

# Form of Gift or Bequest

.....

I give (or bequeath) to CHARITY HOSPITAL of Louisiana at New Orleans, the sum of

..... Dollars,  
to establish a Bed "ENDOWMENT FUND."

It is agreed that this fund is to be judiciously invested and the revenue therefrom applied solely to charitable work in said institution.

.....  
*Full Name*

Date.....  
*Address*

Resolution Adopted July 19th, 1926.

The Board of Administrators of the Charity Hospital of Louisiana, New Orleans, does hereby agree and bind itself and its successors in office as a condition precedent to the receipt of donations or bequests to the "Bed Endowment Fund," to put aside unimpaired in perpetuity and invest said funds, and keep same perpetually invested in high grade bonds or other interest bearing securities, and the interest earned thereon to be dedicated and used exclusively for the furtherance of its charitable work.

## Bed "ENDOWMENT FUND"

Memorial Bed  
Endowed By  
ADELE EMILY ROESSLE  
New Orleans  
1926

Memorial Bed  
Endowed By  
JOHN FLEMING  
New Orleans  
1938

Memorial Bed  
Endowed By  
MRS. P. A. CAPDAU  
New Orleans  
1928

Memorial Bed  
Endowed By  
MRS. HATTIE McMARIUS  
GAUDET  
Thibodaux, Louisiana  
1938

Memorial Bed  
Endowed By  
LIONS' CLUB  
New Orleans  
1929

Memorial Bed  
Endowed By  
BERNARD GEO. HOLSCHER  
New Orleans  
1938

Memorial Bed  
Endowed By  
DR. J. A. HARDIN  
Chicago, Illinois  
1930

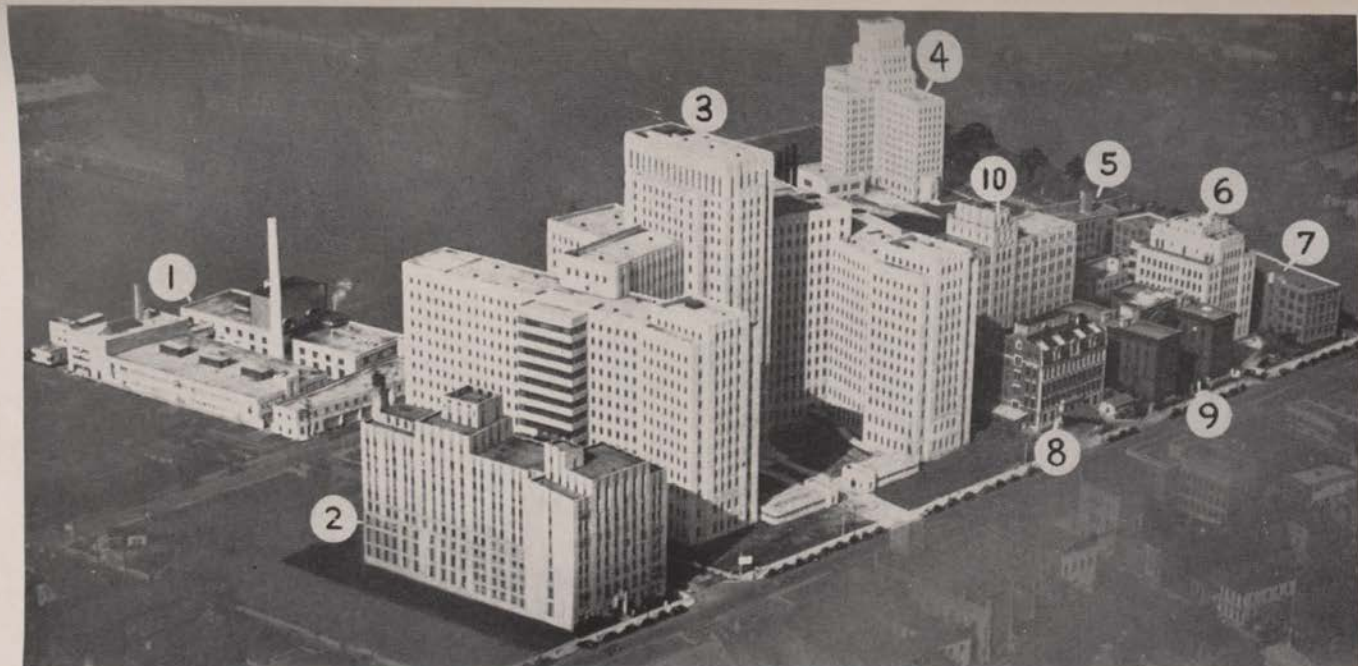
Memorial Bed  
Endowed By  
MRS. YVETTE ARON  
New Orleans  
1938

Memorial Bed  
Endowed By  
ALLEN J. ELLENDER, Jr.  
Houma, Louisiana  
1934

Memorial Bed  
Endowed By  
MISS MARIE ANTOINETTE  
BERNARD de MONTIER  
New Orleans  
1938

Memorial Bed  
Endowed By  
MRS. MOLLIE MORGAN HORN  
New Orleans  
1936

Memorial Bed  
Endowed By  
GEORGE M. READ  
Slidell, Louisiana  
1936



1. Auxiliary Buildings comprising Laundry, Garages, Warehouse, Power Plant, Ice House, Animal House, Incinerator, Auto Repair and Paint Shop.
2. Hutchinson Memorial Building, School of Medicine, Tulane University.
3. New Main Hospital Building.
4. School of Nursing and Nurses' Residence.
5. Sisters' Home Building.
6. Lapeyre Miltenberger Home for Convalescents.
7. John Dibert Tuberculosis Hospital.
8. Delgado Memorial Charity Hospital.
9. Richard Milliken Memorial Hospital.
10. Louisiana State University School of Medicine.

**BOARD OF ADMINISTRATORS**  
**Years Closing June 30th, 1939-1940**

---

†HIS EXCELLENCY GOVERNOR EARL K. LONG, Ex-OFFICIO PRESIDENT

HIS EXCELLENCY GOVERNOR SAM H. JONES, Ex-OFFICIO PRESIDENT

CHAS. J. RIVET, Vice-President

B. C. CASANAS

J. A. DUMAINE

T. J. DARCY

DR. W. D. PHILLIPS

JOHN L. DIASSELLISS

RICHARD R. FOSTER

DR. E. F. SALERNO

---

**FINANCE COMMITTEE**

JULES A. DUMAINE, Chairman

B. C. CASANAS

RICHARD R. FOSTER

---

**HOUSE COMMITTEE**

JOHN L. DIASSELLISS, Chairman

T. J. DARCY

RICHARD R. FOSTER

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**MEDICAL COMMITTEE**

DR. E. F. SALERNO, Chairman

RICHARD R. FOSTER

DR. W. D. PHILLIPS

---

FRED. W. MATTHEWS

*Secretary-Treasurer of the Board*

---

†Term expired May 14, 1940.

## HOSPITAL STAFF

### Year Closing June 30, 1940

---

GEORGE S. BEL, M. D., Director  
(Died August 10th, 1939)

ROY W. WRIGHT, M. D., Assistant Director  
(Appointed Director to succeed Dr. Bel, August 14th, 1939)

CHAS. B. ODOM, M. D.  
J. O. WEILBAECHER, JR., M. D. } Assistant Directors

---

#### PATHOLOGICAL LABORATORIES

RIGNEY D'AUNOY, M. D., Pathologist and Director of Laboratories  
(Resigned August 22nd, 1939)

EMMA S. MOSS, M. D., Pathologist and Acting Director of Laboratories

---

#### X-RAY, RADIUM AND DEEP THERAPY

AMEDEE GRANGER, M. D., Director  
(Died December 15th, 1939)

JAMES B. IRWIN, M. D., Acting Director  
(Resigned June 30th, 1940)

EDNA W. BROWN, M. D., Acting Director

---

#### HEART STATION—ELECTROCARDIOGRAPH LABORATORY

RICHARD ASHMAN, Ph. D., Director

JAMES L. GOUAUX, M. D., Assistant Director

---

#### PHYSICAL THERAPY DEPARTMENT

MARION B. STEWART, Supervisor

---

#### SOCIAL SERVICE DEPARTMENT

BEATRICE HODGE, Director

---

#### RECORD LIBRARY

ELIZABETH B. GREENWALD, Registered Medical Record Librarian

---

#### NURSING DEPARTMENT

SISTER STANISLAUS, R. N., Sc. D., Director of Department

SISTER MATHILDE, M. A., Assistant Director of Department

SISTER HENRIETTA, R. N., M. S., Director of School of Nursing and  
Nursing Service

# CHARITY HOSPITAL RESIDENT STAFF

July 1, 1939—June 30, 1940

## MEDICINE

### *L. S. U. Unit—*

J. E. BLUM, M. D.—4th year  
D. E. FADER, M. D.—3rd year  
R. E. SELSER, M. D.—3rd year  
A. W. CANNAVA, M. D.—2nd year  
W. G. FISHER, M. D.—2nd year  
C. H. RABINOWITZ, M. D.—2nd year  
†M. J. BOGGS, M. D.—1st year  
W. A. GALBREATH, M. D.—1st year  
J. D. GARCIA, M. D.—1st year  
B. A. GOLDMAN, M. D.—1st year  
P. W. HORN, M. D.—1st year

### *Tulane Unit—*

R. A. WISE, M. D.—3rd year  
R. C. KELLEHER, M. D.—2nd year  
J. A. CHUSTZ, M. D.—2nd year  
P. J. THOMAS, M. D.—2nd year  
A. M. GORDON, M. D.—1st year  
C. C. JOSEPH, M. D.—1st year  
J. A. MAGNE, M. D.—1st year  
M. E. ST. MARTIN, M. D.—1st year

### *Independent Unit—*

H. J. DUPUY, M. D.—1st year  
H. M. TAYLOR, M. D.—1st year

## PEDIATRICS

W. J. CRAWFORD, M. D.—2nd year  
A. S. ALBRITTON, M. D.—1st year  
B. J. LACOUR, M. D.—1st year  
E. L. LEVERT, M. D.—2nd year  
B. N. WEXLER, M. D.—2nd year  
C. B. BURNS, M. D.—1st year

## DERMATOLOGY AND SYPHILOLOGY

M. E. KOPFLER, M. D.—2nd year  
G. H. SMULLEN, M. D.—1st year

## NEURO-PSYCHIATRY

†S. A. GOODMAN, M. D.—1st year

## SURGERY

F. M. SANDIFER, M. D.—4th year  
†N. A. COX, M. D.—3rd year  
L. J. O'NEIL, M. D.—3rd year  
R. P. HAYS, M. D.—2nd year  
D. B. WILLIAMS, M. D.—2nd year  
A. E. RAMAY, M. D.—1st year  
J. L. DiLEO, M. D.—1st year  
P. P. GIUFFRE, M. D.—1st year  
C. H. MOSELY, M. D.—1st year  
S. D. MURRAY, M. D.—4th year  
F. T. GIDMAN, M. D.—3rd year  
D. S. CONDIE, M. D.—2nd year  
R. G. HOLCOMBE, M. D.—2nd year  
L. J. KLEINSASSER, M. D.—2nd year  
J. A. RAVENEL, M. D.—2nd year  
H. BETHEA, M. D.—1st year  
R. C. DAY, M. D.—1st year  
J. A. SABATIER, M. D.—1st year  
G. F. SCHROEDER, M. D.—1st year

### *Independent Unit—*

L. B. LEGGIO, M. D.—4th year  
M. C. KOLZUN, M. D.—3rd year  
H. E. NELSON, M. D.—1st year  
L. C. DELERY, M. D.—1st year

†Resigned.

## RESIDENT STAFF—Continued

### OBSTETRICS AND GYNECOLOGY

H. LEIDENHEIMER, M. D.—2nd year	†G. A. VARINO, M. D.—3rd year
†R. E. MONTGOMERY, M. D.—2nd year	W. K. GAUTHIER, M. D.—2nd year
G. K. ROGERS, M. D.—2nd year	ABE GOLDEN, M. D.—2nd year
J. W. WILLIAMS, M. D.—2nd year	O. V. PREJEAN, M. D.—2nd year
D. W. GOLDMAN, M. D.—1st year	W. F. THOMAS, M. D.—2nd year
B. J. LEHMAN, M. D.—1st year	J. R. JONES, M. D.—1st year
J. E. WARREN, M. D.—1st year	E. W. NELSON, M. D.—1st year
	J. D. TALBOT, M. D.—1st year

#### *Independent Unit—*

W. V. TREADWELL, M. D.—1st year

### ORTHOPEDECS

I. CAHEN, M. D.—2nd year	M. M. BANNERMAN, M. D.—2nd year
I. REDLER, M. D.—1st year	M. P. KNIGHT, M. D.—2nd year
J. J. SOFRANEC, JR., M. D.—1st year	R. W. AUGUSTINE, M. D.—1st year
	J. T. JACOBS, M. D.—1st year

### OPHTHALMOLOGY

N. C. FARRINGTON, M. D.—2nd year	J. H. SAUNDERS, M. D.—2nd year
J. T. SIMMONS, M. D.—1st year	L. S. GAMBLE, M. D.—1st year
	J. C. SUARES, M. D.—1st year

### OTO-RHINO-LARYNGOLOGY

†V. H. BOYD, M. D.—2nd year	J. D. MAGEE, M. D.—2nd year
A. V. HAYS, M. D.—2nd year	W. FINKLESTEIN, M. D.—1st year
N. L. HART, M. D.—1st year	

#### *Independent Unit—*

R. D. ELLENDER, M. D.—2nd year

### UROLOGY

W. D. BEACHAM, M. D.—3rd year	G. VANDAMA, M. D.—2nd year
E. MALTRY, M. D.—2nd year	E. F. KELLY, M. D.—1st year
G. W. VICKERY, M. D.—1st year	M. SILVEY, M. D.—1st year

#### *Independent Unit—*

M. E. FATTER, M. D.—1st year

### RADIOLOGY (*All Units*)

H. C. JENSEN, M. D.—2nd year	J. R. RILEY, M. D.—1st year
D. R. MATTINGLY, M. D.—2nd year	H. FISHBEIN, M. D.—1st year

### PATHOLOGY (*All Units*)

E. PALIK, M. D.	M. M. RICE, M. D.
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### DENTISTRY (*All Units*)

C. C. BRUCKER, D. D. S.

### ADMITTING PHYSICIANS

C. L. BLUMSTEIN, M. D.	E. T. WHITE, JR., M. D.
J. G. MARSH, M. D.	J. A. WHITE, M. D.
J. E. TOUPS, M. D.	M. SUTER, M. D.
†C. M. WARREN, M. D.	

†Resigned.



Emergency Entrance Showing Ramp for Ambulances.



## CHARITY HOSPITAL INTERNE STAFF

July 1, 1939—June 30, 1940

- |  |  |
|--|--|
| <p>Hartwig Moss Adler, M. D.<br/>                     *Benjamin L. Allen, M. D.<br/>                     Alyce Mary Arretteig, M. D.<br/>                     Donald W. Atcheson, M. D.<br/>                     Samuel Carter Atkinson, M. D.<br/>                     Landon Haynes Bachman, M. D.<br/>                     Soddie James Barkett, M. D.<br/>                     George Lee Basham, M. D.<br/>                     John Dillard Battle, Jr., M. D. (Path)<br/>                     Kenneth Harold Beach, M. D.<br/>                     Philip J. Begley, M. D.<br/>                     Phillip Augustus Belleggie, M. D.<br/>                     John Henry Bergman, M. D.<br/>                     Thurmond DeWitte Boaz, Jr., M. D.<br/>                     Ralph Louis Bourgeois, M. D.<br/>                     *Fred Austin Boyd, D. D. S.<br/>                     David Van Brown, M. D.<br/>                     Charles Russell Brownell, Jr., M. D.<br/>                     John Paul Burton, M. D.<br/>                     Fred Arthur Butler, M. D.<br/>                     Edmond Chadwick Campbell, M. D.<br/>                     Edward E. Cannon, M. D.<br/>                     Vincent Henry Carstensen, M. D.<br/>                     Eustace Vitor Chauvin, Jr., M. D.<br/>                     James Jennings Cleckley, M. D.<br/>                     Claude C. Craighead, M. D.<br/>                     Alfred Penn Crain, Jr., M. D.<br/>                     Lester Cain Crismon, M. D.<br/>                     Horace Milton Dalton, M. D.<br/>                     William Andrew Daniel, Jr., M. D.<br/>                     Ernest George DeBakey, M. D.<br/>                     Bernard M. DeMahy, M. D.<br/>                     Jack Drury DeMott, M. D.<br/>                     Walter Palmer Diaz, M. D.<br/>                     James Willard Dowell, M. D.<br/>                     Horace Buffington Dozier, M. D.<br/>                     Vance Johnson Elliott, M. D.<br/>                     Ira Chenault Evans, M. D. (Path.)<br/>                     Herbert Ray Evers, M. D.<br/>                     John Pleasant Fatherree, M. D.<br/>                     Esmond Anthony Fatter, M. D.<br/>                     Henry H. Fineberg, M. D.<br/>                     William Joseph Fitzgerald, M. D.<br/>                     Leo Jay Flax, M. D.<br/>                     Guy Martin Francis, M. D.<br/>                     George Fraser, M. D.<br/>                     Alfred Francis Frey, D. D. S.<br/>                     Morris S. Friedman, M. D.<br/>                     Isidore Wilmot Gajan, Jr., M. D.<br/>                     Richard Ellis Gardner, M. D.<br/>                     Paul Lionel Getzoff, M. D.</p> | <p>Harold Raymond Gilbert, M. D.<br/>                     George Glenwood Gill, M. D.<br/>                     Donald D. Gnose, M. D.<br/>                     Israel Ian Esar Gordon, M. D.<br/>                     Peter Carl Graffagnino, M. D.<br/>                     *Jacob Greenblatt, M. D.<br/>                     Vernon LeRoy Hagan, M. D.<br/>                     Myron Richard Halsbond, M. D. .<br/>                     Robert Kennon Hancock, M. D.<br/>                     Edward McLeod Harrell, M. D.<br/>                     James William Headstream, M. D.<br/>                     Herbert Dale Hebel, M. D.<br/>                     Vernon Medd Henington, M. D.<br/>                     Claude Nash Herndon, Jr., M. D.<br/>                     Warren Vance Hinshaw, M. D.<br/>                     Leon Hodges, M. D.<br/>                     Joseph Vincent Hopkins, Jr., M. D.<br/>                     *Jack Chenoweth Horner, M. D. (Path.)<br/>                     *Russell Keaton Horsman, M. D.<br/>                     Roy Albert Hulse, M. D.<br/>                     Donald T. Imrie, M. D.<br/>                     Louis Wm. Oscar Janssen, Jr., M. D.<br/>                     Allen Jones Jervey, Jr., M. D.<br/>                     William St. Julien Jervey, M. D.<br/>                     Wilbur Edward Johnson, M. D.<br/>                     Gus William Jones, Jr., M. D.<br/>                     Roy Arthur Kelly, M. D.<br/>                     Paul Kernek, M. D.<br/>                     Lamar Louis Lambert, M. D.<br/>                     James Jack LaNasa, M. D.<br/>                     Charles O'Dowd Lilly, M. D.<br/>                     Lyon K. Loomis, M. D.<br/>                     Lee Hall Lorensen, M. D.<br/>                     Raymond Earl Lovett, M. D.<br/>                     Harl D. Mansur, Jr., M. D.<br/>                     Frank Xavier Marino, M. D.<br/>                     George Harriss Martin, M. D.<br/>                     Murphy Patrick Martin, M. D.<br/>                     William Kenney Massie, Jr., M. D.<br/>                     Milton Mazo, M. D.<br/>                     James S. McCabe, M. D.<br/>                     William Mellen McCord, M. D.<br/>                     John Francis McGregor, M. D.<br/>                     Delbert Wesley McKinney, M. D.<br/>                     Francis Claburn McLane, M. D.<br/>                     Justin C. McNutt, M. D.<br/>                     *Janie McSwain, M. D.<br/>                     Edmund Arthur Melvin, M. D.<br/>                     Eldon Edward Merse, M. D.<br/>                     Floyd Darwin Miller, M. D.</p> |
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\*Resigned

## INTERNE STAFF—Continued

- Max Mayo Miller, Jr., M. D.  
 †George John Mitchell, M. D.  
 Joseph Daniel Mitchell, Jr., M. D.  
 Joseph Marcel Montagnet, M. D.  
 James Frederick Morton, M. D.  
 Jules Stelly Mottv, Jr., M. D.  
 Rush Edward Netterville, M. D.  
 George Burton Neukom, M. D.  
 Roland Edward Nieman, M. D.  
 Evelyn Beatrice Nix, M. D.  
 Leonard Collier Paggi, M. D.  
 Julian Gray Parker, M. D.  
 Van Sam Parmley, M. D.  
 Homer Sylvester Parnell, Jr., M. D.  
 Morris Pasternack, M. D.  
 McLeod Patterson, M. D.  
 Louis Scowcroft Peery, M. D.  
 John Luke Pepe, M. D.  
 Claud W. Perry, Jr., M. D.  
 Benjamin James Phillips, M. D.  
 Philip Pizzolato, M. D. (Path.)  
 Joseph Winfield Plauche, Jr., M. D.  
 \*Joseph Page Pollard, M. D.  
 †Elizabeth Balas Powell, M. D.  
 Norborne Berkeley Powell, M. D.  
 Winston Boone Prothro, M. D.  
 Roscoe LeRoy Pullen, M. D.  
 Francis Warren Raggio, Jr., M. D.  
 Linus Edwin Rausch, M. D.  
 Frederick Louis Reuter, M. D.  
 George Shackelford Richardson, M. D.  
 Jack Leahy Richardson, M. D.  
 Bernard Jay Rike, M. D.  
 Howard Emerson Roberts, M. D.  
 Melville Rosenbusch, M. D.  
 George Catlett Rowe, M. D.  
 Irvin Sadoff, M. D.  
 Blaise Peter Salatich, M. D.  
 Peter Blaise Salatich, Jr., D. D. S.  
 David Douglas Salmon, M. D.  
 Martin Francis Samson, M. D.  
 Marshall Morris Scarle, M. D.  
 Raymond Scheff Schear, M. D.  
 James Maurice Shargel, M. D.  
 Thurman Shuller, M. D.  
 Martha Adele Simmons, M. D.  
 Courtland Prentice Smith, M. D.  
 Francis Dunnington Smith, M. D.  
 John Robert Snavelly, M. D.  
 Robert Sprague Srigley, M. D.  
 Alvin Stander, M. D.  
 Ray Gingles Stark, M. D.  
 Henry Maximilian Stern, M. D.  
 Sidney Stillman, M. D.  
 Frederick Adolphus Stine, M. D.  
 Bertha-Elvis Stokes, M. D.  
 Margaret Elinor Strange, M. D.  
 Roland Reuben Suran, M. D.  
 Garnett J. Sweeney, M. D.  
 William Trachtenberg, M. D.  
 William Wallace Tribby, M. D.  
 William Willer Trice, M. D.  
 Joseph John Tritico, M. D.  
 James Edward Trow, Jr., M. D.  
 Portis Wils Turrentine, M. D.  
 Arthur Vandergrift, Jr., M. D.  
 James William Vaudry, M. D.  
 William Ogden Vennard, M. D.  
 Gretchen Marie Vitter, M. D. (Path.)  
 Jerome Anderson Weaver, M. D.  
 Henry Clay White, Jr., M. D.  
 Francis Record Whitehouse, M. D.  
 Fred Stewart Whitfield, Jr., M. D.  
 Jack Kenneth Wickstrom, M. D.  
 Lee Williamson, M. D.  
 James A. Wilson, M. D.  
 Cyril Thompson Yancey, M. D.  
 Anthony Cyril Yerkovich, M. D.  
 Reuben Allnutt Zarrilli, M. D.

