one for men and the other for women. Meantime the number of patients increased, and in 1852, with comfortable accommodations for 160 patients, there were at times 210 crowded into attics, dormitories and the fifth stories. The external dimensions, with the exception of the two Appleton houses, just finished, were the same as in 1837, when there were one-half as many patients.

In his second year of office Dr. Tyler asked for and received a regular appropriation of $300 for the general library, which appropriation continues to the present day. He devoted a great deal of attention to the amusement and diversion of patients in the way of weekly

ntertainments, sleigh rides, singing classes, and orchestra composed of men patients, drawing and French classes for the women, and the like. Believing thoroughly in the idea that bodily infirmities influence the mind for ill, he engaged Dr. Dio Lewis as gymnastic teacher in 1860. Of an extremely religious temperament himself, he encouraged the wave of religious revival which swept over the institution in 1858, and in 1867 succeeded in getting a chaplain appointed — the Rev. David G. Haskins.

In 1866 a large sum of money was expended for repairs and improvements; the grounds were graded and improved and the farm buildings removed from their former close proximity to the front entrance and repaired.

The Trustees decided in 1871 that, owing to the continued encroachments of the railroads and the other objectionable features of its location, the asylum must be removed, and, therefore, for the next few years practically no repairs, alterations or improvements were made. In 1875, 107 acres of land on Wellington Hill, Belmont (Waverley), were purchased for $75,000. In 1878 the Trustees entered upon negotiations to sell the Somerville property, and in 1880 the Fitchburg Railroad bought 23 acres of their land for $70,000, which, with damages awarded from various lawsuits, created a fund of $122,076.30 for the new hospital buildings at Waverley.

Dr. Cowles came to McLean with the experience of 16 years in the Army and as superintendent of a large city hospital behind him. He at once proceeded to make of the asylum a distinctly modern hospital. In 1880, his first year, the bars were taken off some of the windows and unobtrusive screens were put in. The following year he tried the experiment of unlocked doors between the wards of some of the buildings for convalescent patients; the women nurses on the men's side introduced by Dr. Jelly were increased to four; ward maids were employed, and visitors were admitted freely to the patients.

The same year (1881) was the first in which patients were admitted voluntarily to the hospitals, and McLean had one such. In 1882 there were 11 voluntary admis-

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accommodations for 180 patients, was open for inspection. The plant cost $1,395,404.29 and included the Pierce Building (administration house), the Upham Memorial, the Belknap, Proctor and Bowditch houses for men; the Belknap, East, Appleton and Wyman houses for women; the stable, laboratories and various service buildings. In the following year the two gymnasiums were finished, and the Hope Cottage, built by Mrs. Sarah S. Matchett.

The new Hospital is built on the cottage plan, with houses quite widely separated, but with corridor connection, and located as far as possible with reference to view and sunlight in the patients' rooms.

The first patients were transferred from Somerville to Waverley in April, 1895. Gradually others were brought over, a few at a time, until the final transfer November 15, 1895. On November 16, the grounds where the asylum had been started 77 years before were delivered to the Boston & Lowell Railroad.

Dr. William Noyes was appointed pathologist in 1888, and in 1889 the Trustees appropriated $600 for the development of the pathological department. Dr. William W. Gannett, of Boston, had served as pathologist for several years, and aside from his other duties had given instruction to the medical staff. Dr. Noyes, besides acting as pathologist, began research work in connection with the patients and was the pioneer in the establishment of a clinical laboratory. He resigned in 1893 and Dr. August Hoch was appointed in his place. Under the latter's leadership Kraepelin's classification of mental diseases was adopted, case-records were kept in a much more scientific manner, and cases were studied and compared and research work was carried on. Dr. Hoch resigned in 1905, when he was appointed assistant physician at Bloomingdale Hospital, White Plains, N. Y., and Dr. Frederic H. Packard, junior assistant physician, who had studied with Dr. Hoch, took his place. In December, 1909, he exchanged positions with Dr. E. Stanley Abbot, then first assistant physician.

The chemical laboratory was established in 1900, and Dr. Otto Folin was appointed chemist, in which capacity

he served until 1908, when he was elected professor of biological chemistry in the Harvard Medical School. During this time extensive researches in physiological chemistry were carried on, new methods of analysis were devised, and many important investigations and valuable contributions to science were made by Dr. Folin, which gave him an international reputation. He was succeeded by Mr. Charles C. Erdman.

The psychological laboratory was opened in 1904, with Dr. Shepherd Ivory Franz at its head. Dr. Franz did much valuable work in physiological psychology during the two years he remained at McLean. Upon his resignation in 1906 Dr. F. Lyman Wells succeeded him. Dr. Wells has devoted his attention to experimental and abnormal psychology.

In 1899 hydrotherapeutic apparatus was installed at a cost of $10,000.

One of the pleasantest features of the institution is the collection of paintings in the art room, which was started in 1898 upon the suggestion of a former patient. While it began as a loan exhibition, many pictures have since been given to the Hospital.

In 1903 the Trustees of the Hospital voted that the medical superintendent and the first and second assistant physicians "shall be retired upon reaching the age of 64 years, and if so retired after a service in the Hospital of not less than 14 years they shall receive thereafter a retired salary equal to 60 per cent of the salary they received at the time of their retirement."

Accordingly, Dr. Cowles, having reached this age limit, was retired in December, 1903, carrying with him the loyal affection of all who had been associated with him in his work.

Upon Dr. Cowles' retirement Dr. George T. Tuttle, who had been associated with Dr. Cowles as second and then first assistant physician for 25 years, was appointed medical superintendent, taking office January 1, 1904.

The Samuel Eliot Memorial Chapel was dedicated May 31, 1906.

Much attention has always been paid in this Hospital to physical exercise in the treatment of patients. To

promote this, a static machine, a mechanical vibrator, and a set of Zander apparatus were installed in connection with the baths in the gymnasium building for women in 1904; a golf course of nine holes was laid out and is kept in good condition; three tennis courts have been built, and all forms of outdoor exercise encouraged.

The importance of various forms of diversion, and especially of manual occupation, has been recognized in this Hospital from its very beginning. As early as 1822, Dr. Wyman writes of their value, and Dr. Bell, in 1839, says that "the experiment of mechanical labor was here first introduced, and the safety, expediency and immense utility of putting tools into the hands of the patients entirely and satisfactorily decided." Although later, owing to the class of patients received at McLean, mechanical and agricultural labor was abandoned for "some form of busy idleness," yet each superintendent has done his share in developing this method of treatment. For the men, as long ago as 1836 the carpenter's shop was opened for their use, and of late years wood-carving and cabinet making have been taught; while the women have had lessons in drawing and painting, and have done various forms of fancywork. In 1910 two rooms in the women's gymnasium were prepared for industrial occupations of a somewhat different type; a teacher of handicrafts was engaged, and instruction is now given daily in basketry, leather work, lace making, weaving, and other forms of industry.

In 1907 one acre of land with house and barn was bought; in 1908, 71,800 square feet of land on Mill Street was purchased, also the "Brown Farm" of a little more than 56 acres, containing a spring which supplies all the water for the Hospital. In 1909 a lot of land containing seven and one-half acres and a house on Mill Street was bought to provide a third residence for married physicians.

McLean Hospital occupies an estate of 317 acres on the southwestern extremity of the Arlington Heights range of hills overlooking the Charles River Valley. It accommodates 220 patients in eleven houses.

Patients are received according to the laws of Massachusetts, voluntarily or by commitment. The Hospital

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The McLean Hospital, Looking West, 1921

is not large enough for reception wards, nor are they needed, for no one is admitted except by previous arrangement and after sufficient information has been obtained to make it reasonably certain that there is room in the house where the patient would properly belong. With opportunity for making many classes of men and women in houses quite widely separated, there is little difficulty in making a proper assignment of rooms at the time of admission. Each patient is given special nursing care during the first few hours, to lessen the shock of admission to a hospital for mental diseases and to obtain further information for the attending physician.

With the opening of the Codman House in 1907, the capacity of the Hospital was enlarged so that it could accommodate [illegible] patients. Although afterward in every year large numbers of patients were refused admission on account of lack of accommodations, no further enlargement of the plant was considered, for the reason that it was thought that with a larger number of patients, the same individual care and attention could not be given.

Nevertheless, Hope Cottage, built in 1896, and the South Cottage, built in 1912, each for a single patient, providing at the same time the atmosphere and surroundings of a private home and proper hospital care and supervision, filled such a need that in 1916 the Arlington House (a gift of Mr. Frank E. Peabody) was built, and in 1919 the West Cottage, making a total of four cottages for single patients. They were a distinct addition to the Hospital in that they extended its field of service to people of wealth, and at the same time added to the revenue which could be devoted to the care of those in moderate circumstances.

The continued success of occupational therapy in the treatment of patients warranted an enlargement of the facilities, and in 1913 a considerable addition was made to the Women's Gymnasium, providing greatly enlarged space for weaving, and a large room for pottery work. In 1914 an addition was made to the Men's Gymnasium which gave much needed room for the expansion of the activities carried on there. Weaving, rug making and

pottery work were immediately begun, and in 1920 book binding and printing were added. With the enlargement of the men's department in 1914, two regular occupational instructors were employed for men patients. In the same year, because the number of pieces made in the pottery rooms was so large, a glazing apparatus and a kiln were installed.

The remodeling and refurnishing of the main kitchen in 1921 did much to facilitate the preparation and serving of food.

In 1915 the Hospital began to feel the effects of the World War. Some of the nurses left to join the Harvard Unit, and in 1917 half the staff of physicians enlisted in the United States Army Medical Corps. The Superintendent of the Hospital was chairman of one of the auxiliary committees of National Defence, and two others of the remaining physicians served on medical advisory boards.

In the following year thirty-five men nurses entered the service directly from the Hospital and forty-four other men graduate nurses enlisted, mostly in the Medical Corps. Forty-nine women nurses, graduates of the Training School, enlisted in the service.

The Hospital also gave a three months' course in psychiatric nursing to seven groups of students from the Army Nursing School of the Medical Department of the United States Army — one hundred and six women in all.

During the period of the war the patients in the occupational departments made 1,176 knitted articles for the soldiers.

The war, of necessity, interrupted all but necessary work in caring for patients. The chemical and psychological laboratories were closed and only routine work was done in the pathological laboratory. In 1920, however, a pathologist was again appointed, and in the same year Dr. Otto Folin, Professor of Chemistry at the Harvard Medical School, was appointed Chemist to the Hospital in an advisory capacity and in the following year a resident chemist was again procured. In 1921 the position of assistant in pathological psychology was

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The Discovery of Ether

A CONSIDERATION OF THE INTRODUCTION OF SURGICAL ANÆSTHESIA*

By William H. Welch, M.D., LL.D.

Prdfessor of Pathology, Johns Hopkins University, Baltimore, Md.

It is a happy conception of the Trustees and Staff of the Massachusetts General Hospital to set apart the sixteenth of October as "Ether Day," and to provide for the annual public celebration, in this historic place, of the anniversary of that most beneficent gift of medicine to mankind — the introduction of surgical anæsthesia. I esteem it a high honor to be invited to deliver the annual address in commemoration of the great event which took place within these walls sixty-two years ago today. Of the significance of this event there can be no question, whatever controversy there may be concerning the exact share of all who participated in the discovery of surgical anæsthesia.

The attendant circumstances were such as to make the operation performed on October 16, 1846, in the surgical amphitheater of this Hospital, by John Collins Warren, upon the patient, Gilbert Abbott, placed in the sleep of ether anæsthesia by William Morton, the decisive event from which date the first convincing, public demonstration of surgical anæsthesia, the continuous, orderly, historical development of the subject, and the promulgation to the world of the glad tidings of this conquest of pain.

Had this demonstration or any subsequent one of like nature failed of success, it is improbable that we should have heard much of claims to the prior discovery of surgical anæsthesia. Often as the story has been told,

*Address delivered at the Massachusetts General Hospital on the sixty-second anniversary of Ether Day.

and full as it is of bitter controversy, I may be permitted to recall to your minds enough of the preceding discoveries and efforts to indicate the proper historical setting of the event which we celebrate.

When and by whom artificial anæsthesia was discovered is unknown. It is certain that the old Greek and Roman physicians were acquainted with the power of various narcotic drugs to produce insensibility to pain and that narcotic potions and even their fumes were frequently administered from ancient times onward before a surgical operation in order to lessen the sufferings of the patient. At a later period more limited use was sometimes made of certain devices for the same purpose, such as compression of the carotids, the tightening of a tourniquet and pressure upon nerve trunks. The Elizabethan dramatist, Middleton, even portrayed an age of surgical anæsthesia when he wrote in one of his plays:

> "I'll imitate the pities of old surgeons
> To this lost limb, who, ere they show their art,
> Cast one asleep; then cut the diseased part."

But we know that none of these procedures, and "not poppy, nor mandragora, nor all the drowsy syrups of the world" were safe, effective and available agents to benumb the senses during a surgical operation.

The history of the events connected with modern surgical anæsthesia begins with the remarkable development of chemistry in the latter part of the eighteenth century, due in large measure to the discovery and study of gases, and especially with the discovery of nitrous oxide by Priestley in 1776 and the investigation of its properties by Humphrey Davy at the end of the century in Dr. Beddoes' "Pneumatic Institute" near Bristol, England. At this period there was widespread interest in England in the study of the effects of inhalation of gases of different sorts, particularly of the newly discovered "vital air," or oxygen and nitrous oxide, and exaggerated ideas were entertained of their medicinal virtues, so that there arose a school of pneumatic medical practitioners. The institute of the leader of this school, Dr. Beddoes, is now

chiefly remembered as the place which afforded to Humphrey Davy, then a young man who had commenced the study of medicine, the opportunity for the first manifestations of his remarkable genius for discovery in the physical sciences.

The particular discovery which here concerns us is that of the intoxicating, and especially the anæsthetic properties of nitrous oxide gas, made in Dr. Beddoes' institute and vividly portrayed by Davy in his "Researches, chemical and physical, chiefly concerning nitrous oxide and its respiration," published in 1799. Here is found the memorable and often quoted sentence: "As nitrous oxide in its extensive operation seems capable of destroying physical pain, it may probably be used with advantage during surgical operations in which no great effusion of blood takes place." It seems to us today amazing that this pregnant suggestion from such a source should have passed unheeded and that the application of Davy's discovery should have been delayed for over forty years. Davy's interests and activities were soon transferred at the Royal Institution to fields remote from practical medicine, and it does not appear that he made any further effort to bring the suggestion to the attention of surgeons.

Observations and tests of the intoxicating effects of the inhalation of nitrous oxide were from this time on frequently made, and there is repeated mention of its capacity to produce insensibility to pain. One of the most dramatic situations, unnoticed hitherto in the voluminous literature on the history of anæsthesia, is the occasion when, in March, 1800, William Allen, the accomplished lecturer on chemistry at Guy's Hospital, demonstrated, in the presence of Astley Cooper and others, the phenomena of inhalation of nitrous oxide, noting especially the loss of sensation to pain. The description was recorded by Allen in his diary and is quoted by Wilks and Bettany in their "Biographical History of Guy's Hospital." The great surgeon had eyes, but he saw not the revelation which a similar observation brought forty-four years later to the poor and unknown dentist, Horace Wells, in Hartford, Conn.

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their association." In less than a decade this erring prophet hailed before the Academy of Medicine in Paris the discovery of what he had called a chimera as "a glorious triumph for humanity."

For several years before the invention of anæsthetic inhalation for surgical purposes, considerable popular and some medical interest in the possibility of securing unconsciousness of pain during a surgical operation had been aroused by the claims of the mesmerists, and there seems to be no doubt that Esdaile, in East India, and others, had, in certain cases, succeeded in performing painless operations in hypnotic sleep. The method, however, was not widely applicable or successful, and the general attitude of the profession toward its employment is sufficiently shown by the joy of the eminent surgeon, Liston, the first after the dentist, Robinson, to verify in Great Britain the discovery of surgical anæsthesia, when he shouted, "Hurrah! Rejoice! Mesmerism and its professors have met with a heavy blow and great discouragement. An American dentist has used the inhalation of ether to destroy sensation in his operations and the plan has succeeded in the hands of Warren, Hayward and others, in Boston. In six months no operation will be performed without this previous preparation. Rejoice!"

It has been sometimes represented that the invention of anæsthetic inhalation for surgical purposes consisted in nothing more than the application to this particular use of knowledge which already existed. This view falls far short of the truth. What was known of the anæsthetizing properties of the two agents which here come under consideration — the vapor of ethyl ether, commonly, although incorrectly, called sulphuric ether, and nitrous oxide gas — was enough to suggest the possibility of their use in surgical operations, and, as I have stated, Sir Humphrey Davy published this definite suggestion as early as 1799. Much more knowledge, however, was needed of the physiological effects of these agents in order to demonstrate their applicability as safe, efficacious and generally available surgical anæsthetics. The only possible sources for obtaining this additional knowledge, as well as that which had already been acquired, were

experiments upon either animals or man. From both of these sources the desired knowledge was obtained, but with a larger use of experimentation upon man than we should today consider justifiable.

The honor of making the first trial of anæsthetic inhalation in surgical operations belongs to Dr. Crawford W. Long, a respected and honorable country doctor, then living in Jefferson, Jackson County, Ga., who, in March, 1842, removed painlessly a small tumor from the neck of James M. Venable, anæsthetized by ether. He seems to have performed at least eight minor surgical operations during the next four years upon patients under the influence of ether. Dr. Long is necessarily deprived of the larger honor which would have been his due had he not delayed publication of his experiments with ether until several years after the universal acceptance of surgical anæsthesia. It is also to be regretted that his published details of the mode of administering the ether and the depth of the anæsthesia are so meager and unsatisfactory. While the accepted rule that scientific discovery dates from publication is a wise one, we need not in this instance withhold from Dr. Long the credit of independent and prior experiment and discovery, but we cannot assign to him any influence upon the historical development of our knowledge of surgical anæsthesia or any share in the introduction to the world at large of the blessings of this matchless discovery.

Until the prior work of Dr. Long became generally known, largely through the publication of an article by Marion Sims in 1877, although the announcement had been made by Long in 1849, and more fully in 1852, the credit of first using inhalation of an effective anæsthetic for surgical purposes was generally assigned to Horace Wells, a dentist of Hartford, Conn. Impelled by the observation of apparent loss of sensation to pain in a person intoxicated with nitrous oxide gas, and exhibited at a lecture by Dr. Gardiner Q. Colton in December, 1844, Wells, the following day, at his own request, submitted to the extraction of a tooth while under the influence of the gas and experienced no pain. He at once began the use of nitrous oxide in extracting teeth, and

other dentists in Hartford used it. Desiring to secure larger publicity for his discovery, Dr. Wells went to Boston in January, 1845, and was given the opportunity by Dr. Warren to demonstrate the value of his claims before him and the students, Dr. Morton, his former partner, being also present. Either from the too early withdrawal or the inferior quality of the gas this test was a tragic failure, which exerted such a depressing influence upon Wells that he soon withdrew from his profession, abandoned his experiments, and four years later ended his own life under most distressing circumstances. From what we now know of the valuable anæsthetic properties of nitrous oxide, and from contemporary evidence, there is no reason to doubt that Horace Wells painlessly extracted teeth by its use, and that if he had persevered in his efforts he would have been able to perfect the method of producing anæsthesia by this gas and to demonstrate to the world the art of surgical anæsthesia. While he did not achieve this complete success, the credit which belongs to him is large and the name of Horace Wells should always be held in honored remembrance.

Unlike the pioneer work of Long, that of Wells forms a direct and important link in the chain of discovery which led through the event celebrated here today to the universal adoption of surgical anæsthesia. So far as was known then, and for years afterwards to those concerned in the further development of the subject, Wells was the first to take the step to which the finger of Humphrey Davy had pointed forty-five years before, and the results and claims of Wells were familiar to his friend and former partner, Morton, and must have stimulated the interest of the latter in the possibilities of surgical anæsthesia, although Morton believed that the particular agent used by Wells was not adapted to secure this end.

The significance of the public demonstration of surgical anæsthesia in this Hospital sixty-two years ago today does not depend upon the settlement of the bitter controversy between Charles T. Jackson and William Morton concerning their respective shares in this event. I deem it, however, fitting and only historical justice to

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ing to it all possible weight, and remembering Humphrey Davy had suggested the use of nitrous oxide for surgical anæsthesia in 1799, and that enough was already known of the anæsthetic properties of both ether and nitrous oxide to have led Long, in 1842, to apply the former, and Wells, in 1844, the latter to painless surgery with a considerable measure of success, it seems to me clear that the chief glory belongs not to Jackson's experiences of 1842, or his thought of suggestion, whatever these may have been, but to Morton's deed in demonstrating publicly and convincingly the applicability of anæsthetic inhalation to surgical purposes and under such fortunate circumstances that the knowledge became, as quickly as it could be carried, the blessed possession of the whole world.

There are circumstances in the conduct of Morton as well as of Jackson much to be regretted in connection with this great discovery, and especially is it to be deplored that Morton, the least heroic of great discoverers, should, if only for a short time, have kept secret the nature of his "letheon," and that he and Jackson should have patented it.

Participation in the gift of surgical anæsthesia to the world brought to none of the claimants to this honor any adequate material rewards or fame during their lives, but rather the stings of embittered controversy, resulting in mental derangement in the case of two of the participants. The boon of painless surgery is the greatest gift of American medicine to mankind and one of the most beneficent ever conferred. There is a growing tendency to celebrate the gift with too little thought of the giver. This easy procedure is doubtless due to the difficulty of meting out equal and exact justice to all concerned and to disinclination to stir the ashes of old controversies. This disposition of the matter, however, is unjust, and it seems to me that every effort should be made to determine the share and the credit belonging to each contributor to the discovery and the introduction of surgical anæsthesia, and to secure, so far as possible, an agreement of opinion in this important matter. We are not likely to come into possession of important new

facts, but their unbiased presentation in historical order, and the consideration of their relative values and significance, should clarify professional and public opinion and enable us to give honor where honor is due. One of the most attractive and instructive accounts of the ether controversy is the chapter on this subject in Dr. Mumford's charming "Narrative of Medicine in America," where references will be found to more detailed statements and the historical documents. I have endeavored in this brief and imperfect historical survey incidentally to express in some measure my personal judgment of the relative importance of the leading contributions, and my conclusions are in essential agreements with those of Dr. Mumford when he says that "time and history are at last placing the honor where it belongs — with Morton, who for his errors most certainly was punished beyond his deserts." But whatever may be the differences of opinion, one fact of the first historical importance stands and will continue to stand unshaken: the world received the gift of surgical anæsthesia as the immediate and direct result of the convincing, public demonstration of its efficacy in this Hospital on the sixteenth of October, 1846.

In the bestowal of honors the name of the eminent surgeon, John Collins Warren, should not be forgotten, who had the courage to subject his patient to unknown risks in the hope, which was far removed from any assurance, that a great blessing was about to be conferred upon suffering humanity. Great indeed was his joy in the fulfilment of this hope.

Turning now from these historical considerations, permit me to direct your attention to certain attributes of the discovery of surgical anæsthesia, and certain lessons to be drawn from it.

It is to be emphasized that this discovery was a triumph of the experimental method, albeit man was made the principal subject of experiment. Animal experimentation played a part, for I see no reason to question, although this has been done, Morton's statements that during the summer of 1846 he successfully anæsthetized dogs and other animals with ether, and that the results of these experiments influenced his trial of the anæsthetic

upon human beings. It must, however, be admitted that the production of unconsciousness in man by ether had not been preceded by such numerous and properly conducted experiments on animals as were required to furnish adequate conception of its effects or its possibilities of danger. Such experiments would have yielded knowledge of this character, and we know that at the present time as full information as possible would have been secured from this source before administering to man an agent with unknown possibilities of danger, one indeed in this instance stated in text-books of the time to be dangerous to life when pushed to the point of producing complete unconsciousness. If the opponents of animal experimentation attempt to utilize, as they have done, the relatively small share of this method of advancing knowledge in the discovery of surgical anæsthesia, the only implication of the argument is that they would substitute experiments upon human beings for those upon animals, for only from one or the other of these sources could the discovery have been derived.

We place, then, the discovery of surgical anæsthesia with such other great discoveries as those of the circulation of the blood, of vaccination against smallpox, of antiseptic surgery, of antitoxin, and many more among the great contributions to the welfare of mankind made by the use of that indispensable aid to the advancement of medical science art — the experimental method of investigation.

A quite different line of thought suggested by the discovery of surgical anæsthesia is the aid to medicine which comes often in the most unexpected ways from discoveries in other sciences. Not only did chemistry furnish the anæsthetic agents, but the wonderful discoveries of pneumatic chemistry, which revolutionized the whole science of chemistry in the latter part of the eighteenth century, were the immediate stimulus to the study of the physiological effects of various gases, a study which led promptly to the recognition of the anæsthetic properties of nitrous oxide gas, and which, continued through half a century, resulted finally in the demonstration of the applicability of certain of these

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sources of knowledge are exact observation and experiment. The great impulse derived from the introduction of the new methods of physical diagnosis and the systematic anatomical study of disease had shortly before reached this country from France, and was especially active in this city. Experimental physiology and pharmacology had entered upon fruitful fields of exploration through the work of Magendie and of Johannes Müller and their pupils. The foundations of cellular pathology were soon to be laid. While it is not apparent that those directly concerned in the discovery of surgical anæsthesia were influenced by the new spirit and the new ideas, they contributed an aid to experimental research of immeasurable service. It was fortunate indeed for the public demonstration, reception, and promotion of the discovery of surgical anæsthesia that it was revealed to that able group of surgeons and physicians then connected with this Hospital, who were imbued with the new scientific spirit and with the best traditions of the profession, and were active in the advancement of the art.

A consideration of some interest connected with the introduction of surgical anæsthesia is the influence of environment and of material conditions upon discovery. Here we find illustrated the fact, of which there are many examples, that apparently adverse surroundings and average intellectual endowment without special scientific training constitute no barrier to the making of discoveries of the highest importance to mankind. The country doctor in Georgia, with only an ordinary general and professional education, and the two poor and previously unknown dentists of Hartford and of Boston, are the chief actors in the drama. It is not surprising that dental surgeons should have been particularly eager in the quest of anæsthesia, for there is no more excruciating agony than the pulling of an aching and sensitive tooth, and the short duration of the operation and the suffering would suggest possibilities of success which might not be variable in a prolonged surgical operation. Nor is it surprising that American dentists should have been most active in this search, when we

recall the remarkable inventiveness and skill which have characterized their work and have given to American dentistry a foremost position for this branch of surgery.

On the other hand, however, the share which the Massachusetts General Hospital and its surgeons had in the demonstration, promulgation and acceptance of surgical anæsthesia exemplifies the value of a favorable environment and was largely responsible for the complete success which Morton achieved over his predecessors in discovery. The manner in which the surgeons of this Hospital at that time — including John Collins Warren, George Hayward, Henry J. Bigelow, and J. Mason Warren — received and advanced Morton's demonstration of anæsthesia must always be a source of pride, not only to this Hospital, but to our country and the world. Especially are they to be commended for their insistence upon disclosure of the nature of the secret letheon. No better example can be found of the service which a great hospital and its professional staff can render in furthering discovery and in advancing and spreading new knowledge and new methods important to the medical and surgical art than that furnished by the Massachusetts General Hospital in its relations to the demonstration and introduction of surgical anæsthesia, and its officers and staff have ever remained faithful to the high ideals then exemplified.

Worthy of especial mention are the first announcement to the world in a scientific journal of the great discovery, by Henry J. Bigelow, in an important paper read before the American Academy of Arts and Sciences, on November 3, 1846, and published in the *Boston Medical and Surgical Journal* on November 18, and likewise Oliver Wendell Holmes' delightful part in coining the word "anæsthesia," and, indeed, his whole attitude of lively, sympathetic and imaginative interest, as expressed in all that he said and wrote concerning the new discovery. A sentence often quoted will suffice to illustrate Dr. Holmes' appreciation of the benefits of the discovery, as well as his powers of vivid description:

"The knife is searching for disease, the pulleys are dragging back dislocated limbs, nature herself is working

out the primal curse which doomed the tenderest of her creatures to the sharpest of her trials, but the fierce extremity of suffering has been steeped in the waters of forgetfulness, and the deepest furrow in the knotted brow of agony has been smoothed forever."

The reception of the joyful discovery was everywhere enthusiastic, although not without some of the mutterings which come from those petrified against all innovations, as appears from remarks made by Professor Miller to his class in London not long afterward. "The profession," he says, "were surprised, excited, charmed in the mass, and more especially those on the junior side of the grand climacteric. The elderly gentlemen had their preconceived and heretofore settled notions sadly jostled and disturbed. Not a few grew irritable and resented the interference; they closed their ears, shut their eyes, and folded their hands; they refused to touch or in any way meddle with the unhallowed thing; they had quite made up their minds that pain was a necessary evil and must be endured; they scouted on the attempted innovation and croaked that 'no good could come of it.' On, notwithstanding, sped the movement."