\*Resigned

†Began Internship January 1, 1940.

# CHARITY HOSPITAL VISITING STAFF

## July 1, 1939—June 30, 1940

### MEDICINE AND THE MEDICAL SPECIALTIES

#### GENERAL MEDICINE

##### Consulting Physicians

\*GEO. S. BEL, M. D. A. E. FOSSIER, M. D.  
L. J. DUBOS, M. D. S. C. JAMISON, M. D.  
\*J. A. STORCK, M. D.

##### Senior Visiting Physicians

O. W. BETHEA, M. D. W. A. LOVE, M. D.  
M. CAMPAGNA, M. D. M. W. MILLER, M. D.  
J. C. COLE, M. D. L. A. MONTE, M. D.  
UPTON GILES, M. D. J. H. MUSSER, M. D.  
BEN R. HENINGER, M. D. I. L. ROBBINS, M. D.  
SAM HOBSON, M. D. J. H. SMITH, JR., M. D.  
P. H. JONES, JR., M. D. J. G. STULB, M. D.  
A. L. LEVIN, M. D. NARCISSE F. THIBERGE, M. D.  
J. L. LOCASCIO, M. D. R. H. TURNER, M. D.

##### Visiting Physicians

OWEN F. AGEE, M. D. EDGAR HULL, M. D.  
J. J. ARCHINARD, M. D. SYDNEY JACOBS, M. D.  
JULIUS BAUER, M. D. D. V. LONGO, M. D.  
R. H. BAYLEY, M. D. ROBERT C. LOWE, M. D.  
ROBERT BERNHARD, M. D. LOUIS OCHS, JR., M. D.  
EMILE A. BERTUCCI, M. D. P. L. QUERENS, M. D.  
OSCAR BLITZ, M. D. L. C. SCOTT, M. D.  
G. E. BURCH, JR., M. D. MORRIS SHUSHAN, M. D.  
J. S. D'ANTONI, M. D. DANIEL M. SILVERMAN, M. D.  
K. L. DICKENS, M. D. W. A. SODEMAN, M. D.  
J. C. ELLINGTON, M. D. C. J. TRIPOLI, M. D.  
MANUEL GARDBERG, M. D. F. S. WILLIAMS, M. D.  
GRACE A. GOLDSMITH, M. D. JULIUS L. WILSON, M. D.

##### Assistant Visiting Physicians

ALICE BAKER, M. D. NATHAN GOLDSTEIN, M. D.  
G. E. P. BARNES, M. D. D. F. GOWE, M. D.  
CLARENCE A. BISHOP, M. D. JOEL B. GRAY, M. D.  
KERMIT BRAU, M. D. J. E. HOLOUBEK, M. D.  
STANLEY COHEN, M. D. OZA JOSEPH LABARGE, M. D.  
SEBRON C. DALE, M. D. J. D. LANDRY, M. D.  
M. J. DUFFY, M. D. LOUIS K. LEVY, JR., M. D.  
NICHOLAS K. EDRINGTON, M. D. J. A. LEWIS, M. D.  
F. A. EIGENBROD, M. D. EDWARD DES. MATTHEWS, M. D.  
HUGO T. ENGELHARDT, M. D. R. S. MUNGER, M. D.  
EARL FOSTER EVANS, M. D. ADOLPH T. OGAARD, M. D.  
CHESTER S. FRESH, M. D. HENRY D. OGDEN, M. D.  
MARCEL J. FORET, M. D. J. O. W. RASH, M. D.  
W. H. GILLENLINE, M. D. NORTON W. VOORHIES, M. D.  
JOSEPH W. WELLS, M. D.

\*Deceased.

## VISITING STAFF—*Continued*

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### PREVENTATIVE MEDICINE AND PUBLIC HEALTH

Visiting Consultant

ALDO CASTELLANI, M. D.

Senior Visiting Physician

GEO. W. MCCOY, M. D.

Parasitologist

J. C. SWARTZWELDER, Ph. D.

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### DERMATOLOGY

Consulting Physicians

H. E. MENAGE, M. D.

\*J. NUMA ROUSSEL, M. D.

Senior Visiting Physician

RALPH HOPKINS, M. D.

Visiting Physicians

\*J. A. DEVRON, M. D.

M. D. LANG, M. D.

J. K. HOWLES, M. D.

M. MALLOWITZ, M. D.

C. B. KENNEDY, M. D.

J. W. TEDDER, M. D.

M. T. VAN STUDDIFORD, M. D.

Assistant Visiting Physician

A. J. ITALIANO, M. D.

---

### NEURO-PSYCHIATRY

Senior Visiting Physicians

W. J. OTIS, M. D.

G. F. ROELING, M. D.

T. A. WATTERS, M. D.

Visiting Physicians

LUCY SCOTT HILL, M. D.

H. RANDOLPH UNSWORTH, M. D.

ERWIN WEXBERG, M. D.

Assistant Visiting Physicians

L. A. GOLDEN, M. D.

H. L. MACKINNON, M. D.

†CARL H. HAMANN, M. D.

J. BERYL SUMERFIELD, M. D.

JULIUS M. WALLNER, M. D.

---

\*Deceased.

†Resigned.

## VISITING STAFF—Continued

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### PEDIATRICS

#### Senior Visiting Physicians

C. J. BLOOM, M. D.                                 \*JOHN SIGNORELLI, M. D.  
MAUD LOEBER, M. D.                             E. A. SOCOLA, M. D.  
  R. A. STRONG, M. D.

#### Visiting Physicians

RUTH G. ALEMAN, M. D.                        F. J. KINBERGER, M. D.  
JAMES E. BAILEY, M. D.                       E. F. NAEF, M. D.  
RENA CRAWFORD, M. D.                        W. C. RIVENBARK, M. D.  
R. E. DE LA HOUSSEY, M. D.                 HERBERT ROTHSCHILD, M. D.  
P. C. DEVERGES, M. D.                         SUZANNE SCHAEFER, M. D.  
MERRILL W. EVERHART, M. D.                JACK E. STRANGE, M. D.  
J. GRAUBARTH, M. D.                         M. D. STERBCOW, M. D.  
  G. R. WILLIAMSON, M. D.

#### Assistant Visiting Physicians

AUDREY HEINTZ, M. D.                         JOSEPH D. RUSS, M. D.  
H. P. MARKS, JR., M. D.                     ADRIAN RODRIGUEZ, M. D.  
DAVID S. MILLER, M. D.                     CARROLL SMITHERS, M. D.  
  R. P. VEITH, M. D.

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### PHYSICAL THERAPY

#### Visiting Physician

NATHAN H. POLMER, M. D.

---

\*Deceased.

## VISITING STAFF—Continued

### SURGERY AND THE SURGICAL SPECIALTIES

#### GENERAL SURGERY

##### Consulting Surgeons

J. M. BATCHELOR, M. D.	*MAURICE GELPI, M. D.
MUIR BRADBURN, M. D.	HERMAN GESSNER, M. D.
RUDOLPH MATAS, M. D.	

##### Senior Visiting Surgeons

G. C. ANDERSON, M. D.	L. H. LANDRY, M. D.
EMILE BLOCH, M. D.	E. L. LECKERT, M. D.
W. P. BRADBURN, JR., M. D.	HENRY LEIDENHEIMER, M. D.
W. R. BREWSTER, M. D.	JOSEPH LEVY, M. D.
O. C. CASSEGRAIN, M. D.	SHIRLEY C. LYONS, M. D.
F. L. CATO, M. D.	URBAN MAES, M. D.
FRANK CHETTA, M. D.	C. WALTER MATTINGLY, M. D.
ISIDORE COHN, M. D.	C. J. MIANGOLARRA, M. D.
C. GRENES COLE, M. D.	DANIEL J. MURPHY, M. D.
JOSEPH A. DANNA, M. D.	JAMES T. NIX, M. D.
I. M. GAGE, M. D.	ALTON OCHSNER, M. D.
F. C. HAVA, M. D.	P. A. PHILLIPS, M. D.
EMMETT IRWIN, M. D.	E. J. RICHARD, M. D.
P. G. LACROIX, M. D.	J. D. RIVES, M. D.
JEROME E. LANDRY, M. D.	A. H. STORCK, M. D.

##### Visiting Surgeons

P. A. BOUDREAUX, M. D.	JOHN L. KEELEY, M. D.
F. F. BOYCE, M. D.	A. B. LONGACRE, M. D.
J. E. BRIERRE, M. D.	FRANK LORIA, M. D.
CUTHBERT J. BROWN, M. D.	H. R. MAHORNER, M. D.
R. L. BUCK, M. D.	†W. H. MEADE, M. D.
L. S. CHARBONNET, JR., M. D.	WALDEMAR METZ, M. D.
R. J. CHRISTMAN, M. D.	W. D. NORMAN, M. D.
T. E. CLEMENTS, M. D.	JOHN F. OAKLEY, M. D.
J. A. COLCLOUGH, M. D.	NEAL OWENS, M. D.
PASCAL L. DANNA, M. D.	RAWLEY M. PENICK, JR., M. D.
M. E. DEBAKEY, M. D.	A. MCK. POWE, M. D.
D. H. ECHOLS, M. D.	SAMUEL A. ROMANO, M. D.
CARROLL F. GELBKE, M. D.	SAM B. SAIIEWITZ, M. D.
CORNELIUS E. GORMAN, M. D.	WARREN HOOPER SEARS, M. D.
L. J. HANCKES, M. D.	J. F. SICOMO, M. D.
W. H. HEBERT, M. D.	J. KELLY STONE, M. D.
H. C. ILGENFRITZ, M. D.	L. H. STRUG, M. D.
H. R. KAHLE, M. D.	COSMO J. TARDO, M. D.
I. W. KAPLAN, M. D.	WM. G. TROESCHER, M. D.
SAMUEL KARLIN, M. D.	RICHARD W. VINCENT, M. D.
CARL N. WAHL, M. D.	

##### Assistant Visiting Surgeons

T. T. BATSON, M. D.	GEORGE B. GRANT, M. D.
MERRILL C. BECK, M. D.	F. M. HINDELANG, M. D.
H. A. DAVIS, M. D.	BERNARD HOCHFELDER, M. D.
VINCENTE D'INGIANNI, M. D.	DAVID HYMAN, M. D.
FRANK GAMBINO, M. D.	JOHN L. KRON, JR., M. D.
A. G. SILVA, M. D.	

\*Deceased.

†Resigned.

## VISITING STAFF—Continued

### ANESTHESIA

#### Visiting Anesthetist

WILMER BAKER, M. D.

#### Assistant Visiting Anesthetist

LILY L. DISMUKE, M. D.

### OBSTETRICS AND GYNECOLOGY

#### Consulting Surgeons

J. S. HEBERT, M. D. WM. D. PHILLIPS, M. D.  
H. W. KOSTMAYER, M. D. P. T. TALBOT, M. D.

#### Senior Visiting Surgeons

H. B. ALSOBROOK, M. D. ADOLPH JACOBS, M. D.  
P. J. CARTER, M. D. E. L. KING, M. D.  
JOHN F. DICKS, M. D. WALTER E. LEVY, M. D.  
A. H. GLADDEN, M. D. (Inactive) H. E. MILLER, M. D.  
FRANK R. GOMILA, SR., M. D. T. B. SELLERS, M. D.  
P. GRAFFAGNINO, M. D. H. VERNON SIMS, M. D.  
A. F. HEBERT, M. D. E. H. WALET, M. D.

#### Visiting Surgeons

DAVID ADIGER, M. D. ALFRED JACOBY, M. D.  
R. E. ARNELL, M. D. C. G. JOHNSON, M. D.  
C. F. BELLONE, M. D. THEO. F. KIRN, M. D.  
H. G. BUTKER, M. D. M. E. LAPHAM, M. D.  
C. P. CABIBI, M. D. J. E. LINDNER, M. D.  
ARTHUR CAIRE, JR., M. D. H. C. MAGEE, M. D.  
HYMEN L. COHEN, M. D. G. A. MAYER, M. D.  
C. G. COLLINS, M. D. HARRY MAYER, M. D.  
E. H. COUNTISS, M. D. T. H. OLIPHANT, M. D.  
GEO. H. CRONAN, M. D. FELIX A. PLANCHE, M. D.  
G. D. FELDNER, M. D. J. W. REDDOCH, M. D.  
W. P. GARDINER, M. D. WM. H. ROELING, M. D.  
JACK S. GEORGE, M. D. EARL C. SMITH, M. D.  
W. F. GUERRIERO, M. D. M. L. STADIEM, M. D.  
E. R. GUIDRY, M. D. N. J. TESSITORE, M. D.  
W. R. HARDY, M. D. E. P. THOMAS, M. D.  
J. S. HERRING, M. D. C. H. TYRONE, M. D.  
KATHERINE HAVARD, M. D. F. K. VAUGHAN, M. D.  
E. L. ZANDER, M. D.

#### Assistant Visiting Surgeons

EUGENE H. CLAVERIE, M. D. M. L. M. PARETI, M. D.  
†JOSEPH W. DOUGLAS, M. D. ROLAND F. PHILLIPS, M. D.  
A. V. FILIZOLA, M. D. P. E. PROUET, M. D.  
JAMES P. GILLASPIE, M. D. R. E. ROUGELET, M. D.  
T. A. GLASS, JR., M. D. MALCOLM SCHWARTZENBACH, M. D.  
F. R. GOMILA, JR., M. D. MELVIN D. STEINER, M. D.  
DANIEL M. KINGSLEY, M. D. RICHARD T. STEPHENSON, M. D.  
FRANK R. LOCK, M. D. †J. A. VELLA, M. D.  
CARROLL H. LONG, M. D. JAMES S. WEBB, M. D.  
R. E. MOOR, M. D. J. C. WEED, M. D.  
CARL F. MOORE, JR., M. D. BENJAMIN WEINSTEIN, M. D.

†Resigned.

## VISITING STAFF—Continued

### OPHTHALMOLOGY

#### Consulting Surgeon

VICTOR SMITH, M. D.

#### Senior Visiting Surgeons

CHARLES A. BAHN, M. D.

H. F. BREWSTER, M. D.

HENRY BLUM, M. D.

W. R. BUFFINGTON, M. D.

THEODORE J. DIMITRY, M. D.

#### Visiting Surgeons

SAM BERGMAN, M. D.

GEORGE M. HAIK, M. D.

WM. M. BOLES, M. D.

\*PARK HOWELL, M. D.

ALEX R. CREBBIN, M. D.

JONAS H. ROSENTHAL, M. D.

PAUL L. MARKS, M. D.

MARIE STANBERY, M. D.

#### Assistant Visiting Surgeons

F. T. BEATROUS, M. D.

WILFRED C. CARRERAS, M. D.

P. W. RENKEN, M. D.

### OTO-RHINO-LARYNGOLOGY

#### Visiting Consultant

CHEVALIER JACKSON, M. D.

#### Senior Visiting Surgeons

C. L. BROWN, M. D.

F. E. LEJEUNE, M. D.

CHARLES L. COX, M. D.

SPENCER B. MCNAIR, M. D.

R. H. FISHER, M. D.

MONTE F. MEYER, M. D.

VAL H. FUCHS, M. D.

GEO. J. TAQUINO, M. D.

#### Visiting Surgeons

J. B. GOOCH, M. D.

JOSEPH PALERMO, M. D.

ALFRED A. KELLER, M. D.

H. ASHTON THOMAS, M. D.

JEANNE ROELING HANLEY, M. D.

E. G. WALLS, M. D.

#### Assistant Visiting Surgeons

A. A. CANTU, M. D.

R. B. RIERRA, M. D.

†J. H. LAROSE, M. D.

†WALTER TUMAN, M. D.

### ORTHOPEDECS

#### Senior Visiting Surgeons

E. D. FENNER, M. D.

H. THEODORE SIMON, M. D.

#### Visiting Surgeons

RUFUS HENRY ALLDREDGE, M. D.

G. A. CALDWELL, M. D.

G. C. BATTALORA, M. D.

G. K. LOGAN, M. D.

FRANK BROSTROM, M. D.

E. H. MAURER, M. D.

HARRY D. MORRIS, M. D.

#### Assistant Visiting Surgeon

J. O. REDDING, M. D.

\*Deceased.

†Resigned.



## VISITING STAFF—Continued

### UROLOGY

#### Consulting Surgeon

W. A. REED, M. D.

#### Senior Visiting Surgeons

P. JORDA KAHLE, M. D.

J. G. PRATT, M. D.

HENRY LINDNER, M. D.

H. W. E. WALTHER, M. D.

MONROE WOLF, M. D.

#### Visiting Surgeons

HUGH T. BEACHAM, M. D.

ROGER MAILHES, M. D.

EDGAR BURNS, M. D.

J. G. MENVILLE, M. D.

IRVING J. GLASSBERG, M. D.

HILAIRE D. OGDEN, M. D.

MAX M. GREEN, M. D.

R. F. SHARP, M. D.

W. E. KITTREDGE, M. D.

GILBERT TOMSKEY, M. D.

JOSEPH A. LANASA, M. D.

EUGENE B. VICKERY, M. D.

R. M. WILLOUGHBY, M. D.

#### Assistant Visiting Surgeons

†L. B. CENTANNI, M. D.

†F. L. RAMSAY, M. D.

HENRY CLAY HATCHER, M. D.

WM. W. WATKINS, M. D.

### PATHOLOGY

#### Consulting Pathologists

C. W. DUVAL, M. D.

A. V. FRIEDRICH, M. D.

W. H. HARRIS, M. D.

#### Senior Visiting Pathologists

KENNETH L. BURDON, M. D.

BELA HALPERT, M. D.

ALBERT E. CASEY, M. D.

BJARNE PEARSON, M. D.

JOHN CONNELL, M. D.

J. R. SCHENKEN, M. D.

#### Visiting Pathologists

EDWARD L. BURNS, M. D.

H. J. SCHATTENBERG, M. D.

HUGH PAGE NEWBILL, M. D.

JOSEPH STASNEY, M. D.

JOSEPH ZISKIND, M. D.

#### Assistant Visiting Pathologists

†PLINY A. ALLEN, M. D.

†J. R. KRIZ, M. D.

WILHELMINA C. BACHER, M. D.

†JOHN F. RYAN, M. D.

### RADIOLOGY

#### Senior Radiologist

\*AMEDEE GRANGER, M. D.

\*Deceased.

†Resigned.

## VISITING STAFF—Continued

### DENTAL SURGERY

#### Consulting Dental Surgeon

CHARLES P. KELLEHER, D. D. S.

#### Senior Visiting Dental Surgeons

SIDNEY L. TIBLIER, D. D. S.

L. L. LEVY, D. D. S.

#### Visiting Dental Surgeons

S. C. ALEMAN, D. D. S.

W. M. NICAUD, D. D. S.

FRANCIS B. DUCASSE, D. D. S.