One of the most extraordinary aberrations of the human mind was manifested by the raising of religious scruples, particularly against the abolition of pain in childbirth. Sir James Simpson, the discoverer of the anæsthetic uses of chloroform, and of important service in advancing the art of anæsthesia, quotes from the letter of a clergyman, who declares that chloroform is "a decoy of Satan, apparently offering itself to bless women, but in the end it will harden society and rob God of the deep, earnest cries which arise in time of trouble, for help." If this clergyman remembered the primal curse, he forgot the earliest example of anæsthesia when, in the resection of a rib for the creation of Eve, "the Lord God caused a deep sleep to fall upon Adam."

The immediate immeasurable benefits conferred by anæsthesia in the relief of human suffering were realized more fully and were expressed more adequately by the generation which knew by experience the contrast be-

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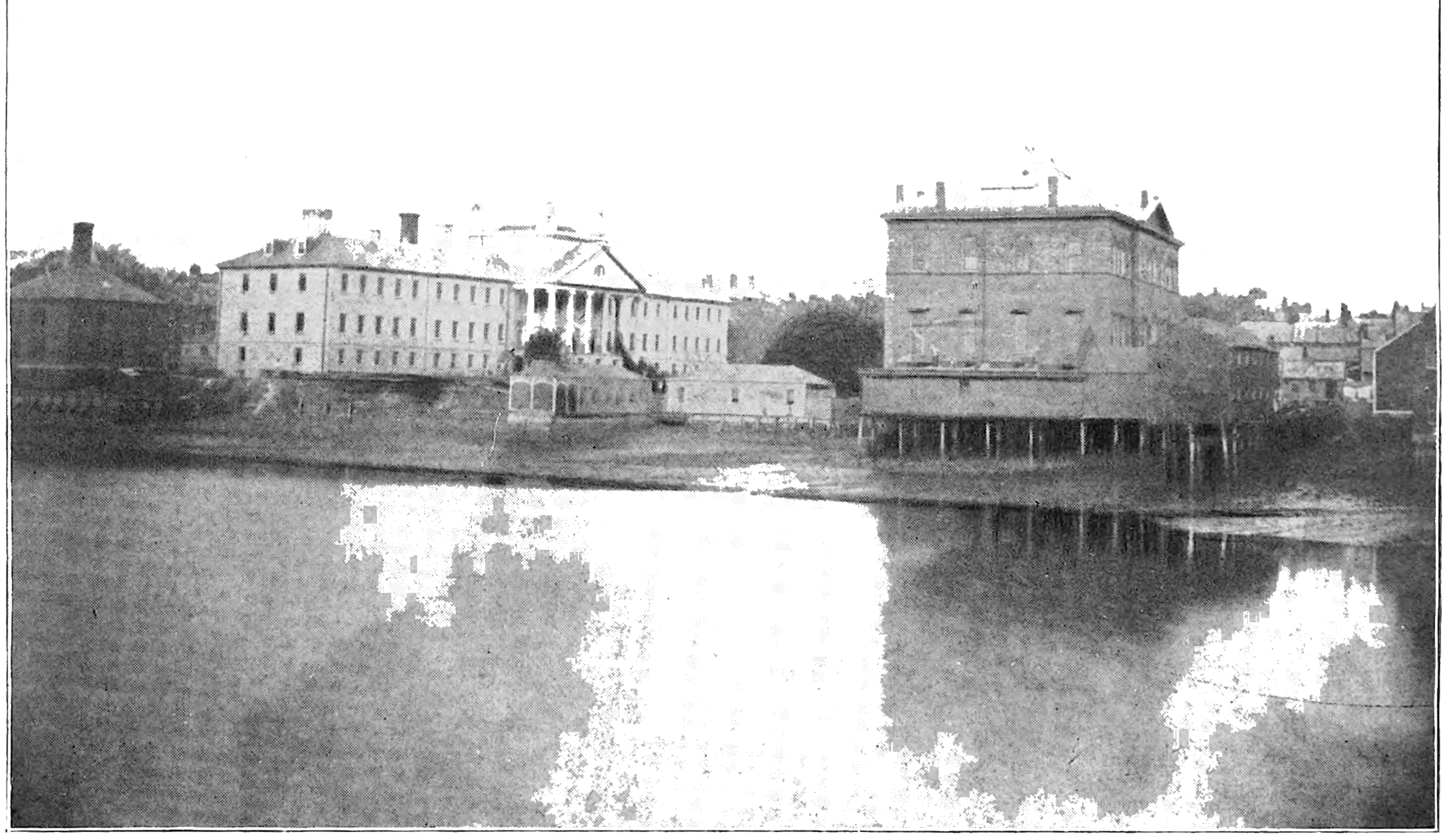
greatest practical achievements in our art during the nineteenth century were anæsthesia, antiseptic surgery and the power to control infectious diseases resulting from the discovery of their living contagia — achievements surpassing the heritage of all the centuries which had gone before in the saving of human life and the alleviation of suffering. Of all these gifts of medicine to mankind, the sweetest and the happiest is that "death of pain" so beautifully portrayed at the semi-centennial anniversary of anæsthesia by our beloved poet-physician Weir Mitchell:

> "Whatever triumphs still shall hold the mind,
> Whatever gift shall yet enrich mankind,
> Ah! here no hour shall strike through all the years,
> No hour as sweet, as when hope, doubt, and fears,
> 'Mid deepening stillness, watched one eager brain,
> With Godlike will, decree the Death of Pain."

To these fine lines I can add in closing no more fitting words than those of John Collins Warren, who presided over the scene enacted here sixty-two years ago, a name ever to be honored in this place and throughout the civilized world. These words, spoken soon after the event which we celebrate, retain their vigor, freshness and truth to this day. He said:

"A new era has opened on the operating surgeon. . . . If Ambrose Paré and Louis and Dessault and Cheselden and Hunter and Cooper could see what our eyes daily witness, how would they long to come among us and perform their exploits once more. And with what fresh vigor does the living surgeon, who is ready to resign the scalpel, grasp it and wish again to go through his career under the new auspices. As philanthropists we may well rejoice that we have had an agency, however slight, in conferring on poor suffering humanity so precious a gift. Unrestrained and free as God's own sunshine, it has gone forth to cheer and gladden the earth; it will awaken the gratitude of the present and of all coming generations. The student who from distant lands or in distant ages may visit this spot will view it with increased interest, as he remembers that here was first demonstrated one of the most glorious truths of science."



THE GENERAL HOSPITAL 1853 HARVARD MEDICAL SCHOOL

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the Fourth of July is called Independence Day, the date we are considering, October 16, 1846, should be called Ether Day, for both ushered in the dawn of a new era.

The work of Long, Wells, and Jackson in no way affected surgical practice. It was not until the convincing experiment of Morton was made, in the dome of the amphitheater of the Massachusetts General Hospital, that it became at once apparent to all the world that surgical anæsthesia had become a reality and that "pain was no longer the master but the servant of the body."

Special Departments

THE WARREN LIBRARY

"On November 7, 1841, Dr. John C. Warren transmitted a letter enclosing one thousand dollars as a fund for the purchase of religious and moral books to be given to patients on leaving the Hospital."* Thus began the Warren Library for Patients.

In 1872 the Trustees in their report said they would "gratefully receive additions to the General Library of the Hospital," so we infer that the scope of library service and type of book had broadened within those preceding years.

The Warren Library in its pioneer days was in the Accounting Office under the supervision of the bookkeeper.

In 1904 the Hospital organized its patients' library, appointed a librarian, and became, so far as is known, the first general hospital to establish regular book service to ward patients. This service became so popular that some means had to be devised to carry books in greater number to the wards, and in 1910 a book-cart was designed. This book-cart was the model for the larger one used by the American Library Association in its War Service.

A small room on the first floor of the Bulfinch Building was provided for the library. Here convalescent patients, nurses, doctors, and employees of the Hospital came to select their books from open shelves. As the library service developed and its therapeutic value became more obvious it required a larger room. In 1921 the Library was moved to its present location in the Bulfinch Building. Within the last six months this room has been made as attractive and comfortable as possible — a cheerful place where convalescent patients may come to read in a homelike atmosphere.

*From the History of the Massachusetts General Hospital by N. I. Bowditch.

During its eighty-two years of service the Warren Library has grown into a library of 4,000 volumes, mainly fiction, travel, and biography, with 400 volumes in 18 different foreign languages.

Technical books are borrowed from the Boston Public Library for patients desiring to continue with their interrupted work or studies.

Patients who are blind, but read Braille, are loaned books from the Perkins Institution.

Books in foreign languages are borrowed, to supplement our collection, from the Traveling Library of the Massachusetts Free Public Library Commission.

Magazines are placed weekly on the wards and in the various Out-Patient and X-ray waiting-rooms.

The Warren Library for Patients has developed to its present extent of usefulness through gifts of money and books from friends of the Hospital, and also through the efforts of the Ladies' Visiting Committee.

Through this library service all readers, of every nationality and age, are supplied with wholesome, entertaining reading while in the Hospital.

Elizabeth W. Reed,
Librarian.

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opportunity, might delay until they become severely sick, and perhaps past cure."

In 1864 it was found necessary, because of the increasing number of cases, to appoint a surgeon to Out-Patients in addition to Dr. Abbott, the physician. The new appointee was Dr. Algernon Coolidge. In 1867 another physician was added to the staff and gradually more and more until in 1882, just before the opening of the new special Out-Patient building, there were six physicians to the medical cases, three to the surgical cases, and five physicians to special clinics. In 1868 the first special department, the dental, was instituted, and in 1873 put under charge of the first dentist, Dr. Wilson. In 1869 the skin clinic was begun with Dr. J. C. White as chief; in 1872 two more special departments were started, the nerve clinic under Dr. James J. Putnam and the throat clinic under Dr. F. I. Knight. In 1873 the fifth special clinic, for eye diseases, was instituted under Dr. Wadsworth, and in 1887 Dr. John Orne Green became the first aural surgeon.

In 1882 "a friend of the late Dr. George H. Gay" gave $25,000 to the Hospital as a memorial to him. The Trustees voted to use this fund in a building for the Out-Patient Department, the most pressing need of the Hospital. In 1883 this new building was dedicated, but in less than ten years it was so far outgrown that it was necessary to add a new story to it, and in 1900, only seventeen years after its opening, "a communication was submitted from Mr. Thomas E. Proctor offering to pay one-half the cost, not exceeding $75,000, of a new building for the Out-Patient Service of the General Hospital, the Trustees to appropriate the balance." In 1901 the new building was begun, and on October 16, 1903, it was opened for inspection with great acclaim as one of the very best buildings of its kind in the world, which it still continues to be, although already overcrowded.

In 1893 a new office had been established, that of Examining Physician to Out-Patients. Dr. John H. McCollum received the first appointment. During the following year he excluded five hundred cases of contagious disease out of over twenty-five thousand patients

whom he examined. This control is now exercised by the superintendent of the Out-Patient Department with his staff of nurses.

In 1896, just fifty years after books began to be kept of out-patient cases, 29,867 new patients visited the Department, with a total for the year of 91,468 visits by old and new cases, as compared with the total of 328 patients fifty years earlier.

Further rapid progress followed the opening of the new building and has continued in the twenty years since. The peak of attendance of patients occurred in 1917, when there were over 200,000 total visits, with over 30,000 new cases. Far more important, however, than the number of patients have been numerous other developments. The staff has increased until now it consists of approximately the following: superintendent with his staff of clerks in the record room and at the admitting desks, and with his messengers; a corps of 15 internes, a head nurse with her staff of nurses, a chief of the Social Service Department with her assistants, a corps of clinic secretaries, laboratory technicians, 35 visiting physicians in the general and special clinics of the Medical Department, 15 surgeons in the Surgical Department, 9 physicians in the Dermatological Department, 13 in the Neurological, 12 in the Children's Medical, 18 in the Laryngological, 14 in the Orthopedic, 9 in the Genito-Urinary, 6 in the Syphilis, and 7 in the dental clinic—a total of over 200 workers. The eye and ear cases are examined and treated at the Eye and Ear Infirmary next door.

Under the medical service many special clinics have grown up for the study and special treatment of cardiac, pulmonary and gastro-intestinal diseases, obesity, diabetes, thyroid and blood diseases and various other conditions. Research work of value has been carried on in these as well as in the special clinics of other departments. The social service work begun in 1905 by Dr. Richard C. Cabot has proved of inestimable value and has been a guide to the spread of this enterprise throughout this country and abroad. An industrial clinic was established in 1913, a nutrition clinic in 1916, and whenever advance

in medicine has suggested the value of clinical concentration on a disease, or on a group of diseases, the Out-Patient Department of the Massachusetts General Hospital has helped to blaze the way with its corps of hard-working physicians, nurses, social workers, and laymen. Constant endeavor is necessary to surpass the high standards of the past, and in spite of steady progress we never reach the goal.

Paul D. White, M.D.

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should be divided between the Library and the care of the clinical records. In 1897 Mrs. Grace W. Myers was appointed. The Library then contained 4,872 volumes, and 28 periodicals were regularly received. No attempt had been made at a collection of reprints, or of the annual reports of other hospitals. The use of the books was confined exclusively to the visiting staff, and no one else ever dared enter the room. But these days passed, and gradually more liberty was allowed, and house officers were permitted to use the Library afternoons, *after* the last staff member had taken his departure.

As the cataloguing of records progressed, making clinical histories more available, study and research began in good earnest, and in the course of the next fifteen years the Library became a busy place at all times. House officers were as free as their superiors to come and go. The shelves were full to overflowing, books and records reaching literally from attic to basement.

In 1916 came the move into the spacious and attractive quarters on the second floor of the Moseley Memorial Building with plenty of room, and opportunity for expansion. And at last it became free to the entire scientific personnel of the Hospital. Many visitors remark upon the beauty of this room, now decorated with war flags and made precious to all alumni for the memorials there placed to the heroism of a brave group who made the supreme sacrifice when the country called.

All through the World War this Library supplied weekly to Washington, as original work, a bibliography on the medical and surgical aspects of the war, made up from the periodicals as they were received. At the headquarters of the American Red Cross this was regularly mimeographed and sent all over the country to military hospitals and cantonments, and to many libraries. It was the only piece of work of the kind that was done anywhere and was the immediate cause of the publishing by the Index Medicus of its War Supplement, after the war was ended.

At the end of 1922 there were 11,012 volumes on the shelves and 12,247 reprints; and 106 periodicals were

being received. The Library contains a large collection of the annual reports of other hospitals — "the most complete collection in Boston," according to a paper recently read by Dr. David Cheever; and there is a special collection of all matter pertaining to the discovery of ether, with which great event the name of this Hospital is forever linked. Also, continual effort is made to gather together the writings of all past and present members of our Medical Board, and of all matter concerning Hospital history.

During the last twenty-five years the clinical records of the Hospital have improved in every way, until its system stands today as one of the three best in the country. A "unit" method of binding was established in 1922, taking the place of large volumes which contained *several* records; and this method has proved most satisfactory.

In 1914, a three months' course in the Care of Hospital Records was arranged, and since that time nine pupils have received instruction. They have been sent, in most cases, from other hospitals, and have come from as far away as St. Louis, Mo., and Nashville, Tenn. At the present writing (1923) there is one application on file from San Francisco, and another from China.

The Association of Record Librarians — designed for mutual helpfulness among those engaged in such work — was organized by the librarian in 1916 with a membership of five. It now numbers 21 and has done much among local hospitals to standardize methods of caring for clinical records.

Twenty-five years ago the entire work of the Library and record room was done by the librarian alone. Today she has one assistant in the care of the Library; and seven (with half-time of another) are employed on clinical records, two of the seven being engaged in special work. A student clerk serves as evening attendant and the Library is open until 10 P.M. every day except Saturday and Sunday.

Grace W. Myers,
Librarian.

THE PATHOLOGICAL DEPARTMENT

THE Pathological Department of the Hospital may be said to have had its beginning in the creation in 1851, by the Trustees, of the office of chemist and microscopist, and the appointment of an incumbent, whose duties among others were "attendance on autopsies within the walls of the Hospital and in the preparation of records of his observations, with the privilege when matters of sufficient importance have accumulated as results, of publishing them to the world, under the patronage of the surgeons and physicians."

In 1854 a pathological cabinet or museum was established, $100.00 appropriated for commencing it, and the office of curator created, whose duties were "to preserve morbid specimens and arrange them in the way best fitted to make them useful; and that he should make all autopsies excepting such as shall be made by the attending physicians and surgeons; and shall observe all the regulations now in force or that may be made respecting them."

In 1855 the microscopical duties of the chemist and microscopist were assigned to the curator of the pathological cabinet at the request of the former officer. The work of the chemist apparently increased during the next year, for in 1862 he "was authorized to employ an assistant in the performance of his duties, in such way and at such time as he cannot attend to them himself, at an expense not exceeding $250.00 annually."

The completion of the Allen Street House, so designated by a vote of the Trustees in 1875, with its autopsy theatre seating 165 students and rooms for the pathological cabinet, was an important addition in the development of the pathological work of the Hospital. "In making this addition the Trustees have kept in view the two purposes of a hospital set forth in the circular of Dr. James Jackson and Dr. John Collins Warren published in 1810, viz., to succor the poor in sickness, and

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director of the Pathological Laboratory, surgical pathologist, assistant pathologist, assistant surgical pathologist, chemist, assistant in clinical pathology, assistant in clinical bacteriology, and medico-legal pathologist. With some minor changes these offices have been continued.

J. Homer Wright, M.D., S.D.,
Pathologist.

THE WARREN TRIENNIAL PRIZE

THE Warren Triennial Prize was founded by the late Dr. J. Mason Warren in memory of his father, Dr. John C. Warren; and his will provides that the accumulated interest of the fund shall be awarded every three years to the best dissertation, considered worthy of a premium, on some subject in Physiology, Surgery, or Pathological Anatomy.

Following is the list of awards:

1871 To Horatio C. Wood, M.D., of Philadelphia.
Title: Experimental researches on the physiological action of nitrite of amyl.

1874 (No dissertation offered).

1877 To E. O. Shakspeare, M.D., of Philadelphia.
Title: Healing of arteries after ligation.

1880 (No award made).

1883 (No award made).

1886 (No award made).

1889 To H. A. Hare, M.D., and Edward Martin, M.D., of Philadelphia.
Title: Practical studies on the nervous and mechanical government of respiration, designed to determine the best methods of treating disorders of the same, more particularly those produced by traumatism to the phrenic nerves or the inhalation of gases.

1892 To John Strahan, M.D., of Belfast, Ireland.
Title: Rickets.

1895 (No award made).

1898 To Howard A. Lothrop, M.D., of Boston.
Title: Anatomy and surgery of frontal sinus and anterior ethmoid cells.

1901 To Frederic J. Cotton, M.D., of Boston.
Title: Elbow fractures in children. Fractures of the lower end of the humerus; lesions and end-results, and their bearing upon treatment.

1904 To Max Borst, M.D., of Würzburg, Bavaria.
Title: Neue Experimente zur Frage nach der Regenerations-fähigkeit des Gehirns.

1907 To Aldo Perroncito, M.D., of Pavia, Italy.
Title: Rigenerazione dei nervi.

1910 To George H. Whipple, M.D., of Baltimore.
Title: Pathogenesis of icterus.

1913 To Arrigo Visentini, M.D., of Pavia, Italy.
Title: Fonction du pancréas et ses rapports avec la pathogénèse du diabète.

1916 To D. Noël Paton, M.D., and Leonard Findlay, M.D., of Glasgow, Scotland.
Title: The parathyroids. Tetania parathyreopriva: its nature, cause, and relations to idiopathic tetany.

1919 (No award made).

1922 (Two prizes; there having been two of equal merit).
1st, To Cecil Kent Drinker, M.D., Katherine R. Drinker, M.D., and Charles C. Lund, M.D.
Title: Circulation in the mammalian bone-marrow; with especial reference to the factors concerned in the movement of red blood-cells from the bone-marrow into the circulating blood as disclosed by perfusion of the tibia of the dog and by injections of the bone-marrow in the rabbit and cat.
2d, To James Mott Mavor, M.D., of Schenectady, N. Y.
Title: Effect of X-Rays on the nuclear division.

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Children, who had had a year's experience during the formative period of the Bellevue School. Miss Richards possessed experience, ability and a pleasing, forceful personality, and soon brought order out of chaos. The pupils became happy and contented; the Staff referred with pride to "our school"; and the Trustees reported in 1875 "gratifying success of the school" and stated that "an arrangement has been made to extend its usefulness by gradually placing all the wards in charge of the school."

For twenty-two years those splendid men and women who comprised the Board of Directors carried the work. They financed the project, interviewed pupils, visited wards, attended lectures, and for sixteen years corrected the lecture notes. Their vision of what comprised adequate preparation for a nurse was truly remarkable. During those first years some pupils went to the Boston Lying-In Hospital, and for a time all went to the Eye and Ear Infirmary. Sending them to the McLean Asylum was considered.

The years from 1881–1889 were especially progressive under the leadership of Anna C. Maxwell. The "Thayer" was erected, more maids were employed, greater attention was given to the health of nurses, instruction was increased, and a badge and uniform were adopted. The first "blue and white broken check" uniform was soon changed to the present black and white because the blue easily faded.

Soon after 1890 there were evidences that the responsibilities were resting heavily on the Directors. Policies became very conservative, and although good suggestions were made they were not carried out, probably because of the uncertainty of income and the uncertainty of satisfactory administration. During November, 1895, the Trustees wrote a letter to the Directors, expressing appreciation of their accomplishments. In this letter there also appeared the following: "The Trustees of the Hospital have gradually come to the belief that the best interests of the Hospital will be promoted by the establishment of a closer relation between the school and it, and that this can be best accomplished by placing

the school under the management of the Hospital Trustees."

The Directors agreed to this suggestion. The school was transferred to the Hospital January 1, 1896, and was renamed the Massachusetts General Hospital Training School for Nurses.

About 1900 began a second period of rapid development under Miss Pauline L. Dolliver. The graduate staff was increased, many students were given a preliminary course at Simmons College, obstetrical and operating-room experience was given to all, and affiliations were arranged for pediatrics, for the care of patients in a private hospital, and for district nursing. Instruction was increased through bedside clinics, special lectures, and the appointment of a practical nursing instructor. In 1901 the course was lengthened to three years, and in 1903 the first formal graduation exercises were held.

The decade beginning 1910, with Miss Sara E. Parsons in charge, brought continued developments. Among these were increased social activities, the policy of tuition with the Hospital furnishing text-books and uniforms (instead of paying the pupils an allowance), scholarships, loan fund, full time theoretical instructor and full time practical instructor, the building of the New Home, affiliation with the McLean Hospital and the Eye and Ear Infirmary, the endowment fund, student government, cooking laboratory, five-year course with Simmons College, and the fifty-two-hour week.

The centennial year of the Hospital found the school forty-eight years old. To it had come students not only from every part of the United States and Canada, but from England, Switzerland, France, Greece, Italy, Armenia, Albania, Syria, Germany, China, Czecho-Slovakia, Poland and India. The graduates numbered fifteen hundred. They had gone to every State in the Union, to many countries in Europe, to South America, China, Japan, India, Australia, and Africa.

Statistics compiled in 1920 showed the status of 90 as unknown, 141 deceased, 436 married, 229 in private duty, 39 superintendents or assistant superintendents of training schools, 87 superintendents or matrons of hos-

pitals or homes, 68 head nurses, 76 in public health, and 28 instructors; 152 were listed as "at home" and many were in miscellaneous groups. Among the graduates in active work only 10 were listed as doing work other than that which had to do with the promotion of health.

Such is a brief history of the Massachusetts General Hospital Training School for Nurses. The alumnæ are ever grateful to the makers of this history and pray that the future of the school may be worthy of its past.

Sally Johnson, R.N.,
Superintendent of Nurses.

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taken. Unfortunately, the amount of current consumed was so large that it burned out the fuses on the mains, and the machine was pronounced unsafe and the work abandoned.

Through the efforts of the radiographer, Professor Lemp's apparatus was allowed to remain in the hospital until the fiftieth anniversary of "Ether Day," at which time it was placed on exhibition. Soon after this sufficient money was subscribed for its purchase by one of the trustees, and it was moved to the old West Room under the Bulfinch steps.

In this same year, at a medical convention held in Washington, Dr. Reginald H. Fitz exhibited a radiograph of the entire human body. This radiograph was taken by Mr. Dodd, and the subject was his assistant, Mr. Joseph Godsoe.

In 1897, the first record of expenditure for x-ray apparatus appeared in the annual report of the Hospital.

During that year, a patient was referred from the out-patient department for x-ray examination. He returned a few days after the examination stating that the "light" had relieved the pain in his leg. To prove the truth or fallacy of the patient's statement, investigations were undertaken by Mr. Dodd and Dr. Seabury W. Allen. Their conclusions that the x-rays were capable of relieving pain in certain pathological conditions, and that probably this was brought about by changes in the character or amount of the blood supply, have since been confirmed.

For over a year, Mr. Dodd had been exposed daily to the x-rays, and in April, 1897, he developed a severe radio-dermatitis of the hands and was admitted to the surgical ward for treatment. This was the first of many operations that he was obliged to undergo as a result of the injuries received in this early experimental work.

In 1900, the x-ray room was moved from the old West Room to the domestic building. Here for the first time lead screens were used to protect the operator from the x-rays.

In 1907, the Department of Roentgenology was established, and Mr. Dodd, having received the degree of

Doctor of Medicine, was appointed Roentgenologist. In 1911, Dr. George W. Holmes was appointed Assistant Roentgenologist.

During the next two years, the members of the x-ray staff, in coöperation with Dr. George C. Shattuck, developed a technique for the study of the heart and great vessels.

For some time Mr. Sewell Cabot had been working on a type of apparatus that would give a non-fluctuating, high potential current, and, with the assistance of Dr. Dodd, he undertook to develop a machine for use in giving x-ray treatment that would allow the operator to measure accurately the dosage. Their efforts met with considerable success.

Using this machine in connection with the clinical work of the department, Dr. Holmes established a method of measuring dosage by computing the electrical energy supplied the tube.

For a number of years considerable instruction had been given in the department both to undergraduate and postgraduate students, and in 1915 it became necessary to organize a definite program of instruction. This program included the appointment of a house pupil, resident in the Hospital, who would devote his entire time to the work in the X-ray Department. The establishment of such a course offered an opportunity for the adequate training of physicians desiring to take up roentgenology as a specialty, and was the first to be offered in any hospital in America. This course has attracted a high type of young men, and the work that they have accomplished since leaving the Hospital has been a credit both to the department and to the institution.

During the summer of 1915, Dr. Dodd was with the first Harvard Medical Unit in France, where he did a large amount of fluoroscopic work in connection with the treatment of the wounded. For this work, he received citation from the British Government. He returned to this country in October of the same year, and shortly afterwards the injuries from which he had suffered so long became rapidly worse, and he died on December 18, 1916.

Dr. Dodd had frequently emphasized the need of an endowment to carry on the research work of the department, and after his death his widow, Mrs. Margaret L. Dodd, placed a small sum of money at the disposal of the hospital for the establishment of such a fund. His friends generously subscribed to this, and the Dr. Walter J. Dodd Memorial Fund was thus established.

In the year 1917, three rooms were added to the X-ray Department in the old Gay Ward building, one of which was properly equipped for therapeutic work; and in May, of this year, rooms for the examination and treatment of private patients were opened in the Phillips House, the private ward of the Hospital.

Dr. George W. Holmes was appointed Roentgenologist to succeed Dr. Dodd, and Dr. Adelbert S. Merrill was appointed Assistant Roentgenologist. Later in that year, Dr. Merrill went to France with the hospital unit, Base Hospital No. 6, where he remained in active service until 1919. Dr. James F. Boyd was appointed Acting Assistant Roentgenologist.

Early in 1919, it was found necessary to reorganize the treatment clinic, so that diseases of the thyroid and skin, the two largest groups of cases, could be handled in special groups with a consultant for each group.

In 1922, the Hospital received a generous gift for the purchase of radium, and it was thought desirable to combine the therapeutic use of x-rays with radium. Following out this idea, the clinics were combined, and a policy of special groups with consultants was adopted.

Early in 1923, a machine producing x-rays of very short wave length was installed, and equipped with a device for measuring accurately the intensity of the rays.

The department now occupies sixteen large rooms. The staff consists of five physicians who give their entire time to its work, and as many more who act as consultants in the treatment clinic. The number of patients examined or treated daily averages seventy-five, making it one of the largest and most active clinics in the Hospital.