O. ROSADO, D. D. S.

A. D. SMITH, D. D. S.

#### Assistant Visiting Dental Surgeons

E. BANKS-WILLIAMS, D. D. S.

R. P. GREENBLATT, D. D. S.

C. F. BARTELS, D. D. S.

C. H. HIMEL, D. D. S.

GEO. W. BOLIAN, D. D. S.

OSCAR KRIEGER, D. D. S.

R. E. BOUDREAUX, D. D. S.

MORRIS H. LAUFER, D. D. S.

PERRY J. BOOTH, D. D. S.

WILBUR A. LAZARUS, D. D. S.

A. G. BRAVO, D. D. S.

†ANTHONY N. LAVATA, D. D. S.

MARION E. BRIERRE, D. D. S.

JAMES GUY MALLORY, D. D. S.

CHARLES R. BURNS, D. D. S.

VICTOR B. MARQUER, D. D. S.

MARK O. CAREY, JR., D. D. S.

R. J. MORRIS, D. D. S.

WM. J. DARDIS, D. D. S.

THERESA NAPOLITANO, D. D. S.

STELLA DEBOUCHEL, D. D. S.

RALPH C. NEEB, D. D. S.

ABRAM H. DIAZ, D. D. S.

DON L. PETERSON, D. D. S.

J. M. DONAHUE, JR., D. D. S.

H. W. PETERSON, D. D. S.

RICHARD H. FLEMING, JR., D. D. S.

VIRGIL A. A. ROBINSON, D. D. S.

HARRY EVANS FODIMAN, D. D. S.

G. O. ROSADO, D. D. S.

BERTNEY G. FRICK, D. D. S.

JOHN P. SCHIRO, D. D. S.

LEON GALATOIRE, D. D. S.

HAROLD F. SMITH, D. D. S.

E. A. GAMARD, D. D. S.

FRED J. WOLFE, JR., D. D. S.

W. O. GOGGIN, D. D. S.

H. S. ZIMMERMAN, D. D. S.

†Resigned.

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**DIRECTOR'S REPORT**

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July 11, 1940

To the Board of Administrators of  
The Charity Hospital of Louisiana at  
New Orleans, Louisiana.  
Gentlemen:

I herewith submit the Annual Report of the Charity Hospital of Louisiana at New Orleans for the fiscal year beginning July 1, 1939 and ending June 30th, 1940.

The year ending June 30, 1940 was outstanding in the history of this institution. During this period the new hospital group of buildings was completed and equipped at a cost of approximately \$12,750,000.00. The main building is the largest and best equipped and capable of accommodating more patients under one roof than any other hospital.

This moving began July 1st, 1939, and on January 4th, 1940, we had moved all departments, wards and patients.

The new Nurses Home was occupied on December 28th, 1939. This is a 14-story building, located on Claiborne Avenue, very tastefully and beautifully furnished, with a library, lounge, four reception rooms, classrooms, offices, post-office, twenty-nine bed rooms on each floor from the second to the tenth floor, with a dinette and a smoking room on each floor.

After it had been duly considered and passed by the Board of Administrators, the meal ticket system was put into effect, at Charity Hospital, and the following notice was sent to all department heads:

"It was decided by the Board of Administrators, at their last meeting, April 3rd, 1940, that meal tickets be issued by the Secretary-Treasurer with the semi-monthly pay envelopes to everyone allowed meals at Charity Hospital.

That all non-medical employees be allowed only one meal daily, except non-medical employees earning \$100.00 per month or more, who shall receive no meal whatsoever.

That all resident employees will continue to be served three meals daily.

This plan will be put into effect May 1st, 1940".

Some changes and innovations put into effect during the year were:

A Post Office was opened on the Main Floor, thus relieving the Secretary-Treasurer's office of the distribution of the mail.

A Central Supply Service was inaugurated—its objective to give quick and efficient service to both doctors and nurses. This service was established when we brought Mrs. Alma Buck down from Milwaukee where she had established such a service there. Mrs. Buck remained with us from August 1939, until April 15th, 1940, when she resigned to return to Milwaukee, in fact Mrs. Buck had only been loaned to us for this purpose. Central Service is made up of ten units, the key unit is on the twelfth

floor, with a dispensing unit on each of the ward floors. All sterile material is cared for and dispensed to the various floors from the twelfth floor. There is a graduate nurse on duty at all times. She does not leave the unit, all errands being done by messengers.

On January 29th, 1940, a Social Worker was assigned to the Admitting Room, at my request. The object of placing her there was to keep out all those patients who apply for relief and lodging who are not ill and to take care of any problems which the Admitting Physicians do not consider hospital cases. Although I feel that one Social Worker in the Admitting Room is doing splendid work, this is not sufficient, and we should have two or three workers there at all times, particularly during the day.

There are two men in the Admitting Room, one designated as Admitting Officer and the other as Supervisor in the Admitting Room. Their duties, among other things, are investigating the financial set-up of patients applying for admission to the hospital.

On January 9th, 1940, the Discharge Desk was established as an accessory unit to the Record Library. All patients are officially discharged from the hospital through the Discharge Desk, and the patient is furnished with a slip, written by the doctor, giving pertinent information including diagnosis, recommendations for further treatment, and if necessary referring patient to Social Service.

Clinic appointment system was inaugurated, and on September 29th, 1939, the following notice was sent to each member of the Visiting Staff:

"It has been decided to establish in the hospital a combined ward and clinic record for each patient. The unit record would thus contain in chronologic order all important notes concerning each visit that the patient may make to the ward or clinic.

In order to facilitate this and also to reduce congestion in the clinics, it is deemed wise to establish an appointment system for clinic visits. We therefore ask that, beginning Monday, October 2nd, 1939, you kindly designate to the attendant the date on which you wish your clinic patient to return. We shall attempt to limit all clinic visits to this appointment system, except, of course, in instances where the complaints of a patient would justify immediate action".

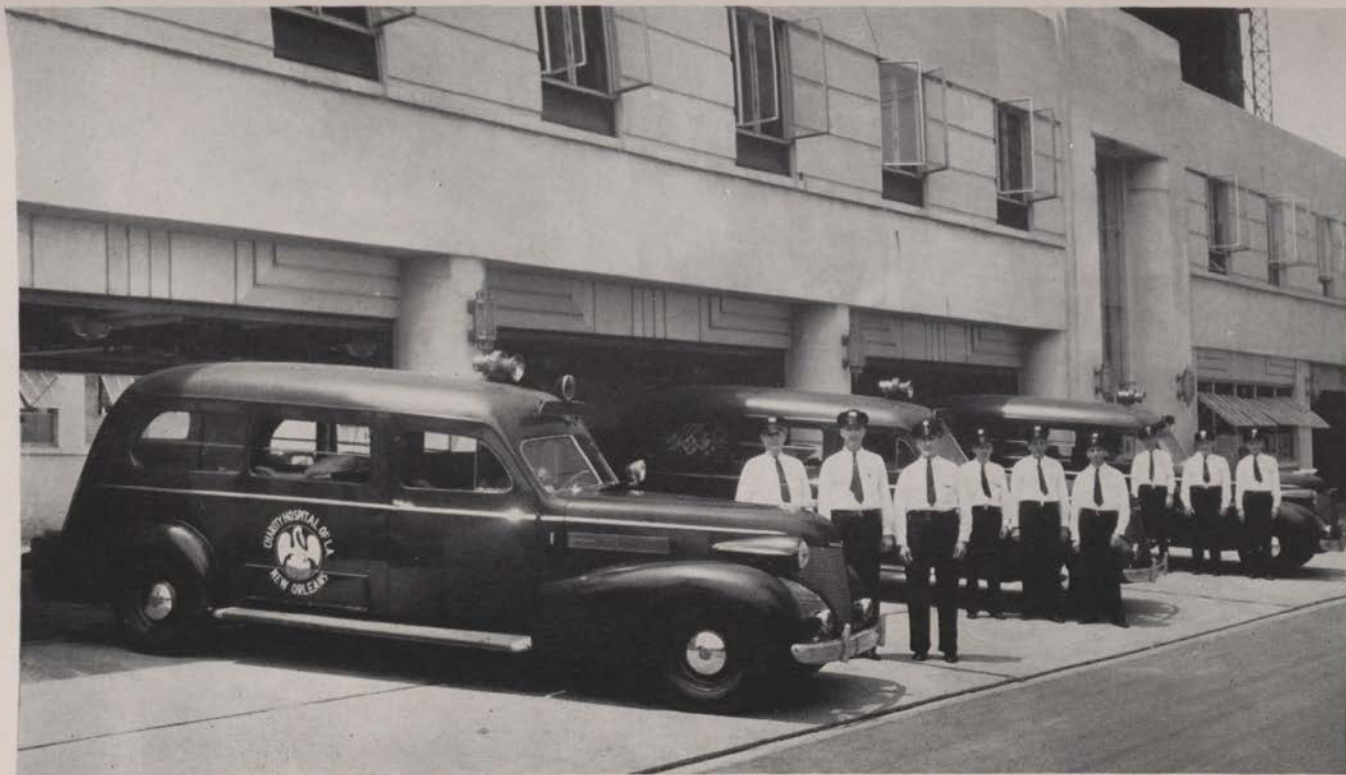
A Lounge for Visiting Staff was established on the first floor, with adequate telephones and comfortably furnished.

Dibert and Colored Tuberculosis clinics were opened and the cottages for colored tuberculous patients were closed and the patients moved to the second floor Nurses Old Home.

The Independent Unit was put into effect and is functioning smoothly, with the Independent Clinics opened. The Board of Administrators passed the following resolution:

"The Board reiterates its previous action that doctors who have school connections are required to accept bed assignments, as designated by their respective schools". This was done as many members of the Visiting Staff were on the Independent Staff and were holding teaching positions with the schools.

At the regular monthly meeting of the Board of Administrators, June 17th, 1940, the following action was taken:



Ambulance Fleet and Crew.

"... that appropriate charges be made for all emergency treatment rendered to persons other than the poor and destitute in accordance with charges in other first-class hospitals, including physicians and surgeons fees".

The system of having Senior Internes was re-established. Under this plan there will be a Junior and a Senior year, a larger number of Junior Internes being selected than Senior Internes. Residents will be selected from the Senior Internes. This plan will not disturb the system of Residencies as now functioning.

The Board of Administrators approved the recommendation of the Medical Advisory Committee for the institution of a Fact-Finding Committee.

I feel that the patients at Charity Hospital are now receiving better meals, better served and more tastily prepared, due to the increase in the number of dietitians. We now have thirteen dietitians and have had this number since March 1940. On July 1st, 1939, we had eight dietitians.

The hospital has functioned since the death of Doctor Amedee Granger without a Director of the X-Ray Department. Both Doctors J. B. Irwin, who was Acting Director until June 1st, when he resigned, and Dr. Edna Brown, present Acting Director, have done splendid work in that department.

Dr. Emma Moss has been Acting Director of the Department of Pathology, and she is to be commended on the excellent manner in which this department has been run.

I recommend that both positions be filled by permanent, qualified doctors, certified by their various boards, as directors of these two important departments.

I also recommend that we establish a shop for making braces and orthopedic appliances here in the hospital, and that a full-time man, familiar with this type of work, be employed.

I further recommend that the White Clinic be opened. That we have more beds for colored tuberculous patients. I feel that one of the old buildings, preferably the White Female Building, could be use as a Psychopathic Unit.

I sincerely hope that adequate funds may be procured to operate the hospital as it should be, especially increasing the number of graduate nurses, as we feel that we need four hundred more than at the present time, and, particularly in view of the fact that Charity Hospital has just been awarded a full rating by the American College of Surgeons, and we hope to live up to the standard thus set.

I believe a system of "zoning" of state hospitals would relieve congestion at Charity Hospital at New Orleans. At the present time, we get patients from Shreveport, Monroe, Lafayette and Alexandria, and I feel if there was some sort of a "zoning set-up", which would definitely state which section of the state was to be taken care of by the various state hospitals, this congestion would be eliminated.

I recommend that a Chief Engineer be appointed at the earliest possible time. This is one of the most important positions in the hospital, and should be held by someone thoroughly familiar with the mechanical set-up of the building, as the entire hospital cannot operate efficiently unless this department is functioning properly.

I wish to take this opportunity to thank the Sisters of Charity for their unflinching interest, splendid co-operation and untiring labor.

I want to express appreciation to the Deans of the two medical schools, Dr. B. I. Burns, Louisiana State University, and Dr. Max Lapham, Tulane University. They have worked with us and have thus helped to create a closer harmony between the hospital and the medical schools than has ever existed before.

To the Visiting, Resident and Interne Staffs, my sincere thanks for their loyalty and splendid support.

The ladies of the Needlework Guild have, as always, given of their very valuable time, and we are grateful.

To the Board of Administrators I express my appreciation for their guidance and loyal support, and I am deeply grateful to my two Assistant Directors, Doctors J. O. Weilbaecher, Jr., and C. B. Odom for their whole-hearted assistance. The Secretary-Treasurer, Mr. Fred W. Matthews, Heads of all Departments, my secretaries, and the entire personnel of the hospital, nurses, and workers in all departments, all have my deepest gratitude for their loyalty, devotion and wonderful co-operation.

Respectfully submitted,

ROY W. WRIGHT, M. D.,

Director.

RWW:HL

**TABLE I  
IN-DOOR SERVICE**

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
Admissions.....	42,636	45,483	48,077	55,437	67,952	70,504	58,030	52,863	58,899	63,852
Hospital Days.....	649,350	767,261	797,766	769,503	1,015,172	1,079,322	994,367	662,629	707,055	830,068
Discharges.....	39,669	42,371	45,200	51,793	64,530	66,563	55,679	49,473	55,785	60,000

**OUT-PATIENT CLINICS**

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
No. of Visits.....	276,462	318,735	349,038	402,221	473,986	466,512	354,717	349,538	404,996	463,803

**TABLE II  
MATERNITY CASES  
IN-DOOR SERVICES**

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
No. Admitted.....	2,072	2,529	3,266	3,453	3,805	4,045	4,098	4,815	6,448	6,833

**OUT-PATIENT CLINICS**

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
Total No. of Visits.....	10,179	12,044	13,853	16,046	16,978	17,724	15,596	15,688	19,005	20,811



**TABLE III**  
**PEDIATRICS**  
**OUT-PATIENT SERVICES**

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
No. of Visits.....	13,910	18,955	22,348	26,251	23,452	22,332	16,379	15,795	16,270	18,914

**TABLE IV**  
**VENEREAL DISEASES**  
**OUT-PATIENT CLINICS**

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
No. of Treatments given	37,277	48,434	61,525	74,631	83,000	88,186	72,707	72,050	88,603	125,277

**TABLE V**  
**X-RAY AND RADIUM THERAPY**

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
No. of X-Ray treatments given.....	538	1,039	6,975	11,924	18,499	15,717	14,317	16,084	22,283	27,507
Radium.....					1,148	980	774	434	298	258

TABLE VI

	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
Pathological Dept., No. of Examinations.....	260,932	237,574	209,198	225,316	282,680	403,024
X-Ray Dept., No. of Plates.....	65,429	73,823	68,280	67,269	93,968	112,936
Pharmacy Dept., No. of Prescriptions Filled.....	181,804	165,953	144,366	153,494	158,141	163,726
Physio Therapy Dept., No. of Treatments given.....	69,998	71,460	57,021	49,472	55,196	65,784
Social Service Dept., No. of Services given.....	128,364	160,798	117,839	108,000	119,772	134,637
Operating Rooms, No. of Operations performed.....	27,818	25,627	22,319	21,644	18,095	29,044
Number of Accident Cases.....	41,747	40,624	42,798	43,625	44,957	51,495
Laundry, No. of pieces laundered.....	10,266,132	10,454,437	10,183,561	8,898,349	12,344,494	23,113,056
Engineering Dept., No. calls for Repairs, etc.....	14,000	11,760	12,000	7,300	10,220	34,675

TABLE VII  
PER CAPITA COST

	1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
Wards.....	1.53	1.38	1.31	1.42	1.24	1.27	2.01	2.27	2.59	2.92+
Clinics.....	.25	.24	.23	.23	.20	.228	.40	.44	.35	.408+

TABLE VIII  
DEATH RATE (Average Net)

1930	1931	1932	1933	7/1/34- 6/30/35	7/1/35- 6/30/36	7/1/36- 6/30/37	7/1/37- 6/30/38	7/1/38- 6/30/39	7/1/39- 6/30/40
3.0%	2.8%	2.7%	2.5%	2.4%	2.5%	2.8%	4.4%	3.8%	4.0%

## DIRECTOR'S REPORT

Year Closing June 30, 1940

## BED CAPACITY

White Male.....	635
White Female.....	778
Colored Male.....	472
Colored Female.....	670
Children.....	306
Total.....	2,861

	White	Colored	Total
General Medicine.....	232	232	464
Pediatrics.....	67	67	134
Neuro-Psychiatry.....	28	28	56
Dermatology.....	22	22	44
Contagious Diseases.....	34	35	69
Tuberculosis.....	330	90	420
General Surgery.....	290	248	538
Gynecology.....	117	117	234
Urology.....	77	78	155
Obstetrics.....	115	121	236
Eye, Ear, Nose and Throat.....	79	47	126
Orthopedics and Fractures.....	130	115	245
Radium.....	22	23	45
Dental Surgery.....	14	14	28
Total.....			2,861
*Temporarily unassigned.....			*67

Remaining at beginning of year (fiscal).....	1,914
Admissions.....	63,852
Total indoor patients.....	65,766
Daily average.....	2,267
Remaining at end of year.....	2,411
Accident Cases.....	51,495
Total Hospital Days.....	830,068
Per Capita Cost.....	\$2.92 +
Out-Door Clinics—Consultations.....	463,803
Out-Door Clinics—New Cases.....	31,629
Ambulance Calls.....	8,755
Average time, Ambulance Calls, Minutes.....	27.7
Discharged.....	60,000
Died.....	3,355
Average gross death rate, per cent.....	5.3
Died within 36 hours of Admission.....	823
Average Net death rate per cent after deducting above.....	4.0
Average Time (days) per patient in hospital.....	12.6
Death due to Cardio-vascular Disease.....	156
Death due to Malignancy.....	319
Deaths due to Tuberculosis.....	309
Deaths due to Renal Disease.....	187
Deaths due to Poison, Accidents, and Violence.....	236
Cases reported to Coroner.....	846



Internes' Lounge—Main Building.

TREASURER'S REPORT

# REPORT OF THE TREASURER

Presented at the  
Meeting of the Board of Directors  
Held at the Charity Hospital, New York  
City, on the 15th day of December, 1910

WILLIAM W. MATTHEWS,  
TREASURER

## TREASURER'S REPORT

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July 1, 1940

Board of Administrators,  
Charity Hospital of Louisiana at  
New Orleans.

Gentlemen:

The accompanying report does not include comparison with the year previous. I consider it would be of little interest for the reason that we have moved into the new main building, starting in July 1939, and at the present time the North wing intended for the White Clinics is neither equipped nor occupied. Furthermore, the Delgado Memorial Building, the Milliken Memorial Building and the Lapeyre-Miltenberger Convalescent Home were closed during the year.

This report also omits list of properties rented, leases, real estate owned and statement of investments, as the 1939 report covers these items in detail and the few changes since are accounted for in the various statements attached hereto.