George W. Holmes, M.D.,
Roentgenologist.

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the workers, giving generously of their time and wise counsel as well as taking the responsibility for raising funds for the work.

The success of the demonstration and many of the present policies of the Department can be traced back to them, and to the devoted work and the interaction of such personalities as Garnet I. Pelton, Ellen T. Emerson, Gertrude L. Farmer, Edith N. Burleigh and Jessie D. Hodder, all members of the Out-Patient Staff during the early years.

In February, 1909, a committee was organized for the supervision and support of the work. It consisted of physicians from the Staff, the Hospital Superintendent, two expert social workers, a member of the Ladies' Visiting Committee, and a business man. This Committee has been intimately in touch with the Department all through these years.

In 1911, a social worker was assigned to the Children's Clinic. Decentralization was further extended at the request of the physicians to the Orthopedic and Nerve Clinics, 1913, and to the Genito-Urinary Clinic, 1914. The South Medical Clinic for Syphilis was established in 1914, with Miss O. M. Lewis as social worker. Under her direction a consistent follow-up policy was applied to all patients coming to the clinic, thus anticipating by several years a policy later established by the State.

This specialization in medical-social work has the usual weaknesses of specialization, but is, we believe, a phase of development which is yielding a deeper understanding of the social problems in organized medicine.

In 1913, with the encouragement of Dr. Edsall, a social worker was appointed to gather material for the study of occupational diseases. Two years later this was merged into the Industrial Clinic which now is a department of the Harvard Medical School.

Affiliation with the Boston School of Social Work was established in 1910, students from the school having their practice under supervision in the Department. In 1912 a two years' course for medical-social workers was inaugurated.

Historical

In 1913, Dr. Edsall asked the Department to assist in a lecture course on social subjects to medical students. Two years later the plan of instruction was changed to a weekly discussion of the medical-social problems of patients known to the fourth-year medical students during their assignment to the wards.

The Training School for Nurses began in 1913 to assign to the Department, for a period of three months, selected pupil nurses to get an insight into the social aspects of the Hospital.

The Ladies' Visiting Committee has for fifty years ministered in a friendly way to the ward patients, which service the Department has never supplanted. In 1907, however, patients in the Hospital wards were referred by the physicians for such service as involved visits to the homes and arrangements for care in other institutions. The Hospital administration appointed, in 1908, Miss Alice Tippet as the "Executive's Assistant," to give her full time to ward patients. On her resignation, in 1913, the position of Chief of Social Service was created by the Trustees and the Ward and Out-Patient Departments were correlated, the ward service being paid for by the Hospital. Out-Patient social service continued under the direction and support of the Supervisory Committee until October, 1918, when the Trustees made the Department an official part of the Hospital organization and gave the Supervisory Committee the status of an advisory committee. Of the original members of this body, we are fortunate in still retaining Dr. Cabot, Mrs. Nathaniel Thayer, Mr. Jeffrey R. Brackett, Dr. Daniel F. Jones, and Dr. Washburn.

The Department has had, in increasing numbers, visitors and students from other parts of this country and abroad, coming for experience in hospital work which has given us valuable opportunity to aid in the development of the Hospital Social Service movement. From the beginning volunteers have served the Hospital under the direction of our workers. It is impossible to measure the assistance they have rendered in the day's work and their value in interpreting the Hospital to the community.

In the adjustment of the Social Service Department to the Hospital functions and organization there has been a conscious effort to infuse into the Department the ideals and policies of the Hospital and the threefold purpose of care of patients, teaching and research. Several joint studies have been made with physicians of the Staff, the most outstanding of which were the "Economic Efficiency of Epileptic Patients" and a recent investigation of the "Medical-Social Aspects of Cardiac Disease," for which special funds were donated.

While primarily identified with clinical medicine, the Department has been able to assist the Administration and to supplement the Lady Visitors in the ever-present human problems involved in the service of this, as of every other big hospital.

Ida M. Cannon,
Chief of Social Service.

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to consider matters purely surgical. It was further provided that in matters pertaining to a surgical sub-department, such as the Orthopedic Department, its Chief shall be *ex officio* a member of the Surgical Executive Committee. The same rule provides that the Chief of a sub-department of Medicine shall be *ex officio* a member of the Medical Executive Committee. This plan was approved by the Trustees.

The first meeting of the General Executive Committee was held in the old Treadwell Library in the Bulfinch Building, on April 30, 1912. Since that time meetings have been held once a week, with only an occasional meeting omitted. The members of the Committee have undertaken their duties with great earnestness and conscientiousness, and have made it a matter of pride to attend the meetings.

The establishment of the Committee with the Director (Resident Physician) of the Hospital as a member and Secretary has made it possible for the Administration and Staff to work harmoniously for the advancement of the institution in an effective way. It has made for good understanding. The Committee has carefully considered, and on its recommendation the Trustees have adopted, many important undertakings. Among these may be mentioned the establishment of the Department for the care of Syphilis, the Genito-Urinary Department, and the assignment of special subjects, and the allotment of patients in these subjects to certain individuals on the Surgical Staff for more intensive study and research.

Classes have been established in particular diseases and conditions upon the Medical side, such as classes in diabetes, obesity, nephritis, and others. An Industrial Clinic has been established for the care of patients whose diseases are due to industrial conditions and for study and investigation of the subject. Lately a Dietetic Clinic has been formed for the more careful instruction of patients in their diets. This last clinic has been made possible by the North End Diet Kitchen, which provides the funds for the necessary salaries.

After careful study and thought the Committee recommended, and the Trustees approved, the establishment

of full time paid Services in the Departments of Medicine and Surgery. This means that the Chief of the Medical Department and his first Assistant are paid by the Massachusetts General Hospital and the Harvard Medical School to give practically their full time at the Hospital to the care of patients, medical teaching and scientific research. A similar thing has been done on one of the Surgical Services. This has meant a large increase in the amount of laboratory work done at the Hospital, much more time spent upon important problems, and a constant increase to the Hospital's prestige. The Committee nominates for all Staff positions to the Board of Trustees.

THE PHILLIPS HOUSE

THE Phillips House was opened for patients on May 17, 1917. For many years a ward for the private patients of the Staff of the Hospital had been desired by the Staff and discussed by the Trustees and the Administration.

In the Annual Report of Trustees for the year 1910, the following appears under the Report of the Administrator and Resident Physician of the Hospital:

"A private hospital built in close connection with the General Hospital is much to be desired. From the point of view of the community, this is needed because there is now in Boston no place where people of moderate means and the well-to-do can go to a hospital, and pay their doctor and get all the advantages which they could have in a hospital connected with such an institution as ours. We have here the high traditions of a hundred years, well equipped laboratories with their accrued knowledge and recognized standing, the X-ray, Electrical, Hydrotherapeutic and Medico-Mechanical Departments with their skilled and experienced operators. From the point of view of the Hospital, a private hospital would be of value in the training of our nurses, in furnishing us a revenue to help support the charity wards, and in bringing to our doors people of means who, we would hope, would become interested in the work done by the institution. It would concentrate the work of the Staff and enable them to spend more of their time at the Hospital to the advantage of the patients."

Appeals similar to this appear in other Annual Reports of the Hospital. In 1915 the Trustees felt that they could wait no longer for money given for this particular purpose. They were convinced that the enterprise would pay sufficient dividends on the investment to warrant them in using a part of their funds.

The old Wards A and B, built in the early seventies, as temporary wards to stand for a few years only, were torn down in 1915 to make room for the new private ward; and the Gardner Ward, F, was moved to the eastward, raised, and a new Ward A built under it.

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Phillips House, 1917

Historical

The Phillips House is really a private hospital by itself, rather than a ward. It has an entrance separate from that of the General Hospital. It has its own kitchen, dining room, apothecary shop, store, x-ray plant, and operating rooms. The building is of eight stories with a high basement. It is L shaped, with the long wing extending north and south, and thus exposing all the patients' rooms to the east and west. The ward accommodates one hundred and six patients. The rooms are nearly all provided with connecting doors to permit the assigning of small or large suites. There are many bathrooms. There is an attractive roof garden and a balcony on the south end of each floor. The rooms are furnished individually, and the whole aspect of the place is homelike as far as is consistent with the efficiency of a hospital.

This is written in 1923, and at this time, after six years of occupancy, we may fairly say that the Phillips House has accomplished all that the Trustees expected of it. It has fulfilled the need in the community for a high-class hospital in Boston, where people who can afford to pay for it may go and receive the advantages of treatment at an institution where all the appliances and knowledge demanded today by medical science can be found. This can only be in connection with such a hospital as is the Massachusetts General Hospital. It has proved to earn sufficient interest on the investment to justify the Trustees in the expenditure. It has increased the interest in our Hospital among people who have the means to help us in our charity and scientific work. It has concentrated the work of our Staff at the Hospital so as to give us more of their time for the care of our patients who are unable to pay the full cost. It has increased the Hospital's prestige at home and abroad.

The Trustees have accepted the doctrine that the Hospital should be equipped to care for all classes of the community. For one hundred years we have cared for the poor; for six years we have cared for the well-to-do, and we hope that we will soon be in a position to care, on a large scale, for people of moderate means.

THE MEDICAL LABORATORY

The organization of a laboratory for clinical investigation was made possible in the spring of 1917, when the old offices of the Administration on the ground floor of the Bulfinch Building were vacated. The collection of equipment having been started as early as the spring of 1916, reconstruction was immediately begun. In this way six rooms became available, which now constitute a fairly satisfactory laboratory for about twelve workers. Before the organization of this Laboratory clinical research had to be conducted in any corner that the investigator could find.

The old cashier's office has been converted into a very good chemical laboratory, and to it has been added a portion of the hallway opposite. Dr. Howland's old office has become a bacteriological laboratory, and Dr. Washburn's a blood laboratory. The old stenographers' office and the visitors' room are now used for metabolism work. Near by under the west end of the portico is the cardiographic laboratory.

The organization of the Medical Laboratory has been the result of natural growth. It has not yet been recognized as a definite entity, but functions more or less as such, and also in close coöperation with the Medical and Surgical Services and with the special clinics.

The chief idea underlying the establishment of the Medical Laboratory is that it shall be primarily a place for original work in the field of clinical investigation. Routine work is not done there except in the case of certain highly technical tests which cannot be done elsewhere.

In a sense this Laboratory may be said to provide a follow-up clinic for special cases, such as those of diseases of the blood or ductless glands. Any patient who has been studied in the Laboratory during his stay in the Hospital may be asked to return to it from time to time. In such cases careful observations are made of the progress of the disease, and the patient receives advice as to treatment.

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Medical Service, the Surgical Service, the X-ray Department and the Laboratory has been most profitable. It is believed that coöperation of this sort between men interested in a common problem, but from different angles, has been yielding results distinctly promising. At the present time a liaison of this kind is being formed for the study of gastro-intestinal diseases, and should be able to make valuable contributions.

Dr. Fritz Talbot, ever since the Laboratory started, has continued the work on clinical calorimetry of infants which was originally begun in conjunction with Dr. F. G. Benedict. Dr. Talbot has been able to collect important data on the metabolism, not only in normal infants and children, but in certain pathologic states such as malnutrition, cretinism and Mongolian idiocy. Dr. Talbot has had a considerable group of physicians and laboratory assistants associated with him in this work. In conjunction with Dr. Stanley Cobb, he has made a study of the metabolism of epileptic children, both under normal conditions and during starvation.

Dr. Frederick T. Lord for a period of years has carried on an investigation of the behavior of the pneumococcus under different environmental conditions, especially its viability in different culture media, and in the presence of various percentages of blood serum. He is also studying the bacteriology of pneumonia in the wards and supervises the use of pneumococcus serum.

Dr. F. M. Rackemann has made use of the Medical Laboratory in conjunction with his Anaphylaxis Clinic in the Out-Patient Department. Work has been going on actively since the war. In the Laboratory he has done the bacteriological and immunological work necessary for the intensive study of patients with asthma, hay fever, and allied conditions.

A number of other workers have been active for shorter periods of time in the work of the Laboratory. Dr. Reginald Fitz, during the year 1919–20, carried on extensive studies of the blood and urinary chemistry in diabetes and nephritis.

Dr. Basil Jones was in the Laboratory during the year 1920–21 working upon certain problems of hemolysis.

Dr. A. L. Barach of New York, also spending that year with us, carried on active research on certain problems of acid-base equilibrium in pneumonia and other diseases, and upon the therapeutic use of oxygen. He also studied, in conjunction with Dr. William Mason, the effects produced in the blood by the injection of hypertonic saline solutions.

During the year 1922–23, Dr. William G. Lennox, in conjunction with Dr. Stanley Cobb, has made certain studies of the blood chemistry during starvation. Dr. Harold N. Segall of Montreal, holding the Walcott Fellowship, has made careful studies of the metabolic rate of persons with toxic goiter before and after various surgical procedures. In April, 1922, Mr. Gilbert Adair, of the University of Cambridge, England, joined the laboratory force and for a year took an active part in the blood gas work of Drs. Henderson and Bock, and in addition made studies upon the osmotic pressure of hemoglobin solutions.

Altogether the Laboratory has been most fortunate in having a group of workers with a wide variety of interests, working oftentimes in the closest coöperation upon definite programs of study. The Laboratory has made possible a more complete study of the patients in the wards and has contributed toward a better knowledge of the nature of their diseases. A laboratory for clinical investigation really is a necessary adjunct to the medical clinic of any modern teaching hospital. It is hoped that before long more adequate space may be available in which this type of work may be carried on in more convenient surroundings.

J. H. Means, M.D.

Financial

FINANCES OF THE HOSPITAL
1811–1922

To the reader of the early financial struggles of the Hospital one fact stands forth most clearly. The institution does not receive aid from the State today, but the assistance given by the Commonwealth in the early days was vital to the successful outcome of the undertaking.

On February 25, 1811, the State Legislature granted a Charter to the Massachusetts General Hospital, and it at the same time made a grant of the so-called Province House Estate with authority to sell the same and use the proceeds at pleasure provided that within five years $100,000 additional was raised. In 1813 this time was extended five years, and in 1816 authority was finally granted to sell the Province House Estate on condition that the proceeds be paid into the State Treasury unless within one year the additional sum of $100,000 should be obtained.

The subsequent history of the Province House Estate is interesting. On April 1, 1817, the Hospital leased the Estate to David Greenough, Esq., for 99 years, at an annual rental of $2,000 or an outright sum of $33,000, and on October 1, 1824, this latter option was exercised. In 1828 Mr. Greenough tried to buy the reversionary interest, but the Hospital declined to sell.

The heirs of David Greenough continued to hold the property until 1909, when certain clauses in the lease caused the trustees of the Greenough Estate and the Hospital to enter into an agreement whereby in consideration of $25,000 annual rental to the Greenough heirs the Hospital took possession of the property, some seven years before the 99-year term of the lease was up.

This splendid gift from the State, valued in the General Fund at its original value, $40,000, is today assessed

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This Indenture

made and [illegible]
in the Commonwealth of
Massachusetts [illegible]

of Boston in the [illegible]

Witnesseth

That the said Massachusetts General Hospital for and in consideration
the rents herein after reserved, do hereby demise, lease and to farm let unto the said Greenough
heirs Heirs and Assigns, all that certain tract or parcel of land, situate, lying and being in Boston aforesaid and bounded, & fully known by the number [illegible] Province House,
Beginning, Southerly on land of the heirs of Bellows & upon Somerset Place so called thence running
on the land of Brookhouse Field, and the heirs of Bowes Estate [illegible]
All the Estate belonging to the Proprietors of [illegible]
above described [illegible] the said Greenough [illegible]
[illegible] and ended, Holding and paying the same [illegible] unto the said [illegible]
January & April, during the [illegible] next ensuing the date hereof [illegible] from the first [illegible]
Greenough in consideration of the lease & demise aforesaid, doth hereby for himself his heirs, [illegible]
herewith [illegible] That he will pay, or cause to be paid to the said Massachusetts General Hospital or to their treas-
urer Two Hundred Dollars in every year [illegible] February, July, October, January and April, during the continuance
Years aforesaid One thousand, eight hundred and eighteen; and that the said rent shall be paid in Gold
that he will and [illegible] to be erected on the said demised premises, within [illegible] from the date
the said Greenough, but the cost of which, shall amount to the sum of Seven thousand Dollars the Gifts
voluntarily left [illegible] and ascertained by the said Greenough, & all persons claiming under him,
at the end and expiration of the Term aforesaid, and the said Buildings shall at the aforesaid
said Massachusetts General Hospital may be [illegible] to the performance and fulfilment of the
aforesaid, as follows Viz.

First. That the said Greenough shall pay such taxes as shall be [illegible] on the premises during the said term, [illegible]

Second. That in case the said rent aforesaid shall be in arrear and unpaid for the term of [illegible] at any time after the
by these under their Seal, to enter into all and singular the premises above demised, and to put all persons who may be found
General Hospital shall see fit.

Third. That in case the Buildings which may be erected on the premises by the said Greenough, in pursuance of his
said [illegible] months after such award, and after notice shall have been given to him, or them, to make good, by said
Lease herein made, or seek their remedy on the aforesaid covenants at their option or choice.

Fourth. That it shall be lawful for the Massachusetts General Hospital, or any persons by them [illegible]
[illegible] thereof.

Fifth. It shall be lawfull for the said Massachusetts General Hospital, in the course of the year
cause the Buildings thereon to be valued and appraised, and the state and condition of them to be exactly ascertained
shall have a right, if they see fit, to attend the said appraisers, and it is agreed, that in case the Buildings which at
of repairs, the said Massachusetts General Hospital may at any time enter into the demised premises and re-

Sixth. Whenever the said Greenough, or any person or persons claiming by, through or under him, shall [illegible]
rent to the Massachusetts General Hospital [illegible] thirty three thousand three hundred Dollars and in that case
shall in all cases be made in Gold and Silver coins. And it is further agreed, that the said Greenough, and all persons
one time, by paying a capital sum, the interest of which, shall at the [illegible] amount to the rent so proposed to be redeemed
of the demised premises, as the persons paying the said capital sum, and redeeming said rent, shall request and desire, pro-
which the rent so redeemed shall bear to the whole amount of the rent aforesaid. And in order to ascertain such value, three
made from the said rent, and one by the Governor of the Commonwealth for the time being, the report of whom, or any two of them
shall be binding on both parties and the said Massachusetts General Hospital, shall forthwith on the pro-
of the term which may be then unexpired, conformably to the award of said Arbitrators.

In Witness whereof the said Massachusetts General Hospital have caused the Seal of the
to appear above mentioned.

Signed, Sealed and delivered in presence of.

the word "purpose" being first interlined,

Daniel Welle { witness to the signature of David Greenough. }

Stephen Goodman { witness to the signature of Charles Phillips and David Greenough }

Mary Stillman { witness to the signature of }

William Phillips, Pres

Francis Lyman

Henry

Our Lord

Witnesseth

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The two gifts, however, that were most important as affecting the future of the Hospital were the donation of William Phillips and the bequest of John McLean.

In 1797 the Honorable William Phillips bequeathed the sum of $5,000 to the Town of Boston for a Hospital for the Insane. The son of the testator, Lieutenant Governor William Phillips, increased his father's gift, subscribing $20,000 to the foundation, and on April 20, 1817, advised the Trustees of his readiness to pay his subscription as soon as the town would discharge him as executor of his father's will from the $5,000 given thereby. This large donation had a most encouraging effect on the friends of the Hospital; it stimulated others to liberality and practically insured success.

Mr. Phillips was the first President of the Corporation, and mindful of this and his generosity the Trustees most appropriately named the splendid private ward erected in 1916 the Phillips House.

On November 2, 1823, the Trustees received the gratifying announcement of a bequest of $25,000 under the will of John McLean. The Hospital it also developed was the residuary legatee. The residue eventually proved to be over $90,000, the whole gift amounting to $119,858.20.

When the time came to create a fitting memorial to such generosity the Trustees, with the approval of the friends of the testator, voted that the Asylum be hereafter known as "The McLean Asylum for the Insane."

On December 18, 1816, the funds being in sight, the board decided to proceed with negotiation for the purchase of Mr. Joy's land, the site of the McLean Hospital in Somerville. The subscriptions having by January 5 reached the sum of $93,969, authority was given to purchase Mr. Joy's land, not exceeding fifteen acres or to cost over $15,000. On January 12 the committee reported the purchase for $15,650, and the board approved.

A committee was now appointed to select a site for a General Hospital, and after examining several locations, reported in favor of North Allen Street.

Each trustee approved the site, and after various delays the committee reported in October, 1817, "The

Allen Street" purchase as substantially completed. During these negotiations Charles Bulfinch had prepared plans for both the Asylum and the General Hospital. Evidently of the opinion that competition might produce something better, in November the committee reported the draft of an advertisement offering $100 reward for a plan of a hospital.

The competition brought out several plans, but in January, 1817, the plan for a hospital by Mr. Bulfinch was adopted, and immediately steps were taken to proceed with the building. On July 4, 1818, the corner stone of the General Hospital was laid in Masonic form by the Grand Lodge of Massachusetts. The ceremony was attended by his Excellency the Governor, the Lieutenant General, the Honorable Council, many charitable societies, the Selectmen and Board of Health of the town of Boston, the members of the Corporation of the Massachusetts General Hospital, and a great concourse of citizens. The exercises were followed by an address by Mr. Quincy, and the ceremony concluded by remarks by Mr. Prince, the Treasurer.

His Excellency and other invited guests then proceeded to Mr. Prince's house and partook of a collation. Those who could not get into the house were accommodated in the garden.

On September 1, 1821, the Bulfinch Building was so far completed that the Hospital was ready to receive patients.

Both the Asylum and the General Hospital were now organized and in active operation, and the Trustees issued a report addressed "To the Subscribers and to the Public." This report is one of the most interesting that the Trustees have ever issued and in form is very similar to the reports issued today (with the donations omitted).

The Medical report is signed by Dr. James Jackson, the Surgical by Dr. J. C. Warren, and the Asylum report by Dr. Rufus Wyman.

The Treasurer's report, which is here reproduced, gives a vivid sense of the financial difficulties under which the Hospital labored.

APPENDIX.....No. 1.

THE following statement of the pecuniary concerns of the Massachusetts General Hospital, from the commencement to the present period, is respectfully submitted to the Trustees.

Donations to the Institution have been received under three distinctions, and great care has been taken in the Treasury Books to keep each class distinct so as to meet the intentions of the benefactors.

One portion of them was bestowed subject to the disposition of the Trustees.....viz.

The Province House and Lands, valued at - - - -	$40,000 00	
A House and Land in Boylston Street, valued at - - -	6,900 00	
Six shares in the Warren Turnpike, which at the time were valued at $900, but are not now worth more than - - -	200 00	
One share in the Union, valued at - - - - -	200 00	
Donations in money, amounting to - - - - - -	28,199 87	.....74,599 87

Another portion was appropriated exclusively for the use and benefit of the Massachusetts General Hospital.....viz.

Donations in money, amounting to - - - - - -		73,809 29

The other portion was bestowed for the use of the Asylum for the Insane.....viz.

Donations in money, amounting to - - - - - -		53,997 47
Whole amount - - - - - -		$202,406 63

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It will be perceived that the annual income of the property of the Corporation, after deducting interest on money borrowed, is not sufficient to pay the salaries of the Superintendants.

NATH'L P. RUSSELL, *Treasurer.*

BOSTON, MARCH 14, 1832.

APPENDIX.....No. 2.

STATEMENT of the annual expenditure at the Hospital:

Superintendant,	$500 00
Wages,	616 0
Furniture,	240 00
Stores,	1,560 00
Stationary,	60 00
Fuel,	560 0
Contingencies,	150 00
	$3,686 00
Credit.....By Board,	1,850 00
	$1,836 00

$1,836.....The whole present expense of the Hospital.

N. B.....As the Hospital has been in operation only since the first day of last September, this statement is made in some degree by approximation. It is evident that in proportion as the boarders increase, the expenses of each will be diminished.

Statement of Receipts and Expenditures of the Asylum for the Insane, from the opening of the Institution in September 1818 to the first day of January 1822.

ASYLUM FOR THE INSANE.

Dr.				*Cr.*			
1818. Sept. 30,	To Expenses before opening the Asylum,	$153	73	1821. Dec. 31,	By Boarder, over-paid,	00	50
1821. Dec. 31,	" Contingencies,	531	24	"	" Cash of Treas.	4,257	14
"	" Fuel (4 years,)	1,591	39			$4,257	64
"	" Stationary,	218	20	"	" Farm,	494	66
"	" Stores,	6,864	17	"	" Board,	14,314	78
"	" Wages,	3,330	28	"	" Funerals,	17	00
"	" Medicines,*	97	91				
"	" Furniture,	1,672	42				
"	" Clothing,	67	43				
"	" Finishing and Improving Bldgs, &c.	3,339	92				
"	" Balance,	1,217	39				
		$19,084	08			$19,084	08
				1822. Jan. 1.	Balance,	$1,217	39

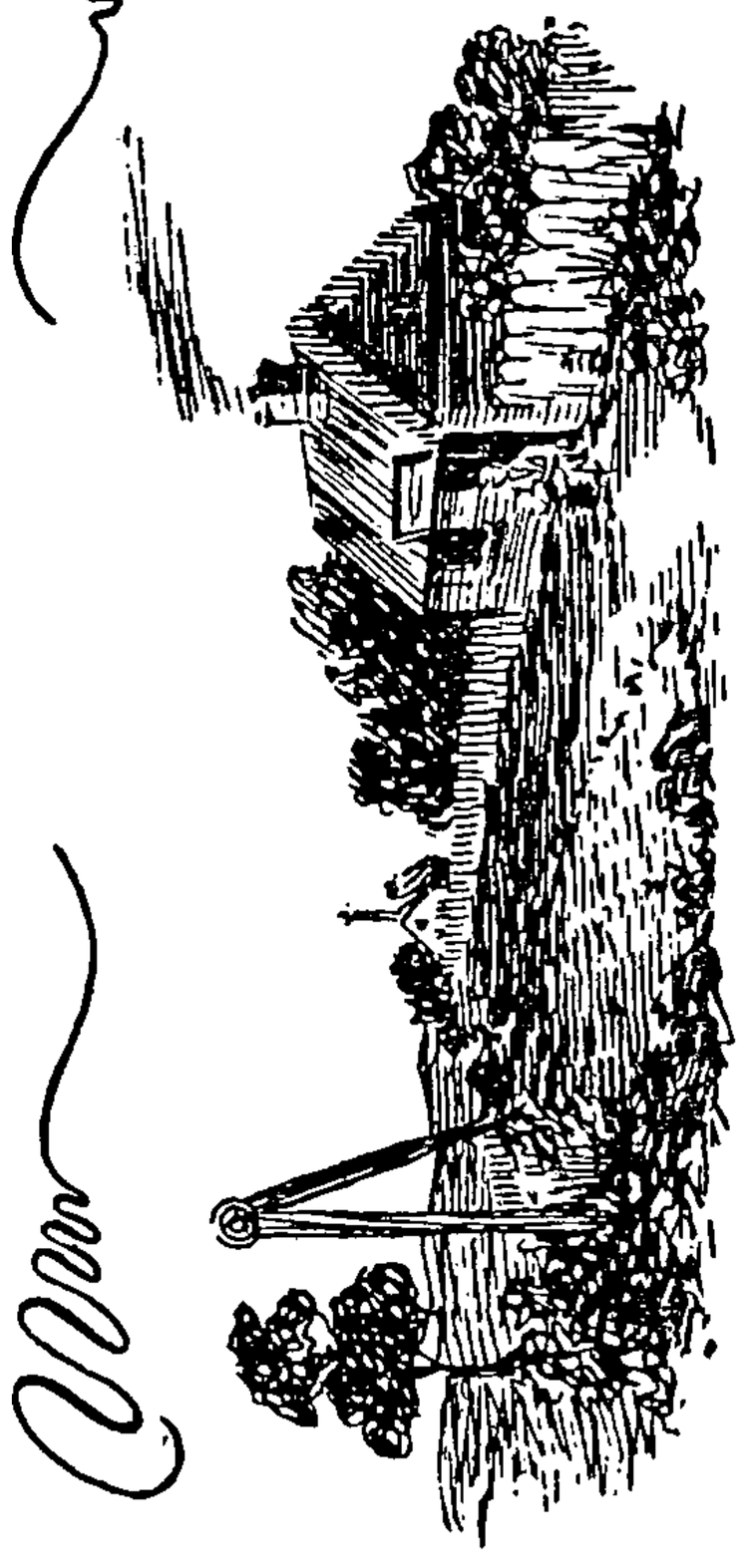
* Medicines are debtor to two donations.....viz.

Medicine and Instruments,	$100
Cabinet for do.	200 00
	$315 00

N. B.....To the expenditures should be added the Salary of the Superintendant at the rate of $1,500 a year.

Incorporated March 7, 1806.

Worcester Turnpike Corporation,



This Certifies, that the Mass.tts General Hospital of Boston in the County of Suffolk is Proprietor of Six shares viz numbers 297 298 299 300 301 and 302 in the WORCESTER TURNPIKE CORPORATION.

Boston, Dec.r 7 1814

Wm. Ziegler Clerk — Thomas West Pres.

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General Hospital in 1910 were $380,146.28 and $173,457.37 receipts. At the McLean Hospital expenses were $334,110.55, receipts $320,072.93, a total expenditure of $714,256.83. In 1922 the total expenses of the General Hospital and the Asylum were $1,894,000.30 and the receipts $1,473,064. The war had come and passed with its legacy of high costs. Phillips House and the new Administration Building were completed and in operation, a notable advance, but these additions to the activities of the Hospital will not under normal conditions account for such heavy increase in expenditure, and some other measure for the growth of the institution must be found. That portion of this history dealing with what we may call the professional activities of the Hospital will furnish a fairer measure.

During the period just reviewed, 1811 to 1922, gifts to the Hospital have reached $11,287,429; profits on investments and accumulated restricted income have increased this to $14,292,499.39; $5,542,452.43 has been expended in Hospital buildings, $3,266,481.87 to make up operating deficits, etc. The balance, $5,483,565.09, represents the income producing investments of the Hospital. Today these investments cover funds the greater part of which are restricted as to principal and income to certain specified Hospital purposes.

The names of the benefactors of the Hospital form an impressive list. The humblest and those most honored in the community over a period of one hundred and twelve years are there with gifts ranging from eight cents to over eight hundred thousand dollars. Exceeding, however, the gift of any individual is that of the generous host of Annual Free Bed Subscribers, who have, since 1825, when the Trustees voted to place a Free Bed for one year at the disposal of anyone who should donate $100, given the Hospital over nine hundred thousand dollars, thirty-six thousand dollars having been given in a single year.

PERMANENT FUNDS

FREE BED FUND

INCOME FOR FREE BEDS

1825	The Davis Fund, a bequest from Mrs. Eleanor Davis		$900.00
1827	William Phillips Fund, a bequest from William Phillips		5,000.00
1830	Belknap Fund, a bequest from Jeremiah Belknap		10,000.00
1841	Brimmer Fund, a bequest from Miss Mary Ann Brimmer		5,000.00
1842	Tucker Fund, a bequest from Miss Margaret Tucker		3,312.37
1849	Williams Fund, a bequest from John D. Williams, of Estate No. 17 Blackstone Street		19,600.00
	Nichols Fund, a bequest from B. R. Nichols		6,000.00
1850	Todd Fund, a bequest from Henry Todd		5,000.00
1851	Wilder Fund, a bequest from Chas. W. Wilder	$12,000.00	
1912	and a bequest from Florence Elizabeth Wilder, his grandaughter	1,000.00	13,000.00
1856	Bromfield Fund, half of a bequest from John Bromfield		20,000.00
	Wm. Reed Fund, a bequest from Wm. Reed		5,233.92
1857	Treadwell Fund, part of a bequest from J. G. Treadwell	$38,703.91	
1922	Additional	6,000.00	44,703.91
1858	Dowse Fund, a bequest from Thomas Dowse		5,000.00
1858–1897	Sawyer Fund, part of a bequest from M. P. Sawyer		76,966.19
1859	Thompson Fund, a bequest from S. B. Thompson		500.00
1860	J. Phillips Fund, a bequest from Jonathan Phillips		10,000.00
1862	Miss Townsend Fund, a donation from the executors of the will of Miss Mary P. Townsend		11,486.50
1863	Pickens Fund, a bequest from John Pickens		1,676.75
	Percival Fund, a bequest from John Percival		950.00
1864	Greene Fund, a bequest from Benj. D. Greene		5,000.00
1865	Sever Fund, a bequest from Miss Martha Sever		500.00
	Raymond Fund, a bequest from E. A. Raymond		2,820.00
1868	Harris Fund, part of a bequest from Charles Harris		1,000.00
	Mason Fund, a bequest from Wm. P. Mason		9,400.00
	Loring Fund, a bequest from Abigail Loring		5,000.00
1868–1875	Miss Shaw Fund, a donation and bequest from Miss M. Louisa Shaw		5,500.00
	Carried forward		$273,549.64

Permanent Funds

	Brought forward	$273,549.64
1871	The J. L. Gardner Fund, a donation from J. L. Gardner	20,000.00
	B. T. Reed Fund, a donation from Benj. T. Reed	1,000.00
	Read Fund, half of a bequest from James Read	1,000.00
1872–1877	McGregor Fund, half of a donation and bequest from James McGregor	7,500.00
	Joy Fund, a bequest from Miss Nabby Joy .	20,000.00
1873	Parker Fund, a bequest from Jonathan Parker, Jr.	10,000.00
1874	Templeton Fund, half of a bequest from John Templeton	5,000.00
	Miss Rice Fund, a bequest from Miss Arabella Rice	5,000.00
	Mrs. J. H. Rogers Fund, a donation from J. H. Rogers	1,177.50
1876	Beebe Fund, a bequest from J. M. Beebe . .	50,000.00
	Lincoln Fund, half of a bequest from Mrs. F. W. Lincoln	85,000.00
1877	Blanchard Fund, a bequest from Mrs. M. B. Blanchard	4,000.00
	George Gardner Fund, a donation of $1,000 from George Gardner, and $11,000 from Shepherd Brooks	12,000.00
	Hemenway Fund, a donation from the executors of the will of Augustus Hemenway .	20,000.00
	Jessup Fund, part of a bequest from Dr. Chas. A. Jessup	1,000.00
	Tufts Fund, a bequest from Quincy Tufts . .	10,000.00
1878	Eliza Perkins Fund, a donation from Mrs. H. B. Rogers	1,000.00
	Dwight Fund, a donation from Mrs. T. Bradford Dwight	1,000.00
1879	Hunnewell Fund, a donation from H. H. Hunnewell	10,000.00
	R. M. Mason Fund, a bequest from R. M. Mason	5,000.00
	Hannah Lowell Cabot Fund, a donation from Dr. Samuel Cabot	1,000.00
	The Gray Fund, a donation from John C. Gray	1,000.00
1881	Welles Fund, a donation from Miss Jane Welles	5,000.00
1882	Black Fund, a bequest from Miss Marianna Black	2,000.00
	Eben Wright Fund, an assignment of legacies by the children of T. Jefferson Coolidge . .	14,000.00
1883	Paraclete Holmes Fund, a donation from W. S. Adams	2,000.00
	Estabrooks Fund, a bequest from J. W. Estabrooks	1,000.00
	Thayer Fund, a bequest from Nathaniel Thayer	30,000.00
1884	John Bertram Fund, a donation from Mrs. Clara Bertram Kimball	5,000.00
	D. R. Whitney Fund, a donation of D. R. Whitney	1,000.00
	Carried forward	$605,227.14

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Permanent Funds

	Brought forward	$744,362.46
1893	The Elizabeth W. Gay Fund, a bequest of Elizabeth W. Gay	7,931.19
1894	Lawrence Fund, a bequest of Abbott Lawrence	10,000.00
	Isaac Sweetser Fund, a bequest of Mrs. Anne M. Sweetser	46,913.14
1895	Burnham Fund, a bequest of T. O. H. P. Burnham	250,000.00
	Moseley Fund, a bequest of Wm. O. Moseley	20,000.00
	Snow Fund, a bequest of Sophia J. Snow . .	5,000.00
1896	Glover Fund, a bequest of Albert Glover . .	5,000.00
	R. W. Turner Fund, a bequest of Royal W. Turner	21,086.48
	Coolidge Fund, a bequest of Susan G. Coolidge	176,000.00
	Vose Fund, half of a bequest of Ann White Vose	38,983.09
	Cheney Fund, a bequest of B. P. Cheney . .	10,000.00
	Mary B. Turner Fund, a bequest of Mary B. Turner	5,000.00
	Theodore Chase Fund, a donation of Alice Bowdoin Chase	5,000.00
1896	Henry E. Moody Fund, a bequest of Jane C. Moody	2,091.42
1897	Benj. Jos. Gilbert Fund, a donation of Mrs. Susan B. Richards	5,000.00
	Harriet T. Andrew Fund, a bequest of Harriet T. Andrew	5,000.00
	Wm. Hilton Fund, a bequest of Wm. Hilton .	22,553.66
	Cornelia V. R. Thayer Fund, a bequest of Mrs. C. V. R. Thayer	25,000.00
	Chas. Paine Cheney Fund, a donation of Mrs. B. P. Cheney	5,000.00
	Chas. B. Porter Fund, a bequest of W. L. Chase	5,000.00
1898	Henry L. Pierce Fund, part of a bequest of Henry L. Pierce	50,000.00
	Brown Fund, a bequest of Harriet Louisa Brown	5,000.00
1899	Luther Farnum Fund, a bequest of Luther Farnum	2,637.37
	J. Huntington Wolcott Fund, a bequest of Mrs. J. Huntington Wolcott	25,000.00
	Geo. A. Newell Fund, a bequest of Geo. A. Newell	5,000.00
	Ira C. Calef Fund, a donation of Ira C. Calef	5,000.00
1900	J. Collins Warren Fund, a bequest of Anna S. C. Blake	10,000.00
1901	Henry Saltonstall Fund, a bequest of Henry Saltonstall	10,000.00
	Conrad Mohr Fund, a bequest of Conrad Mohr	41,384.18
	Sarah H. A. Burnham Fund, a donation of Mrs. Sarah B. Whittemore and Mrs. Theresa B. Dodge	5,000.00
	Chas. L. Young Fund, a bequest of Chas. L. Young	5,000.00
	Carried forward	$1,578,942.99

Permanent Funds

	Brought forward	$1,578,942.99
1902	The Henry Woods Fund, a bequest of Henry Woods	5,000.00
	Henry Whitman Fund, a bequest of Henry Whitman	10,000.00
	Jos. B. Glover Fund, a bequest of Jos. B. Glover	5,000.00
	Stuart Wadsworth Wheeler Fund, a donation of Susan Farnum Wheeler	1,000.00
	Wm. Whitworth Gannett Fund, a donation of Wm. Whitworth Gannett	1,000.00
1903	Fred'k L. Ames Fund, a bequest of Mrs. Fred'k L. Ames	5,000.00
	John Ruggles Fund, a bequest of Mrs. Mary L. Ruggles	10,000.00
	Robert Chas. Billings Fund, a donation of Thomas Minns,surviving executor under the will of Robert Chas. Billings	5,000.00
	J. Sullivan Warren Fund, legacy of Elizabeth T. L. Warren	62,350.00
1904	Chas. H. Hayden Fund, part of a bequest of Chas. H. Hayden	5,000.00
1904–1915	Harriet O. Cruft Fund, a donation and bequest of Miss Harriet O. Cruft	33,000.00
1904	Shepard Norwell Fund, a donation of John Shepard	5,000.00
1905	Henry C. Weston Fund, a donation of Mrs. Evelyn O. Weston	5,000.00
	Geo. B. Upton Fund, a bequest of Geo. B. Upton	5,000.00
	Hannah Smith-Lexington Fund, a bequest of George O. Smith	5,000.00
1906	Coburn Fund, a bequest of Mrs. Helen G. Coburn	75,000.00
	Nurses' Training School, Free Bed Fund . .	5,000.00
1907	Charles Merriam Fund, a bequest of Charles Merriam	5,000.00
1908	Moses Williams Fund, a donation of Laura L. Case	5,000.00
	Smith Gerrish and Sarah A. Gerrish Fund, a bequest of Edward Gerrish	8,000.00
	Harriet O. Cruft Fund, a donation of Miss Harriet O. Cruft, as a Children's Fund . .	5,000.00
1908–1919	W. Scott Fitz Fund, a donation of Mrs. W. Scott Fitz	15,000.00
1910–1914	Florence Lyman Fund, a bequest of Florence Lyman	3,891.41
1910	Eugene V. R. Thayer Fund, a bequest in memory of Eugene V. R. Thayer	5,000.00
	Lucius Clapp Fund, a bequest of Lucius Clapp	5,000.00
	Thomas Niles Fund,a bequest of Thomas Niles	29,281.67
	William Litchfield Fund, a bequest of William Litchfield	5,000.00
	Charles H. Draper Fund, a bequest of Charles H. Draper	23,934.13
1911	James Rogers Rich Fund, a bequest of James Rogers Rich	1,000.00
	Carried forward	$1,932,400.20

Permanent Funds

	Brought forward	$1,932,400.20
1911	The Mrs. Bennett H. Nash Fund, a donation of Mrs. Bennett H. Nash	5,000.00
1911–1919	Frances Fay and Arthur Kelsey Fay Memorial Fund, a donation of James H. Fay	25,000.00
1911	Catherine A. Barstow Fund, a bequest of Catherine A. Barstow	10,000.00
	Mary E. Badger Fund, a bequest of Mary E. Badger	2,000.00
	Thomas Talbot Fund, a bequest of Isabella W. Talbot	5,000.00
1912	Matchett Fund, a bequest of Mrs. Sarah A. Matchett	25,000.00
	Waite Memorial Bed, a bequest of Harriet E. Goodnow	5,091.67
	Caroline M. Martin Fund, a bequest of Caroline M. Martin	5,094.94
1913	John S. Ames Fund, a donation of John S. Ames	5,000.00
	Mary Stickney Fund, a bequest of Mary Spaulding	5,000.00
	George N. Smalley Fund, a bequest of George N. Smalley	5,000.00
1914–1915	William S. Hills Fund, a bequest of William S. Hills	10,000.00
1914–1917	Dr. John M. Harlow Fund, a bequest of Dr. John M. Harlow of $31,125.47 and of Frances K. Harlow of $13,339.48	44,464.95
1915	Esther Storey Fund, a bequest of Joseph C. Storey	5,000.00
	Jane Elkins Fund, a bequest of Joseph C. Storey	5,000.00
	William N. Felton Fund, a bequest of William N. Felton	5,000.00
	Jennie A. Pond Fund, a donation of H. D. Woods	5,250.00
	Susan Welles Sturgis Fund, a bequest of John Aiken Preston	5,000.00
1916	Isabella Freeman Dillingham Bed, a bequest of Isabella W. Dillingham	5,314.44
	William Endicott Fund, a bequest of William Endicott, $25,000, and an Anonymous donation of $25,000	50,000.00
1917	Sylvester Bowman Fund, a bequest of Sylvester Bowman	50,900.00
	Ellen Channing Fund, a bequest of Ellen Channing	5,000.00
	Mrs. Henry S. Grew Fund, a donation of Mrs. Henry S. Grew	5,000.00
	Timothy Paige Fund, a donation of Timothy Paige	4,000.00
1918	Henry Lee Higginson Fund, given by his partners	4,250.00
	Mary T. Appleton Fund, bequest of Mary T. Appleton	1,000.00
	Moses Wildes Fund, bequest of Moses Wildes	20,104.16
	Carried forward	$2,254,870.36

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Permanent Funds

	Brought forward		$2,408,830.64
1921	Carmela Belmonte	$10.00	
	Enrico Balboni	10.00	
	Frederick Balboni	10.00	
	E. C. Bowen, M.D.	5.00	
	L. A. Brignati	5.00	
	Mrs. Maude E. Besse	200.00	
	Charles Bonnano Company	25.00	
	Biggi & Cassassa	25.00	
	I Bergo	10.00	
	Michele Bellucci	10.00	
	R. Bernardi	2.00	
	Charles Britt	1.00	
	A. Balboni	50.00	
	A. A. and J. A. Badaracco	50.00	
	Joseph M. Bailen	10.00	
	Joseph Bruno	10.00	
	Dr. T. Bello	5.00	
	Stephen Bacigalupo	5.00	
1920	D. A. Costa	100.00	
	Lawrence Caffarella	50.00	
	Nathaniel M. Cohen	100.00	
	S. Caruso	10.00	
	J. J. Calabro, D.M D.	10.00	
1921	J. E. Chiesa	20.00	
	Francis M. Ciccone	10.00	
	Isidoro Carcioffo	10.00	
	Ralph Cangiano	10.00	
	Ettore Ciampolini, M D.	10.00	
	Charles Cuneo	100.00	
	C. Carbone	25.00	
	M. Capidalupe	25.00	
	Rev. Father Victor Cangiano	25.00	
	Anna Carletti	25.00	
	Michele Cangiano	25.00	
	Emilio Carlson	10.00	
	Automa Cavicchi	10.00	
	Dora B. Cassini	10.00	
	J. A Christoforo	5.00	
	Angelo Casteldini	10.00	
	L. J. Costa	10.00	
	Caldarone & Grillo	5.00	
	Vladimiro Ciani	5.00	
1920	Cav. Domenick D'Allesandro	100.00	
	Agostino DeFerrari	100.00	
	Andrea DiPietro	100.00	
	Luigi DeVincentis	100.00	
	Errico Delladonne	25.00	
	Fred Drew, M D.	50.00	
	M. DeFelice, D M.D.	25.00	
	Vincent J. DiMento, M.D.	25.00	
	A. De Robertis, M.D.	15.00	
	C. De Simone	15.00	
1921	G. B DeFerrari Family	100.00	
	Primo Diozzi	25.00	
	Rev. Father P. DiMilla	25.00	
	Agostino DiStefano	10.00	
	Leonardo DeMurra	10.00	
	Martin Devizia	10.00	
	Agostino DeGuglielmo	5.00	
	Alfred DeVoto	25.00	
	Victorio DeAgostini	20.00	
	Renita C. Davenport	10.00	
	Fedele DelBene	5.00	
	Santo DiGregorio	5.00	
	Oliver B. DeCecca	5.00	
1920	Eliot, Marchetti & Agostini	5.00	
	Albert B. Fopiano contributed	100.00	
	Albert B. Fopiano collected	150.00	
	Franciscan Fathers	200.00	
	Massimiliano Francesconi	100.00	
	G. Ferullo	10.00	
	Paulina Ferri	10.00	
	Frank Fralli	10.00	
	Farmacia Cento Citta	10.00	
1921	James Famingo	10.00	
	Carried forward		$2,408,830.64

Permanent Funds

	Brought forward		$2,408,830.64
1921	Allen R. Fredericks	$50.00	
	A. A. Frederick	25.00	
	Figli DelLavoro e Lega Protettiva . . .	25.00	
	Felix Forte	10.00	
	C. D. Funai	10.00	
1920	Pasquale Gallassi	60.00	
	Alfons Gaeta	25.00	
	Green Star Pharmacy	25.00	
	Cesido Guerini, M.D.	10.00	
	Frank Guinasso	10.00	
	Ralph D. Guarente	10.00	
1921	G. Gubitosi	25.00	
	Luigi D. Gardella	10.00	
	Andrea J. Granara	10.00	
	Anthony J. Granara	10.00	
	Vincent Garro	15.00	
	Guistina Gregori	10.00	
	John J. Gill	5.00	
	C. G. Galbo	25.00	
	Arthur Gaetani	5.00	
	Cesare Govani	10.00	
1920	Michael J. Harty	25.00	
1921	International Hod Carriers Building and Common Laborers Union of American Local No. 209	200.00	
	Angelo Jannini	50.00	
1920	J. E. Locatelli	100.00	
	Amelia LoPresti	25.00	
	Albert Lombardi	25.00	
	Robert La Centra	25.00	
	Angelo Liberti, M.D.	15.00	
	Louise Leverone, M.D.	10.00	
	Prof. Georgio LaPiana	10.00	
	John Luciano	5.00	
1920–1921	Rev. Father F. Liberti	15.00	
1921	Frank Lentini, D.M.D.	25.00	
	Antonio N. Lawrence	25.00	
	Lugurian Mutual Benefit Society . . .	50.00	
	Leo Lodi	10.00	
	Joseph A. Langone	5.00	
	Charles Lanzagand Agents, Metropolitan Life Insurance Co.	40.00	
	Gerard LaCentra	25.00	
	Albert Levis	15.00	
	Louis LoConte	11.00	
	F. M. Leonardi, D.M.D.	10.00	
	Felice Lauricella	10.00	
	Michael Langone	2.00	
1920	Paul Mondello	25.00	
	P. Mysel, M.D.	25.00	
	Emmanuel Macaluso	25.00	
	N. Maggioli	25.00	
	A. Macaluso	20.00	
	James T. Maguire	20.00	
	Nino B. Moro	10.00	
	A. Marchetti	5.00	
1921	Nathaniel R. Mason, M.D.	50.00	
	Robert C. Martini	25.00	
	Pantaleone Mercurio	25.00	
	Enrico Moro	25.00	
	Felix A. Marcella	25.00	
	Joseph Malatesta	25.00	
	Zaccharo A. Mollica, M.D.	10.00	
	Antonio Marciello	10.00	
	John G. Membrino	10.00	
	C. W. Miller, D.M.D.	5.00	
	Rev. P. Maschi	50.00	
	F. Malatesta	25.00	
	Benilda Malaguti	25.00	
	Francesco Moglia	10.00	
	Dr. Marco Mastrangelo	5.00	
	Pietro Mongrandi	5.00	
1920	George Mongavero	50.00	
	Antonio Musolino	100.00	
	Thomas Nutile	100.00	
	Carried forward		$2,408,830.64

Permanent Funds

	Brought forward		$2,408,830.64
1920	Michele Nigro	$100.00	
	Joseph Nutile	25.00	
1921	Napoli Restaurant	25.00	
	Cesare Notini	10.00	
	Northern Fruit Company	40.00	
	Vittorio Orlandini	25.00	
1920	Michael J. Porcella	100.00	
1920–1921	Charles A. Pastene	300.00	
1920	Prince Macaroni Company	100.00	
	Pistorino & Yunes	50.00	
	Dr. Vincent J. Pollina	25.00	
	Leopoldo Pastorelli	50.00	
	Gaetano Praino	33.33	
	Rev. N. Properzi	30.00	
	L. Pennini	25.00	
	D. Petrini	15.00	
	C. Pizzi	10.00	
1921	Gino L. Perera	50.00	
	Joseph L. Porcella	10.00	
	Jerome J. Pastene	10.00	
	Catherine Peseia	25.00	
	Rev. Father Pietro Piemonte	25.00	
	Mrs. Benjamin Piscopo	25.00	
	John Piscopo	25.00	
	Felicita and Teresa Pellegrim	15.00	
1920	Romano & Saporito	25.00	
	David A. Rosen, M.D.	50.00	
	Rev. Father Ernest Rovai	25.00	
	Thomas Russo	25.00	
	Umberto Re	25.00	
1921	Giovanni Razetto	5.00	
	Abramo Re	25.00	
	Jerome Russo	25.00	
	Dr. W. H. Regan	25.00	
	Adolorata Russo	25.00	
	Frank Ratto	10.00	
1920	Alfred Scaramelli	100.00	
	Joseph Santosuosso	100.00	
	Gabriele Stable	100.00	
	St. Charles Borromeo Fathers	100.00	
	Frederick Solari	30.00	
	Arthur L. Shain, M.D.	50.00	
	Joseph St. Angelo, M.D.	25.00	
	L. F. Salerno, M.D.	25.00	
	R. Simpson	25.00	
	S. Sodekson	5.00	
1921	Societa Italiana Colombo	50.00	
	Societa Maria Santissima Lettera di Messina	25.00	
	Societa San Collogero	25.00	
	Societa Cittadini Pietraperzia	50.00	
	Frank Squillaciotti	15.00	
	Savoy Importing Company	10.00	
	Vincent Savarese	10.00	
1920	Harry Z. Tosi	100.00	
	Rev. L. Toma	30.00	
	Vincent Tassinari	25.00	
	L. Torielli	10.00	
	C. Torielli	5.67	
1921	Michael A. Tricano	25.00	
	Samuel J. Tomasello	25.00	
	Joseph A. Tomasello	25.00	
	Marie Tassinari	25.00	
	William Roscoe Thayer	10.00	
	Augusta Thompson	10.00	
	Uphams Corner Market	100.00	
1920	Vesuvius Pharmacy	10.00	
1921	Feliz Viano	50.00	
	Anthony Viano	50.00	
	J. J. Viano	50.00	
	F. E. Viano	50.00	
	Augusto Vannini	10.00	
1920	Woodbury Drug Company	25.00	
1921	Chandler M. Wood	25.00	
1920	Joseph Zottoli	100.00	
	Carried forward		$2,408,830.64

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Permanent Funds

	Brought forward			$2,408,830.64
1921	Effenson Bros.	$10.00		
	E. J. Zorzy	10.00		
	Boggiano Bros.	10.00		
	A. Damori	10 00		
	A. Silverman & Son	10 00		
	B. Durso	10 00		
	G. Voci	10.00		
	Caruso Bros.	10 00		
	F. Puccia	10 00		
	J. Managlia	10 00		
	A. Minstretta	10 00		
	Sawtelle & Pratt	10.00		
	S. Golub	10 00		
	Mrs. Orsi	10 00		
	Mrs. Bonardi	10.00		
	A. C. Fisher & Co. Inc.	10 00		
	G. Giovino	15 00		
	G. Goldman	10 00		
	A. Marchetti	10 00		
	G. B. Houghton & Co.	10 00		
	Mrs. Thomas Nutile	25.00		
	Mrs. G. M. Balboni	25 00		
	P. Herschkovitz	10 00		
	Commercial Fruit Co.	10 00		
	A. Papouleas	10 00		
	Pascal Cohen	10 00		
	J. Simes	10 00		
	Antonio Frene	10 00		
	L. Ginsberg	10 00		
	Silver Bros.	10 00		
	Sparta Fruit Co.	10 00		
	J. Hunt	10 00		
	S. Arria	10 00		
	P. Puccia	10.00		
	S. Russo	10 00		
	Miss Mary Tassinari	10.00		
	Winsor Gleason	10 00		
1921	Hecht Free Bed Fund, bequest of Mrs. Lina Frank Hecht			5,000.00
	George B. Upton Fund, bequest of George B. Upton, in memory of his father			5,000.00
	Katherine E. Bullard Fund, bequest of Miss Katherine E. Bullard			2,500.00
1922	Emily R. M. Strauss Fund, bequest of Mrs. Emily R. M. Strauss			5,000.00
	Rev. Reuben Kidner Fund, donations of friends in memory of Rev. Reuben Kidner			10,000.00
	Francis C. Lowell Free Bed Fund, in memoriam, bequest of Mrs. Cornelia Prime Lowell			10,000.00
	Charles and Helen L. Walker Fund, bequest of Miss Leslie W. Walker			80,000.00
	Abigail and Samuel T. Armstrong Fund, bequest of Miss Leslie W. Walker			10,000.00

INCOME UNRESTRICTED FUND

1845	The Waldo Fund, bequest of Daniel Waldo		$40,000.00	
	Dr. J. H. Whittemore Memorial Fund:			
	William S. Bullard . .	$500.00		
	Peter C. Brooks . . .	200.00		
	Martin Brimmer . .	300.00		
	Arthur T. Lyman . .	250.00		
	Carried forward . . .	$1,250.00	$40,000.00	$2,536,330.64

Permanent Funds

	Brought forward . . .	$1,250.00	$40,000.00	$2,536,330.64
1845	Geo. P. Metcalf	100.00		
	Benton, Caverly & Co. . .	100.00		
	B. Johnson	100.00		
	A Friend	1,000.00		
	David P. Kimball	500.00		
	T. Jefferson Coolidge . .	500.00		
	James L. Little	100.00		
	Caroline G. Curtis	100.00		
	Theodore Lyman	100.00		
	E. F. Mason	100.00		
	T. K. Lothrop	500.00		
	C. J. Morrill	1,000.00		
	George Higginson	5,000.00		
	Edmund Dwight	1,000.00		
	S. D. Warren	1,000.00		
	Mrs. J. E. Lodge . . .	100.00		
	Dr. Charles V. Bemis . .	50.00		
	George S. Hale	50.00		
	Miss Anne Wigglesworth .	500.00		
	H. H. Hunnewell	1,500.00		
	J. A. Emmons	500.00		
	Mrs. Gardner Brewer . .	100.00		
	Miss C. A. Brewer	20.00		
	Mrs. E. B. Bowditch . . .	500.00		
	Sands, Furber & Co. . . .	100.00		
	J. B. Fletcher	100.00		
	Shattuck & Jones	100.00		
	D. R. Whitney	100.00		
	Nathan Robbins	100.00		
	William Perkins	100.00		
	Chas. P. Curtis	100.00		
	Otis E. Weld	500.00		
	Ida M. Mason	100.00		
	George B. Brown	50.00		
	A Friend	50.00		
1886	A Friend, through Mr. Endicott	100.00		
	John L. Bremer	500.00		
	Miss Anna Hallowell .	100.00		
	N. P. Hallowell	100.00		
	G. W. Wells	100.00		
	A Lady, through Mr. Dalton	50.00		
	Franklin Haven, Jr. . . .	100.00		
	Charles Merriam	100.00		
	Edward Austin	300.00		
	C. H. Dalton	300.00		
	Mrs. C. H. Dalton	50.00		
	Augustus Lowell	250.00		
	Henry Saltonstall	200 00		
	Mrs. G. H. Shaw	100.00		
	Mrs. Frank Morison . . .	50.00		
	Mrs. J. H. Wolcott . . .	100 00		
	Mrs. W. W. Vaughan . .	250.00		
	R. T. Paine	200.00		
	Francis Blake	100.00		
	Roger Wolcott	100.00		
	Henry Lee	500.00		
	Carried forward . . .	$20,820.00	$40,000.00	$2,536,330.64