Respectfully submitted,

FRED. W. MATTHEWS

SECRETARY-TREASURER

## BALANCE SHEET

June 30, 1940

### ASSETS

#### General Fund

Cash on hand and in bank.....	\$	40,707.35
Accounts Receivable		
Delgado Trustees.....	\$	981.78
La State University & Agricultural & Mechanical College, Baton Rouge, La.....		2,281.34
Loranger Milk Plant.....		234.00
St. Martinville School Board, St. Martinville, La.....		250.00
		3,747.12
Prepaid Insurance (Schedule 2).....		14,014.55
		\$58,469.02

### LIABILITIES

Notes Payable.....	\$	350,000.00
Tulane Tunnel Fund.....		682.13
Insulin Fund.....		280.10
La. State University & Agricultural & Mechanical College, Baton Rouge, La. Rent—Dec. 1939.....		6,000.00
Endowment Bed Fund.....		31.88
Wright, E. A. & Co. Contract.....		2,337.50
Insurance fund.....		1,350.00
		360,681.61
Deficit June 30th, 1940.....		302,212.59
		\$ 58,469.02

#### Construction Fund—La. 4529-D P. W. A.

Cash.....	\$95,262.59
Accounts receivable	
Louisiana State University & Agricultural & Mechanical College, Baton Rouge, La.....	\$10,090.00
P. W. A. Washington, D. C.....	50,000.00
	60,090.00
	\$ 155,352.59

Contracts payable.....	\$	88,304.01
Balance due Technical Advisor.....		2,500.00
Claims pending—		
Geo. A. Fuller Co. No. 6	}	Memo only
Burkes Bros. No. 14		
Weiss, Dreyfous & Seiferth Architects		
Surplus.....		64,548.58
		\$ 155,352.59

## BALANCE SHEET

June 30, 1940

## ASSETS

## LIABILITIES

## Bond Liquidation Fund

Cash.....	\$ 164,526.26
	<u>                    </u>
	\$ 164,526.26

Due August 1st Coupons.....	\$ 86,625.00
Surplus.....	77,901.26
	<u>                    </u>
	\$ 164,526.26

## Dibert Endowment Fund

Cash.....	\$ 70,817.15
Securities (Whitney National Bank) Custodians, Par Value \$1,445,000.00 Book Value.....	\$1,468,836.13
	<u>                    </u>
	\$1,539,653.28

Endowment Fund Principal.....	\$1,539,653.28
	<u>                    </u>
	\$1,539,653.28

## Endowment Fund—Beds

Due from General Fund.....	\$ 31.88
Securities owned (Par value \$6,600.00).....	6,508.80
	<u>                    </u>
	\$ 6,540.68

Endowment Bed Fund Principal.....	\$ 6,540.68
	<u>                    </u>
	\$ 6,540.68

## Lapeyre Miltenberger Fund

Cash.....	\$ 30,520.31
Bonds Owned (Par Value \$126,000.00).....	125,841.25
Stock Owned.....	314.00
Florida Real Estate Title Pending.....	1,000.00
Florida Real Estate Taxes paid.....	96.53
	<u>                    </u>
	\$ 157,772.09

Fund Account.....	\$ 157,772.09
	<u>                    </u>
	\$ 157,772.09



### Special Fund

Cash.....	\$	51,132.66	Unrestricted Funds.....	\$	3,586.05
Investments (Par Value \$55,350.00).....		57,621.30	Temporary Funds for designated purposes.....		107,276.57
Real Estate—729 Henry Clay Ave.....		1,400.74	Surplus.....		15,334.24
Taxes on Minnesota Land.....		349.25			
Stauffer Eastwick Legacy—pending.....		15,692.91			
		<u>\$ 126,196.86</u>			<u>\$ 126,196.86</u>

### Insurance Fund a/c Compensation for Employees

Cash.....	\$	2,376.80	Insurance fund account.....	\$	13,782.27
Due from General Fund.....		1,350.00			
Claims paid in full (since 1934).....		9,881.38			
Claims paid and pending.....		174.09			
		<u>\$ 13,782.27</u>			<u>\$ 13,782.27</u>

### General Bonded Debt

Amount required for Bond redemption.....	\$8,737,000.00	Bonds Payable—1936 Issue.....	\$4,237,000.00
		Bonds Payable—1938 Issue.....	4,500,000.00
	<u>\$8,737,000.00</u>		<u>\$8,737,000.00</u>
GRAND TOTAL.....	\$10,959,293.05	GRAND TOTAL.....	\$10,959,293.05

**STATEMENT OF RECEIPTS**  
**GENERAL FUND**  
**For Year Closing June 30th, 1940**

REVENUE RECEIPTS	GROSS	OPERATING
<b>APPROPRIATIONS:</b>		
State of Louisiana-----	\$ 2,100,000.00	\$ 2,100,000.00
<b>FEEs AUTHORIZED BY LEGISLATURE:</b>		
Act No. 12 of 1930—Secretary-----	17.75	17.75
Act No. 53 of 1882—Action Sales-----	3,649.97	3,649.97
Act No. 126 of 1924 {	8,020.75	8,270.75
Act No. 230 of 1932 {		
Act No. 46 of 1932—Licenses-----	22,029.25	22,029.25
Act No. 87 of 1888—Live Stock Inspection--	8,258.25	8,258.25
	<u>\$ 41,975.97</u>	<u>\$ 42,225.97</u>
<b>FEEs AUTHORIZED BY THE BOARD OF ADMINISTRATORS:</b>		
Certificates—Death and Burial-----	\$ 1,091.50	\$ 1,091.50
Certificates—Insurance-----	11,707.10	11,707.10
Certificates—Chart records-----	851.80	851.80
Official Undertaker-----	4,000.00	4,000.00
Training School-----	2,255.00	2,255.00
	<u>\$ 19,905.40</u>	<u>\$ 19,905.40</u>
<b>HOSPITAL INCOME:</b>		
Donations-----	\$ 638.25	\$ 638.25
Interest on Bonds-----	42,242.21	36,046.43
Rents—Various properties-----	10,079.82	10,079.82
Rents—1016-1022 Canal St.-----	10,600.00	10,600.00
Royalties and Rents—Wisner lands-----	216.00	216.00
Swill—Contract-----	635.00	635.00
Salvage-----	14,607.71	14,774.04
Salary refunds-----	995.84	-----
Sundry Sales and Refunds-----	3,099.30	145.00
Telephone Service and Long Distance Calls	1,408.15	-----
Badges—Employees-----	131.00	-----
Insurance refunds and R. P.-----	1,076.06	-----
Social Service Collections-----	4,986.99	5,189.49
Bonds Matured—Milliken-----	4,000.00	-----
Notes payable-----	350,000.00	-----
Bond and Grant Interest a/c balance-----	-----	4,696.52
	<u>\$ 444,716.33</u>	<u>\$ 83,020.55</u>
<b>NON-REVENUE RECEIPTS</b>		
Co-Owner's Shippers Press-----	\$ 5,469.00	-----
Co-Owner's Union Press-----	21.03	-----
Tulane Tunnel Fund-----	5,000.00	-----
Insulin Fund-----	500.00	-----
Dibert Special Legacy-----	15,678.98	-----
Dibert Endowment Fund-----	350,367.19	-----
Miltenberger Fund-----	5,148.94	-----
<b>TOTAL CASH RECEIPTS</b> -----	<u>\$ 2,988,782.84</u>	-----
<b>TOTAL A/C OPERATING EXPENSES</b> -----	-----	<u>\$ 2,245,151.92</u>

## TREASURER'S REPORT

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Cash on hand July 1, 1939-----	\$ 301,538.70	
	<u>\$ 3,290,321.54</u>	
Cash Disbursements-----	3,251,414.19	
	<u>38,907.35</u>	
Cash on hand June 30th, 1940-----	\$ 38,907.35	
June 30th, 1940 Deficit in Operating Expenses-----		\$ 370,318.89
June 30th, 1940 New Equipment transferred to Inventory a/c		58,392.83
		<u>\$ 2,673,863.64</u>

## STATEMENT OF CASH DISBURSEMENTS

## GENERAL FUND

For Year Closing June 30th, 1940

ADMINISTRATIVE:	GROSS	OPERATING
Salaries—Officers and Clerks.....\$	52,213.55	\$ 46,407.32
Office Expenses.....	4,190.48	4,104.99
Stationery, Postage and Printing.....	18,295.03	20,625.07
Telephone Operators—Salaries.....	12,982.84	12,982.84
Telephone and Telegraph Service.....	12,330.18	10,922.03
Advertising proposals.....	284.55	298.94
Badges—employees.....	88.00	-----
Legal Expenses.....	402.01	397.46
Traveling Expenses.....	1,104.27	1,077.42
	\$ 101,890.91	\$ 96,816.07
PROFESSIONAL CARE OF PATIENTS:		
Salaries—Resident Staff.....\$	85,376.67	\$ 85,196.67
Nursing Service and Training School.....	410,363.60	397,153.46
Salaries—Ward help and Admitting Dept.....	219,040.48	223,395.64
Medical and Surgical Supplies.....	109,565.31	109,424.51
Biologicals.....	25,589.28	25,586.88
Apparatus and Instruments.....	40,491.70	40,359.35
Salaries—Pharmacist and Assistants.....	13,432.18	13,432.18
Drugs and Chemicals.....	58,726.68	57,399.36
Salaries—Pathological Dept.....	43,492.52	43,492.52
Supplies, etc.—Pathological Dept.....	6,155.85	6,790.90
Salaries—Social Service.....	56,422.68	58,222.85
Expenses—Social Service.....	8,221.68	8,892.48
X-Ray, Radium and Deep-Therapy—Salaries.....	37,274.35	42,736.68
X-Ray, Radium and Deep-Therapy—Supplies and Equipment.....	50,785.65	50,322.00
Record Library—Salaries.....	35,462.24	35,462.24
Record Library—Supplies and Equipment.....	1,209.99	1,217.49
Clinic—Salaries.....	44,481.31	55,419.65
Heart Station—Salaries.....	8,775.00	8,755.00
Heart Station—Supplies.....	1,860.09	1,877.74
Physical Therapy—Salaries.....	15,403.33	17,680.83
Physical Therapy—Supplies and Equipment.....	2,062.26	2,176.76
	\$ 1,274,172.85	\$ 1,284,995.19
DEPARTMENTAL EXPENSES:		
Ambulance Drivers—Salaries.....\$	10,241.33	\$ 10,241.33
Ambulance Supplies and Repairs.....	1,459.89	2,755.59
Housekeeping—Salaries.....	75,780.60	73,071.81
Housekeeping—Supplies.....	122,700.41	118,370.29
Uniforms.....	10,128.19	10,832.09
Laundry—Salaries.....	57,586.20	57,431.20
Laundry—Supplies.....	7,717.14	7,715.14
Steward's Department:		
Purchasing Agent and Store Room—Salaries.....	12,114.50	12,114.50
Dietary Dept. (incl. kitchens)—Salaries.....	112,066.34	112,315.95
Dietary Dept.—Equipment.....	6,118.48	6,118.48
Bakery—Salaries.....	5,409.66	5,409.66

TREASURER'S REPORT

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DEPARTMENTAL EXPENSES—(CONTINUED):	GROSS	OPERATING
Bakery—Supplies.....\$	11,582.58	\$ 14,638.56
Ice Plant—Salaries.....	4,473.00	4,473.00
Ice Plant—Supplies.....	390.68	390.68
Milk and Cream.....	73,030.13	73,030.13
Groceries and Canned Goods.....	93,335.96	88,483.06
Butter and Eggs.....	34,764.57	34,688.77
Fruits and Vegetables.....	45,364.55	45,364.55
Meats, Poultry and Fish.....	107,705.28	107,703.48
	\$ 791,969.49	\$ 785,148.27
GENERAL HOUSE AND PROPERTY EXPENSE:		
Salaries—Engineering and Maintenance		
Departments.....\$	231,718.66	\$ 227,533.88
Light and Power.....	74,845.06	70,569.84
Gas for heating.....	44,719.13	48,646.10
Fuel Oil for heating.....	1,950.88	
Gasoline and Lubricating Oils.....	4,422.62	156.08
Maintenance, Real Estate.....	31,689.08	33,543.37
Machinery and Tools.....	6,560.38	6,561.13
Plumbing and Steam Fittings.....	5,094.82	5,090.39
Insurance.....	17,495.10	5,470.87
Motor Cars and Trucks.....	4,874.09	6,899.25
Water Treatment Supplies.....	1,641.66	1,647.26
Rent of Properties.....	33,050.00	39,050.00
Cemetery Maintenance.....	2,910.22	3,343.11
	\$ 460,971.70	\$ 448,511.28
TOTAL OPERATING EXPENSES.....		\$ 2,615,470.81
ACCOUNTS RECEIVABLE:		
Delgado Building.....\$	305.69	
Milliken Building.....	178.95	
Wisner Donation Advisory Committee.....	10.50	
TOTAL.....\$	495.14	
OTHER DISBURSEMENTS:		
Shippers Press Co-Owners.....\$	5,444.00	
Union Press Co-Owners.....	17.60	
Bond and Grant Interest a/c.....	285.49	
Interest on Notes Payable.....	200.80	
Interest on Bonds purchased (Accrued).....	2,339.17	
Tulane Tunnel Account.....	3,989.87	
Sundry, Petty Accounts.....	106.13	
Sister's Clothing a/c.....	6,000.00	
TOTAL.....\$	18,383.06	
Petty Cash Funds—increases		
Purchasing Agent's.....\$	150.00	
Treasurer's.....	250.00	400.00
Purchase of Bonds and Transfer of Dibert		
Endowment Funds.....\$	571,986.88	
New Equipment:		
1938-1939.....\$	27,578.97	
1939-1940.....\$	30,813.86	31,144.12
Charged to Surplus and Deficit.....		\$ 58,392.83
TOTAL GROSS CASH DISBURSEMENTS.....\$	3,251,414.19	
TOTAL ACCOUNTS CHARGED TO SURPLUS AND		
DEFICIT ACCOUNT.....		\$ 2,673,863.64

**CHARITY HOSPITAL OF LOUISIANA AT NEW ORLEANS**  
**Statement of Cost Per Ward Patient Day and Per Visit Out-Patient Clinics**  
**For Year Closing June 30th, 1940**

	WARD PATIENTS	OUT-PATIENT DEPARTMENT	TOTAL
Administration Salaries and Expenses-----	\$ 94,324.92	\$ 2,491.15	\$ 96,816.07
Physicians' Services, Resident Staff-----	76,677.00	8,519.67	85,196.67
Nursing-----	397,153.46	-----	397,153.46
Ward Employees and Admitting Room-----	223,395.64	-----	223,395.64
Medical and Surgical Supplies-----	94,331.89	15,092.62	109,424.51
Pharmacy and Biologicals-----	93,286.54	3,131.88	96,418.42
Apparatus and Instruments-----	35,818.55	4,540.80	40,359.35
X-Ray and Heart Station-----	71,999.40	31,692.02	103,691.42
Pathological Laboratories-----	35,198.40	15,085.02	50,283.42
Physical Therapy-----	5,889.38	13,968.21	19,857.59
Record Library-----	18,339.87	18,339.86	36,679.73
Clinic Salaries-----	-----	55,419.65	55,419.65
Social Service-----	53,692.27	13,423.06	67,115.33
Ambulance Service-----	12,996.92	-----	12,996.92
Housekeeping Department-----	199,662.51	2,611.68	202,274.19
Dietary Department-----	118,434.43	-----	118,434.43
Laundry-----	63,218.98	1,927.36	65,146.34
Steward's Department-----	384,364.93	1,931.46	386,296.39
General House and Property-----	447,062.45	1,448.83	448,511.28
<b>TOTAL OPERATING EXPENSE</b> -----	<b>\$2,425,847.54</b>	<b>\$ 189,623.27</b>	<b>\$2,615,470.81</b>
<b>TOTAL PATIENT DAYS TREATMENT</b> -----	<b>830,068</b>		
New Cases—Out-Patient Clinics-----			31,629
Old Cases—Out-Patient Clinics-----			432,174
Cost per patient visit-----			463,803
Cost per patient day-----			\$ .408 +
			\$ 2.92 +

## STATEMENT OF CONSTRUCTION ACCOUNT

La. 4529-D

PUBLIC WORKS ADMINISTRATION

Year Closing June 30th, 1940

Balance July 1st, 1939.....		\$	4,062.76
RECEIPTS DURING YEAR:			
From Bond Liquidation fund.....	214,822.96		
From P. W. A. grant.....	750,000.00		964,822.96
Insurance—return premium.....			4,729.48
Total balance and receipts.....		\$	973,615.20
DISBURSEMENTS DURING PERIOD:			
Advertising proposals.....	\$ 301.96		
P. W. A. office—telephone service.....	259.83		
Consulting Engineers.....	9,360.10		
Photographs.....	25.00		
Filing Acceptances.....	6.75		
Salaries—Inspectors, Clerks of Works, Timekeeper and Stenographer.....	4,761.78		
Concrete inspection and testing.....	175.00		
Scientific tests and readings (Settlement) ..	1,146.27		
Payment to Technical Advisor.....	11,500.00		
Paid Contractors.....	850,815.92		
Total disbursements.....			878,352.61
Cash balance June 30th, 1940.....		\$	95,262.59
MEMO—			
Due by P. W. A. balance a/c grant \$3,600,000.00.....	\$ 50,000.00		
Due by La. State University and Agricultural College, Baton Rouge, La. for pas- sageway connecting L. S. U. Medical Center.....	10,090.07		
			60,090.07
Total available.....		\$	155,352.66

## MEMO—

Claims pending:

Geo. A. Fuller Co.

Burkes Bros.

Weiss, Dreyfous &amp; Seiferth, Inc.

**BOND LIQUIDATION ACCOUNT**  
**STATEMENT OF RECEIPTS AND DISBURSEMENTS**  
**For Year Ending June 30, 1940**

**RECEIPTS:**

Cash balance July 1, 1939.....		\$ 222,433.50
Transfer from Construction Account.....	\$ 6,219.30	
From Secretary of State.....	800,000.00	806,219.30
		\$ 1,028,652.80

**DISBURSEMENTS:**

Coupons paid.....	\$ 248,192.50	
Bonds retired.....	83,000.00	
Transfer to Construction a/c.....	214,822.96	
Prof. Hardy Cross.....	6,219.30	
Payment to Contractors.....	311,891.78	864,126.54
		\$ 164,526.16

**DIBERT ENDOWMENT FUND**  
**STATEMENT OF RECEIPTS AND DISBURSEMENTS**  
**Year Closing June 30th, 1940**

**RECEIPTS:**

Cash from Mr. Marcus Walker, Testamentary Trustee....		\$ 400,000.00
Proceeds from securities sold and/or matured.....		610,073.44
Refund from legatees participating in residuary estate for their proportionate share of expense of examining and photographing certain documents.....		420.14
		\$ 1,010,493.58

**DISBURSEMENTS:**

Cost of securities purchased.....	\$ 938,836.13	
Examination and photographs of certain documents.....	840.30	939,676.43
		\$ 70,817.15



**STATEMENT OF  
LAPEYRE-MILTENBERGER FUND**

Year Closing June 30th, 1940

Balance July 1, 1939-----		\$ 21,558.75
<b>RECEIPTS:</b>		
Bonds called 9/1/39 @ 105-----		10,500.00
Interest on bonds-----		5,510.00
Refund account equipment-----		20.00
Overage in reserve for costs-----		3.38
		\$ 37,592.13
<b>DISBURSEMENTS:</b>		
Equipment-----	\$ 2,615.06	
Maintenance and repairs-----	4,284.08	
1% fee to Custodians of securities-----	55.12	6,954.26
		\$ 30,637.87

**STATEMENT OF  
SPECIAL FUNDS**

Year Closing June 30th, 1940

Balance July 1st, 1939-----		\$ 57,560.09
<b>RECEIPTS:</b>		
Temporary funds for designated purposes:		
Mrs. John Dibert Legacy—refund-----	\$ 7.24	
Mrs. Alice Applegate Legacy-----	10,000.00	
Mrs. Louise Bartels Thilborger—Barataria Lands—Rents-----	117.00	
Mrs. Fannie Waldeck Legacy-----	1,583.02	
Unrestricted revenues:		
Dividends on stock-----	17.50	
Rents—No. 729 Henry Clay Avenue-----	345.00	
Mrs. Louis M. White-----	500.00	
Mrs. Cora Barton Livingston-----	186.05	
Mrs. Julia Barton Hunt-----	2,000.00	
Total receipts-----		14,755.81
Total Balance and Receipts-----		\$ 72,315.90
<b>DISBURSEMENTS:</b>		
Mrs. John Dibert Special Legacy-----	\$ 15,781.18	
Infantile Paralysis Fund—Sundry charges		
a/c Social Service-----	1,432.55	
Drinker Respirator-----	1,637.88	
Social Service Donation Fund-----	19.10	
Secretary's office—Equipment—out of Waldeck Legacy-----	2,195.81	
Barataria Property-----	41.42	
729 Henry Clay Avenue—repairs-----	73.30	
Barton Legacy—Certificate-----	2.00	
Total Disbursements-----		21,183.24
Cash balance June 30th, 1940-----		\$ 51,132.66

**STATEMENT OF  
INSURANCE FUND  
COMPENSATION—HOSPITAL EMPLOYEES  
For Year Closing June 30th, 1940**

Balance July 1st, 1939.....	\$	2,138.04
From General Fund.....		600.00
		2,738.04
<b>DISBURSEMENTS:</b>		
Claims paid—		
Baessler, O.....	\$	20.80
Balliet, C.....		30.85
Baumann, E.....		13.44
Gauthreaux, E.....		10.23
Hernandez, L.....		18.00
Kieffer, M.....		15.84
Lederer, M.....		26.81
Rachel, A.....		23.44
Schaff, P.....		17.20
Scanlan, E.....		4.63
Thibodaux, H.....		180.00
		361.24
Balance June 30th, 1940.....	\$	2,376.80

**INSURANCE IN FORCE AT CLOSE OF BUSINESS JUNE 30, 1940**

TREASURER'S REPORT

Company	Policy Number	Property Insured	Amount of Policy	Kind of Insurance	Expiration Date	Rate	Premium Paid	Agent	Address	Term Years
Duquesne Underwriters	F632	Hospital Bldgs. & Contents	5,000,000.00	Fire	8-9-42	2.975	11,950.00	Hartwig Moss Ins. Agcy	New Orleans	3
Pearl Ass'n Co. Ltd.	9501578	Shippers Press Bldgs.	5,000.00	Fire	8-31-40	1.75	87.50	Leon Irwin & Co. Inc.	New Orleans	3
Pearl Ass'n Co. Ltd.	9501603	Shippers Press Contents	5,000.00	Fire	9-8-40	1.875	93.75	Leon Irwin & Co. Inc.	New Orleans	3
Prov. Wash. Ins. Co.	222814	Union Press Bldg.	10,000.00	Fire	10-19-41	2.875	287.50	Hartwig Moss Ins. Agcy	New Orleans	3
Atlas Ass'n Co. Ltd.	21782	Union Press Bldg.	10,312.50	Fire	2-28-42	2.875	296.48	Hartwig Moss Ins. Agcy	New Orleans	3
Gen'l Ins. Co. of America	F6640	1016-1022 Canal St.	50,000.00	Fire	*9-30-42	1.42	1,020.55	La. Ins. Agcy of N. O.	New Orleans	3
Agricultural Ins. Co.	33950	729 Henry Clay Ave.	2,500.00	Fire	11-17-41	.60	15.00	Carrere's Sons	New Orleans	3
First National	3441A11107	Auto Fleet	20,500.00	F. T. & C.	6-25-41		684.56	Mehle Ins. Agcy	New Orleans	1
Columbia Cas. Co.	CUC276973	Auto Fleet	25,000.00	Lia. & P.D.	6-25-41		941.03	Mehle In. Agcy.	New Orleans	1
			50,000.00							
			5,000.00							
Columbia Cas. Co.	CRI9832	Power Plant, etc.	20,000.00	Lia.	6-25-41		1,837.00	Gillis-Winkler	New Orleans	1
New Cent. Cas. Co.	132275	Sisters' Home		P. G.	1-6-41		74.60	Mrs. I. D. Miller	New Orleans	1
Trinity Universal	E207711	Elevators	5/10,000.00	Lia.	11-1-42		1,863.92	Meyers, Whitty & Hodge	New Orleans	3
Trinity Universal		Less R. P. 1-2-40				112.00		Meyers, Whitty & Hodge	New Orleans	3
Trinity Universal		Less R. P. 1-17-40				183.50		Meyers, Whitty & Hodge	New Orleans	3
Trinity Universal		Less R. P. 3-27-40				83.75		Meyers, Whitty & Hodge	New Orleans	3
National Cas. Co.	B.R.-0806603	Money in transit	4,000.00	Rob.	5-23-41		20.00	Hartson	New Orleans	1
Aetna Cas. & Surety	39B5537	Money & Securities-offices	5,500.00	Rob.	1-5-42		161.75	Moss Agency	New Orleans	3
Aetna Cas. & Surety	39BH97	Pay Roll Money	40,000.00	Rob.	1-5-42		364.00	Moss Agency	New Orleans	3
		1-5-40 Addl. Premiums	15,000.00	Rob.	1-5-42		178.10	Moss Agency	New Orleans	

\* Policy dated 6-5-38 extended 3 years to 9-30-42.