Permanent Funds

	Brought forward . . .	$20,820.00	$40,000.00 $2,536,330.64
1886	A. A. Lawrence . . .	300.00	
	William Endicott, Jr.	1,000.00	
	Henry Woods	500.00	
	Ezra Farnsworth . .	1,000.00	
	Thomas E. Proctor .	500.00	
	Henry B. Rogers . .	500.00	
	Mary Anne Wales . .	200.00	
	Mrs. Jas. McGregor .	100.00	
	Mrs. Caroline Merriam	100.00	
	Mrs. J. Elliot Cabot .	1,000.00	
	J. M. Sears	1,000.00	
	Nathaniel Thayer . .	1,500.00	
	John E. Thayer . . .	1,000.00	
	Bayard Thayer . . .	1,000.00	
	E. V. R. Thayer . . .	500.00	
	Mrs. Nathaniel Thayer	500.00	
	Mrs. J. F. Andrews .	500.00	
	R. C. Greenleaf . . .	1,000.00	
	Samuel Johnson . . .	500.00	
	Mrs. Francis Brooks .	100.00	
	J. H. Wolcott	100.00	
			33,720.00
1889	The Blake Fund, a bequest of Stanton Blake		10,000.00
1892	Charles W. Faulkner Fund, bequest of C. W. Faulkner . . .		2,940.00
	John Foster Fund, bequest of John Foster		10,000.00
1898	Elizabeth C. Ware Fund, bequest of Elizabeth C. Ware		10,000.00
1901	Lucretia A. Wilder Fund, a bequest of Lucretia A. Wilder . .		9,377.64
	Roger Wolcott Fund, bequest of Roger Wolcott		5,000.00
1915	Arthur T. Lyman Fund, a donation of Arthur T. Lyman . . .		10,000.00
1916	Mitchell A. Dearborn Fund, a bequest of Mitchell A. Dearborn		525.00
1917	Arthur G. Tompkins Fund, a bequest of Arthur G. Tompkins .		25,000.00
	Charles P. Jaynes Fund, a bequest of Charles P. Jaynes		11,477.00
1905	Edward W. Codman Fund, part of a bequest of Edward W.Codman By vote of the Trustees April 14, 1905, the income on $10,000 is to be transferred annually to the Training School for Nurses Fund.		10,000.00
1918	Charles L. Pitts Fund, bequest of Mary Rose Harris	10,000.00	
	Charles Goddard Weld Fund, bequest of Mrs. Caroline L. Weld	100,000.00	
1919	Surgical Dressings Fund, donation of the New England Surgical Dressings Committee	10,000.00	
	Carried forward	$298,039.64	$2,536,330.64

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Permanent Funds

	Brought forward	$80,510.00	$3,458,483.62
1870	The Amusement Fund, $5,000 bequest of Miss Mary Louise Shaw:		
1875	$5,000 donation of Mrs. Quincy A. Shaw and other ladies	10,000.00	
1871	Read Fund, half of a bequest from James Read	1,000.00	
1872	McGregor Fund, half of a donation and bequest from James McGregor	7,500.00	
1874	Templeton Fund, half of a bequest from John Templeton	5,000.00	
1876	Lincoln Fund, half of a bequest from Mrs. F. W. Lincoln . . .	85,000.00	
1885	Proctor Fund, a bequest from Mrs. Lydia P. Proctor	1,000.00	
1888	Hibbard Occupation Fund . . .	1,000.00	
1889	Higginson Fund, a bequest from George Higginson	10,000.00	
1890	Ellen M. Gifford Fund, part of a bequest from Ellen M. Gifford	5,000.00	
1892	Bradlee Fund, part of a donation from Helen C. Bradlee	50,000.00	
1895	Matchett Fund, a donation of Sarah A. Matchett	15,000.00	
	Thomas E. Proctor Fund for maintenance of buildings	30,000.00	
1896	Vose Fund, half of a bequest of Ann White Vose	38,983.09	
1900	Abbott Fund, a bequest of Marshall K. Abbott	2,500.00	
	Fund for Department of Scientific Research:		
1904	Donation of Sarah A. Matchett	$5,000.00	
1921–1922	Donation of W. Eugene McGregor .	1,000.00	
1922	Donation of Mrs. Lucy I. Kingsbury	1,000.00	7,000.00
1906	Samuel Eliot Memorial Chapel Fund for maintenance of Chapel		10,904.84
1909	George F. Parkman Fund, part of a bequest of George F. Parkman		50,000.00
	Elizabeth B. Maxwell Fund, a bequest of Elizabeth B. Maxwell		1,030.00
	Mercy A. Bailey Fund, a bequest of Mercy A. Bailey		5,500.00
1911	Martha R. Hunt Fund, to be used for the entertainment of patients at McLean Hospital		10,135.00
1912–1915	Matchett Memorial Fund, part of a bequest of Sarah A. Matchett		73,376.05
1913	Sarah E. Cazenove Fund, a bequest of Sarah E. Cazenove . .		63,784.36
1916	John Milton Hall Fund, a donation of a Friend		3,000.00
			567,223.34
	Carried forward		$4,025,706.96

Permanent Funds

CONVALESCENT HOSPITAL FUND

	Brought forward		$4,025,706.96
1879	Sundry Donors (through Miss Russell)	$3,446.00	
	Executors of George O. Hovey .	2,000.00	
1880	Sundry Donors (through Miss Russell)	2,513.00	
	Dr. and Mrs. C. E. Ware	1,000.00	
	Mrs. Sarah S. Fay	1,000.00	
	J. L. Gardner	1,000.00	
	Mrs. E. B. Bowditch	1,000.00	
	H. B. Rogers	1,000.00	
	Anne S. Hooper	1,000.00	
	E. Pierson Beebe and Miss Emma Beebe	1,000.00	
	W. S. Bullard	500.00	
	Samuel W. Swett	500.00	
	William Amory	500.00	
	C. H. Dalton	500.00	
	Chas. P. Curtis	500.00	
	T. K. Lothrop	500.00	
	H. L. Higginson	300.00	
	F. L. Higginson	300.00	
	O. W. Peabody	250.00	
	J. R. Hall	200.00	
	George Dexter	200.00	
	Mrs. Mary M. McGregor	200.00	
	Mrs. Frank Morison	200.00	
	Eliza Goodwin	150.00	
	Friends	2,050.00	
	Mrs. Augustus Hemenway . . .	100.00	
	T. G. Appleton	100.00	
	J. R. Coolidge	100.00	
	H. P. Kidder and C. J. Morrill, Trustees	3,713.85	
	Margaret Curtis account Mrs. C. P. Curtis, Sr.	25.00	
	D. F. Appleton	50.00	
1881	Sundry Donors (through Miss Russell)	3,750.83	
	C. J. Morrill and Friend, one-half each	5,000.00	
	Moses Williams	1,000.00	
	A. T. Lyman	200.00	
	A. Cochrane	250.00	
	J. C. Gray	300.00	
	B. Schlessinger	500.00	
	Henry Saltonstall	500.00	
	Mrs. P. C. Brooks	300.00	
	T. J. Coolidge	300.00	
	Mrs. J. B. H. James	100.00	
	R. P. Wainwright	50.00	
	Ezra H. Baker	500.00	
	William S. Houghton	1,000.00	
	Elijah Smith	500.00	
	Mrs. Samuel Cabot	100.00	
	Charles Merriam	100.00	
	Carried forward	$40,348.68	$4,025,706.96

Permanent Funds

	Brought forward	$40,348.68	$4,025,706.96
1881	Caroline Merriam	100.00	
	W. G. Weld	250.00	
	Mrs. Theodore Chase, Sr. . . .	50.00	
	Miss Cochrane.	500.00	
	Alice M. Longfellow and sister .	1,000.00	
	Leopold Morse	50.00	
	Samuel Eliot	500.00	
	Eliza Ashton, by Charles P. Curtis	500.00	
	"A Bostonian," by Charles P. Curtis	500.00	
	W. E. Bright	200.00	
	G. A. Nickerson	200.00	
	S. R. Payson	300.00	
	George C. Richardson	300.00	
	Edward Austin	500.00	
	Charles P. Hemenway	250.00	
	Nathaniel Thayer	20,000.00	
	H. P. Kidder	5,000.00	
	J. L. Bremer	1,000.00	
	Henry Lee	1,000.00	
	Martin Brimmer	300.00	
	Miss Anne Wigglesworth	300.00	
	Quincy A. Shaw	5,000.00	
	F. H. Peabody	500.00	
	S. B. Rindge	500.00	
	S. D. Warren	2,000.00	
	Elisha Atkins	500.00	
	H. H. Hunnewell	10,000.00	
	Nevins & Co.	500.00	
	W. Endicott, Jr.	2,500.00	
	Henry Woods	1,000.00	
	Samuel Johnson	500.00	
	R. C. Greenleaf	500.00	
	Henry Endicott	100.00	
1882	Ezra Farnsworth	500.00	
	W. C. Grover	1,000.00	
	Joseph B. Glover	100.00	
	Sundry Donors (through Miss Russell).	450.00	
	Miss Anne Wigglesworth	100.00	
	Frank L. Ames	3,000.00	
	Cornelia Dehon	75.00	
1883	Jerome G. Kidder, bequest . . .	15,000.00	
1884	Samuel W. Swett, bequest . . .	50,000.00	
1885	"Francis," donation	20.00	
1886	George A. Gardner, donation . .	5,000.00	
	Miss Mary Russell, donation . .	40.00	
1888	Elizabeth B. I. B. Dixwell, bequest	1,000.00	
1889–1895	Miss Helen C. Bradlee, donation	1,300.00	
1892	Elizabeth B. Bowditch, bequest .	5,000.00	
1893	Mrs. Isaac Sweetser, in memory of Dr. Edw.H. Clarke, donation	1,000.00	
1912	Julia M. Moseley, bequest . . .	6,190.47	
		$186,524.15	
	Cost of Building	34,713.02	
			151,811.13
	Carried forward		$4,177,518.09

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Permanent Funds

	Brought forward	$55,500.00	$4,212,518.09
1896	George F. Fabyan	1,000.00	
	Miss A. P. Rogers	500.00	
	A Friend	400.00	
	Mrs. W. D. Pickman	1,000.00	
	Frank Simpson	1,000.00	
	A. A. Lawrence	500.00	
	E. Pierson Beebe	1,000.00	
	J. Reed Whipple	500.00	
	A. Hemenway	1,000.00	
	W. H. Forbes	500.00	
	Mrs. Frank Merriam	500.00	
	Mrs. William C. Loring	1,000.00	
	Estate of Eben D. Jordan . . .	5,000.00	
	Nathaniel Thayer	1,000.00	
	Mrs. J. N. Fiske	1,000.00	
	Through Dr. A. T. Cabot . . .	100.00	
	Throngh Dr. Chas. B. Porter . .	100.00	
	W. Sturgis Bigelow	2,500.00	
	Anna S. C. Prince	1,000.00	
	Wm. Endicott, Jr.	5,000.00	
	Interest on Fund added	1,947.02	
1897	Henry M. Whitney	1,000.00	
	Children of Samuel Parkman . .	2,000.00	
	Laurence Minot	100.00	
	Mrs. Henry S. Grew	500.00	
	George Wigglesworth	100.00	
	William Minot	100.00	
	A. Hemenway	1,000.00	
	Miss A. P. Carey	500.00	
	Allen Danforth	100.00	
1912	Mrs. Mary Upham Johnson, a bequest	3,201.32	
	Pathological Fund	$90,648.34	
	Apparatus and Equipment . . .	26,772.93	
		$63,875.41	
1898	John W. and Belinda L. Randall Fund	20,000.00	
			83,875.41

TRAINING SCHOOL FOR NURSES FUND

1897	C. P. Curtis, Treasurer, for sundry donors	$18,386.42	
	John Foster	5,000.00	
1902	Francis Skinner	1,000.00	
1904	Francis E. Bangs	2,000.00	
	William Amory	25.00	
	George A. Gardner	2,000.00	
	Mrs. Ernest B. Dane	100.00	
	Mrs. Robert W. Emmons	25.00	
	Mrs. Larz Anderson	50.00	
	Mrs. John L. Bremer	100.00	
	Mrs. George F. Fabyan	50.00	
	J. Randolph Coolidge	100.00	
	Carried forward	$28,836.42	$4,296,393.50

Permanent Funds

	Brought forward	$28,836.42	$4,296,393.50
1904	H. D. Chapin	10.00	
	A Friend	1.00	
	Dr. J. F. Burnham	1.00	
	Miss Fannie R. Brewer	100.00	
	F. L. Higginson	100.00	
	Mrs. J. B. Case	100.00	
	Miss Georgina Lowell	25.00	
	Mrs. E. Preble Motley	50.00	
	Arthur A. Carey	25.00	
	Mrs. Annie L. Woods	100.00	
	Thomas Wigglesworth	500.00	
	Miss Isabel Fabyan	50.00	
	Charles E. Cotting	50.00	
	Mrs. B. P. Cheney	50.00	
	T. Jefferson Coolidge	500.00	
	Mr. and Mrs. Thornton K. Lothrop	500.00	
	Charles H. Dalton	100.00	
	Mrs. A. W. Blake	50.00	
	Miss B. F. Blake	50.00	
	Forbes Lithograph Co.	10.00	
	Mrs. W. Scott Fitz	100.00	
	Miss Eliza W. S. Parkman . . .	10.00	
	Walter Hunnewell	100.00	
	Henry S. Hunnewell	50.00	
	Mrs. F. B. Harrington	10.00	
	Miss Mary S. Ames	50.00	
	W. O. Gay	100.00	
	The Misses Minot	25.00	
	Miss Sarah F. Bremer	50.00	
	Stephen Bullard	50.00	
	Samuel W. Rodman	20.00	
	Mrs. F. C. Manning	10.00	
	Miss M. L. Blake	10.00	
	Miss Mary Brandegee	50.00	
	Shepherd Brooks	400.00	
	O. H. Alford	100.00	
	Mrs. Alford	15.00	
	Miss Mary Thomas	10.00	
	Miss Sarah C. Paine	25.00	
	Miss Mary W. Eastman	100.00	
	Charles W. Hubbard	25.00	
	Mrs. John C. Phillips	50.00	
	George F. Fabyan	1,000.00	
	Graduate of School	50.00	
	Graduate of School	1.00	
1905	Mrs. Algernon Coolidge	10.00	
	Luce & Manning	25.00	
	Mrs. J. T. Eldredge	5.00	
	Mrs. William C. Otis	100.00	
	Nurses' Alumnæ Association . .	53.50	
	Miss Mary Lee Ware	500.00	
	Miss Alice Longfellow	5.00	
	John T. Coolidge	100.00	
	Mrs. Theodore Lyman	100.00	
	Mrs. G. Howland Shaw	100.00	
	Clement S. Houghton	25.00	
	Carried forward	$34,642.92	$4,296,393.50

Permanent Funds

	Brought forward	$34,642.92	$4,296,393.50
1905	Louis S. Dabney	25.00	
	William S. Dexter	200.00	
	Thomas P. Beal	50.00	
	Francis Skinner	300.00	
	Henry Mulliken	500.00	
	Mrs. W. S. Bullard	25.00	
	Mrs. H. S. Grew	25.00	
	Richard H. Weld	25.00	
	Mr. and Mrs. George Putnam . .	200.00	
	Mr. and Mrs. N. Thayer	2,000.00	
	Mr. and Mrs. Dudley L. Pickman	100.00	
	F. L. Higginson	250.00	
	Mrs. G. G. Hammond	100.00	
	Mr. and Mrs. H. M. Sears . . .	200.00	
	Mrs. Daniel Merriman	50.00	
	Arthur Amory	5.00	
	Mrs. Otis Norcross, Jr.	50.00	
	Alexander Cochrane	100.00	
	Mrs. S. Parkman Blake	100.00	
	Grant Walker	100.00	
	Mrs. J. J. Storrow	10.00	
	Mrs. H. H. Fay	25.00	
	Miss M. B. Lothrop	50.00	
	Francis W. Hunnewell	100.00	
	Nathaniel T. Kidder	500.00	
1906	Mrs. Anna D. Blake	50.00	
	William P. Blake	50.00	
	E. Pierson Beebe	50.00	
	Miss Emma Rodman	25.00	
1907	Mrs. R. G. Shaw	50.00	
1909	Mrs. A. Coolidge	10.00	
1912	Henry A. Wyman	5.00	
1913	Miss Harriet W. Barnes	50.00	
		———	40,022.92

ART ROOM FUND

Income for Art Room McLean Hospital

1904	Mrs. Samuel Eliot	$500.00	
1904–1908	Sundry Donors	311.90	
1904–1922	Interest added	897.86	
		———	1,709.76

ORTHOPÆDIC WARD FUND

1906–1907	Nathaniel Thayer	$5,000.00	
	Bayard Thayer	5,000.00	
	Mrs. Lester Leland	5,000.00	
	John and W. S. Spaulding and Mrs. H. F. King	5,000.00	
	Mrs. W. G. Weld	5,000.00	
	Mr. and Mrs. H. M. Sears . . .	5,000.00	
	Mrs. B. P. Cheney	5,000.00	
	Augustus Hemenway	3,000.00	
	J. L. Bremer	2,448.64	
	E. V. R. Thayer	2,500.00	
	H. E. Converse	2,500.00	
	Miss Mary Ames	2,000.00	
	Carried forward	$47,448,64	$4,338,126.18

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Permanent Funds

	Brought forward	$1,477.00	$4,375,597.10
1917	Mrs. James Howard Means . . .	25.00	
	Dr. J. Payson Clark	25.00	
	Dr. L. L. Bigelow	5.00	
	Dr. James J. Putnam	25.00	
	Dr. F. B. Lund	100.00	
	Dr. Richard C. Cabot	100.00	
	Dr. E. W. Emerson	5.00	
	Dr. George H. Wright	50.00	
	Dr. E. P. Bagg, Jr.	5.00	
	Dr. Robert B. Osgood	10.00	
	Dr. Joseph L. Goodale	3.00	
	Dr. George M. Sheahan	5.00	
	Dr. Wilder Tileston	10.00	
	Dr. Henry Lee Morse	25.00	
	Lieut.-Col. H. H. Shaw	5.00	
	Dr. Henry L. Sanford	10.00	
	Dr. Elisha Flagg	25.00	
	Dr. F. H. Davenport	25.00	
	Dr. F. Van Nüys	2.00	
	Dr. Robert M. Green	5.00	
	Drs. E. P. and E. D. Joslin . . .	10.00	
	Dr. R. M. Smith	10.00	
	Dr. Adelbert S. Merrill	5.00	
	Dr. Richard Dexter	15.00	
	Dr. Elliott C. Cutler	10.00	
	Dr. George H. Monks	10.00	
	George Wigglesworth	1,000.00	
	Dr. George S. Derby	15.00	
	Dr. John W. Elliot	100.00	
	Mrs. Lewis Agassiz Shaw	4.00	
	Dr. Walter C. Seelye	5.00	
	Dr. Frederick W. Taylor	5.00	
	Dr. Herbert C. Moffitt	100.00	
	Dr. W. F. Whitney	5.00	
	Dr. Hyman Morrison	5.00	
	Dr. Seabury W. Allen	10.00	
	Dr. A. A. Davis	10.00	
	Dr. Walter I. Baldwin	10.00	
	Dr. George K. Sabine	5.00	
	Dr. Theodore J. Eastman . . .	10.00	
	Dr. Henry S. Forbes	10.00	
	Dr. Joseph B. Howland	10.00	
	Dr. James J. Minot	50.00	
	Dr. Marshal Fabyan	100.00	
	Dr. Herbert B. Howard	25.00	
	Dr. Franklin G. Balch	100.00	
	Dr. Horace Binney	10.00	
	Dr. Frances W. Peabody	10.00	
	Dr. Chauncey W. Norton . . .	25.00	
	Dr. William H. Buffum	5.00	
	Dr. James L. Gamble	20.00	
	Dr. Edward L. Young, Jr. . . .	5.00	
	Dr. Augustus Thorndike	250.00	
	Dr. Charles G. Mixter	5.00	
	Dr. Herbert J. Hall	10.00	
	Dr. Lloyd T. Brown	10.00	
	Carried forward	$3,931.00	$4,375,597.10

Permanent Funds

	Brought forward	$3,931.00	$4,375,597.10
1917	Dr. Charles N. Meader	10.00	
	Dr. W. P. Graves	5.00	
	Dr. Charles S. Butler	25.00	
	Dr. Russell T. Congdon	5.00	
	Dr. Charles Edwin Briggs . . .	25.00	
	Dr. Harvey P. Towle	10.00	
	Dr. John B. Hawes, 2d	10.00	
	Mrs. Mabell Burleigh Chase . .	35.00	
	Dr. William Jason Mixter . . .	25.00	
	Dr. H. P. Greeley	5.00	
1918	Donation of Dr. D. Crosby Greene	25.00	
	Donation of Alumnæ Association of the Massachusetts General Hospital Training School for Nurses	65.00	
1919	Dr. Mark W. Richardson	50.00	
	Miss Anna Lea	10.00	
	Wallace L. Pierce	100.00	
	Mrs. John C. Gray	100.00	
	Miss J. L. Motley	5.00	
	Mrs. Irma Vonnegut	10.00	
	Dr. Duncan McDougall	50.00	
	Dr. A. C. Nason	70.00	
1920	Donations and proceeds from sale of memorial books through Phillips House X-Ray Department	35.52	
	Donation of Dr. David Cheever .	25.00	
	Donation of Dr. Edward P. Richardson	25.00	
1918–1922	Accumulated Income	1,458.86	
			6,115.38

WARREN LIBRARY FUND

Income for Books for Patients

1841	Donation of Dr. J. C. Warren . .		1,000.00

TREADWELL LIBRARY FUND

Income for the Library

1857	Bequest of J. G. Treadwell . . .	$5,000.00	
1913	Donation of Richard Olney . . .	100.00	
1914	Donation of Dr. Daniel Fiske Jones	5.00	
	Donation of Dr. John M. T. Finney	200.00	
1917	Donation of Dr. John W. Elliot .	1,000.00	
			6,305.00

WOODEN LEG FUND

1861	Donation — P. K.	$100.00	
	Bequest of N. I. Bowditch . . .	5,000.00	
	George A. Newell Fund	2,500.00	
			7,600.00
	Carried forward		$4,396,617.48

Permanent Funds

Brought forward $4,396,617.48

WARREN PRIZE FUND

Income for a Triennial Prize

1868	Bequest of Dr. J. M. Warren . .	$1,880.00	
	Accumulated interest	3,305.84	
			5,185.84

SURGICAL INSTRUMENT FUND

Income for Special Surgical Instruments

1870	Donation of Dr. Henry J. Bigelow	$1,250.00	
1881	Donation of R. M. Moore . . .	100.00	
1889	Donation of Lydia B. and O. A. Taft	100.00	
	Donation of Chas. S. Bixby . . .	25.00	
1902	Arthur Appleton Beebe Fund . .	5,000.00	
			6,475.00

SHATTUCK FUND

Income for Music at Hospital

1894	George C. and Anne H. Shattuck Fund, donation of Dr. Frederick C. Shattuck	2,000.00

NEW ENDOWMENT FUND

1917	Donation of George R. Agassiz .	$500.00	
	Donation of Miss Sarah H. Blanchard	500.00	
1918–1922	Donation of George Wigglesworth	36,752.45	
1919	Donation of Frank G. Webster .	5,000.00	
	Donation of Mr. and Mrs. Thomas Motley	555.00	
1920	Donation of Henry S. Hunnewell	10,000.00	
	Donation of Francis Henry Appleton	1,000.00	
	Donation of Francis L. Higginson	5,000.00	
1920–1921	Donation of Mrs. Charles E. Mason	10,000.00	
1920	Donation of Arthur Lyman . .	1,000.00	
	Donation of Walter H. Hunnewell	5,000.00	
	Donation of Mrs. A. Lawrence Hopkins	5,000.00	
	Donation of Mrs. John Holmes Morison	500.00	
	Donation of Anonymous	2,000.00	
	Donation of A. Lawrence Lowell .	5,000.00	
	Donation of Mrs. Moses Williams	5,000.00	
	Donation of Mrs. Henry Forbes Bigelow	4,300.00	
	Donation of Miss Louise W. Case	500.00	
	Donation of Miss Marian R. Case	100.00	
	Donation of Mrs. O. H. Alford .	1,000.00	
	Donation of Henry C. Everett .	500.00	
	Carried forward	$99,207.45	$4,410,278.32

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Permanent Funds

Brought forward $4,621,047.77

MRS. NATHANIEL THAYER FUND

The income to be used "preferably for the Social Service Department"

1920	Donation of Mrs. Nathaniel Thayer	10,000.00

GEORGE ROBERT WHITE FUND

Income for the Development or Maintenance of a Department for the Treatment of Diseases of the Skin

1922	Donation of George Robert White	100,000.00
	TOTAL PERMANENT FUNDS	$4,731,047.77

SPECIAL PURPOSE FUNDS

FREE BED SUBSCRIBERS FOR TEN YEARS

		Unexpired
Mrs. W. Scott Fitz (1913–1922)	$1,000.00	$0.00
James Longley (1914-1923)	1,000.00	100.00
Mrs. Louis A. Frothingham (1915–1924)	1,000.00	200.00
The late Henry R. Dalton (1915–1924)	1,000.00	200.00
Mrs. Henry S. Grew (1915–1924)	1,000.00	200.00
Mrs. O. H. Alford (1916–1925)	1,000.00	300.00
Miss Martha A. Alford (1916–1925)	1,000.00	300.00
Mr. and Mrs. Shepherd Brooks (1916–1925)	1,000.00	300.00
Mrs. George D. Howe (1916–1925), in memory of George D. Howe	1,000.00	300.00
Frank G. Webster (1917–1926)	1,000.00	400.00
Mrs. Elizabeth Cabot Lyman (1917–1926)	1,000.00	400.00
The Misses Kimball (1917–1926)	1,000.00	400.00
Mrs. Anne P. Rice (1918–1927)	1,000.00	500.00
Miss Mary Weld (1919–1928)	1,000.00	600.00
Walter Hunnewell (1919–1928)	1,000.00	600.00
Mrs. George Putnam, Sr. (1920–1929)	1,000.00	700.00
Richard Wheatland (1920–1929)	1,000.00	700.00
Frances E. (Cutler) Sprague Fund (1921–1930)	1,000.00	800.00
Miss Martha A. Alford (1922–1931)	1,000.00	900.00
		$7,900.00

NURSES' HOME FUND — McLEAN HOSPITAL

1913	Donation of Miss Elizabeth L. Grant	$1,000.00	
1914	A Friend	40,000.00	
	Sundry Donors (through Mrs. E. Stanley Abbot)	13,679.70	
	Donation of Miss Sara E. Parsons	5.00	
1915	Donation of Miss Louise W. Case	100.00	
	Donation of Sundry Donors (through Mrs. E. Stanley Abbot):		
	Anonymous	16.00	
	Edward B. Field	15.00	
	Mrs. A. H. Hews	25.00	
	Mrs. Charlotte Nichols Greene	10.00	
	Mrs. Isabel B. Richardson	10.00	
1916	A Friend	2,500.00	
	Mrs. Florence N. Putnam	100.00	
1922	From McLean Hospital Operations	20,241.09	
1913–1922	Accumulated Income	30,671.96	
		$108,373.75	
	Expended on Plans, etc.	4,883.54	
			103,490.21
	Carried forward		$111,390.21