**SUNDRY CASH DONATIONS****UNRESTRICTED**

From July 1st, 1939 to June 30th, 1940

Appreciation Box.....	\$55.57
Aymond, J. P. N. S.....	2.00
Brodenick, Mrs. Anna (In Memory).....	30.00
Brother Universal.....	3.00
Bryan, Homer.....	20.00
Bryan, Mrs. Lottie.....	15.00
Clinic Donation Box.....	6.68
Evans, Dr. Logan.....	5.00
Faucheaux, Ernest.....	15.00
Herdemann, Harry K.....	1.00
Marugg, Katherine.....	50.00
Oettley, Mrs. Elizabeth.....	35.00
Pulford, Dorothy Ann.....	10.00
Pulford, Frank.....	30.00
Riviere, Geo.....	15.00
Shields, Mrs. James.....	35.00
Unknown from Baton Rouge, La.....	10.00
	<hr/>
	\$ 338.25

**POLICE JURIES**

East Baton Rouge Police Jury, Baton Rouge, La.....	\$200.00
St. John the Baptist Police Jury, Mount Airy, La.....	100.00
	<hr/>

\$ 300.00

**RESTRICTED**

Lucien B. & Katherine Price Foundation (Insulin Fund).....	\$500.00
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**DONATIONS TO CHARITY HOSPITAL**

During 1940

**CHRISTMAS FUND**

General Electric X-ray Corporation.....	\$ 5.00
Elizabeth Parker Trabue.....	10.00
Hyams, Glas & Carothers.....	15.00
Longino & Collins.....	10.00
Graham Paper Co.....	5.00
P. L. Thomson & Co.....	5.00
F. F. Hansell & Bro.....	2.00
Rex Electric, Inc.....	5.00
Godchaux Sugars, Inc.....	25.00
I. L. Lyons & Co.....	10.00
National Window Cleaning Co.....	5.00
Southern Surgical Supply Co.....	15.00
Hanson-Flotte Co., Inc.....	5.00
Surgical Equipment Co.....	5.00
Loubat Glassware & Cork Co.....	5.00
Woolfolk, Huggins & Shoher.....	5.00
Surgical Supply Co.....	5.00
Dane & Weil.....	5.00
Wm. Henderson.....	Cash
Student Body, L. S. U. Medical School.....	Cash

**DONATIONS TO PEDIATRICS DIVISION**

Christ Church Cathedral.....	Christmas candy and toys
Happiness Helpers.....	Candy, toys, infants' and children's clothing, and entertainment
Elks Club.....	Candy, toys, clothing, and Christmas tree
Civic Progressive Association.....	Candy and toys
Rabouin Vocational School.....	Candy and toys
McDonogh Schools No. 17 and No. 19.....	Easter baskets
Mrs. Maspero.....	Easter basket
Simon Radio Company through the kindness of Mr. P. Kenney.....	Two radios

**DONATIONS TO DIBERT**

Nazarene Society.....	Candy on New Year's Day and Easter
St. Margaret's Daughters.....	Weekly Bingo Party and Refreshments, Easter baskets, and Christmas presents
Dibert Auxiliary.....	Donations and Party at Christmas
Rev. Mr. Weed.....	Flowers and magazines weekly

**SUNDRY DONATIONS**

Bernice Dippacher.....	Scrapbooks
Cooperative Clubs.....	Flowers
Miss Dorothy Dix.....	Goldfish
Mrs. C. W. Gilmer.....	Clothing, magazines
Ninth Ward Federated League (Civic).....	Candy, books
Happiness Helpers.....	Tables and chairs
Various Members of the Charity Hospital Guild.....	Clothing
Miss Esther Helis.....	Radio
Mrs. William G. Helis.....	Radio

## REAL ESTATE

Occupied by Hospital Group of Buildings (approximately 10 acres).....	\$ 1,889,276.75
Other Properties.....	538,042.33
Total as per 1939 report—Pages 69 and 70.....	\$ 2,427,319.08
Acquired by legacy since:	
1100 Acres—Jefferson Parish adjacent to Wagner Bridge, Bayou Barataria.....	5,500.00
Total land values June 30th, 1940.....	\$ 2,432,819.08

REVISED INVENTORY  
June 30, 1940

	VALUES	
	BUILDING	CONTENTS
Ambulance Building (old) corner Tulane Ave. and S. Villere.....	\$ 36,150.16	\$ 431.00
Ambulance Building (new) corner Gravier and LaSalle Streets and adjoining Garage and Laundry Buildings.....	266,355.54	187,051.38
Auxiliary Buildings—Comprising extension to old power house and including Ice Plant, Metal Shop, Warehouse, Wood Working Shop, Incinerator, Animal House and Attendant's quarters.....	767,345.17	185,768.35
Barataria Property.....	1,100.00	
Carpenter Shop—Freret and Gravier Streets.....	6,484.74	5,750.00
Cemetery—Tool House.....	850.00	275.00
Flower Shop.....	875.00	
Contagious Hospital.....	270,350.00	9,647.21
Covered Passageways.....	4,339.38	
Delgado Hospital (Closed).....	203,400.38	2,200.00
Dibert Tuberculosis Hospital.....	307,050.84	34,964.60
Henry Clay Avenue No. 729.....	2,500.00	
Internes' Quarters, Tulane Ave. adjoining old Ambulance House.....	94,088.12	1,700.00
New Main Hospital.....	9,208,738.05	1,134,701.60
Medical Building (formerly White Female).....	61,543.53	9,723.76
McBurney Building—1016-1022 Canal St.....	50,000.00	
Milliken Memorial Hospital.....	254,170.37	7,200.00
Lapeyre-Miltenberger Convalescent Home.....	321,121.52	44,494.14
Nurses' Home (old) now occupied by Colored T. B. Patients.....	79,959.79	17,890.41
Nurses' Home (new) No. 450 S. Claiborne Avenue.....	1,010,525.92	64,569.02
Shippers Press.....	7,387.00	2,000.00
Sisters' Home—Corner S. Claiborne Avenue and Gravier.....	150,610.72	4,762.49
Refreshment Stand adjoining old Nurses' Home Building.....	1,400.85	185.30
Telephone Office Bldg., L. S. U. entrance, Tulane Avenue.....	2,030.46	
Union Press.....	19,180.12	
Villere Street House.....	3,000.00	
Watchmen's House.....	25.00	
Total Buildings and Contents.....	\$13,130,582.66	\$ 1,713,314.26

## REVISED INVENTORY—Continued

June 30, 1940

## SUNDRY ITEMS:

Fences.....	\$	954.93
Granite and Marble—stored on side walk Freret Street.....		2,000.00
Spot Light (illuminates main entrance to New Hospital Main Building).....		391.87
Paved walks and driveways.....		6,634.00
Oil tank.....		5,990.86
Underground Electrical distribution system.....		75,303.49
Underground drains, sewers, conduits, steam lines and trenches.....		40,108.09
Total—Sundry Items.....	\$	131,383.24

## RECAPITULATION

Land Values—Hospital Buildings.....	\$	1,889,276.75
Other Properties.....		543,542.33
Buildings.....		13,130,582.66
Contents.....		1,713,314.26
Sundry Items.....		131,383.24
Total.....	\$	17,408,099.24

## NEW EQUIPMENT

July 1, 1939 to June 30, 1940

## NEW AMBULANCE HOUSE

## ENGINEERING DEPARTMENT:

6/27/39	68 Lockers.....	\$	395.76
7/5/39	1—No. 73646 AK 12" Oscillating Fan.....		16.64
8/26/39	1—No. 1274 L 4Dr. Letter Filing Cabinet.....		20.09
3/7/40	1—No. 11 Ideal Electric Etcher.....		19.86

## MACHINE SHOP:

6/2/39	1—Toledo No. 999 Super Model Portable.....		303.75
6/8/39	1—Prest O Weld Cutting and Welding Outfit Complete.....		106.82
6/14/39	1—No. 304 Oster Heavy Duty Power Pipe Machine Complete.....		782.04
6/29/39	1—No. 633 Clamp Ammeter with Case for same.....		
6/29/39	1—No. 639 Type No. 2 Industrial Analyzer.....		363.02
6/30/39	1—Illgette Fan.....		14.94
7/12/39	1—Type V-2 Growher No. 110 Volt.....		
7/12/39	1—Armature Stand.....		
7/12/39	1—200 Coil Winder and Cable.....		
7/12/39	1—No. 10 Universal.....		
7/12/39	1—No. 5 Medget Head.....		
7/12/39	1—No. 20 Concentric Head.....		
7/12/39	1—Coil Tamping Tools 3/16 x 1.....		
7/12/39	1—Coil Tamping Tools 5/16 x 1 1/4.....		
7/12/39	1—Coil Tamping Tools 3/8 x 1 1/2.....		492.77

## NEW EQUIPMENT

July 1, 1939 to June 30, 1940

## CARPENTER SHOP:

6/ 2/39	1—U-36 Thor. Portable Electric Hammer 3/4' capacity	88.20
6/27/39	1—No. 9 Crescent Saw Table Fig. 327—Direct Motor Driven with 5 H.P. 220 Volts 3 Phase 60 Cycle A.C. Motor Complete	
6/27/39	1—Approved Safety Guard Saw	
6/27/39	1—Martising and Boring attachment	490.00
7/10/39	1—No. 4147 S Champion Electric Forge No. 110 V Single Phase	25.48

## MAINTENANCE DEPARTMENT:

6/27/39	55 Lockers	320.10
1/18/40	2—F-04 Ivory Clocks	6.31

## AUTO SHOP:

3/28/40	1—Chevrolet No. 1383 (New) No. 3 W. a-02	
3/28/40	1—Chevrolet No. 1657 (New) No. 3 W B-03	1,524.00
4/ 6/40	1—Ingersoll Round Model HBR 1-2-1/2x1-1/2 Type 30 Single Stage Air Compressor No. 1468 driven thru V-Belt by 1-HP 1750 RPM 3 phase, 60 cycle 220/440 Volt G. E. Motor mounted on 35 Gal. horizontal Air Receiver	147.00

## COURT YARD

3/ 5/40	Filter Rocks	10.62
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## DELGADO BUILDING

## ACCIDENT ROOM:

10/23/39	1—No. 450 Roger Anderson Automatic Leg Splint	82.50
10/23/39	1—No. 450 B-Universal Foot Plate	22.50

## DIBERT BUILDING

10/21/39	23—No. 1002 White Beds	} 216.09
10/21/39	4—No. 1004 White Beds	
10/21/39	3—No. 985 Irrigating Rds. White Cribs	
12/21/39	30—No. 2460 S-1746-Chairs	120.58

## MILTENBERGER BUILDING

## ELECTRO-CARDIOGRAPH DEPARTMENT:

8/ 8/39	2—No. 8341 Green 4Dr. Files	87.50
8/31/39	1—X-Ray File Cabinet O. G.	85.25
11/10/39	2—O. G. Files with Wobble Blocks	109.00
11/28/39	2—No. 133 A Stools—Oak	17.25
1/ 5/40	1—No. 7410 C Oak Cabinet	2.45
1/29/40	4—No. 1658 Add A Unit Transfer Cases	9.00
2/15/40	1—No. 142 D. S. P. Type Desk	} 35.00
2/15/40	1—No. 45 Posture Chair	
4/17/40	1—No. 1 Olive Green Cabinet	37.95

## NURSES' NEW HOME

1/ 3/40	23—Venetian Blinds for East Nursery	
1/ 3/40	21—Venetian Blinds for West Nursery	330.26
2/ 9/40	36—No. 1 Bronze Smokadors	222.27
2/27/40	1—No. 118 Machine With Water Tank and Handle 110V-A. C.	253.50



**NURSING SCHOOL OFFICE**

9/15/39	100—No. 99 Tablet Arm Chairs.....	450.00
10/ 6/39	1—No. 11/5097455-E-1-K Underwood Master.....	93.56

**POWER HOUSE**

11/30/39	1—Allpax Gasket Cutter Complete.....	17.15
4/ 5/40	2—4 dia. Zallea Self-equalizing copper expansion joint for L. Traverse with No. 250 C-S Flangers and Model Sleeves.....	93.00
4/ 5/40	1—3" dia. C-S Flangers and Model Sleeves.....	42.04

**SISTERS' HOME**

7/12/39	1—16" A. C. Oscillating R. M. Fan.....	21.18
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**NEW WAREHOUSE**

7/14/39	1—New Scale.....	645.92
8/ 8/39	Shelving for Warehouse and Special Cabinets.....	668.80
8/12/39	Cash Discount Erroneously deducted from Invoice dated 7/14/39 Amt. \$665.69—This scale is sold net cash.....	13.18

**NEW LAUNDRY**

6/ 3/39	2—R. G. H. Brass Comp. Hose Bibbs.....	3.00
6/ 8/39	3—Pcs. 6x6 Reinforcing Mesh	
6/ 8/39	1—Galv. Anthydro.	
6/ 7/39	1—Bdle. 3.4 Galv. Metal Lathe	
6/ 8/39	2—N. O. Regulation Clean Outs.....	1.20
6/ 8/39	1—Ex. Heavy Y.....	.78
6/ 8/39	2—S. 620 N. P. P. Traps Only.....	2.00
6/ 8/39	2—S. 800 N. P. P. O. Plug Complete.....	.86
6/ 8/39	2—Female Solder Bushings.....	.38
6/ 8/39	2—B-1010 N. P. Faucets.....	3.76
6/10/39	1—Extra Heavy 1/16 Bend	} 1.03
6/10/39	1—Extra Heavy San Top Tee	
6/10/39	F-2223 Modera White S. J. Elongated Bowl	
6/10/39	W No. 110 N. P. Sloon Stor	
6/10/39	Flush Valves WIV-60-R	
6/10/39	Vacuum Breaker No. 2500	
6/10/39	Church Sani-Black Seat Open Front Less Cover	
6/10/39	2—China Bolt Caps. Less Flanges.....	57.44
6/10/39	2—No. 32 B. Wusway Budgeteer Shower Stalls Com- plete with Valves on R. H. Side White Finish.....	100.00
6/10/39	1—White Filler Plate for above.....	7.50
6/10/39	2—No. 32 B-Ditto with Valves on L. H. Side.....	100.00
6/12/39	12—1/2" Galv. Ells.....	.60
6/12/39	6—1" Galv. Ells	} .98
6/12/39	4—1/2x1/4 Galv. Reducers	
6/12/39	2—1/2" Galv. Tees.....	.15
6/12/39	2—1" Galv. Tees	
6/12/39	1—1 1/4" Galv. Tees.....	.57
6/12/39	1—1" Brass Gate Valve	
6/12/39	1—1/2" Brass Gate Valve.....	3.42
6/12/39	1—1 x 1 1/4 Galv. Tee.....	.28

## NEW EQUIPMENT

July 1, 1939 to June 30, 1940

6/12/39	12— $\frac{1}{2}$ " Galv. Asstd. Nipples C to 6"	
6/12/39	6— $\frac{3}{4}$ " Galv. Asstd. Nipples C to 6"	
6/12/39	6—1" Galv. Asstd. Nipples C to 6"	
6/12/39	1— $1\frac{1}{4}$ x 3 Galv. Nipples.....	1.02
6/12/39	2— $1\frac{1}{2}$ " Galv. Shoulder Nipples.....	.13
6/12/39	1—No. 21 Sheet Lead.....	2.36
6/14/39	4 Pcs. 6 x 6 Reinforcing Wire	
6/17/39	1 Cu. Yd. 1-2-4 Perfect Mixed Concrete.....	16.05
6/19/39	1 Lot Shelving as per plan.....	728.00
6/21/39	2— $\frac{1}{2}$ " Galv. Pipe 40'0".....	2.24
6/21/39	4—1 x $\frac{1}{2}$ Galv. Tees	
6/21/39	1—1 x $\frac{3}{4}$ Galv. Tees	
6/21/39	4— $\frac{3}{4}$ x $\frac{1}{2}$ Galv. Tees	
6/21/39	2— $\frac{3}{4}$ x $\frac{1}{2}$ x $\frac{1}{2}$ Galv. Tees.....	1.79
6/21/39	2— $\frac{3}{4}$ Galv. Tees	
6/21/39	2—1" Blk. Plugs	
6/21/39	2— $\frac{3}{4}$ Blk. Plugs	
6/21/39	2— $\frac{1}{2}$ Galv. Tees.....	1.18
6/21/39	8— $\frac{1}{2}$ Galv. G. J. Unions.....	1.13
6/21/39	18— $\frac{1}{2}$ Galv. Asstd. Nipples C to 4"	.51
6/21/39	4— $\frac{1}{2}$ Galv. 45 Degree Ells.....	.35
6/24/39	1— $1\frac{1}{4}$ S. 620 N. P. Trap W/Plug	
6/24/39	1— $1\frac{1}{2}$ x $1\frac{1}{4}$ Female Solder Bushing	
6/24/39	1 Pr. B-1010 N. P. Lav. Faucets	
6/24/39	2— $\frac{1}{2}$ x $\frac{1}{4}$ Galv. Reducers	
6/24/39	1— $1\frac{1}{2}$ x 4 Galv. Nipples.....	3.70
6/27/39	127 Lockers.....	741.04
6/28/39	2—16"—110 V. A. C. R. & M. Osc. Fans.....	42.37
7/ 1/39	2—36" M. Ilg. Exhaust Fans.....	337.90
7/10/39	4—36" M. Ilg. Exhaust Fans.....	675.80
7/14/39	6 Exhaust Fans.....	179.52

## NEW HOSPITAL BUILDING

## MISS BELL'S OFFICE:

10/11/39	1 Piece Overstuffed Living Room Suite.....	69.00
10/11/39	1 Rocker.....	9.75
10/11/39	1 Fiddle Back Walnut Desk Chair.....	6.00
10/11/39	1 Kneehole Desk.....	12.50
10/11/39	1—9 x 12 Quaker Armstrong Rug.....	5.95
10/11/39	1—3 x 6 Quaker Armstrong Rug.....	1.50
12/15/39	1 Desk Set.....	3.75

## CLINIC (FIRST FLOOR):

8/25/39	3 Venetian Blinds (Office).....	34.38
8/25/39	2 Venetian Blinds S. S. C.....	22.92
9/20/39	20 Olive Green No. 105 Dr. Letter Files 8-S.....	857.60
9/20/39	2 Walnut No. 20-5 Dr. Letter Files 8-S.....	151.12
11/ 3/39	11 B & D Blood Pressure.....	179.70
11/16/39	6—7 Drawer 8 x 5 Steel Cabinets, finished Green to match Benson Files, 2 Wood Bases to fit under 2 files.....	30.00

## CLINIC (FIRST FLOOR):

11/27/39	1 Double No. 24 Brown Buerger Convex Cystoscope with one catheterizing and one operating telescope	
11/27/39	1 Only sheath and one obturator for cystoscope	235.20
12/18/39	1—B & L Slit Lamp No. 71-61-20-06 with	478.17
1/ 4/40	1—No. 1357 Stereo-Compimeter	150.00
2/ 8/40	Desks and Tables	91.14

## DRUG STORE:

8/ 8/39	1—U. S. Model P 3 combination Unit for filtering and filling Parenteral Solutions	1,700.00
8/18/39	1—100 Gal. Spec. No. 71 acid resisting Glass Enamel Lined Tank, Electric Needle tested for distilled Water contact	172.00
8/18/39	1 Size dia. Special Slow Speed Elec. Portable Mixer	196.00
9/23/39	1—No. 7381—3 Drawer Letter File	49.50
9/25/39	3 Sets 5" Dia. Wheel casters with sq. shank	52.20
12/ 6/39	1 Yeomans E-4 Stainless Steel Turbine Pump	257.40
12/11/39	1 Crate Bottle Filling Machine	
12/11/39	1 Crate Steel Tank Glass Enameled	
12/11/39	3 Box Steel Pts. Glass	
12/11/39	1 Box 1/4 Up. Motor and Glass No. E-591/2/3	31.26
1/11/40	2 Knickerbocker Letter Tray	2.94