Special Purpose Funds

	Brought forward		$111,390.21
	CHILDREN'S MEDICAL WARD BUILDING FUND		
1913	Donation of G. S. Talbot	$250.00	
1913–1922	Accumulated Income	165.52	
			415.52
	TRAINING SCHOOL FOR NURSES' ENDOWMENT FUND		
1915–1919	Miss Sara E. Parsons	$700.00	
1915–1920	Miss Louise C. May	140.00	
	Miss Susan L. Mills	5.00	
	Miss Louie W. Wellington	25.00	
	Dr. Benjamin Brown	10.00	
	Graduate of School	1.00	
1916	Miss R. Helen Cleland	200.00	
	A Graduate of 1880	50.00	
1916–1920	Miss Annabella McCrae	170.00	
	Miss Jane F. Riley	100.00	
	Miss Grace Nichols	10.00	
	Mrs. John Bartol	15.00	
	Miss E. W. Allen	2.00	
	Miss Mary F. Emery	12.00	
	Miss Alice C. S. Cushman	5.00	
	Miss Grace Stackpole	15.00	
	Miss Helen B. Fenton	10.00	
	Miss Grace Nichols	100.00	
	Miss Frances C. Dailey	22.50	
	Mrs. William S. Ely	1,000.00	
	Mrs. Samuel Cabot	100.00	
1916–1919	Miss Fannie R. Slayton	40.00	
1916–1918	Miss Helen G. O'Dea	4.00	
	Miss Helen T. Niverson	10.00	
1916–1919	Miss V. C. Hall	50.00	
	Miss Helen Wood	90.00	
	Miss Harriet J. Allyn	25.00	
	Mrs. Helen A. Wayland Hudson .	10.00	
	Miss Agnes J. Trull	10.00	
	Miss Alice M. Watson	10.00	
	Mrs. and Miss Alford	200.00	
1916–1920	Miss Jessie E. Grant	20.00	
1916–1919	Miss Eileen R. Curley	15.00	
1916–1918	Miss Charlotte M. Perry	100.00	
	Miss Olga Olson	5.00	
	Miss Josephine Mulville	10.00	
	Miss Ruth C. Blair	5.00	
	Miss Helen M. Finlay	1.00	
	Miss Hannah Ward	10.00	
	Miss Mary L. Keith	100.00	
	Miss Jessie L. Brown	25.00	
	Miss Harriet L. P. Friend . . .	100.00	
	Mrs. Isaac Phillips, in memory of Ethel May Fixter	10.00	
	Miss Rose K. Butler	10.00	
1916	Miss Mary E. Higson	10.00	
	Miss Melissa J. Cook	5.00	
	Miss Christina J. McDonald . . .	2.00	
	Carried forward	$3,569.50	$111,805.73

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Special Purpose Funds

	Brought forward	$5,441.12	$111,805.73
1920	Donation of Miss Hannah S. Peterson	5.00	
	Donation of Miss Annie C. Carlisle	10.00	
	Donation of Miss Isabelle McC. Lumsden	50.00	
	Donation of Miss Elizabeth E. Payne	10.00	
	Donation of Mrs. S. Bell Hartshorn	10.00	
	Donation of Miss Laura A. Wilson .	10.00	
	Donation of the Massachusetts General Hospital House Pupils Alumnæ Association	100.00	
	Donation of Miss Minnie S. Hollingsworth	25.00	
	Donation of Miss Bessie Fullerton .	25.00	
	Donation of Miss Ruth H. King . .	50.00	
	Donation of Miss Hilda A. Fletcher (in memory of Lucy N. Fletcher)	100.00	
	Donation of Mrs. Eva S. Rogers .	20.00	
	Donation of Mrs. C. K. Ovington .	100.00	
	Donation of Miss Louise S. Zutter .	25.00	
	Donation of Mrs. Lillian Dobie Balboni	25.00	
1920–1921	Donation of Miss Pauline L. Dolliver	200.00	
	Donation of Miss Elizabeth Conway	40.00	
	Donation of Miss Alma A. Maddocks	10.00	
	Donation of Miss Annie L. Clarke .	10.00	
	Donation of Miss Annie Fletcher .	5.00	
	Donation of Miss Dorothea J. MacInnis	5.00	
	Donation of Miss R. Louise Metcalf	75.00	
	Donation of Mrs. Robert Shaw Russell as a memorial to Mr. and Mrs. Charles Pelham Curtis	1,000.00	
	Donation of Miss Clare Dennison .	5.00	
	Donation of Miss Anna C. Maxwell	25.00	
	Donation of Miss Rosa A. Munger	10.00	
	Donation of Mrs. Francis M. Rackemann	50.00	
1916–1922	Accumulated Income	2,300.83	
			9,742.45

BOWDITCH HISTORY FUND

Income and Principal devoted to the Publication of a History of the Hospital

1861	Bequest of N. I. Bowditch	2,000.00

ANNIE NORTON WARD FUND

For Charitable Purposes connected with the Hospital pursuant to the vote of the Ladies' Visiting Committee

1920	Bequest of Miss Annie Norton Ward	1,000.00

MARTHA B. ANGELL FUND

For the purpose of Medical and Surgical Experimentation on Animals to the end of saving human lives

1920–1922	Bequest of Mrs. Martha B. Angell .	15,842.61
	Carried forward	$140,390.79

Special Purpose Funds

	Brought forward		$140,390.79

NURSES' HOME (McLEAN HOSPITAL) FURNISHINGS FUND

For Furnishings in proposed Nurses' Home

1920	Donations of Nurses at McLean Hospital	$359.85	
1920–1922	Accumulated Income	56.79	
			416.64

TROPICAL MEDICINE FUND

For Study and Care of Tropical Diseases

1916	Donation of United Fruit Company	$2,500.00	
1916–1922	Accumulated Income	576.27	
			3,076.27

WILLIAM H. GOVE FUND

For the Purchase of Radium

1921	Donation of Mrs. Aroline C. Gove .	$30,000.00	
1922	Expended	30,000.00	
			0.

MARY RACHEL MARTIN FUND

Preferably for a Needy Dressmaker

1921	Bequest of Mary Rachel Martin		500.00

NATHANIEL T. KIDDER FUND

For Changes in Trustees' Room and Repairing Portraits

1922	Donation of Nathaniel T. Kidder .	$2,000.00	
1922	Expended	2,000.00	
			0.

NURSES' HOME AND OTHER IMPROVEMENTS FUND

For an Additional Story on the Nurses' Home, Renovating Thayer Building for Nurses, and other repairs at the General Hospital

1922	Donation of Mrs. T. Jefferson Coolidge	$5,000.00	
	Donation of Edwin A. Grozier . .	5,000.00	
	Donation of John R. Macomber . .	2,500.00	
	Donation of Arthur W. Wheelwright	1,000.00	
	Donation of Mrs. Frank G. Webster	500.00	
	Donation of Horace S. Sears . . .	500.00	
	Donation of Mr. and Mrs. W. L. Shearer	1,000.00	
	Donation of John S. Lawrence . .	500.00	
	Donation of Frank G. Webster . .	10,000.00	
	Donation of William Endicott . . .	10,000.00	
	Donation of F. L. Higginson . . .	5,000.00	
	Donation of Frank W. Remick . .	5,000.00	
	Donation of Mrs. Shepherd Brooks	3,000.00	
	Donation of A Friend (through Wm. Endicott)	1,000.00	
	Donation of C. W. Barron	500.00	
	Donation of Herbert M. Sears . .	1,000.00	
	Donation of George P. Gardner . .	1,000.00	
	Donation of Thomas P. Beal . . .	500.00	
	Donation of Charles P. Curtis . . .	100.00	
	Donation of Mr. and Mrs. Thomas B. Gannett	2,500.00	
			55,600.00

TOTAL SPECIAL PURPOSE FUNDS	$199,983.70

GENERAL FUND

1811	Commonwealth of Massachusetts, Province House Estate		$40,000.00
	Cutting stone for Hospital		35,070.27
1811–1843	Subscribers for Foundation:		
	Benjamin and Caleb Adams . . .	$100.00	
	Joseph Allen	100.00	
	Hannah R. Amory	100.00	
	John Amory	200.00	
	Jonathan Amory	200.00	
	Ebenezer T. Adams	300.00	
	Nathan Appleton	500.00	
	Samuel Appleton.	2,000.00	
	William Appleton, for himself . .	100.00	
	William Appleton, for an unknown	200.00	
	Samuel T. Armstrong	100.00	
	Nathaniel Austin	100.00	
	Adam Babcock	300.00	
	Baker, Brown, & Co.	100.00	
	Aaron Baldwin	110.00	
	Charles Barnard	100.00	
	John Bartlett	100.00	
	Thomas Bartlett	300.00	
	Stephen Bean	100.00	
	Jeremiah Belknap	100.00	
	John Belknap	100.00	
	John Bellows	100.00	
	Amos Binney	300.00	
	John Bishop	100.00	
	George Blake	100.00	
	George Bond	180.00	
	Boott, Kirk, & Sons	300.00	
	Mary Boott	300.00	
	Charles Bradbury	100.00	
	Gamaliel Bradford	100.00	
	Joseph P. Bradlee	100.00	
	Josiah Bradlee	200.00	
	Thomas D. Bradlee	100.00	
	Nathan Bridge	100.00	
	Andrew Brimmer	100.00	
	John Brooks	100.00	
	Peter C. Brooks	2,000.00	
	Moses Brown	100.00	
	Samuel Brown	100.00	
	John Bryant	100.00	
	Thomas Bumstead	125.00	
	Benjamin Bussey	1,000.00	
	George Cabot	100.00	
	John Cabot	150.00	
	Sarah and Susan Cabot	100.00	
	William Cabot	100.00	
	Francis Carnes	200.00	
	Carried forward	$11,665.00	$75,070.27

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General Fund

	Brought forward	$29,194.37	$75,070.27
1811–1843	Joshua Fisher	100.00	
	Simon Forrester	2,000.00	
	Ebenezer Francis	200.00	
	John French	100.00	
	French and Weld	120.00	
	Robert H. Gardiner	200.00	
	Samuel P. Gardiner	100.00	
	Abraham Gibson	100.00	
	Nathaniel Goddard	200.00	
	John Gore	200.00	
	Francis C. Gray	100.00	
	Henry Gray	1,000.00	
	Horace Gray	1,000.00	
	John C. Gray	100.00	
	John C. Gray	300.00	
	William Gray	500.00	
	Gardiner Greene, $1,000 in three per cents	650.00	
	David Greenough	200.00	
	David S. Greenough	200.00	
	Dudley Hall	200.00	
	Samuel Hammond	200.00	
	John Hancock	200.00	
	Harvard College	213.32	
	Lemuel Hayward	100.00	
	Joseph Head	1,000.00	
	Joseph Head, Jr.	100.00	
	Augustine Heard	100.00	
	Barnabas Hedge	150.00	
	David Hinckley	1,000.00	
	Hingham, Third Parish	504.44	
	John Holland	200.00	
	Benjamin P. Homer	100.00	
	Henry Homes	100.00	
	John Howe	100.00	
	Henry Hubbard	100.00	
	John Hubbard	200.00	
	Humane Society of Massachusetts	5,140.56	
	Humane Society (Merrimack) . .	2,000.00	
	Jonathan Hunnewell	100.00	
	John Hurd	100.00	
	Joseph Hurd	200.00	
	Charles Jackson	400.00	
	James Jackson	420.00	
	Patrick T. Jackson	220.00	
	Samuel Jacques, Jr.	100.00	
	John Coffin Jones	500.00	
	Thomas Kilby Jones	200.00	
	Abigail Joy and family	300.00	
	Benjamin Joy	250.00	
	John Kidder, Jr.	100.00	
	Josiah Knapp	100.00	
	Seth Knowles	100.00	
	William Lambert	100.00	
	Amos and Abbott Lawrence . .	200.00	
	William Lawrence	100.00	
	Carried forward	$51,762.69	$75,070.27

General Fund

	Brought forward	$51,762.69	$75,070.27
1811–1843	Francis Lee	100.00	
	George Lee	150.00	
	Joseph Lee	300.00	
	Thomas Lee, Jr.	100.00	
	Winslow Lewis	100.00	
	Lincoln and Wheelwright	100.00	
	James Lloyd	1,000.00	
	Caleb Loring	100.00	
	Francis C. Lowell	400.00	
	John Lowell	450.00	
	George W. Lyman	150.00	
	Theodore Lyman	2,000.00	
	Theodore Lyman, Jr.	150.00	
	Josiah Marshall	100.00	
	Massachusetts Charitable Fire Society	900.00	
	Perrin May	100.00	
	Samuel May	100.00	
	Samuel R. Miller	100.00	
	William Minot	100.00	
	John Morse	100.00	
	Thomas Motley	100.00	
	Israel Munson	1,000.00	
	Caleb Oakes	100.00	
	John Odin	200.00	
	George Odiorne	100.00	
	Joseph Orne	200.00	
	Samuel Orne	200.00	
	John Osborn	200.00	
	H. G. Otis	500.00	
	Daniel P. Parker	500.00	
	John Parker	500.00	
	Samuel Parkman	2,000.00	
	Samuel Parkman, Jr.	200.00	
	Nehemiah Parsons	200.00	
	William Parsons	1,500.00	
	M. Payne	100.00	
	William Payne	100.00	
	Joseph Peabody	2,000.00	
	James Perkins	5,000.00	
	Samuel G. Perkins	100.00	
	Thomas H. Perkins	5,000.00	
	John Perry	100.00	
	John Phillips	100.00	
	Jonathan Phillips	100.00	
	Stephen Phillips	200.00	
	William Phillips, including $5,000 legacy of his father	20,000.00	
	Henry Pickering	100.00	
	Benjamin Pickman, Jr.	1,000.00	
	Dudley L. Pickman	150.00	
	William Pickman	300.00	
	Paschal P. Pope	100.00	
	John Pratt	135.00	
	William Pratt	400.00	
	William Prescott	150.00	
	Carried forward	$100,997.69	$75,070.27

General Fund

	Brought forward	$100,997.69	$75,070.27
1811–1843	James Prince	250.00	
	John Prince	200.00	
	Josiah Quincy	200.00	
	Isaac Rand	100.00	
	John Randall	100.00	
	John T. Reed	100.00	
	Joseph W. Revere	100.00	
	Paul Revere	100.00	
	Henry G. Rice	100.00	
	Benjamin Rich	300.00	
	John Richards	100.00	
	Andrew Ritchie	500.00	
	Nathan Robinson	200.00	
	Daniel D. Rogers	1,000.00	
	William Ropes	150.00	
	Nathaniel P. Russell	500.00	
	Samuel Salisbury	500.00	
	Samuel Salisbury, Jr.	100.00	
	Samuel Sanford	300.00	
	Daniel Sargent	200.00	
	Ignatius Sargent	400.00	
	William Sawyer	100.00	
	David Sears	5,000.00	
	Joseph Sewall	500.00	
	Robert G. Shaw	500.00	
	Michael Shepherd	100.00	
	William Shimmin	100.00	
	Nathaniel Silsbee	100.00	
	John Skinner	100.00	
	Barney Smith	400.00	
	Samuel Snelling	100.00	
	Washington Benevolent Society, Charlestown Branch	200.00	
	Hollis-street Society	148.05	
	First Church Society	100.67	
	King's Chapel Society	114.44	
	West Church Society	190.06	
	Roman Catholic Society	100.40	
	First Parish Society, Dorchester .	168.48	
	Dr. Bancroft's Society, Worcester	140.60	
	Dr. Pierce's Society, Brookline .	173.38	
	John Soley	100.00	
	Samuel Spear	100.00	
	Phineas Spelman	100.00	
	William Spooner	100.00	
	Francis Stanton	100.00	
	Russell Sturgis	200.00	
	William Sturgis	100.00	
	George Sullivan	200.00	
	Richard Sullivan	400.00	
	William Sullivan	200.00	
	John Tappan	350.00	
	Lewis Tappan	100.00	
	Charles Taylor	300.00	
	Boston Theatre	1,190.00	
	Abraham Thompson	100.00	
	Carried forward	$118,473.77	$75,070.27

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General Fund

	Brought forward		$233,362.82
1820	Beza Tucker		5,350.00
1822	Seth Webber		1,000.00
1823	Abraham Touro		10,000.00
1824–1835	John McLean		119,858.20
1826	Thomas Oliver		22,438.70
	Allan Crocker		100.00
1829	James Savage		100.00
1831–1849	Isaiah Thomas		6,370.33
1832–1833	Mary Belknap		89,882.60
1834	Jonathan Moseley		753.46
1836	Susan Richardson		250.00
1838	Ambrose S. Courtis		2,500.00
1841	Peter Westerfield		165.67
1844	Subscribers for Enlargement of Hospital:		
	Charles Amory	$500.00	
	James S. Amory	250.00	
	William Amory	500.00	
	Ebenezer T. Andrews	1,000.00	
	Nathan Appleton	1,000.00	
	Samuel Appleton	2,000.00	
	Samuel A. Appleton	100.00	
	William Appleton	2,000.00	
	Samuel T. Armstrong	100.00	
	Edward Austin	100.00	
	Richard Aylwin	100.00	
	Daniel C. Bacon	100.00	
	Benjamin Bangs	200.00	
	Charles Barnard	500.00	
	Francis Bassett	100.00	
	John D. Bates	250.00	
	Amos Binney	200.00	
	Mrs. Joshua Blake	200.00	
	Edward Blanchard	500.00	
	William H. Boardman	100.00	
	J. Ingersoll Bowditch	100.00	
	N. I. Bowditch	500.00	
	Dwight Boyden	100.00	
	Josiah Bradlee	1,000.00	
	James B. Bradlee	200.00	
	Martin Brimmer	500.00	
	P. C. Brooks	2,000.00	
	P. C. Brooks, Jr.	500.00	
	John Bromfield	100.00	
	John Bryant, Jr.	250.00	
	Henry Cabot	200.00	
	Thomas G. Cary	100.00	
	Carney and Sleeper	100.00	
	Caleb Chase	200.00	
	Eben Chadwick	500.00	
	Abiel Chandler	100.00	
	Jonas Chickering	500.00	
	Charles R. Codman	100.00	
	Edward Codman & Co.	100.00	
	Henry Codman	100.00	
	Gardner Colby	100.00	
	B. W. Crowninshield	300.00	
	Carried forward	$17,450.00	$492,131.78

General Fund

	Brought forward	$17,450.00	$492,131.78
1844	A. and C. Cunningham	100.00	
	Charles P. Curtis	100.00	
	Thomas B. Curtis	100.00	
	Peter R. Dalton	100.00	
	Samuel Dana	100.00	
	John James Dixwell	100.00	
	J. W. Edmands	200.00	
	Samuel A. Eliot	500.00	
	Moses Everett	100.00	
	Samuel Fales	200.00	
	Richard Fletcher	100.00	
	John M. Forbes	100.00	
	Ebenezer Francis	1,000.00	
	George Gardner	100.00	
	John L. Gardner	1,000.00	
	John Goodenough	100.00	
	Benjamin Goddard	500.00	
	Ozias Goodwin	500.00	
	Francis C. Gray	500.00	
	Horace Gray	300.00	
	John C. Gray	1,000.00	
	Samuel C. Gray	100.00	
	William Gray	100.00	
	Elizabeth C. Greene	500.00	
	Sarah Greene	1,000.00	
	David S. Greenough	100.00	
	Henry Hall	100.00	
	George Hallett	200.00	
	George Hayward	100.00	
	Nathaniel Hooper	100.00	
	Robert Hooper	250.00	
	Robert C. Hooper	100.00	
	Samuel Hooper	250.00	
	George Howe	500.00	
	Jabez C. Howe	200.00	
	Iasigi and Goddard	100.00	
	P. T. Jackson	100.00	
	James Johnson	100.00	
	Samuel Johnson	100.00	
	Abigail Joy	100.00	
	Abel Kendall, Jr.	100.00	
	George H. Kuhn	100.00	
	Lane and Reed	100.00	
	Abbott Lawrence	2,000.00	
	Amos Lawrence	1,000.00	
	Amos A. Lawrence	100.00	
	William Lawrence	1,000.00	
	Lawrence and Stone	500.00	
	George Lee	1,000.00	
	Thomas Lee	500.00	
	Isaac Livermore	100.00	
	Elijah Loring	100.00	
	Francis C. Loring	100.00	
	John J. and Francis Low	100.00	
	Francis C. Lowell	500.00	
	John A. Lowell	1,000.00	
	Carried forward	$36,650.00	$492,131.78

General Fund

	Brought forward	$36,650.00	$492,131.78
1844	Charles Lyman	500.00	
	George W. Lyman	500.00	
	Theodore Lyman	1,000.00	
	John Marland	100.00	
	Robert M. Mason	100.00	
	William P. Mason	500.00	
	Charles H. Mills	100.00	
	Milton and Slocumb	100.00	
	Benjamin R. Nichols	100.00	
	William Oliver	100.00	
	William F. Otis	100.00	
	Daniel P. Parker	500.00	
	James Parker	500.00	
	John Parker	1,000.00	
	George Parkman	150.00	
	William Parsons	100.00	
	William P. Perkins	100.00	
	Edward D. Peters	100.00	
	William Phipps	100.00	
	C. Gayton Pickman	100.00	
	Paschal P. Pope	500.00	
	Mary Pratt	500.00	
	William Prescott	500.00	
	William H. Prescott	100.00	
	Samuel R. Putnam	100.00	
	Josiah Quincy, Jr.	1,000.00	
	Joseph W. Revere	100.00	
	Rice and Thaxter	100.00	
	Richardson, Jeffrey, and Brother	100.00	
	Edward H. Robbins	100.00	
	Henry B. Rogers	500.00	
	James D. Russell	100.00	
	Richardson, Burrage, and Co.	100.00	
	Stephen Salisbury	500.00	
	Ignatius Sargent	1,000.00	
	Lucius M. Sargent	100.00	
	James Savage	100.00	
	Willard Sayles	500.00	
	David Sears	2,000.00	
	R. G. Shaw	1,000.00	
	Francis Skinner	250.00	
	Josiah Stickney	100.00	
	Charles Stoddard	100.00	
	William Sturgis	1,000.00	
	John E. Thayer	500.00	
	Nathaniel Thayer	100.00	
	Joseph Tilden	100.00	
	Henry Timmins	500.00	
	Phineas Upham	1,000.00	
	Daniel Waldo and sister	200.00	
	Thomas B. Wales	1,000.00	
	William J. Walker	200.00	
	Waterson, Pray, and Co.	100.00	
	John C. Warren	500.00	
	John Welles	500.00	
	Thomas Wetmore	100.00	
	Carried forward	$57,750.00	$492,131.78

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General Fund

	Brought forward	$19,850.00	$775,089.72
1863	George Higginson	500.00	
	Robert Hooper	250.00	
	George Howe	1,000.00	
	Jabez C. Howe	1,000.00	
	Peter Hubbell	500.00	
	H. H. Hunnewell	1,000.00	
	Miss Anna P. Jones	400.00	
	James Lawrence	1,000.00	
	Abbott Lawrence	1,000.00	
	Charles Lyman	300.00	
	George W. Lyman	500.00	
	Robert M. Mason	500.00	
	Ex'rs of Henry P. Oxnard	500.00	
	J. W. Paige	500.00	
	Benjamin T. Reed	250.00	
	George C. Richardson	1,000.00	
	Henry B. Rogers	1,000.00	
	David Sears	1,000.00	
	G. Howland Shaw	1,000.00	
	Francis Skinner	1,000.00	
	Henry P. Sturgis	500.00	
	William Sturgis	1,000.00	
	Nathaniel Thayer	3,000.00	
	George W. Wales	500.00	
	Miss Mary Anne Wales	500.00	
	William F. Weld	1,000.00	
	B. C. White	300.00	
	Joseph Whitney	500.00	
	Misses Wigglesworth	1,000.00	
	Edward Wigglesworth	500.00	
	Thomas Wigglesworth	300.00	
	Moses Williams	1,000.00	
	J. Huntington Wolcott	300.00	
			44,450.00
	Elizabeth Hill		237.50
1864	William S. Bullard		800.00
	William Oliver		57,760.04
1865	Hannah F. Lee		1,000.00
	William Minot		100.00
	Stephen Salisbury		5,000.00
	Edward Whitney		5,000.00
	Edward Wigglesworth		1,000.00
1866	Subscribers in Aid of Funds:		
	William Amory	$250.00	
	William T. Andrews	500.00	
	Charles H. Appleton	500.00	
	Nathan Appleton, Jr.	250.00	
	Thomas G. Appleton	1,000.00	
	William Appleton, Jr.	500.00	
	William S. Appleton	500.00	
	Anonymous, by W. S. B.	500.00	
	Francis Bacon	500.00	
	James M. Beebe	5,000.00	
	George B. Blake	100.00	
	John Borland	300.00	
	Boston Stock Exchange Board	1,000.00	
	Carried forward	$10,900.00	$890,437.26

General Fund

	Brought forward	$10,900.00	$890,437.26
1866	Mrs. N. I. Bowditch	5,000.00	
	F. H. and J. B. Bradlee	500.00	
	Martin Brimmer	1,000.00	
	Edward Brooks	500.00	
	Peter C. Brooks	1,000.00	
	Peter C. Brooks, Jr.	1,000.00	
	Shepherd Brooks	1,000.00	
	William S. Bullard	5,000.00	
	Edward A. Codman	500.00	
	Caleb A. Curtis	100.00	
	Greely S. Curtis	500.00	
	John G. Cushing	500.00	
	Robert M. Cushing	500.00	
	Thomas F. Cushing	500.00	
	Otis Daniels	500.00	
	Isaac Warren Danforth	500.00	
	F. Gordon Dexter	500.00	
	Albert Fearing	500.00	
	Augustus Flagg	100.00	
	William H. Gardiner	250.00	
	George Gardner	300.00	
	Henry J. Gardner	500.00	
	John L. Gardner	5,000.00	
	Joseph B. Glover	300.00	
	The Misses Eliza and Lucy Goodwin	500.00	
	Mrs. Henry Grew	500.00	
	Andrew T. Hall	100.00	
	Augustine Heard.	250.00	
	Mrs. Augustus Hemenway . . .	1,000.00	
	George Higginson	250.00	
	Robert Hooper	200.00	
	C. F. Hovey & Co.	1,000.00	
	George Howe	1,000.00	
	Jabez C. Howe	2,000.00	
	Thomas Howe	250.00	
	Horatio H. Hunnewell	2,000.00	
	Iasigi, Goddard & Co.	500.00	
	Herman B. Inches	250.00	
	Abbott Lawrence	500.00	
	Amos A. Lawrence	500.00	
	James Lawrence	1,000.00	
	James L. Little	1,000.00	
	Mrs. John E. Lodge	300.00	
	Francis C. Lowell	250.00	
	John Amory Lowell	1,000.00	
	George W. Lyman	1,000.00	
	Theodore Lyman	200.00	
	Robert M. Mason	1,000.00	
	William P. Mason	500.00	
	Theodore Matchett	200.00	
	Nathan Matthews	200.00	
	James McGregor	250.00	
	Charles H. Minot	100.00	
	George R. Minot	200.00	
	Enoch R. Mudge	1,000.00	
	Charles Merriam	250.00	
	Carried forward	$56,200.00	$890,437.26

General Fund

	Brought forward	$56,200.00	$890,437.26
1866	E. Francis Parker	100.00	
	John Brooks Parker	500.00	
	Samuel R. Payson	1,000.00	
	William Perkins	500.00	
	Andrew Pierce, Jr.	100.00	
	Miss Sarah P. Pratt	1,000.00	
	Miss Mary Pratt	1,000.00	
	Jeffrey Richardson	1,000.00	
	Henry B. Rogers	1,000.00	
	George C. Shattuck	500.00	
	Francis Skinner & Co.	2,000.00	
	Henry P. Sturgis	500.00	
	Samuel W. Swett	250.00	
	Nathaniel Thayer	25,000.00	
	William Thomas	100.00	
	Mrs. William Thomas	100.00	
	Mrs. William W. Wadsworth	500.00	
	Miss M. A. Wales	300.00	
	William G. Weld	250.00	
	George D. Welles	100.00	
	Miss Susan J. Welles	500.00	
	Miss Jane Welles	500.00	
	Benjamin C. White	200.00	
	Joseph Whitney	500.00	
	Miss Anne Wigglesworth	1,000.00	
	Miss Mary Wigglesworth	1,000.00	
	Edward Wigglesworth	1,000.00	
	Thomas Wigglesworth	1,000.00	
	Moses Williams	3,000.00	
	Robert C. Winthrop	100.00	
			100,800.00
	Rev. Mr. Spaulding		500.00
	Rev. S. M. Worcester		1,900.00
	F. N. Mitchell		67.50
1867	Sarah Pratt		18,800.00
	Charles Harris		1,000.00
	J. Mason Warren		2,000.00
1868	Abigail Loring		38,901.67
	St. Stephen's Chapel		2,000.00
	Morrill Wyman		200.00
1870	Amateur Dramatic Association		450.00
	H. J. Bigelow		500.00
1871	Sidney Homer		1,000.00
1871–1917	Massachusetts Hospital Life Insurance Co.		410,000.00
1874–1886	Hospital Sunday		10,798.28
1875	Miss M. C. Bryant		500.00
1877–1883	Charlotte Harris		274,457.33
1877	Elizabeth Powers		3,000.00
1878	Edward Blanchard		3,000.00
1879	J. T. Coolidge		100.00
	Margaret Tucker		49.63
	Miss Marian Hovey		1,000.00
	Henry S. Hovey		1,000.00
	Mrs. John T. Morse, Jr.		1,000.00
1880	F. James		846.07
1881	John C. Gray		25,000.00
	Carried forward		$1,789,307.74