## GAS THERAPY DEPARTMENT:

11/15/39	1 Dunker Collins Tilting Rotating Adult Respirator A. C. 110-220 V. Single Phase cycle 60 (Iron Lung)	1,637.88
2/26/40	1 Portable Helium Outfit (Metz) with Mask and Portable Circle Filter	187.50

## INSURANCE OFFICE:

8/30/39	2 Venetian Blinds	25.87
1/ 5/40	1—No. 2470200 Elite Typewriter	94.50
2/ 1/40	1—No. 7070 Olive Green Desk	36.00

## NEW INTERNES' QUARTERS:

6/30/39	17 doz. Glass ash trays	17.00
7/12/39	201—No. 2412 Crystal Cup Casters	130.02
8/31/39	6—No. 1018 Mah. Finish Tel. Tables	27.60
8/31/39	6—No. 10 Mah. Finish Side Chairs	12.30
9/ 6/39	Furnishing and Installing Window Shades	469.12
11/11/39	4—No. 1018 Mah. Tel. Tables	18.40

## GYMNASIUM (18TH FLOOR):

9/ 2/39	2 Sets Boxing Gloves	
9/ 2/39	2 Soft Ball Bats	
9/ 2/39	2 Basket Balls	
9/ 2/39	1 Pr. Basket Ball Goals	
9/ 2/39	2 Indoor Balls	
9/ 2/39	1 Striking Bag	
9/ 2/39	1 Horizontal Bar	
9/ 2/39	1 Pr. Chest Pulley Weights	
9/ 2/39	1 Medicine Ball 4 lb.	
9/ 2/39	1 Medicine Ball 9 lb.	
9/ 2/39	1 Set of Badminton	
9/ 2/39	1 Striking Bag Disc	163.94
10/27/39	9—1000 W. High Bay Alzak Reflectors—Concentrating Type with Guards	100.55
10/27/39	3—18" Guards for Commercial Ceiling Units	12.35
1/ 5/40	1 Volley Ball Stand End	
1/ 5/40	1 Volley Ball Center	36.25

## NEW EQUIPMENT

July 1, 1939 to June 30, 1940

## NEW HOSPITAL BUILDING—Continued

## MAIN KITCHEN:

8/16/39	1—No. 441 Wood frame Tilting Platform Truck.....	59.50
8/24/39	Platform Trucks for Dietary (Freight).....	4.97

## DR. CHARLES B. ODOM'S OFFICE:

8/25/39	1 Venetian Blind.....	11.46
8/25/39	2 Venetian Blinds.....	22.92
9/ 6/39	1—No. 2404 L. Walnut Steel Cabinet.....	74.50
10/30/39	2—No. M 63—66x36 Walnut Desks.....	297.60
10/30/39	2—No. 1440½ Walnut Revolving Armchairs.....	60.80
10/30/39	2—No. 1440 Walnut Armchairs.....	47.20
10/30/39	4—No. 1439 Walnut Side Chairs.....	70.40
10/30/39	2—No. 1531 Walnut Telephone Tables.....	49.20
10/30/39	2—No. 300 Walnut Baskets.....	11.70
10/30/39	2 Sight Light Lamps.....	30.00
10/30/39	2 Desk Pads.....	16.00
11/ 2/39	12 Venetian Blinds.....	110.40
12/ 5/39	2 Venetian 1230-3 Panel Screens.....	23.50
12/21/39	2 Extra Sets (6) Hinges.....	1.47
1/26/40	1 Glass Shade for Desk Lamp.....	7.20

## PURCHASING DEPARTMENT:

9/30/39	1 Gross Feeble Safe No. 24824.....	38.00
11/ 2/39	6 Ga. 7381 V. L. Cabinets—Mahogany.....	219.00
11/ 2/39	1 Ga. 7381 V. L. Cabinet with 7-E inserts—Mahogany.....	43.85
11/ 2/39	1 Ga. 7195 Desk Set with 1 Drawer fitted with Lock— Mahogany finish.....	40.25
11/ 2/39	1 Ga. 7191-S open storage case fitted with 2 shelves.....	35.95
11/ 2/39	1 Ga. 7216 Panel Type Gate—Mahogany.....	25.95
11/22/39	6—No. 10 Side Chairs.....	18.50
1/31/40	1 Model No. 90 Mimeograph No. 9254.....	96.53
2/14/40	No. 1 Bronze Smokador.....	12.35
2/26/40	1 M 2000 Bronze Lamp.....	7.94
2/28/40	1 M 2001 Desk Lamp.....	7.96
2/29/40	2 Bronze Smokadors.....	24.70
3/ 9/40	1 Double Letter Tray.....	6.32

## RADIUM ROOM:

11/21/39	1 Ether Suction Machine No. 712.....	63.70
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## RECORD LIBRARY:

7/27/39	11 Venetian Blinds.....	112.70
11/ 4/39	1—No. E-10 Electrically operated Basket Lift.....	166.00
12/21/39	50 Cases 4-Rollers Pr. Draw.....	282.50
12/27/39	8—No. 7714 Transfer Binders.....	8.64

## SECRETARY-TREASURER'S OFFICE:

7/27/39	1 Venetian Blind.....	10.24
8/30/39	6 Venetian Blinds.....	85.85
8/30/39	1 Venetian Blind (Coupon Room).....	12.94
8/30/39	1 Venetian Blind Duster.....	1.23
9/ 8/39	1 Underwood Master No. 11/5098783 Pica.....	93.56
11/28/39	1—No. 15 T-72 Act Metal Table (Olive Green).....	54.98
11/30/39	7—No. 4116 R Dr. Y & E Check Size Transfer Cases.....	44.28

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SR. MATHILDE'S OFFICE (FOURTH FLOOR):

9/22/39	1 Underwood Master No. 14/5096435	
9/22/39	1 Underwood Stand Typewriter 11/4023284	84.56
11/ 6/39	1—No. SL-6 Sight Light Floor Lamp	20.00
11/ 6/39	1—No. 626 Desk Lamp	2.00
11/ 6/39	1—No. 6942-3d-42x34 Y & E Single Pedestal Typewriter Desk Black Crinkle Finish	69.66
11/ 6/39	1—No. Y-59d Secretary Chair	19.84
11/ 6/39	1—No. 6904 L. T 60x34 Y & E Typewriter Desk, Black Crinkle Finish	79.40
11/ 6/39	1—No. 6954—3 Drawer 55x34 Y & E Desk, Black Crinkle Finish	80.90
11/ 6/39	1—No. Y 1500 Arm Swivel Chair	34.54
11/ 6/39	1—No. Y-59d Secretary Chair	19.84
11/ 6/39	2—No. 166 Arm Chairs, Tray	22.56
11/ 6/39	1 Telephone Table, Black Crinkle Finish	37.13
11/ 6/39	1—No. 2403 Y & E Steel File	44.74
11 /6/39	3 Steel Waste Baskets	8.10
11/ 7/39	2—No. 16 L. Walnut Letter Trays	3.50

SOCIAL SERVICE DEPARTMENT:

8/ 8/39	1—No. 8341 Green 4-Dr. Files	43.75
8/18/39	2—No. 8341 Green 4-Dr. Files	87.50
8/25/39	12 Venetian Blinds	137.46
8/31/39	1—No. 8341 Green Filing Cabinet	43.75
9/14/39	1—No. 118-S Stool—Oak	2.25
9/27/39	5—No. 8341 V. L. Cabinets	218.75
9/28/39	15 Sets No. 5515-25 V. L. Guides	25.05
2/ 3/40	1—No. 8341 Green Steel Letter Size Cabinet	43.75

TELEPHONE OFFICE:

7/ 1/39	1—No. 77646 A. B. Emerson Fan	18.12
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DR. WEILBACHER'S OFFICE:

8/25/39	1 Venetian Blind	11.46
11/ 9/39	3 Rugs cut and pad	12.50
11/ 9/39	2 Rug Pads	20.50
12/21/39	2—No. 1230 Screens (3) Panels	23.53

DR. ROY WRIGHT'S OFFICE:

8/11/39	6 Venetian Blinds	67.27
8/11/39	1 Venetian Blind	12.93
8/11/39	1 Model 3-H-77 Clock	3.79
8/11/39	1 Model 4-H-87 Clock	4.15
8/25/39	2 Venetian Blinds	22.92
8/25/39	2 Venetian Blinds	22.92
8/25/39	3 Venetian Blinds	34.38
9/ 1/39	1—938 K Installed in '39 Buick with dash control and coil aerial	47.30
9/11/39	1 Underwood Master No. 11/5093791	93.56
12/19/39	2 Venetian Blinds	23.40

X-RAY DEPARTMENT:

6/13/39	2—16" Emerson Fans	43.23
8/ 3/39	12 Venetian Blinds	106.68
8/ 8/39	1 L. C. Smith Typewriter	90.00
8/ 8/39	1 Only T. W. Desk and Chair	60.00
8/ 8/39	1 Only Metal Waste Basket	2.60

**NEW EQUIPMENT**  
**NEW HOSPITAL BUILDING—Continued**

8/15/39	36—No. 1658 8x5 Add. A Unit Cases.....	73.80
8/17/39	4—36" High Stools.....	11.00
8/21/39	2—36" Light Oak Stools.....	5.50
8/21/39	2—8 Drawer Double Row 4x6 Cabinets.....	205.70
11/13/39	50—"C" Metal Tab Press Guides.....	22.00
11/16/39	1—O. G. File.....	52.55
11/30/39	1—No. 1 O. G. Cabinet.....	68.70
1/22/40	3 Steel Stools.....	32.10
1/24/40	2 Steel Stools.....	5.50
2/12/40	1—No. 1 O. G. Cabinet.....	68.70
<b>LADIES' DRESSING ROOM:</b>		
9/ 1/39	100 Sets No. Mar Bed Rests 2" Dia.....	67.17
9/15/39	100 Sets No. Mar Bed Rests 2" Dia.....	67.17
10/20/39	4—5 cent Blue Type Kotex Machines.....	49.50
<b>LECTURE ROOM:</b>		
10/ 9/39	30—No. 99 Tablet Arm Chairs.....	135.00
<b>DEEP THERAPY DEPARTMENT:</b>		
11/28/39	1—No. 134 A Highpoint Oak Stool.....	9.52
<b>SR. URBAN'S OFFICE:</b>		
11/13/39	1—8600-5 Direct Reading Cord Recorders No. 579980 Automatic day to day (Time Clock).....	327.10
<b>ANESTHESIA DEPARTMENT:</b>		
11/24/39	2—No. 5123 Blood Pressure.....	52.27
<b>DR. WRIGHT'S ROOM:</b>		
11/30/39	1 Chest of Drawers.....	47.50
<b>VISITING DOCTORS' ROOM:</b>		
12/14/39	1—No. 1160 T. Table—Walnut Finish.....	22.15
<b>TIME KEEPERS' OFFICE (BASEMENT):</b>		
12/ 4/39	2 Supervisor's Desks.....	35.56
12/ 7/39	Key Boards.....	9.91
12/11/39	1 Underwood Typewriter.....	7.50
<b>5TH FLOOR (SR. CLARISE):</b>		
8/14/39	2 Sets 16 BR 3 Palmetto Brushes.....	6.68
8/23/39	3—No. 113 Machines 110 V.A.C. 60 cycle Less tanks.....	433.62
<b>7TH FLOOR:</b>		
8/14/39	65 ft. Hairfelt.....	
	2 lbs. Jute Twine.....	
	10 yds. Drilling.....	
	1 lb. Cold Water.....	14.72
<b>8TH FLOOR:</b>		
11/ 2/39	1—No. 94 Agate Tray 4x6.....	1.10
11/ 2/39	1 Set 4 C 25 Guides.....	.35
<b>9TH FLOOR:</b>		
8/30/39	1—7 Drawer Desk (Walnut).....	12.50
8/30/39	1 Occasional Table.....	4.50
12/ 1/39	Utility Tables.....	343.65
12/ 2/39	Utility Tables for Wards.....	1,014.66
12/14/39	Bed Side Screens.....	7.69
2/13/40	45 Brown Cribs.....	396.90
2/13/40	1—No. 271½ Adjustable Punch.....	13.72

TREASURER'S REPORT

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10TH FLOOR:		
2/26/40	1 New Motor 110V 60 Cycles.....	30.20
12TH FLOOR:		
9/ 5/39	30 Pcs. 36x72 Medicine Cabinets	
9/ 5/39	4 Pcs. 24x72 Examination Tables	
9/ 5/39	8 Pcs. 24x72 Examination Tables	
9/ 5/39	24 Pcs. 24x72 Examination Tables	
9/ 5/39	2—4x10 Cabinets	
9/ 5/39	30—36x72 Medicine Cabinets	
9/ 5/39	2—4x12 Cabinets	
9/ 5/39	24—24x72 Examination Tables	
9/ 5/39	2—4x6 Doctors' Gymnasium	
9/ 5/39	12—24x72 Examination Tables.....	224.85
9/14/39	4 Pcs. Masonite Tempered B. D. 3/16-4x12	
	192 sq. ft. for table tops.....	16.94
9/18/39	1 Davenport couch.....	29.50
9/18/39	1 Vanity Dresser.....	9.50
9/18/39	2 Armchairs.....	13.00
9/18/39	1 Over Stuffed Chair.....	14.50
9/19/39	6 Pcs. Masonite Tempered B. D. 3/16-4x12	
	288 sq. ft. for table tops.....	25.40
11/15/39	Furnish and install complete with screws, brackets, finish all seats in Miles and Delgado Operating Rooms.....	2,950.00
11/29/39	Utility Tables.....	84.50
12/ 4/39	Utility Tables.....	10.50
12/19/39	1 Supervisor's Desk.....	18.87
12/ 4/39	Utility Tables.....	70.32
1/ 6/40	Utility Tables.....	84.09
1/17/40	Suction Machine (Reconditioned).....	7.35
1/31/40	Surgical Tables.....	36.17
2/ 7/40	Underwood Master No. 11/5114636.....	93.56
2/13/40	Surgical Tables.....	28.24
2/19/40	Maguson Bone Surgery Engine—1 Set Maguson Bone Surgery Accessories.....	220.50
2/22/40	Telephone Tables.....	13.05
2/22/40	4—No. 10 Smokadors—Bronze.....	24.70
2/28/40	1—M. C. Blood Pressure Apparatus.....	16.34
2/29/40	8—No. 1 Smokadors—Bronze.....	49.40
3/ 5/40	Economy Style No. 3 "Pull" Hi Reach Telescope.....	321.75
TOTAL.....		\$32,451.74
SECRETARY-TREASURER'S OFFICE—SPECIAL FUND:		
7/ 7/39	1—No. 2380 D. D. Y & E Cupboard with 2 Shelves	
7/ 7/39	10—2-Drawers for cancelled checks	
7/ 7/39	2 Bases for above.....	140.30
7/15/39	1—No. 52 Diebold Safe, with two plain steel shelves...	113.40
7/26/39	1 Piece of Black Corrugated Rubber Matting—38 ft. long	
7/26/39	1 Piece of Black Corrugated Rubber Matting—12 ft. long.....	22.54
7/31/39	8—No. 10 Chairs—Walnut Finish.....	16.80
8/14/39	1—No. 7921 Desk 45x34	
8/14/39	1—No. 1161 Chair.....	82.10
8/14/39	1—3-Drawer Ledger File with Lock.....	47.00
10/23/39	1—No. 1161 Imitation Revolving Chair.....	19.60
TOTAL.....		\$ 441.74
GRAND TOTAL.....		\$32,893.48

## DEPARTMENT OF PATHOLOGY

July 10, 1940

To the Board of Administrators and  
Doctor Roy W. Wright, Director  
Charity Hospital,  
New Orleans, La.

Gentlemen:

I hereby submit the annual report of the Department of Pathology of Charity Hospital at New Orleans, for the year closing June 30th, 1940.

I wish to take this opportunity to express my appreciation for the cooperation which I have received from the Administrative Authorities of the Hospital and for the opportunity which they have afforded me to effect the reorganization of the Department.

I further wish to express my appreciation to the Visiting Pathologists of Tulane University School of Medicine and Louisiana State University School of Medicine.

I am deeply grateful to my own professional, secretarial and technical staff for their loyalty and assistance during the past year.  
I am,

Very sincerely,

EMMA S. MOSS, M. D.

Acting Director

ESM:mc  
encl.



## ORGANIZATION OF THE DEPARTMENT OF PATHOLOGY AT CHARITY HOSPITAL IN NEW ORLEANS, LOUISIANA

### 1. ADMINISTRATIVE AND MEDICAL STAFF

Pathologist and Acting Director of the Department of Pathology .....	EMMA S. MOSS, M. D.
Bacteriologist .....	GEORGE F. FASTING, M. D.
Senior Pathologist .....	EMIL PALIK, M. D.
Senior Pathologist .....	MAURICE M. RICE, M. D.
Assistant Resident Pathologist .....	GRETCHEN VITTER, M. D.
Assistant Resident Pathologist .....	ELIZABETH POWELL, M. D.
Interne in Pathology .....	JOHN R. MAGRUDER, M. D.
Interne in Pathology .....	HERBERT L. MOORE, M. D.
Interne in Pathology .....	HARRY L. NUTIK, M. D.

### 2. DIAGNOSTIC LABORATORIES

#### A. Bacteriology

Senior Technician .....	MISS ANNE PITTS, B. A.
Junior Technician .....	MISS EMALIE MCNAIR, B. A., M. T.
Preparation Room and B. M. R. Service	
Junior Technician .....	MISS ELIZABETH MAUPIN, B. A., M. T.

#### B. Serology

Senior Technician .....	MISS GESINA DEHOLL, B. S., M. A.
Senior Technician .....	MRS. GLADYS SCHERER, M. T.
Blood Typing and Matching Service	
Junior Technician .....	MISS ENIX BOUDREAUX

#### C. Biochemistry

Senior Technician .....	MISS BETTY JOHNSON, Phg., M. T.
Junior Technician .....	MISS MARTHA WAY

#### D. Hematology and Parasitology

Senior Technician .....	MISS ESTHER McELWEE, B. S., M. T.
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#### E. Histopathology

##### (a) Surgical Pathology

Senior Technician .....	MISS REGINA NOEL, M. T.
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##### (b) Pathologic Anatomy

Senior Technician .....	MISS DOLORES O'TOOLE, M. T.
Junior Technician .....	MRS. PEARL ATCHESON

#### F. Emergency Laboratory

Junior Technician .....	MRS. MILDRED CORSON, M. T.
(4:00 P. M. to 12:00 Midnight)	

#### G. Out-Patient Clinic Laboratory

Senior Technician .....	MISS OLGA BLANKE, M. T.
Junior Technician .....	MISS WILHELMINA SCHWARTZ, B. S., M. S.

**NUMERICAL ANALYSIS OF TESTS PERFORMED BY THE DEPARTMENT OF PATHOLOGY AND DIAGNOSTIC LABORATORIES**

**For the Period July 1, 1939-June 30, 1940**

Bacteriology Division.....	49,423
Serology Division.....	155,587
Biochemistry Division.....	45,487
Hematology Division.....	3,842
Parasitology Division.....	8,431
Histopathology Division.....	50,102
Friedman Tests.....	109
Emergency Laboratory.....	5,219
Pasteur Department—Anti Rabies Vaccinations.....	4,968
Clinic Laboratory.....	73,214
Venereal Diagnostic Laboratory.....	3,117
Basal Metabolism Laboratory.....	3,523
Autopsies.....	1,511
Protocols Written.....	1,511

Actual number of tests show a 55.5 per cent increase over the last available figures from Charity Hospital reports for 1936-1937.

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Bodies Available for Autopsy.....	2,335
Autopsies performed.....	1,511—64.7%
Bodies turned over to Anatomy (L. S. U., Tulane and Loyola)....	143
Coroner's Cases.....	847
Coroner's Cases Autopsied by the Hospital.....	170



Internes' Bed Room—Main Building.

# AN ANALYSIS OF THE SERVICES OFFERED BY THE DEPARTMENT OF PATHOLOGY TO THE PATIENTS OF THE HOSPITAL AND TO THE MEDICAL STAFF

## 1. BACTERIOLOGY

The Division of Bacteriology has been completely reorganized and staffed by technical assistants especially trained in standard and special Bacteriological procedures. Blood cultures which were formerly collected by an Interne from the Department of Pathology are now collected by the Clinical Interne, in bottles containing sterile citrate furnished by the Department of Pathology. This has reacted to the benefit of patient, Clinical Staff and the Division of Bacteriology by preventing delays in collection and allowing the Division to handle a larger volume of work. The work incident to the pneumonia program has been satisfactorily carried out and plans for more adequate and rapid diagnosis are being placed in effect in anticipation of the next pneumonia season.

## 2. SEROLOGY

Prior to my incumbency an unstandardized and recognized type of Wassermann reaction was in use in this department. This division has undergone a complete reorganization and standardization.

The Kline test, which is a precipitation test for syphilis and nationally accepted, has been instituted as a screen test to detect positive and doubtful cases of syphilis. It is a less expensive test than the Wassermann as it requires no animals, fewer reagents and less expensive apparatus.

The Kolmer modification of the Wassermann test is used as a confirmatory test on all Kline positive cases.

The use of two standard tests for the detection of syphilis is the accepted and the approved procedure in all accredited laboratories.

Prior to my incumbency no serological test for syphilis was performed on prospective donors for transfusion. At the present time about 75% of all donors are tested on request and the number of positives is approximately 10%. This is comparable to the number of positives in the general hospital and clinic admissions.

Arrangements have been made to carry out preliminary Kline tests on all patients to be operated on in the ENT department. This service has been requested by the operators who feel that operations should not be done on syphilitic patients without some special preparation. This work will of necessity have to be done at night, inasmuch as patients are admitted on the evening before operation the following morning.

Previously, Colloidal Gold Tests were not performed. This test is necessary in the study of Central Nervous System Syphilis. They are now routine on request.

The Department of Serology manufactures the Kline antigen. This antigen is sold by biological houses at \$2.50 per cu. cm. We use about 500 cc. per year, which is produced at a cost of approximately \$10.00 for the lot.

The Department of Serology manufactures the (Kolmer) Wassermann antigen. This is done at a like saving.

The Department of Serology manufactures the hemolysin at a cost of approximately \$5.00 per year. The value of this product is about \$50.00.

The Department of Serology prepares the complement for the above test.

The Department of Serology manufactures the Colloidal Gold Solution for the diagnosis of central nervous system syphilis.

NOTE: The purchase of these biologicals from the manufacturing chemists and biological houses would make the cost of these tests almost prohibitive. The manufacture by the hospital Department of Pathology reduces the cost to a minimal figure.

### 3. BIOCHEMISTRY

Prior to my incumbency, a total of only 13 types of biochemical determinations were performed in this diagnostic division. The service in this laboratory has been completely reorganized and 43 (NOTE: see appended protocol) different types of determinations are now carried out on routine requests. The diagnosis and treatment of patients has been greatly facilitated by the accurate and specific biochemical determinations offered in this division.

In the past, no attempt to diagnose or identify poisons in blood or other body fluids and tissues has been carried out in this hospital. An attempt is being made to establish a small, but efficient, service in toxicology.

All solutions, reagents and standards for use in the Division of Biochemistry are prepared in this division. This, as in other departments, effects a considerable saving, inasmuch as these reagents may be prepared less expensively than if they are bought ready made.

### 4. HEMATOLOGY AND PARASITOLOGY

Prior to my incumbency, there was not a specialized division of Hematology or Parasitology in the Charity Hospital. All such work was in the hands of inexperienced internes. A consultation service has been inaugurated for these two specialties and a diagnostic laboratory established. The study of blood dyscrasias and parasitic infections, including malaria, has progressed rapidly. This service has become one of the most active in the department and operates markedly to the benefit of the patient, much valuable time being saved in diagnosis and treatment.

### 5. HISTOPATHOLOGY

The technique for handling surgical pathology specimens has been reorganized to such an extent that diagnoses by the pathologist on the resident and visiting staffs have been facilitated. The volume of work in this division has increased enormously and we believe that the reorganization in this department has reacted for the improvement of diagnoses and the subsequent care of the patient. An attempt has been made to return reports more rapidly so that in many cases hospital days are lessened for individual patients.

### 6. FROZEN SECTION SERVICE FOR RAPID DIAGNOSIS

Prior to my incumbency, the number of frozen sections for rapid diagnosis averaged about 1 a week. Since my incumbency, a satisfactory technique has been instituted and pathologists are available at all times and at all hours for rapid diagnosis while the patient is yet on the operating table. This frequently saves the patient a second operation and assures the proper surgical handling, depending on the diagnosis. In the past six months this service has increased remarkably, the number of requests averaging almost 1 a day.

### 7. FRIEDMAN TESTS

Prior to the past six months this very important diagnostic procedure was not available in Charity Hospital, and if the test was carried out on these patients by other agencies, the patient was charged \$1.00 for the examination. The need for this service has been demonstrated in the number of legitimate requests that we have had at the present time. This service is purely a consultation service.

### 8. EMERGENCY LABORATORY

Under the present organization the Department of Pathology and Diagnostic Laboratories functions 24 hours a day, 7 days in the week. The Emergency Laboratory has been established in the basement in the Mortuary Unit. This laboratory cares for all work arising between 5 P. M. and 9 A. M. and from Saturday noon until Monday morning. A technician has been assigned to this service so that all necessary diagnostic procedures may be carried out rapidly. This operates for the benefit of the patient in rapid diagnosis and treatment as well as to the benefit of the Medical Staff.

### 9. PASTEUR INSTITUTE

The Pasteur Institute prepares all anti-rabies vaccine administered in the Pasteur Clinic of the Charity Hospital. The cost of materials used in the preparation of this very valuable biological product amounts to approximately \$200.00 a year. The estimated value of the finished product amounts to approximately \$7,000.00. This represents a theoretical saving to the hospital of some \$6,800.00.

All anti-rabies treatments are administered by the Medical Staff of the Department of Pathology.

Pathologists from this department examine all dog and other animal brains submitted for the detection of rabies. Considerable study has gone into the improvement of the staining method of suspected brains for the detection of rabies and the diagnosis can now be made with greater surety as well as rapidity.

The department sends out telegrams and letters of reports on all brains received.

The department sends out follow-up letters on all patients failing to return for treatment.

### 10. TUMOR CLINIC

One or more pathologists from the resident staff is always in attendance for consultation in this clinic for the study of tumors.

Biopsy specimens are prepared in the Division of Histopathology for diagnosis by a pathologist.

### 11. CLINIC LABORATORY

This diagnostic division of the Department of Pathology serves the out-patient clinic department. The volume of work in this laboratory is enormous and must be done rapidly, inasmuch as reports must be returned to the charts in as short a space of time as is possible with accuracy. The laboratory personnel must not only perform the number of technical operations listed in the numerical analysis, but in addition must actually collect the specimens directly from the patient in most cases. This necessitates the handling of a large number of individuals. A member of the medical staff is in attendance in this clinic at all times for consultation, as well as the carrying out of diagnostic procedures.

## 12. VENEREAL DIAGNOSTIC CLINIC

The medical staff, with the assistance of one member of the technical staff, operates this clinic daily. The average number of patients cared for in this service amounts to 20-25 a day. These patients are referred by the medical staff from all other clinics and from the hospital. Since the recent campaign by the U. S. Public Health for the diagnosis and eradication of venereal diseases, the work of this clinic has increased remarkably. Such procedures as the Frei test for lymphogranuloma inguinale, Ducrey test for chancroid, Dark Field Examination for primary syphilis and tests for granuloma inguinale are carried out on request. In addition to the above venereal work, diagnostic procedures are carried out for the detection of leprosy and fungus infections, in this division.

## 13. PREPARATION ROOM

In any diagnostic laboratory a division must be set aside which prepares material for all other divisions. This is the purpose of this service.

All culture media used by the hospital for the proper identification of infectious agents is manufactured in this division. This again is carried out at a minimal expenditure, inasmuch as the material can be prepared from stock with far less expense than the purchase of the same material completely prepared by biological houses.

Diagnostic antigens and anti-sera for serological agglutination tests for the diagnosis of disease are prepared.

Antigens for allergy tests are prepared.

All staining solutions used in the department are prepared.

All solutions other than those used in biochemistry are prepared.

All glassware for the collection of specimens throughout the hospital, as well as in the department, is washed, wrapped and sterilized in this division.

Certain glassware and apparatus for use in the department is fabricated in this division.

## 14. BASAL METABOLISM LABORATORY

The number of consultations sent to this division has increased enormously. Provision has been made so that the division operates 6 days a week, instead of the previous 5 days a week, and both colored and white, male and female can be cared for on every day. This has been done by the assignment of a special technician to this service.

## 15. MORGUE

This service must of necessity operate 24 hours a day, 7 days a week. Two additional attendants have been added to this division in order to take care of the enormous increase in work on this service and to assure that no delays occur in the removal of bodies from the ward and the disposition of the bodies received.

The two Medical Schools use the Morgue Amphitheatre for an average of 40 teaching hours per month. This necessitates frequent cleaning and preparation of the amphitheatre as well as the handling of autopsied material.

All necessary cleaning in this division is performed by the Morgue Attendants.

The records of this department and the necessary vital statistics reports are prepared by the clerk in this division.

The Morgue attendants convey bodies from the ward to the Morgue on call.

They prepare and release bodies to the Coroner and to the undertakers. They notify members of the medical staff when bodies are to be released and when autopsies are to be performed.

They notify the Coroner of all cases falling under his jurisdiction.

They prepare for burial all bodies buried by the hospital.

They attend to the disposition of all unclaimed bodies to the departments of anatomy of the two medical schools and of the Loyola University Dental School.

They care for all instruments and materials used in the performance of autopsies, including the sharpening of cutting instruments.

They check and send out all linen used in this department.

#### 16. ANIMAL HOUSE

The maintenance of suitable animal colonies is an important function in any diagnostic division. Animals are available for diagnostic inoculation on request at the present time. It is no longer necessary to purchase guinea pigs, inasmuch as with better housing facilities and care we are able to breed our own supply. This is partially true for the rabbits used in the Friedman test and in the manufacture of anti-rabies virus. However, it is expected that within the next 2-3 months that the rabbit colony will also be self-maintaining. It was necessary to purchase a number of white mice in order to start a mouse colony. This colony will likewise maintain itself and in anticipation of the next pneumonia season a sufficient number of animals will be available for the confirmation and diagnosis of all types of pneumococci.

#### 17. BLOOD DONOR ROLL

The Department of Pathology has cooperated with the Blood Donor Roll of the City of New Orleans, sending out a member of the medical staff and a technician to obtain blood for typing and serological testing for syphilis. All of this typing, as well as the serological tests for syphilis, is performed in the Department of Pathology. Donors from this roll are used for the transfusion of patients for whom donors would otherwise be unavailable. In the past year some 400 individuals have been tested for the blood donor roll.

#### 18. RECEIVING FILE DESK

This service has been instituted within the past 7 months. All specimens are received and delivered to the proper diagnostic laboratory, preventing the loss of specimens, as frequently occurred in the past, as well as saving of time in the examination of these specimens. The clerk files duplicate reports of procedures performed by the Division of Diagnostic Laboratories.

The clerk likewise answers all telephone inquiries about reports on specimens. This has operated to save a great many hours of technical time, inasmuch as prior to the institution of this service inquiries were of necessity answered by the technical assistants in each laboratory.

The clerk notifies the wards when blood matching reports are ready for delivery, thereby saving valuable time in the treatment of patients, as well as releasing those individuals who have offered themselves as donors.

The clerk checks all improperly filled out laboratory requests by contacting the information desk, the Record Library, the ward or the doctor in charge of the patient.

This service issues all test tubes, bottles and supplies provided by this department to the various central services of the hospital.



### 19. RECORDING CLERKS

Prior to the institution of this service of recording all laboratory reports directly on the patient's chart by members of the staff of the Department of Pathology, an average of 110 reports per day were turned into the Record Library which had never been entered on the patient's chart. In addition to these, numerous other records of diagnostic procedure were not only not entered on the chart, but the records were lost on the ward. This meant that the patient's chart was incomplete and frequently valuable diagnostic data on the patient was lost to the doctor. This also necessitated the repetition of many diagnostic procedures, either during the patient's stay in the hospital or on readmission, or in the clinic. At the estimated cost of some 13c per laboratory test, based on the numerical analysis, this represents a monetary loss of \$13.00 per day or \$4,680.00 per year.

This service has operated to immeasurably improve the patient's record and diagnosis.

The procedure has also eliminated private work being sent to the Department of Pathology with fictitious names and hospital numbers. This was no inconsiderable item.

A saving has been effected in stationery and printing by the institution of this service, by reducing by one-half the number of laboratory requisition slips used, inasmuch as in the past the original requisition was kept for the department files and a duplicate was typed for the patient's record. This duplicate was destroyed after the interne had entered the report on the chart.

A further saving has been effected along this line by the elimination of all slips, except one single type of request slip.

It has also eliminated the use of two typists for the making of these duplicate typed reports.

### 20. SECRETARIAL STAFF

The secretary to the department prepares all requisitions for the department and keeps records of the delivery of supplies. This secretary also directs the activities of the other members of the secretarial staff. She must also act as personnel officer for the department. This service is of extreme importance in a department as large as the Department of Pathology and employing the number of individuals that are employed in this department. It is frequently necessary for her to assign individuals to cover services where the regular member is absent. She must act as a liaison officer between the medical staff and the department in the matter of records and appointments for staff members of the Department of Pathology. Besides these very special duties it is necessary for her to carry a considerable volume of the routine protocol record work as well.

The secretarial staff as a whole carries an enormous volume of routine work in the preparation of autopsy protocols. During the year 1939-40, 1511 autopsies were performed in the Department of Pathology. Each protocol requires an average of 6 legal cap typewritten pages in its final preparation.

Before the final copy can be made the material must be dictated by the Pathologist performing the autopsy. It is easy to see that this constitutes an unusual load of secretarial work.

All protocols of autopsies are indexed and checked with the autopsy permit for diagnosis and copies are attached to the patient's chart to be sent to the Record Library for file, another copy is retained by the Department of Pathology to be bound in monthly or bimonthly volumes and a copy is retained by the doctor who performed the autopsy. On all cases coming under the coroner's jurisdiction a copy is likewise sent to the coroner's office.

The bound volumes of protocols are available for study and use by all members of the visiting and resident staff. A suitable place has been made available in the department so that the medical staff may come in at any hour of the day or night and use these records. They may not be removed from the department under any circumstances.

This service also prepares a cross-index of anatomic diagnoses in accordance with the standard nomenclature of diseases.

All records on surgical specimens received in the Division of Histopathology are prepared by the secretary in this division. Over 10,000 surgical specimens a year are received and gross descriptions are dictated to the secretary by the pathologist. The final records are indexed and the volumes are bound monthly. These records are available to the residents and visiting staff for study, within the department.

The records of the Pasteur Clinic are kept by the secretary in this division and letters and telegrams are sent out.

## 21. SERVICE TO THE RESIDENT AND INTERNE STAFF

A clinical pathological conference has been organized and is held each Wednesday afternoon at 1:30 P. M. in the Morgue Amphitheatre. These conferences are participated in by the three hospital units, the Tulane Unit of Visiting Pathologists, the L. S. U. Unit of Visiting Pathologists and the Charity Hospital Staff Pathologists. On occasion, pathologists from elsewhere have been invited to conduct these conferences. The attendance at these conferences has increased steadily and now averages about 75 members of the visiting and resident staff weekly. A projection screen has been provided in the Morgue and through the courtesy of the L. S. U. Department of Pathology the use of a microprojector has been provided so that the histopathology of each case may be demonstrated as well as the gross pathology. The clinicians have been encouraged to participate in these conferences as well as the pathologists. The X-ray Department, the Radiology Department and the Heart Station cooperate by making available their records for these conferences and by attending in person.

Clinical Pathological Conferences are held 4 evenings each week at 4 P. M. in the Morgue Amphitheatre, at which time the material obtained from autopsies in the past 24 hours is considered. These conferences are conducted by the Charity Hospital Staff Pathologists and are attended by an average of 25 visiting and resident clinical staff members.

Since my incumbency, the slides and records of the Division of Histopathology have been made available, with necessary microscopes for those residents desiring to qualify themselves in pathology for the examinations of their respective certification boards.

Provision has been made for a room and for bodies for cadaveric surgery in the Morgue. This is particularly for the benefit of the resident surgical staff in the preparation for National Board Examinations for the American College of Surgeons.

## 22. SUBSCRIPTIONS TO PUBLICATIONS

Prior to 1940, the department subscribed to 15 medical publications. This has been reduced to 9 publications. Those eliminated were the more expensive foreign journals. All of the journals now subscribed for are specialized pathology and clinical laboratory journals and are necessary in order that the department may keep abreast of the newest and best in laboratory diagnostic procedures.

### 23. MORALE OF PERSONNEL

Under the increased volume of work, quality has increased out of proportion to the volume. With this increase, hours of overtime work by all members of the department is frequently necessary. This is carried out cheerfully and in spite of it, the morale of all the members of the department is excellent.

The Department of Pathology is now operating in perfect harmony with the Departments of Pathology of the two medical schools and there is a friendly and cooperative attitude on the part of all members of the visiting staff pathologists as well as the resident pathologists.

No efforts have been spared to assure the 3 units operating within the department of fair dealing and full cooperation in their teaching programs.

NOTE: All work for private and commercial laboratories, not connected with Charity Hospital, has been eliminated since my incumbency. This was done with the full sanction of the Director of the hospital. This item in the past has amounted to a considerable figure.

There is much yet to be done to bring the Department of Pathology to its maximum efficiency. The past months have seen many changes to improve the services offered by this department. However, the reorganization in the Department of Pathology has been greatly handicapped by an insufficient number of adequately trained technicians and secretarial assistants. On the basis of the experience of other hospitals the number of personnel in this department is from one-fourth to one-third that which is necessary for the volume of work performed.

The Acting Director and the resident Staff Pathologists devote their full time to the Department of Pathology of Charity Hospital. They are available at all times for consultation with the members of the Resident and Visiting Staff.

Respectfully submitted,

EMMA S. MOSS, M. D.

Acting Director



Student Nurses' Library—Nurses' Home.

## REPORT OF X-RAY DEPARTMENT

Year Closing June 30th, 1940

AMEDEE GRANGER, M. D., DIRECTOR

(Died December 15th, 1939)

JAMES B. IRWIN, M. D., ACTING DIRECTOR

(Resigned June 30th, 1940)

DR. EDNA W. BROWN, ACTING DIRECTOR AND RADIOLOGIST

DR. MANUEL GARCIA, ACTING DIRECTOR AND THERAPEUTIST

DR. HENRY J. JENSEN, Second Year Resident in Radiology

DR. DOROTHY MATINGLY, Second Year Resident in Radiology

DR. JAMES RILEY, First Year Resident in Radiology

DR. HARRY FISHBEIN, First Year Resident in Radiology

## DIAGNOSTIC DIVISION

Total number of patients examined.....	66,736
Total number of plates used.....	112,936
Total number of fluoroscopies.....	4,447

## HOSPITAL CASES

White.....	20,898
Colored.....	13,480

## ACCIDENT ROOM AND CLINICAL CASES

White.....	16,816
Colored.....	11,973

## SIZE OF FILMS USED AS FOLLOWS:

5x7.....	1,290
8x10.....	29,190
10x12.....	21,983
11x14.....	17,235
14x17.....	43,238

## PARTS EXAMINED AS FOLLOWS:

Cranium and bones of the face.....	3,891
Sinuses.....	1,560
Mastoids.....	892
Upper extremities.....	6,745
Lower extremities.....	7,662
Chests.....	31,776
Gastro-intestinal tract.....	3,614
Genito-urinary tract.....	5,840
Spinal column.....	2,371
Abdomen and pelvis.....	4,113

## THERAPY DIVISION

Superficial Therapy cases.....	3,063
Deep Therapy cases.....	14,772
Total.....	17,835
Superficial Therapy treatments.....	4,824
Deep Therapy treatments.....	22,683
Total.....	27,507
Superficial Therapy new cases.....	627
Deep Therapy new cases.....	739
Total.....	1,366

## RADIUM DIVISION

White.....	135
Colored.....	123
Total.....	258

Respectfully submitted,

EDNA W. BROWN, M. D.,

Acting Director, Dept. of Radiology

## REPORT OF HEART STATION— ELECTROCARDIOGRAPHIC LABORATORY

Director

RICHARD ASHMAN, PH. D.

Assistant Director

JAMES L. GOUAUX, M. D.

Laboratory Technicians

DOROTHY JOSEPH, B. S.

VIRGINIA MERIWETHER, B. S.

ESTHER JUDLIN, B. S.

JOSEPH BUCHE

SIDNEY PAILET

Secretary

MARCELLE JARREAU

July 5, 1940

Dr. Roy Wright, Director and the  
Board of Administrators of the Charity Hospital  
New Orleans, La.

Dear Sirs:

The year 1939-1940 has seen a considerable increase in the number of electrocardiograms taken by the Heart Station, together with an augmentation in the interest in this aid to diagnosis on the part of the hospital staff. Because the technical assistance is now more nearly adequate to our need, lead IV of the electrocardiogram has for the first time been introduced as a part of our routine procedure. Furthermore, with the help of a full time resident assigned to the Heart Station, it has become possible still further to increase the usefulness of the department by fluoroscopic examination of many patients.

During the period, January to June, 1939, the number of electrocardiograms taken per working day was nearly 18; during the same period in 1940, the number has risen to over 35. This increase has resulted not only from the taking of more records from patients with cardiac disease, but also from the recording of pictures on surgical cases as a part of the routine pre-operative check-up.

During the past several years, the department has not only served its purpose to the State as a part of the diagnostic procedure, but has also contributed to the general knowledge of the subject through the medium of studies made and published by the Director, and by others,—and from the publication of a book, "Essentials of Electrocardiography" (Macmillan) which has been translated into the Spanish language (Buenos Aires) and which is soon to appear in a second American Edition. This has, of course, been accomplished without neglect of the routine duties of the department.