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General Fund

	Brought forward	$3,580,529.51
1902	Children of Mrs. Henry Winsor (Phila.)	1,000.00
1903–1908	William S. Dexter	5,000.00
1903	C. H. W. Foster	500.00
	Jacob Hecht	500.00
	Merchants' & Miners' Transportation Co.	50.00
	Sarah A. Matchett	1,000.00
1904–1905	Charles H. Hayden	102,133.33
1904–1907	Thomas Wigglesworth	15,000.00
1904	Mrs. Alice B. Chase	1,000.00
	Harriet O. Cruft	2,000.00
	Mrs. Henry Lee	2,000.00
1905	Mrs. William Caleb Loring	100.00
	Ellen V. Smith	50.00
	J. H. T. Adams	58,256.46
	Edward W. Codman	303,073.91
	Mr. and Mrs. Henry S. Grew	1,000.00
1906	Mrs. H. Kuhn	50.00
	Desmond FitzGerald	25.00
	Laura M. Moore	2,500.00
	Martin Brimmer	20,000.00
	William Bolton	555.22
	Edward Woodman	1,000.00
	Henry L. Higginson	1,000.00
	Mrs. George D. Howe	1,000.00
1907	Charles E. French	10,000.00
	Mrs. J. J. Storrow	25.00
1907–1912	Donation and Bequest of Henry B. Mulliken	113,424.21
1907–1915	Donation of Miss Georgina Lowell	170.00
1907	Donation of William Amory	50.00
	Donation of Miss Alice M. Longfellow	5.00
	Donation of Mrs. R. G. Shaw	50.00
1907–1914	Donation of William P. Blake	250.00
1907	Donation of Miss Anna Dehon Blake	25.00
1908–1915	Donation of Philip S. Sears	125.00
1908–1911	Donation of Mrs. B. L. Young	75.00
1908–1918	Donation of Charles W. Hubbard	375.00
1908	Donation of Mrs. John H. Sturgis	10.00
	From Orthopædic Ward Fund	38,577.72
	Bequest of Luther Farnham	466.63
1909	Donation of "Cash"	1.00
	Donation of C. O. Brewster	12.00
	Bequest of George F. Parkman	50,000.00
	Donation of J. P. Reynolds, Jr.	50.00
1909–1915	Donation and Bequest of Francis Skinner, Jr.	12,000.00
1910	Donation of T. C. Thatcher	25.00
	Donation of Howard Child	25.00
	Bequest of George W. Boyd	2,000.00
	Donation of Mrs. Frances R. Jones	35.00
1910–1911	Charity Contest — Henry Siegel Co.	30.00
1910	Donation of Mrs. G. W. W. Dorr	25.00
	Donation of Miss Ellen T. Emerson	10.00
	Bequest of William J. Chever	8,116.95
1910–1913	Bequest of John E. Atkins	89,420.68
1910	Bequest of George Dexter	10,000.00
	Donation of Mrs. Frederick C. Shattuck, "Walcott Fellowship"	300.00
	Carried forward	$4,435,002.62

General Fund

	Brought forward		$4,435,002.62
1910	Donation of R. M. Burden		50.00
1910–1916	Bequest of Lucy F. Simmons		5,007.04
1911–1919	Donation of Miss Marian L. Blake		105.00
1920	Donation of Miss Marian L. Blake, in memory of Moses Williams		200.00
1911	Bequest of John Ashton		22,176.47
	Donation of E. C. Lee "Walcott Fellowship" .		500.00
	Donation of Madame la Vicomtesse Treilhard .		400.00
1911–1912	Donation of Harvey H. Baker		10.00
1911	Donation of Lionel Norman		9.00
1911–1921	Donation of Dr. Frederick C. Shattuck		400.00
1911	Bequest of Joseph G. Dalton by A. P. Loring .		1,000.00
	Donation of Thomas J. Knudsen		4.00
1912–1916	Donation of Mrs. Edwin S. Webster		100.00
1912	Donation of The Misses Dorothy King and Olivia Churchill		1.00
	Donation of Victor Govignon		50.00
	Donation of Pedro Tosea		10.00
	Donation of Dr. E. M. Vrooman		10.00
	Donation of Drs. Wasener and Tongs		40.00
	Donation of Paul W. Reimer		1.00
	Donation of Miss Josephine Pitman		2.00
	Donation of Miss Rosamond Clark		2.00
	Donation of Oliver S. Roberts		3.00
	Donation of Henry H. Hills		100.00
	From Clara Barton Fund		3,241.00
1913–1917	Donation of F. Hunnewell, 2d		110.00
1913	Donation of Edward W. Grew		20.00
	Donation of Mr. Countway		1.00
1913–1916	Donation of I. Tucker Burr		75.00
1913	Donation of Charles T. Lovering		30.00
	Donation of A Former Out-Patient		2.00
	Donation of Miss Mary Thomas		10.00
1913–1915	Donation of Francis I. Amory		100.00
1913–1919	Donation of Mrs. Harcourt Amory		350.00
1913	Donation of Mrs. Peter C. Brooks		50.00
1913–1919	Donation of Mrs. Stephen S. FitzGerald . . .		60.00
1913–1914	Donation of Frank E. Langley		30.00
1913	Donation of Josef Henrik Johnsan		5.00
	Donation of A Friend		25.00
1913–1922	Donation of Humane Society of Commonwealth of Massachusetts		3,700.00
1913	Donation of Mr. and Mrs. F. A. Eustis . . .		10.00
	Donation of Mrs. Henry S. Grew		1,000.00
1913–1914	Bequest of Mehitable C. C. Wilson		543.75
1913	Donation of Anonymous		2.00
	Donation of Mrs. F. A. Eustis		10.00
	Donation of Theodore Mendelstein		5.00
	Donation of The Ninety-Five Sewing Circle .		20.00
	Donation of Rosa A. Mulrey		1.00
	Donation of Miss Marjorie R. van Wickle . .		50.00
1913–1922	Donation of Mrs. W. Scott Fitz		16,000.00
1913	From Nurses' Home Fund		92,880.31
	Donation of Mrs. Andrew C. Wheelwright	$20,000.00	
	Donation of Nathaniel Thayer .	50,000.00	
	Carried forward	$70,000.00	$4,583,514.19

General Fund

	Brought forward	$70,000.00	$4,583,514.19
1913	Donation of Shepherd Brooks . .	5,000.00	
	Donation throngh the Ladies' Advisory Committee of the Training School for Nurses	14,000.00	
	Donation in memory of Mrs. Samuel Torrey Morse	1,000.00	
		$90,000.00	
	Interest accrued	2,880.31	
		$92,880.31	
1914	Donation of Mrs. Harold J. Coolidge		748.03
1914–1916	Donation of J. M. Crafts		40.00
1914	Donation of Edward B. Adams		10.00
	Donation of A Friend		5.00
1914–1919	Donation of Mrs. S. Parkman Blake		300.00
1914	Bequest of Mrs. Caroline B. Allen		5,000.00
	Bequest of Francis Bartlett by H. M. Sears, F. C. Welch and R. E. Bullard, Executors		10,000.00
	Donation of Edward B. Alford		60.00
	Donation of Mrs. William P. McKenzie . . .		5.00
	Donation of Emily Whiting		5.00
	Bequest of Anne W. Davis		9,030.70
	Donation of Mrs. Warren B. P. Weeks		25.00
	Donation of Out-Patient		1.00
	Donation of Mary A. Conlin		10.00
1914–1920	Bequest of Francis Skinner, Sr.		43,832.38
1914	Donation of Miss Helen Cudahy		500.00
	Donation of Anonymous		1.00
	Donation of Mrs. Eliza Dean		5.00
	Donation of George Wigglesworth		2,500.00
	Donation of William H. Blacar		2.50
1915	Donation of Mrs. David K. Horton		15.00
	Donation of Arthur A. Carey		5.00
	Donation of Lawson Frederick Cartter		50.00
1915–1916	Donation of Miss A. F. Manning		20.00
1915	Donation of Mrs. F. S. Mead		5.00
	Donation of Mrs. Alex. S. Porter, Jr.		25.00
1915–1919	Donation of W. B. P. Weeks		125.00
1915	Donation of Anonymous		.08
1915–1919	Donation of Mrs. F. G. Curtis		125.00
1915–1919	Bequest of Charles R. Lawrence		15,431.04
1915	Donation of Mrs. Gertrude Hunter		2.00
	Donation of Anonymous		3.00
	Donation of Dr. William E. Reed		9.22
	Donation of Anonymous		3.00
	Donation of Henry Lyman		200.00
	Donation of Anonymous		50,000.00
	Donation of Anonymous		5.00
	Donation of W. H. Williams		6.00
	Donation of Out-Patient		3.00
	Donation of Martin J. Foley		1.00
	Donation of Everett Morss		100.00
	Donation of Miss Lois W. Clarke		5.00
	Donation of Annie L. Conley		5.00
	Donation of Salvatore Maschera		3.00
	Carried forward		$4,721,741.14

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General Fund

	Brought forward	$5,950,361.56
1918	Donation of Frederick P. Bagley	25.00
	Bequest of James D. Sullivan	1,000.00
	Donation of William Caleb Loring	1,000.00
	Bequest of Richard Black Sewall	25,000.00
	Donation of Mrs. T. O. Richardson	50,000.00
	Bequest of Annie M. Washburn	100.00
	Bequest of Susan Smith, 1912. Transferred from Susan Smith Fund	13,703.98
1919	Donation of Mrs. S. D. Warren, Jr.	10.00
	Bequest of Mrs. Elizabeth W. Russell	1,133.50
	Donation of Mary T. Crocker	5.00
	Donation of Mrs. William H. McElwain . . .	50.00
	Bequest of George von L. Meyer	2,500.00
	Donation of Jennie Leitch	15.00
	Donation of Edward D. Rosenwald	15.00
	Donation of Charles P. Hobbs	5.00
	Donation of Charles Hodgdon	1.00
1920	Donation of A Friend	22,750.00
	Donation of Daniel Russell	150.00
	Bequest of Miss Fanny Young	5,000.00
	Donation of Patrick J. Kilcoyne	2.00
	Donation of Jewish Federated Charities . . .	750.00
	Donation of Henry and Theodore Lyman . . .	500.00
	Donation of Charles A. Dean	500.00
	Donation of Robert Saltonstall	2,000.00
	Donation of Horace S. Sears	2,000.00
	Bequest of Catherine M. Lewis	200.00
	Donation of David U. Boland	50.00
	Donation of E. M.	1,000.00
	Donation of Louisa Hogan	5.00
1920–1922	Donation of Edward M. Pickman	750.00
1920	Donation of Winifred T. Bolan	1.00
	Donation of the Agoos Family Charity Fund .	50.00
	Donation of Judge E. Allen Frost	100.00
	Donation of Mr. and Mrs. James J. Phelan . .	1,500.00
	Donation of Mrs. Louis A. Frothingham . . .	1,000.00
	Donation of Mr. and Mrs. S. H. Fessenden . .	5,000.00
	Donation of Dr. and Mrs. F. A. Washburn . .	100.00
	Donation of Miss Clark	1.00
	Donation of Nathaniel T. Kidder	1,000.00
	Donation of Joseph Lee	100.00
	Donation of A. E. O. Munsell	1,000.00
	Donation of T. Jefferson Coolidge	10,000.00
	Donation of Charles E. Cotting	1,000.00
	Donation of Kidder, Peabody & Co.	50,000.00
	Donation of James Dean	50.00
	Donation of Thomas Barbour	500.00
	Donation of Mrs. George E. Warren	1,000.00
	Donation of H. O. Underwood	2,500.00
	Donation of John R. Macomber	500.00
	Donation of A Friend	7,700.00
	Donation of Galen L. Stone	5,000.00
	Donation of Mrs. T. J. Coolidge, Jr	2,000.00
	Donation of Samuel Appleton	1,000.00
	Donation of Post Publishing Co.	5,000.00
	Carried forward	$6,176,684.04

General Fund

	Brought forward	$6,176,684.04
1920	Donation of James Richard Carter and Carter, Rice & Co., Inc.	500.00
	Donation of Arthur W. Wheelwright	1,000.00
	Donation of Miss Amelia Peabody	100.00
	Donation of Prof. Theodore Lyman	1,000.00
1920–1921	Donation of "T. N. P."	25,159.15
1920	Donation of Mrs. Francis W. Sargent	1,000.00
	Donation of James C. Neeley	200.00
	Donation of Mr. and Mrs. Thomas B. Gannett	9,900.00
1920–1921	Donation of Miss Sallie Sharpe	2,000.00
1920	Donation of Tarrant P. King	1,000.00
	Donation of Mrs. Frederick Winthrop . . .	2,000.00
	Donation of F. S. Moseley	1,000.00
	Donation of Anonymous	7.20
1921–1922	Donation of Committee of the Permanent Charity Fund, Inc.	3,500.00
1921	Donation of Miss Alice Maud Sturgis	880.00
	Donation of " A Grateful Patient "	30.00
	Donation of R. G. Fessenden	50.00
	Donation of Mrs. Frank Morison	3,000.00
	Bequest of William Timlin	14,000.00
	Donation of Dr. Augustus Thorndike	500.00
	Bequest of Benjamin F. Poole	12,694.72
1921–1922	Donation of A. C. Ratshesky Charity Foundation	750.00
1921	Donation of Augustus Hemenway	5,000.00
	Donation of Charles H. Moseley	25.00
	Donation of Anonymous	100.00
	Donation of Maurice E. Finn	18.00
	Donation of Francis Clark	5.00
	Donation of Anonymous	10.00
	Donation of Frank G. Webster	2,000.00
	Donation of William Endicott	5,000.00
	Donation of Mrs. Minnie M. Woods	340.00
1922	Donation of Mrs. Charles E. Mason	400.00
	Donation of Jonathan Kanzabadian	100.00
	Donation of Louis B. Thacher	20.00
	Donation of Morris Sacowitz	5.00
	Donation of Louis J. Beckwith	15.00
	Donation of United Fruit Company	500.00
	Bequest of Miss Ellen Gray	30,000.00
	Donation of Myer Rabinowitz	2.00
	Donation in memory of Jonathan Greeley Stevenson, Physician, Harvard A. M. 1816, M. D. 1826; 1799–1835.	2,000.00
	Donation in memory of Misses Martha Curtis Stevenson, Annie Brace Stevenson, Frances Greely Stevenson, of Brookline, formerly of Boston	1,000.00
1811–1922	Total unrestricted gifts	$6,303,495.11
1811–1922	Gains in Investments, etc.	2,187,359.10
		$8,490,854.21
1811–1922	Deficits at Hospitals, Investments in Land and Buildings, etc.	8,281,989.12
	BALANCE DECEMBER 31, 1922	$208,865.09

DONATIONS AND BEQUESTS FOR SPECIAL PURPOSES

(INCOME)

1857	Dr. J. G. Treadwell:	
	Bequest of books, valued at	$3,000.00
1870–1875	Dr. H. J. Bigelow:	
	Donation of instruments, valued at	3,600.00
1875	Dr. James Jackson Putnam:	
	Donation of an electrical apparatus, valued at	21.50
	Dr. John Collins Warren:	
	Donation of galvanic apparatus, valued at .	25.00
	Benefit indigent at Asylum:	
1876	Donation of Dr. Samuel Cabot	1,000.00
	Training School for Nurses:	
1877	Donation of Executors of Augustus Hemenway	5,000.00
	Toward purchase of pictures:	
1878	Donation of Frederick Dexter	50.00
	Photographic Apparatus:	
1887	Donation of Waldo March	100.00
	To make up deficiency on income of Samuel Cabot Fund:	
1888–1894	Donations of Dr. Arthur T. Cabot and Samuel Cabot	1,335.00
	Photographic Studio:	
1890	Donation of George L. Kingsley	802.82
	Repairs and alterations to Bradlee Ward:	
1895	Donation of Miss Helen C. Bradlee	7,000.00
	To make up deficiency in income of Pathological Fund:	
1897	Donation of the Staff of the Hospital . . .	1,070.60
	Interest accrued on bequest of William L. Chase for Charles B. Porter Fund	370.00
	Microtome for Pathological Laboratory:	
1899	Donation of Francis Blake	266.30
	Treadwell Library:	
	Donation of a patient	200.00
	Open Ball Court:	
1900	Donation of Dr. A. T. Cabot	1,000.00
	Zander Apparatus:	
1901	Donation of Trustees under the will of Mary Hemenway	5,000.00
	Addition to Income of Dalton Fund:	
1902–1905	Donation of Charles H. Dalton	1,000.00
	Treadwell Library:	
1903	Donation of Mrs. T. W. Bennett	100.00
	Carried forward	$30,941.22

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Donations and Bequests for Special Purposes

	Brought forward	$225.00	$72,868.72
1917	Donation of A Friend, in memory of Mary R. Hudson	10.00	
1919	Donation of Miss Margaret Perry for furnishings	430.00	
1922	Donation of J. Brotenas, Amelia Povilonis, Guardian	5.00	
	Donation of Mrs. Edgar N. Wrightington	300.00	
	Donation of Mrs. Charles E. Mason for secretarial work	75.00	
			1,045.00
1922	Toward salary and expenses of a Visiting Nurse in the Dermatological Department:		
1914–1920	Donation of a Friend	$5,820.79	
1921	Donation of Sundry Donors . .	1,949.00	
			7,769.79
	Toward the expenses of a Tennis Court for Nurses:		
1914	Donation of Miss Marion H. Fenno		10.00
	Two Scholarships, Training School for Nurses, General Hospital:		
1915–1917	Donation of Mrs. Nathaniel Thayer		100.00
	Babies' Milk Fund:		
1915–1916	Donation of George Wigglesworth .	$1,000.00	
1915	Donation of Anonymous	37.11	
1917	Donation of Dr. W. B. Robbins . .	5.00	
1917–1920	Donation of Miss Emma Hutchins .	15.00	
1917	Donation of Mrs. Neal Rantoul . .	50.00	
	Donation of Mrs. Ralph B. Williams	5.00	
	Donation of Mrs. J. D. C. Bradley .	20.00	
	Donation of Mrs. Edward Wigglesworth	25.00	
	Donation of Mrs. W. S. Spaulding .	25.00	
	Donation of Mrs. F. A. Winthrop .	25.00	
	Donation of Mrs. W. B. Emmons .	5.00	
	Donation of Mrs. Gorham Brooks .	50.00	
	Donation of Mrs. Alvan T. Fuller .	125.00	
	Donation of Mrs. Winthrop Coffin .	5.00	
	Donation of Mrs. Freeman Allen .	5.00	
	Donation of Mrs. Allan Forbes . .	10.00	
	Donation of Roger B. Merriman .	10.00	
	Donation of Mrs. Roger B. Merriman	25.00	
	Donation of Anonymous	1.00	
	Donation of Miss Alice A. Thorpe .	33.18	
1919	Donation of A Friend	50.00	
			1,526.29
	To extend help to worthy patients as their needs may become known through their attendance at the Hospital:		
1915–1917	Donation of A Friend		1,500.00
	Refitting part of the Genito-Urinary Out-Patient Rooms:		
1915	Donation of Friends of the Hospital through Mrs. Hugh Cabot		167.00
	Furniture for roof-garden:		
	Donation of Training School for Nurses' proceeds of a May Party		74.82
	Carried forward		$85,061.62

Donations and Bequests for Special Purposes

	Brought forward		$85,061.62
	Expense of X-raying a series of cases in the Out-Patient Department:		
1915	Donation of Anonymous		30.00
	Books for Patients' Library:		
	Donation of Junior Girls of Camp Abena . .		6.46
	Social Service Work:		
	Donation of Mrs. Harold J. Coolidge, in memory of the late Amory A. Lawrence	$75.00	
1916	Donation of Moses Williams . . .	25.00	
	Donation of Mrs. Charles H. Dalton	20.00	
1917	Donation of Miss Alice Farnsworth	25.00	
	Donation of Chase & Sanborn . . .	25.00	
			170.00
	Social Service Work in the Wards:		
1915–1919	Donation of the Ladies' Visiting Committee	$2,000.00	
1917–1919	Donation of Mrs. A. Lawrence Hopkins	1,442.65	
	Donation of the Committee of the Permanent Charity Fund, Inc. .	4,100.00	
			7,542.65
	Scholarship, Training School for Nurses, General Hospital:		
1916	Donation of General Hospital Training School Alumnæ		100.00
	X-Ray Department:		
	Donation of A Friend		150.00
	Special Technical Laboratory Apparatus:		
	Donation of Mrs. Malcolm Donald		1,000.00
	Salary of stenographer, and certain expenses in the Dermatological Department:		
1916–1918	Donation of W. F. Watters		1,850.00
	Children's Medical Out-Patient Department:		
1916	Donation of Dr. Fritz B. Talbot . .	$150.00	
	Donation of Mrs. Charles E. Mason, toward changes in the Department	350.00	
1922	Donation of Mrs. Charles E. Mason, for part time Clinic Secretary . .	300.00	
			800.00
	Warren Library:		
1916–1917	Donation of Dr. Richard Cabot . .	$100.00	
1916	Donation of Patrick Donovan . . .	2.79	
			102.79
	Instruments for Out-Patient Throat Department:		
	Donation of Mrs. Caroline L. Weld	$250.00	
	Donation of A Friend	500.00	
			750.00
	Infantile Paralysis Research Fund:		
	Donation of W. Murray Crane .	$500.00	
	Donation of Alvah Crocker . . .	500.00	
	Donation of William Endicott . .	500.00	
	Carried forward	$1,500.00	$97,563.52

Donations and Bequests for Special Purposes

	Brought forward	$1,500.00	$97,563.52
1916	Donation of Albert Strauss . . .	500.00	
	Donation of Frank G. Webster .	250.00	
	Donation of Charles Jackson . .	200.00	
	Donation of Arthur Perry . . .	100.00	
	Donation of Wallace L. Pierce .	100.00	
1916–1919	Donation of Robert L. Studley .	100.00	
1916	Donation of James H. Proctor .	100.00	
	Donation of George R. Wallace .	250.00	
	Donation of James J. Storrow . .	500.00	
1916–1919	Donation of Allan C. Emery . .	100.00	
	Donation of J. P. Morgan . . .	1,000.00	
1917	Donation of Infantile Paralysis Commission	450.00	
	Donation of Isaac Sprague . . .	25.00	
1919	Donation of F. W. Hallowell . .	100.00	
			5,275.00
	X-Ray Equipment:		
1917	Donation of Charles Philip Beebe		1,000.00
	Out-Patient Department:		
	Donation of Miss Myra T. Styles		10.00
	Course in Occupational Therapy:		
	Donation of Mrs. Nathaniel Thayer		100.00
	For the salary of a clerk in the Treadwell Library to typewrite certain parts of the Surgical Records:		
	Donation of Dr. G. W. W. Brewster	$50.00	
	Donation of Dr. Charles Allen Porter	50.00	
	Donation of Dr. Beth Vincent . .	30.00	
	Donation of Dr. Lincoln Davis . .	30.00	
	Donation of Dr. Hugh Williams . .	50.00	
	Donation of Dr. Daniel Fiske Jones	50.00	
	Donation of Dr. Franklin G. Balch	50.00	
	Donation of Dr. Charles L. Scudder	50.00	
1917–1918	Donation of Dr. Richard C. Cabot	88.50	
1917	Donation of Dr. R. B. Greenough .	20.00	
			468.50
	Salary of a Technician in Medical Research Laboratory:		
1918	Donation of Anonymous		780.00
	Toward Salary of a worker in Infantile Paralysis Department:		
1918–1922	Donation of Harvard Infantile Paralysis Commission		4,500.00
	Toward Expenses of the Librarian to a convention:		
1919	Donation of George Wigglesworth		40.00
	Toward Salary of an assistant in the Genito-Urinary Department:		
	Donation of George Wigglesworth		500.00
	Toward Expenses of a House Social Worker to a convention:		
	Donation of Dr. Richard C. Cabot		75.00
	Carried forward		$110,312.02

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Donations and Bequests for Special Purposes

	Brought forward		$136,004.56
	Purchase of ambrine and replacement of apparatus for treatment of burns:		
1920	Donation of Miss Louise C. May		250.00
	Nurses' Scholarship to be known as the Welch Scholarship:		
	Donation of Mrs. Eleanor Welch Paul . . .		100.00
	After treatment of Infantile Paralysis Cases:		
	Donation of Robert F. Herrick . .	$59.00	
	Donation of F. S. Moseley	100.00	
	Donation of Edward W. Grew . .	50.00	
	Donation of Junius Beebe	100.00	
	Donation of Edward W. Hutchins .	100.00	
	Donation of Mr. and Mrs. Edwin Farnbam Greene	100.00	
	Donation of J. Franklin McElwain .	100.00	
	Donation of Frederic E. Snow . . .	100.00	
			709.00
	Purchase of X-Ray Apparatus:		
	Donation of Mrs. Mary A. Bullard .	$100.00	
	Donation of Miss Judith D. Beal .	100.00	
	Donation of Miss M. E. Crafts . .	15.00	
	Donation of Mrs. C. C. Jackson . .	500.00	
	Donation of Miss E. F. Mason . .	4.00	
1921	Donation of Mrs. Mary S. Crafts .	10.00	
			729.00
	Industrial Clinic:		
1920	Donation of Pacific Mills	$500.00	
1921	Donation of American Felt Co. . .	500.00	
	Donation of Bigelow-Hartford Carpet Co.	500.00	
			1,500.00
	Treatment of Patients and Research:		
1920	Donation of United Fruit Company		1,000.00
	Dr. Walcott's Portrait Fund:		
	Unexpended Balance		90.71
	Construction of rooms in Out-Patient Department of the Industrial Clinic:		
1921	Donation of the Harvard Medical School, Department of Industrial Hygiene		2,000.00
	Rug, Nurses' Sitting Room, seventh floor Phillips House:		
	Donation of Mrs. George T. Rice		22.50
	Furnishings in Nurses' Room, sixth floor Phillips House:		
	Donation of Nathan D. Bill		150.00
	Toward the salary of the half-time worker in the Out-Patient Department of the Scoliosis Clinic:		
	Donation of S. H. Fessenden . . .	$100.00	
	Donation of George Wigglesworth .	200.00	
			300.00
	Nurses' Recreation:		
	Donation of A Friend		200.00
	Furnishing Nurses' Parlor in Thayer:		
	Donation of The Ladies' Visiting Committee		140.15
	Carried forward		$143,195.92

Donations and Bequests for Special Purposes

	Brought forward		$143,195.92
	Alterations in the Nerve Clinic:		
1921	Donation of Anonymous		263.85
1922	Income Donation:		
	Donation of Miss Sarah Smith		5.00
	For purchase of books for Granny's collection in the Warren Library:		
	Donation of A Friend through Dr. Seth M. Fitchet	$20.00	
	Donation of A Friend	20.00	
	Donation of Dr. Seth M. Fitchet . .	10.00	
			50.00
	To give some poor woman hospital care:		
	Donation of Helen Tyler Brown		50.00
	For an ambulance:		
	Donation of William Endicott		5,000.00
	For purchase of Ether Pamphlets:		
	Donation of Nathaniel T. Kidder		10.00
	For purchase of three volumes of Oliver Wendell Holmes:		
	Donation of Nathaniel T. Kidder		8.21
	For South Medical Department:		
	Donation of A Friend		100.00
	For the charitable purposes of the Hospital:		
	Donation of United Fruit Co.		500.00
1857–1922	Total Donations		$149,182.98
1922	Treadwell Library "Fines"		87.00
1919–1922	Interest added		233.46
			$149,503.44
1857–1922	Expended		145,725.08
	BALANCE DECEMBER 31, 1922.		$3,778.36
	Purchase of Ambrine and replacement of apparatus for treatment of burns	$249.90	
	Special Technical Laboratory Apparatus	1,106.31	
	Wheel Chairs	159.18	
	To be expended at Dr. Edsall's direction	209.10	
	Infantile Paralysis Research	62.97	
	Nurses' Recreation	204.00	
	Dr. Walcott's Portrait Fund	90.71	
	For purchase of books for Granny's collection in the Warren Library . . .	27.77	
	For Children's Department	252.92	
	For an Ambulance	1,049.35	
	Children's Out-Patient Department for part time Clinic Secretary	303.50	
	Treadwell Library "Fines"	62.65	
			$3,778.36

INCOME DONATIONS FOR SOCIAL SERVICE DEPARTMENT

1920–1922	Donations of Sundry Donors . .		$63,717.74
1920–1922	Expended		63,717.74
			0.

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Edward Tuckerman	1837–1843
William Appleton	1844–1862
Robert Hooper	1862–1869
Edward Wigglesworth	1869–1875
Henry B. Rogers	1875–1887
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Henry P. Walcott	1910–

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Ebenezer Francis	1833–1835
Samuel Appleton	1836
Jonathan Phillips	1837–1845
Theodore Lyman	1846–1849
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Nathaniel I. Bowditch	1856–1862
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Tristram Barnard	1813–1818
George G. Lee	1813–1816
Francis C. Lowell	1813–1815
Joseph Tilden	1813–1815
John L. Sullivan	1813–1816
Richard Sullivan	1813–1822
Jonathan Phillips	1816–1832
John Lowell	1816–1819
Joseph Coolidge	1816–1831
David Sears	1817–1819
Eben Francis	1817–1831
Peter C. Brooks	1819 (declined serving)
Joseph Head	1819–1829
Thomas W. Ward	1819–1823
Samuel Appleton	1819–1822
John Belknap	1820–1822
Daniel P. Parker	1821–1825
Theodore Lyman, Jr.	1822–1825
Benjamin Guild	1823–1834
William H. Prescott	1823–1825
Gardiner Greene	1823–1830
Samuel Swett	1823–1826
Edward Tuckerman	1824–1836
George Ticknor	1826–1830
Edward H. Robbins	1826–1834
William Sturgis	1826–1827
Amos Lawrence	1826–1831
P. T. Jackson	1827–1828
Henry Codman	1827–1835
William H. Gardiner	1828–1829
Francis C. Gray	1829–1836
Josiah Quincy, Jr.	1830–1836
Benjamin D. Greene	1830–1833
James Bowdoin	1830 (declined serving)
Heman Lincoln	1831 (declined serving)
George Bond	1831–1842
George Hallet	1831–1833

Trustees

Thomas W. Ward	1832 (declined serving)
Abbott Lawrence	1832–1835
Francis J. Oliver	1833–1835
Samuel A. Eliot	1834–1838
Charles G. Loring	1834–1837
Rufus Wyman	1835 (declined serving)
Thomas B. Curtis	1835–1838
Charles Amory	1836–1847
Henry Edwards	1836–1845
Samuel Lawrence	1836–1838
Robert G. Shaw	1836–1838
John P. Thorndike	1836–1837
Martin Brimmer	1837–1842
Robert Hooper, Jr.	1837–1849
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William Appleton	1838–1841
Thomas Lamb	1838–1861
George M. Dexter	1839–1853
Francis C. Lowell	1839–1853
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Ebenezer Chadwick	1840–1842
Ignatius Sargent	1841
William T. Andrews	1842–1847
Jonathan Chapman	1843
William F. Otis	1843
John A. Lowell	1843–1850
Charles S. Storrow	1844–1845
Edward Wigglesworth	1844-1862
William W. Stone	1846
J. Wiley Edmunds	1847–1848
J. Thomas Stevenson	1846–1859
Charles H. Mills	1848–1859
Amos A. Lawrence	1848–1854
William S. Bullard	1849–1872
G. Howland Shaw	1850–1856
William J. Dale	1851–1862, 1864
John P. Bigelow	1852–1855, 1857
Charles H. Warren	1853–1857
Robert M. Mason	1854–1862
Henry M. Holbrook	1855–1857
James B. Bradlee	1856–1859
William D. Greenough	1856–1866
John Lowell	1857–1870
Abbott Lawrence	1858–1859

Nathaniel H. Emmons	1859–1861
George Higginson	1859–1872
Marcus Morton, Jr.	1859–1860
Martin Brimmer	1860–1864
James M. Beebe	1860–1875
J. Amory Davis	1861–1866
Samuel G. Howe	1861–1875
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Harrison Ritchie	1863–1867
Henry A. Whitney	1863–1868
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Charles H. Dalton	1866–1881
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James L. Little	1866–1871
Ezra Farnsworth	1867–1872
Edmund Dwight	1868–1882, 1884–1900
George S. Hale	1870–1888
Samuel W. Swett	1870–1872
George E. Ellis	1871–1875
Samuel D. Warren	1871–1888
Henry P. Kidder	1872–1886
E. Francis Bowditch	1872–1891
Charles R. Codman	1872–1875
Robert H. Stevenson	1874–1880
Charles V. Bemis	1875–1899
Peter C. Brooks, Jr.	1875–1878
Charles J. Morrill	1875–1885
William Endicott, Jr.	1876–1897
Thornton K. Lothrop	1878–1883, 1885–1896
Roger Wolcott	1880–1896
Nathaniel Thayer, Jr.	1881–1910
Thomas E. Proctor	1883–1894
David P. Kimball	1886–1916
David R. Whitney	1887–1894
Frederick L. Ames	1888–1893
Henry P. Walcott	1892–1919
William S. Bigelow	1893–1903
Arthur A. Carey	1894–1897
Henry S. Howe	1894–1912
Samuel D. Warren	1896–1902
George Wigglesworth	1896–
Francis Blake	1897–1909
Reginald Gray	1898–1902
Moses Williams	1898–1919

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Rufus Wyman	1818–1835
Thomas G. Lee	1835–1836
Luther V. Bell	1837–1856, 1857–1858
Chauncey Booth	1856–1857
John E. Tyler	1858–1871
George F. Jelly	1871–1879
Edward Cowles	1879–1904
George T. Tuttle	1904–1919
Frederic H. Packard	1919–

First Assistant Physicians

Thomas G. Lee	1834–1835
Edward Rowland	1835–1836
John R. Lee	1837–1839
John Fox	1839–1843
Chauncey Booth	1843–1856
Mark Ranney	1856–1865
James H. Whittemore	1865–1871, 1873–1876
Orville E. Rogers	1871–1872
Charles F. Folsom	1872–1873
Charles E. Woodbury	1876–1877
James B. Ayer (temp.)	1876–1877
A. R. Moulton (temp.)	1877
Frank W. Page	1878–1879
George T. Tuttle	1879–1904
E. Stanley Abbot	1904–1909
Frederic H. Packard	1909–1919
Theodore A. Hoch	1919–

Second Assistant Physicians

Mark Ranney	1854–1856
Jerome C. Smith	1856–1861
J. Blackmere	1861–1862
James H. Whittemore	1862–1865
Isaac H. Hazelton	1865–1867
James H. Denney	1867–1869
George F. Jelly	1869–1871

Officers

Ferdinand A. Stillings	1871–1873
Charles E. Woodbury	1874–1876
Wilbur F. Sanborn	1876–1879
Winfred B. Bancroft	1879–1880
Frederick M. Turnbull	1880–1885
Henry C. Baldwin	1885
James W. Babcock	1885–1891
Daniel H. Fuller	1891–1897
E. Stanley Abbot	1897–1898
Charles S. Little	1898–1902
Guy G. Fernald	1902–1908
Earl D. Bond	1908–1912
Theodore A. Hoch	1912–1919
Ray L. Whitney	1919–1920
Freeman A. Tower	1920–

Third Assistant Physicians

Horace M. Locke	1887–1889
E. Stanley Abbot	1893–1897
Charles G. Dewey	1894–1895
Frederick W. Pearl	1898–1913
Ray L. Whitney	1913–1919

Assistant Physicians

George A. MacIver	1919–1920
Sidney M. Bunker	1921–
Kenneth J. Tillotson	1922–
John D. McCarthy (temp.)	1923

Pathologists

William Noyes	1888–1893
August Hoch	1893–1905
Frederic H. Packard	1905–1909
E. Stanley Abbot	1909–1917
Emma W. Mooers (assistant)	1900–1903
James S. Plant	1920–1921

Chemists

Otto Folin	1900–1908
Charles C. Erdman	1907–1914
Philip A. F. Schaffer (assistant)	1900–1903
Lucian A. Hill (assistant)	1903–1904
Christian Oestergren (assistant)	1904–1907
Otto Folin	1920–
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Helge Lundholm	1921–

Physiologists

Walter B. Cannon	1921–
Clarence J. Campbell	1922–

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Howard W. Beal	1897–1898
Edwin Leonard, Jr.	1897–1898
George W. Blanchard	1898–
Albert E. Loveland	1898–1899
Harry W. Miller	1898–1900
Charles B. Dunlap	1898–1899
William G. Ward	1899–1900
Guy G. Fernald	1899–1902
Martin J. Cooley	1900–1903
Frederic H. Packard	1902–1905
Albert E. Steele	1902–1903
William F. Roberts	1903–1905
Gilbert V. Hamilton	1905–1907
Ralph C. Kell	1906–1908
Frederic B. M. Cady	1907–1908
Earl D. Bond	1908–1912
Edmund M. Pease	1908–1912
Howard T. Child	1909–1910
Clarence M. Kelley	1910–1914
Hènning V. Hendricks	1911–1912
Clifford G. Rounsefell	1913–1916
Carl F. Vernlund	1913–1914
Charles M. Flagg	1914
Carl B. Hudson	1914
V. Edgar Babington	1915–1916
Sydney V. Kibby	1915–1916
Walter J. Otis	1916–1919
Clarence M. Kelley	1917–1919
Herbert R. Fiege	1917–1918
Kenneth J. Tillotson	1921–1922
Maxwell E. MacDonald	1921–1922

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Italics following the name indicate to what service of the Hospital the individual belonged:

An.; Anesthetist
Bd of Con; Board of Consultation
C.M.; Children's Medical
D; Dermatological
E.M.; East Medical
E S; East Surgical
G.U.; Genito-Urmary
L; Laryngological
N.; Neurological
Or.; Orthopedic
P.; Pathological
R.; Roentgenological
S.; Syphilogical
S.S.; South Surgical
Soc. Serv.; Social Service
T.; Trustee
T M.; Tropical Medicine
Thd.S.; Third Surgical
W.M.; West Medical
W.S.; West Surgical

Letters in small type indicate the special work of an individual. An O following indicates Out-Patient Department.

a.; assistant
assoc.; associate
c.; chief of service
chem.; chemist
con. chem.; consulting chemist
d.; dermatologist
dir.; director
dn.; dentist
h p.; house physician
h.s.; house surgeon
l.; laryngologist
n.; neurologist
obst.; obstetrician
oph.; ophthalmologist
otol.; otologist
p.; physician
path.; pathologist
r.; roentgenologist
r.p.; resident physician
r.s.; resident surgeon
s.; surgeon
s.path ; surgical pathologist
v.p.; visiting physician
v.s.; visiting surgeon

* Deceased

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JAMES HOWARD MEANS, a.p.O. 1916, assoc. m. 1916–1923, c. med. serv's 1923–
JOE VINCENT MEIGS, a.s.O. 1922–
HUGO MELLA, a. in n. 1920–1923, a.n. 1923–
LOUIS MENDELSOHN, a.p.O. 1916–1921.
ADELBERT SAMUEL MERRILL, *X-r.* h.p. 1915–1916, a.r. 1916–
RICHARD HENRY MILLER, a. in s. 1912–1914, a.s.O. 1914–1916, s.O. 1916–1919, c.s.O. 1919–
LEROY MATTHEW SIMPSON MINER, dn. 1910–
*FRANCIS MINOT, v.p. 1859–1887, Bd. of Con. 1887–1899.
GEORGE RICHARDS MINOT, a. in med. 1915–1918, assoc.m. 1918–1924, p. to sp. clin. 1924–
JAMES JACKSON MINOT, p.O. 1887–1903, v.p. 1903–1913, Bd. of Con. 1913–
SAMUEL C. MINTZ, *G.U.* a. in s. 1918–1920, a.s.O. 1922–
SAMUEL JASON MIXTER, s.O. 1886–1894, v.s. 1894–1911, c. *W.S.* 1911–1915, Bd. of Con. 1915–
WILLIAM JASON MIXTER, a.s.O. 1911–1917, s.O. 1917–1919, a.v.p. 1919–
SHERWOOD MOORE, *X-r.* h.p. 1916–1917.
*FERDINAND GORDON MORRILL, p.O. 1878–1884.
HYMAN MORRISON, a.p.O. 1915–1921, p.O. 1921–
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HARRIS PEYTON MOSHER, *L.* a.p.O. 1903–1908, aur.s. 1908–1911, assoc. l. 1912–1913, l. 1913–1920, c. of l. and otol. 1920–

*JAMES GREGORY MUMFORD, s.O. 1894–1903, a.v.s. 1903–1905, v.s. 1905–1912.

FRED TOWSLEY MURPHY, s.O. 1907–1911.

*PERCY MUSGRAVE, a.p. 1902–1903.

N

LOUIS HARRY NEWBURGH a.v.p. 1912-1916.

FRANKLIN SPILMAN NEWELL, obst. 1914–

OTIS KIMBALL NEWELL, s.O. 1889–1895.

HARVEY FIELD NEWHALL, *Or.* a. in s. 1907–1911, a.s.O. 1911–1912.

MICHELE NIGRO, *C.M.* a.p.O. 1917–1922, p.O. 1922–

O

*WALTER BURLINGAME ODIORNE, s.O. 1906.

EDWARD SCOTT O'KEEFE, a. in med. 1917–1920, *C.M.* a.p.O. 1920–1922, p.O. 1922–

EVERARD LAWRENCE OLIVER, a.d. 1911–1923, assoc. d. 1923–

*HENRY KEMBLE OLIVER, Jr., p.O. 1867–1868, v.p. 1868–1873.

RICHARD FROTHINGHAM O'NEIL, *G.U.* a.s.O. 1911, s.O. 1911–

CLARENCE EUGENE ORDWAY, a.p.O. 1917–1919.

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P

GEORGE BYRON PACKARD, Jr., *E.S.* h.s. 1917.

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WALTER WALKER PALMER, *E.M.* h.p. 1913–1915.

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MALCOLM SEYMOUR, a.p.O. 1915–1921, p.O. 1921–
FREDERICK CHEEVER SHATTUCK, p.O. 1878–1886, v.p. 1886–1912, Bd. of Con. 1912–
GEORGE CHEEVER SHATTUCK, a.p.O. 1911–1912, a.v.p. 1912–1921.
*GEORGE CHEYNE SHATTUCK, Bd. of Con. 1836–1850, v.p. 1850–1885, Bd. of Con. 1886–1893.
*BENJAMIN SHURTLEFF SHAW, r.p. 1858–1872, v.p. 1873–1882.
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WILLIAM MARTINDALE SHEDDEN, *G.U.* h.s. 1920–1921, *W.S.* h.s. 1921–1922, a. in s. 1922–
CHANNING CHAMBERLAIN SIMMONS, a.s. path. 1907, s.O. 1907–1916, a.v.s. 1916–
FRED A. SIMMONS, a. in l. 1919–1923, a.l. 1923–
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*ALEXANDER DOULL SINCLAIR, p.O. 1867–1868.
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CHARLES MORTON SMITH, *S.* c. 1913–
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ALBERT EDWARD STEELE, a. in clin. bac. 1910–
JAMES L. STODDARD, chem. 1922–
ARTHUR KINGSBURY STONE, p.O. 1893–1912, a.v.p. 1912–1918.
*DAVID HUMPHREYS STORER, v.s. 1849–1858.
*CHARLES PRATT STRONG, p.O. 1887–1893.
RICHARD PEARSON STRONG, c. *T.M.* 1915–

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J. H. SWARTZ, a.d. 1923–
WALTER B. SWIFT, a. in l. 1915–1918.

T

FRITZ BRADLEY TALBOT, *C.M.* p. in chg. 1910–1911, c. 1911–
*GEORGE GROSVENOR TARBELL, p.O. 1868–1873, v.p. 1873–1891, Bd. of Con. 1891–1900.
EDWARD WYLLYS TAYLOR, *N.* a.p.O. 1893–1911, n. 1911–1912, c. 1912–
JOHN HOUGHTON TAYLOR, a.p.O. 1919–1921, p.O. 1921–
PETER H. THOMPSON, oph. 1920–
GEORGE LORING TOBEY, Temp. a.l. 1917–1918.
HAROLD GRANT TOBEY, a. in l. 1916–1923, a.l. 1923–
HARVEY PARKER TOWLE, *D.* a.p.O. 1903–1911, d. 1911–
CHARLES WENDELL TOWNSEND, p.O. 1892–1909.
*SOLOMON DAVIS TOWNSEND, con. s. 1835–1839, v.s. 1839–1863, Bd. of Con. 1863–1869.
*HENRY TUCK, p.O. 1873–1877.

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ROBERT GLASS VANCE, *X-r.* r.p. 1923–
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FREDERICK H. VERHOEFF, oph. 1920–
HERMAN FRANK VICKERY, p.O. 1887–1898, v.p. 1898–1914, Bd. of Con. 1914–
HENRY ROUSE VIETS, Jr., a. in n. 1919, a. in s. 1919–1920, a. in n. 1921–1923, a.n. 1923–
BETH VINCENT, a. in s. 1906–1907, s.O. 1911–1917, a.v.s. 1917–
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W

*OLIVER FAIRFIELD WADSWORTH, oph.p. 1873–1899, Bd. of Con. 1900–1911.
*WILLIAM WALTER WALCOTT, a.p.O. 1916–1919.
DAVID HAROLD WALKER, otol. 1910–
EUGENE WALKER, a.r.p. 1913–1916, 1919–1920.
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*CHARLES ELIOT WARE, v.p. 1857–1868, Bd. of Con. 1868–1887.
*JOHN WARE, con.p. 1837–1838, v.p. 1839.
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J. COLLINS WARREN, p.O. 1870–1872, s.O. 1873–1877, v.s. 1877–1905, Bd. of Con. 1905–
*JONATHAN MASON WARREN, v.s. 1846–1867.

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GEORGE ARTHUR WATERMAN, *N.* a.p.O. 1902–1911, a.n. 1911–1912, assoc. n. 1912–1915, n. 1915–1916.

JOSEPH DEUTSCH WEIS, a.p. 1903.

CHARLES EDWARD WELLS, a.r.p. 1914–1915, 1917–1919, 1920–1922, 2d a. dir. 1922–

*GEORGE WEBB WEST, s.O. 1883–1888.

BRYANT DAVIS WETHERELL, *S.* a. in med. 1919–

CHARLES JAMES WHITE, *D.* a.p.O. 1895–1903, p.O. 1903–1911, d. 1911–

*JAMES CLARKE WHITE, chem. 1864–1872, *N.* p.O. 1871–1872, p.O. 1873–1902, Bd. of Con. 1902–1914.

J. WARREN WHITE, *Or.* a. in s. 1921–1922, a.s.O. 1922–1924, s.O. 1924–

PAUL DUDLEY WHITE, *W.M.* h.p. 1914–1917, 1919–1920, c. *M.O.* 1920– and p. to sp. clin, 1921–

*WILLIAM FISKE WHITNEY, a.path. 1888–1892, path. 1892–1901, s.path. 1901–1916.

WYMAN WHITTEMORE, a. in s. 1907–1908, a.s.O. 1911–1914, s.O. 1914–1919, a.v.s. 1919–

*EDWARD NEWTON WHITTIER, p.O. 1872–1883, v.p. 1883–1898, Bd. of Con. 1898–1902.

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*ROBERT WILLARD, p.O. 1869–1870.

HUGH WILLIAMS, s.O. 1903–1911, a.v.s. 1911–1917, assoc. s. 1917–1919, v.s. 1919–

PHILIP DUNCAN WILSON, *Or.* s.O. 1919–

*EDWARD STICKNEY WOOD, chem. 1873–1905.

JAMES EDWIN WOOD, Jr., *E.M.* r.p. 1923.

CLARENCE FIELD WORTHEN, Temp. a.oph. 1918.

GEORGE HENRY WRIGHT, dn. 1912–

JAMES HOMER WRIGHT, path. 1896–

MARY WRIGHT, *C.M.* a. in med. 1921–1922, a.p.O. 1922–1923, p.O. 1923–

WADE STANLEY WRIGHT, med. ass't in ind. dis. 1916–1921, p. to sp. clin. 1921–

Y

EDWARD LORRAINE YOUNG, Jr., *G.U.* a.s.O. 1912–1914, s.O. 1914–1919, s.O. 1919–

JAMES HERBERT YOUNG, *C.M.* a.p.O. 1911–1913, p.O. 1913–

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1847		
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John Gallison Sewall,	*M.*	*1872

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BENJAMIN LINCOLN RAY,	*M.*	*1879
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1859		
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1860		
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1862		
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1863		
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1871		
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James Jackson Minot,	*E.M.*	
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1881

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1882		
Franklin Asaph Dunbar,	*E.M.*	
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1883		
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Otis Kimball Newell,	*E.S.*	
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1884		
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Oscar Joseph Pfeiffer,	*E.S.*	
1885		
Henry Cutler Baldwin,	*E.S.*	*1915
Dillon Brown,	*W.S.*	*1909
Henry Jackson,	*E.M.*	
George Morrill Kimball,	*W.S.*	
Edward Reynolds,	*E.S.*	
George Gray Sears,	*W.M.*	
1886		
Algernon Coolidge,	*E.S.*	
Jerrie Knowlton Phillips,	*W.S.*	*1899
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1894

Richard Clarke Cabot,	*E.M.*	
Frederick Jay Cotton,	*W.S.*	
Abel Albert Davis,	*E.S.*	
Edward Hamilton Kidder,	*W.S.*	*1898
Sidney Archer Lord,	*S.S.*	
James Savage Stone,	*E.S.*	
Hobert Endicott Warren,	*E.S.*	
Alfred Augustus Wheeler,	*S.S.*	

1895

George Lawrence Barney,	*E.S.*	*1898
Arthur Lambert Chute,	*S.S.*	
Edmund Wright Clap,	*E.M.*	
Ernest Amory Codman,	*E.S.*	
William Pearce Coues,	*W.S.*	
Francis Parkman Denny,	*W.M.*	
George Carroll Dolliver,	*S.S.*	*1897
Richard Edward Edes,	*E.S.*	*1901
Henry Fox Hewes,	*E.M.*	
George Hillard Hill,	*W.S.*	
Henry Lincoln Houghton,	*W.S.*	
Elliot Proctor Joslin,	*W.M.*	
Herbert Charles Moffitt,	*E.M.*	
Richard Frothingham O'Neil,	*W.S.*	
Frederick Warren Pearl,	*E.S.*	
Charles Russell Lowell Putnam,	*S.S.*	
Mark Wyman Richardson,	*W.M.*	

1896

Charles Norton Barney,	*W.M.*	*1922
Joseph Almarin Capps,	*E.M.*	
William Cogswell,	*S.S.*	
Harvey Cushing,	*S.S.*	
Robert Battey Greenough,	*E.S.*	
Herbert James Hall,	*E.S.*	*1923
Robert Gardner Loring,	*W.S.*	
Franklin Spelman Newell,	*S.S.*	

Richard Frothingham O'Neil,	*E.M.*	
Charles Fairbank Painter,	*E.S.*	
John Combe Pegram, Jr.	*W.S.*	*1906
Gardiner Hubbard Scudder,	*W.M.*	*1896
Franklin Warren White,	*E.M.*	

1897

Henry Arnold Cooke,	*E.M.*	
John White Cummin,	*S.S.*	
James Crowley Donoghue,	*E.M.*	*1911
Horace Bird Frost,	*E.S.*	
Louis Whitmore Gilbert,	*W.M.*	*1919
Robert Battey Greenough,	*W.M.*	
Joseph Briggs Howland,	*W.S.*	
Joshua Clap Hubbard,	*S.S.*	
Daniel Fiske Jones,	*W.S.*	
Harris Peyton Mosher,	*E.S.*	
William Henry Smith,	*W.M.*	
Robert Henry Vose,	*E.S.*	
Frederic Augustus Washburn,	*S.S.*	
Ernest Boyen Young,	*W.S.*	*1923

1898

Seabury Wells Allen,	*W.S.*	
George Sherwin Clark Badger,	*W.M.*	
Charles Edwin Briggs,	*E.S.*	
Arthur Nicholson Broughton,	*S.S.*	
Weston Percival Chamberlain,	*W.M.*	
Arthur Richmond Crandell,	*S.S.*	
William Horace Davis,	*W.S.*	
Carleton Phillips Flint,	*S.S.*	*1908
Nathaniel Bowditch Potter,	*E.M.*	*1919
Howard Townsend Swain,	*E.S.*	
George Shattuck Whiteside,	*W.S.*	
Jonathan Dixon Yost,	*E.S.*	

1899

Howard Walter Beal,	*S.S.*	*1918
Arthur Appleton Beebe,	*E.S.*	*1900
Charles Shorey Butler,	*E.S.*	
Hugh Cabot,	*S.S.*	
Lincoln Davis,	*E.S.*	
Harry Fairbanks Hartwell,	*S.S.*	
Walter Sidney Johnson,	*W.S.*	*1920
Walter Augustus Lecompte,	*W.S.*	*1907

George Wilton Moorehouse,	*E.M.*	
Percy Musgrave,	*E.M.*	*1922
Howard Townsend Swain,	*W.M.*	
Joseph Deutsch Weis,	*W.M.*	
Hugh Williams,	*W.S.*	

1900

Freeman Allen,	*S.S.*	
William Phillips Graves,	*E.S.*	
Frederic Robert Jouett,	*W.M.*	
Maynard Ladd,	*W.M.*	
Thomas James Manahan,	*S.S.*	*1911
William Ropes May,	*E.M.*	
Walter Burlingame Odiorne,	*E.S.*	*1906
Robert Bayley Osgood,	*W.S.*	
George Burgess Pierce,	*W.S.*	
Alexander Carleton Potter,	*S.S.*	
William Henry Sayward, Jr.,	*W.M.*	
Walter Clark Seelye,	*W.S.*	
Channing Chamberlain Simmons,	*E.S.*	
Wilder Tileston,	*E.M.*	

1901

Edward Francis Washburn Bartol,	*E.S.*	
George Strong Derby,	*E.S.*	
Charles Hunter Dunn,	*W.M.*	
Alfred Henry Gould,	*S.S.*	*1907
George Sumner Hill,	*E.M.*	
Harold Abbott Johnson,	*W.S.*	
Merrick Lincoln,	*W.M.*	*1923
Frederick Taylor Lord,	*E.M.*	
Louis Guy Mead,	*E.M.*	
Fred Towsley Murphy,	*W.S.*	
Henry Lindsay Sanford,	*E.S.*	
Richard Goodwin Wadsworth,	*S.S.*	
George Arthur Waterman,	*W.M.*	
Fred Bradlee Winslow,	*S.S.*	

1902

Eliot Alden,	*W.S.*
Horace Binney,	*S.S.*
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Elisha Flagg,	*E.S.*

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Chandler Robbins,	*S.S.*	
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Richard Dexter,	*E.M.*	
Nathaniel Wales Faxon,	*S.S.*	
James Chapman Graves, Jr.,	*E.S.*	
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Charles Leonard Overlander,	*W.M.*	
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Wyman Whittemore,	*W.S.*	
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Fresenius Van Nüys,	*E.M.*	

1908

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Leslie Lawson Bigelow,	*W.S.*	
Lloyd Thornton Brown,	*S.S.*	
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George Maurice Sheahan,	*W.S.*	
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James Herbert Young,	*W.M.*	

1909

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Charles Orrin Day,	*E.S.*	
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Louis Perley Felch,	*O.*	
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Donald Gregg,	*W.M.*	
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Louis Harry Newburgh,	*W.M.*	
Augustus Riley,	*S.S.*	
Roy Angelo Sadler,	*E.M.*	
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Richard Mason Smith,	*W.M.*	
Lesley Hinckley Spooner,	*E.M.*	
John Baker Swift, Jr.	*S.S.*	

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JOHN BRYANT,	*W.S.*	
WILLIAM WADDELL DUKE,	*E.M.*	
JAMES MURRY GALLISON,	*W.S.*	
LOUIS ADILORE OLIVER GODDU,	*O.*	
HUGH PAYNE GREELEY,	*W.M.*	
ROBERT GRANVILLE HALL,	*W.M.*	
ROBERT RICHARD HELLMAN,	*C.M.*	*1911
CHARLES ALBERT HOLBROOK,	*E.S.*	
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CHARLES HENRY LAWRENCE, Jr.,	*W.M.*	
GEORGE PRICE LINGENFELTER,	*D.*	
WALTER WILLIAMSON MANTON,	*S.S.*	
GEORGE W MORSE,	*E.S.*	
ROLAND LESLEY TOPPAN,	*S.S.*	
HARRISON BRIGGS WEBSTER,	*E.S.*	*1918
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1911		
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THOMAS FRANKLIN MAYO,	*O.*	*1919
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Curtice Rosser,	*W.S.*
Robert Brewster Seabury,	*W.S.*
John Newton Shirley,	*W.S.*
Eugene Pardon Sisson, Jr.	*C.M.*
Bryant Davis Wetherell,	*E.S.*

1919

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