We wish to thank the Director of the Hospital and the Board of Administrators for the splendid cooperation in facilitating the work of the department.

Respectfully submitted,  
Richard Ashman,  
Director.

**HEART STATION  
ANNUAL REPORT**

	1939 July-December	1940 January-June
WARD PATIENTS-----	2,332	3,501
CLINIC PATIENTS-----	1,174	1,646
HEART STATION-----	77	119
	<hr/>	<hr/>
TOTALS-----	3,583	5,266
GRAND TOTAL-----	8,849	
January 1, 1940 to July 1, 1940		
Fluoroscopic examinations reported-----		215

## REPORT OF THE DEPARTMENT OF PHYSICAL THERAPY CHARITY HOSPITAL OF LOUISIANA AT NEW ORLEANS

June 30, 1939 to July 1, 1940.

To the Director and Board of Administrators,  
Charity Hospital of Louisiana at New Orleans,

Gentlemen:

I am submitting herewith the annual report of the Department of Physical Therapy for the year ending June 30, 1940:

### PERSONNEL:

The personnel of the Department as of this date consists of the following:

MARION B. STEWART, B. S., R. P. T. T., Supervisor		
MARY BACHARACH, B. P. Ed., R. P. T. T., Graduate Technician		
RUTH LANGLEY, B. S., R. P. T. T.	"	"
MR. T. D. P. ALDRICH, B. HU., R. P. T. T.	"	"
SARA LEWIS, B. S., R. N.	"	"
FLORENCE FOEGETE, P. T. T.	"	"
ARDA LEGGETT, P. T. T.	"	"
BEATRICE B. CURRIE, Secretary		
PEARL SIMON, R. N.		
BETTY STOUGH, R. N.		
FRED TALBOT, Junior Technician		
ELIZABETH ADRAGNA, Admitting Clerk		
MORRIS BUECHE, Orderly		
LEONARD DAIGLE, Orderly		

It will be observed that the graduate technicians employed in the Department are all graduates of schools of physical education or of schools of nursing, or have had at least two years of college work, with science majors, followed by one year of graduate training in physical therapy.

**Recommendations:** The outstanding need of the department of Physical Therapy, from the standpoint of personnel, is the appointment of a physician in the role of director. Such an appointment is essential for the most effective utilization of the departmental facilities, and is also essential for the proper recognition of the Department by the rating boards. The establishment of a school of physical therapy, as will be pointed out later, is possible and very desirable here, but could not be accomplished until a medical director had been appointed for the Department.

Attention has been called above to the training and experience of the departmental personnel, which compare favorably with the training and experience of the personnel in accredited physical therapy departments in other institutions of the country. The salaries at Charity Hospital, however, are far below the standards established for accredited departments. While fully aware of the difficulties facing the Hospital administration in regard to finances, I venture to express the hope that these inequalities of salary may shortly be corrected, both that the Department may be properly accredited and that the excellent service of our technicians, and the good results they have achieved, may receive the proper recognition.



The amount of work now being done in the Department requires at least two more technicians for its proper performance.

#### SPACE:

The space presently occupied by the Department in the Lapeyre-Miltenberger Convalescent Home is satisfactory from the standpoint of location. Some seventy percent of the total number of patients handled come from the clinics, and the major number of other patients are in the stage of convalescence and will, presumably, be hospitalized in this building when it functions as a convalescent home.

**Recommendations:** For the reasons stated, I hope very much that the plan, tentatively discussed, of moving the entire Department of Physical Therapy to the new hospital will not be carried out, if for no other reason than that an equal amount of space could not, as I understand, be assigned for our work in it.

On the other hand, our efficiency would be greatly improved if two rooms (about 20 by 20 feet each) were assigned to the Department in the new building. Such an assignment would make possible the convenient treatment of ambulatory and roller patients not hospitalized in the Convalescent Home, and would simplify the taking of equipment to the wards for bedside treatment. If such space were allocated to us, one of the new technicians could be permanently assigned to the main building.

#### EQUIPMENT:

The amount of work done in the Department, which will be itemized later, places a heavy drain upon our equipment, much of which is old, some of which is antiquated, and most of which is in constant use. Replacements during the year have been negligible, as has been the case for several years past, during which time the volume of our work has steadily increased.

**Recommendations:** Since good results can be achieved only when equipment holds up under heavy usage, and since the use of old equipment is not always free from risk, I make the following suggestions as to the replacement of old and the purchase of new equipment:

1—A Morse wave machine for the low frequency unit (two are now in use.)

2—A non-portable short wave machine suitable for giving all methods of short wave diathermy treatments (not one of the machines now in use is equipped for all methods of treatment, and time and opportunities are both lost as a result.)

3—Two machines for the radiant energy unit, capable of being used on an eight-hour basis. (The machines now in use are too old to stand up under such heavy loads. If they were replaced by new machines, they could be transferred to the white and colored pediatric wards, respectively, where they would take some of the load off the machines in the Department, and at the same time, could be safely employed because they would not be used continuously, as is now the case. This plan would also eliminate the hazard, which is by no means negligible, of bringing very small infants to the Department for treatment, as must now be done. Neither the nursing staff nor the departmental staff is sufficiently large to supply the children with the proper supervision under these circumstances.)

4—Two portable suction-pressure machines to be used for bed-ridden patients with occlusive peripheral vascular diseases. The two machines now in use are not modern, and in addition, are cumbersome, and cannot be used on the wards.)

5—Two additional fever units, to permit prompt treatment of patients for whom this type of therapy is advised. The machines now in use are totally inadequate for the calls upon them, and there is a long waiting list of patients.)

6—The provision of a small gymnasium with several pieces of apparatus, such as stall bars, shoulder wheel and inverted walking bars, to enhance good restoration of function in joint conditions. (Nothing of the sort is now available, and the restorative therapy now applied necessarily stops short of its full possibilities.)

7—A camera to enable us to check accurately and scientifically the results of treatment, and the progress of cure. It is generally agreed that photographic records furnish the only acceptable method of determining results.

Certain of this equipment is needed more urgently than other items listed, and all of it is not only desirable, but really necessary.

#### EDUCATIONAL ACTIVITIES:

Each student nurse in Charity Hospital is assigned for one month to the Department of Physical Therapy. The time, although inadequate for any but superficial training, at least permits her to become familiar with the principles and practice of physical therapy, as she is likely to encounter it in private or institutional work. This practical training is in addition to the twelve lectures on the theory of physical therapy given to the nurses in their first year of training.

The Supervisor of the Physical Therapy Department is a member of the Faculty of the Louisiana State University, where instruction in physical therapy is conducted on both theoretic and practical lines. The time thus consumed is put to excellent use, for there is an increasing realization among the internes and residents of the possibilities of this Department, as the result of the instruction which they receive in their undergraduate years.

**Recommendations:** One of the objects of the Department of Physical Therapy should be the eventual establishment of a school devoted to the teaching of this specialty. Very few institutions in the United States have wider opportunities in this regard. The establishment of such a school, however, could not be contemplated until Charity Hospital were able to meet the requirements for accrediting, including the appointment of a medical director for the Department, the provision of proper equipment and the bringing of the salaries of the technicians into line with the standards elsewhere.

#### EXHIBIT:

The Department presented an exhibit on "Passive Motion and Massage in the Treatment of Fractures of the Upper End of the Humerus" at the Annual Meeting of the American Physiotherapy Association in New York, June 23-28, 1940. It was well received and attracted considerable attention to the work of the Hospital.

The Department also participated by invitation in one of the round table conferences at the Sectional Meeting of the American College of Surgeons held in New Orleans in January.

#### ANALYSIS OF DEPARTMENTAL ACTIVITIES:

Attached you will find a summary of the year's work of the Department, divided according to: Type of Treatment, Work by Months, Race of Patient and Sources of Recommendation (hospital or clinic.)

I am also attaching to this report a copy of a paper entitled "Physical Therapy as a Specialty," which was written by invitation for the March 15, 1940, issue of The Tiger, the official paper of the School of Medicine of Louisiana State University. I welcomed the opportunity of putting the work of the Department before the students as one more method of pointing out to them the possibilities of this specialty, and I think you may be interested in certain details of our activities which do not properly belong in a purely statistical report.

Respectfully submitted,

MARION B. STEWART, Supervisor,

Physical Therapy Department.

Encs.—

**PHYSICAL THERAPY DEPARTMENT**  
**MONTHLY TREATMENT RECORD**  
**July 1, 1939-June 30, 1940**

1939	RAD. HEAT	INFRA RED	DIA.	WHIRL POOL	MASS.	THER. EX.	HUB. BATH	U. V.	LOW(*) FREQ. CURR.	SUC. PRES.	FEVER THER.	TOTAL	POLIO. CASES
July-----	74	922	346	114	930	513	30	143	359	214	25	3,670	78
August-----	198	1,196	337	172	938	653	63	181	278	224	30	4,270	104
September--	277	1,398	299	174	1,102	808	80	224	238	225	50	4,875	102
October-----	322	1,741	358	154	1,396	1,015	93	212	311	193	36	5,831	162
November--	263	1,466	369	93	1,271	880	39	229	306	133	37	5,086	74
December--	246	1,702	415	87	1,192	816	39	300	394	113	27	5,331	79
1940													
January-----	257	1,398	387	86	1,081	793	19	241	398	77	33	4,770	66
February-----	257	1,626	426	60	1,234	985	25	326	355	116	32	5,442	80
March-----	324	2,208	582	82	1,590	1,248	23	349	488	111	36	7,041	92
April-----	332	2,369	671	52	1,698	1,272	19	303	562	72	32	7,382	112
May-----	357	2,218	608	92	1,668	1,268	13	329	496	105	34	7,188	98
June-----	230	1,364	474	96	1,095	964	6	266	287	87	29	4,898	71
TOTAL-----	3,137	19,608	5,272	1,262	15,195	11,215	449	3,103	4,472	1,670	401	65,784	1,118

(\*) Includes Galvanism-  
Faradism-  
Sinusoidal-  
Ionization-



Student Nurses' Lounge—Nurses' Home.

## PHYSICAL THERAPY DEPARTMENT

## MONTHLY TREATMENT RECORD

July 1, 1939-June 30, 1940

1939	WHITE				COLORED			
	NEW PATIENTS	TOTAL	WARD	CLINIC	NEW PATIENTS	TOTAL	WARD	CLINIC
July-----	80	1,432	361	1,071	28	633	99	534
August-----	99	1,413	369	1,044	49	726	77	649
September-----	107	1,588	441	1,147	47	781	241	540
October-----	106	1,805	471	1,334	71	964	283	681
November-----	121	1,560	411	1,149	62	941	338	603
December-----	84	1,662	467	1,195	67	894	261	633
1940								
January-----	74	1,532	449	1,083	75	785	223	562
February-----	141	1,919	671	1,248	57	823	240	583
March-----	148	2,451	791	1,660	68	921	200	721
April-----	113	2,339	793	1,546	74	988	297	691
May-----	141	2,305	836	1,469	79	1,047	306	741
June-----	74	1,628	627	1,001	44	821	231	590
TOTAL-----	1,288	21,634	6,687	14,947	721	10,324	2,796	7,528

	1938-1939	1939-1940
Total Treatments-----	55,196	65,784
Total Patients-----	30,638	31,958
Total New Patients-----	1,712	2,009
Number Working Days-----	306	306
Daily Average Treatments-----	148	214
Daily Average Patients-----	102	104

## REPORT OF CHARITY HOSPITAL GUILD

July 1, 1939 to June 30, 1940

Amputation Sponges.....	1,357,417
Standards.....	546,059
Tags.....	203,000
Masks.....	12,227
Perineals.....	5,109
Lap-sixes.....	22,422
Compressed Dressings.....	40,114
Applicators.....	7,783
Central Service Sponges.....	4,395
Amputation Pads.....	6
Tonsil Tampons.....	189
Needle Cases.....	170
<b>Total.....</b>	<b>2,198,891</b>

Accomplished by volunteer workers during the year:

Number of meetings held.....	286
Number of workers at meetings.....	3,291
Number of dressings sent to the hospital from 1919 to June 30, 1940.....	12,301,783

Morning meetings are held from 9:30 until Noon. Afternoon meetings are from 2:00 to 4:00.

One meeting is held at the Sophie Gumbel Home from 9:00 a. m. until Noon on Thursdays, commencing with the first Thursday in October through May. Mrs. R. H. Carter is in charge.

The children of the Gumbel Home assist the ladies at their meeting and work with the ladies of the Guild during the week. For the past few years they have made over one half of the dressings.

In closing this report I would like to say that this has been the largest year in the history of the Guild and I hope each year we will show an increase in our work. We are delighted with our lovely room.

MRS. C. WARREN GILMER,  
President.

### Officers For the Year

Honorary President for Life.....	SISTER STANISLAUS
President.....	MRS. C. WARREN GILMER
1st Vice-President.....	MRS. S. C. JAMISON
2nd Vice-President.....	MRS. R. H. CARTER
3rd Vice-President.....	MISS G. McCAY
4th Vice-President.....	MRS. W. S. AMOS
Treasurer.....	MRS. HARRY HOWARD
Recording Secretary.....	MISS SARAH PALFREY
Corresponding Secretary.....	MISS ADELE REYNAUD
Publicity Chairman.....	MRS. H. E. KUHNER

**Board Members**

MRS. J. J. WASHINGTON      MRS. E. D. SIMPSON      MRS. GEORGE VILLERE

**Members in Charge of Sections**

Monday, a. m.      Miss G. McCay, Assistant, Miss G. Prochaska.  
 Tuesday, a. m.      Mrs. R. H. Fuselier, Mrs. P. Ganuchau, Mrs. W. Gancheau.  
 Tuesday, p. m.      Mrs. J. R. Lusher, Assistant, Mrs. R. Chevis.  
 Wednesday, a. m.      Mrs. P. Jansen, Mrs. R. Dunham.  
 Wednesday, p. m.      Mrs. James Calcagno, Assistant, Miss Nita Sicarelli.  
 Thursday, a. m.      Mrs. G. A. Chehardy, Assistant, Mrs. C. A. Brauner.  
 Thursday, p. m.      Mrs. E. J. Nestor, Assistant, Mrs. Chas. Chehardy.  
 Friday, a. m.      Mrs. L. D. Barrett, Mrs. J. D. Nix.  
 Saturday, a. m.      Scout Section—Mrs. N. J. Khoury in Charge.



## OUTPATIENT DEPARTMENT

SISTER IGNATIA, R. N.,  
Director

MADGE BOUDREAUX,  
Secretary

BEATRICE LANDRY, R. N.,  
Clinic Supervisor

MARY JANE MCCARTHY, R. N.,  
Clinic Supervisor

LENORE ANDRIES, R. N.,  
Clinic Supervisor

July 17, 1940

To the Board of Administrators and Doctor Roy W. Wright,  
Director of the Charity Hospital of Louisiana at New Orleans.

Gentlemen:

I herewith submit the Annual Report of the Out Patient Department for the fiscal year beginning July 1, 1939 and ending June 30, 1940.

### IMPROVEMENTS

With our occupancy of the new clinics on July 31, 1939 has been found the solution to many of the problems which impeded our progress in the old set-up. It is a recognized fact that the facilities of our new department have made possible the gratifying accomplishments which circumstances and conditions of our former location made impossible.

During the construction period of the new Hospital the Out Patient Department was inconveniently located two blocks away from the hospital proper. To this handicap was added the equally distressing problem of inadequate accommodations for the hundreds of patients who thronged our clinics. In these crowded, undesirable conditions patients could not receive adequate medical care.

It is only after having experienced the inconveniences of our former incommodious clinics that one can truly appreciate the modernism of our present surroundings. This progress is observed not only in improved location, but also in the new X-ray facilities, Cystoscopic Room, Plaster Room and Laboratory, all of which are now available for the exclusive use of clinic patients.

Another step in advance of our past method of admitting patients is the long awaited and much needed Appointment System of Admissions, which we have been able to start in the new hospital. While not by any means perfect this undertaking is succeeding and will, eventually, result in much better care for patients.

Our moving into the new clinics has also made possible the re-instatement of the Well Baby Clinic. At the present time this unit is not functioning to our complete satisfaction because of the congested conditions prevalent at this writing. A necessary expansion to meet the needs of mother and baby calls for an increased staff and additional space. When the latter have been acquired, we hope to open, in conjunction with the Well Baby Clinic, a Food Clinic which has been a need of long standing at Charity Hospital.

### PROBLEMATIC SITUATIONS

While we gratefully acknowledge the extensive improvements and lasting accomplishments which have heralded our entrance into the new Out

Patient Department, it would be to overlook the best interests of Charity Hospital were we to fail to recognize the need for further improvements.

At the present time we are occupying only the East Wing of the Out Patient Department. The need for the opening of the West Wing is greatly felt. The opening of this wing would eliminate many of our major problems which will be noted as this paragraph continues. White patients are admitted on Mondays, Wednesdays, and Fridays, and colored patients are admitted on Tuesdays, Thursdays, and Saturdays. It is obvious, in view of the hundreds who seek aid at our clinics, that three days for the service of white patients and two and one-half for the service of colored patients is not adequate. There is no provision made for the care of patients who need dressings changed every day since white and colored patients are not to be mixed. The Accident Room does not function for the treatment of clinic patients—their responsibility is the handling of emergencies; yet, if a white patient becomes ill on a Monday afternoon and is not sick enough to be admitted to the hospital, it borders on the inhuman to send that patient home with the information that he is to come to the clinic on Wednesday to be treated. However, this is the only alternative and it happens all too frequently, since white and colored patients are treated every other day. The only solution to this problem is the opening of the White Wing of the Out Patient Department.

The overcrowded conditions existing in all the clinics create also certain outstanding problems in the special divisions within the department as, for example, the X-ray Room, Cystoscopic Room, Clinic Laboratory, Social Service, and Appointment Office. The problem becomes more acute in the Fracture, Orthopedic, Obstetrical, Gynecological, and Ear, Nose and Throat Clinics.

For many years, we have advocated a Unit Record System which will make possible an in-service and out-service tie-up. Patients are discharged from one service on the wards and are seen in the clinic on another service, or they are admitted from one clinic service to an opposite ward service. The patient derives little benefit from this procedure and it is emphatically a deterrent to the efficiency, interest, and educational advantages of the doctor and nurse alike. There is, also, a duplication of X-rays and laboratory work because of differences of doctors' opinions on individual cases. Not only is this an economic drain on the hospital but, again we repeat, it is indicative of poor medical care.

Another disagreeable feature lies in the fact that no provision was made in the new set-up for a general waiting room. This cannot be stressed too forcibly. At present, we are using unoccupied admitting room space, but when this is not available we will again be confronted with the problem of waiting patients lined down two city blocks. Quite naturally, this condition elicits the most unfavorable comments from the public.

A woefully insufficient nursing staff prevents proper supervision from this professional group and it affords a minimum of assistance to the patient as well as to the doctor. Then, too, the shortage of nurses in the clinics, necessitates the placing of certain nursing duties on clinic attendants.

There is a definite need for the opening of additional clinics, particularly for Allergy, Contagious Diseases, and Arthritis.

## STATISTICS

The following statistical tables present a picture of the huge amount of work done in the hospital's Out-Patient Department:

Services	New Cases	Inter-Department Consultations	Total Visits 1939-40	Total Visits 1938-39
Surgery.....	6,064	43,360	49,424	47,357
Varicose Veins.....	47	4,144	4,191	4,458
Tumor.....	51	1,368	1,419	960
Fractures.....	879	7,323	8,202	8,169
Orthopedics.....	768	10,168	10,936	9,794
Plaster Room (Began 3-8-40).....		777	777	
Obstetrics.....	1,361	19,450	20,811	19,005
Post-Partum.....	1,383	285	1,668	1,540
Gynecology.....	1,811	20,611	22,422	17,551
Male Urology.....	1,069	16,518	17,587	16,486
Female Urology.....	351	7,648	7,999	5,572
Salvarsan.....	239	104,081	104,320	82,435
Night Venereal Clinic (discontinued 9-30-39).....	28	2,874	2,902	6,168
Ophthalmology.....	1,730	21,337	23,067	20,796
Ophthalmology (Refractions).....	13	1,759	1,772	1,417
Ear, Nose and Throat.....	3,040	27,260	30,300	23,986
Dentistry.....	1,704	17,699	19,403	19,311
Dentistry (House).....	231	2,555	2,786	2,482
Medicine.....	5,231	65,662	70,893	66,588
Metabolic.....	36	4,314	4,350	3,456
Cardiac.....	24	1,052	1,076	1,166
Neruo-Psychiatry.....	162	5,014	5,176	6,059
Pediatrics.....	3,089	15,825	18,914	16,270
Well Baby (reinstated 4-23-40).....	316	242	558	
Dermatology.....	1,374	13,502	14,876	13,303
Allergy.....	110	10,839	10,949	8,555
Colored T. B.....	172	2,215	2,387	1,508
Dibert T. B.....	346	3,821	4,167	604
Clinic Cystoscopic Room (began 10-24-39).....		471	471	
TOTALS.....	31,629	432,174	463,803	404,996
DAILY AVERAGE OF PATIENTS.....				1,526
No. of patients referred to Hospital for operation from Ear, Nose and Throat Clinics.....				1,670
No. of patients referred to Hospital for operation from Ophthalmology Clinics.....				1,037
No. of minor operations in Surgical Clinics.....				1,223
No. of operations in G. U. for Men and Venereal Clinics.....				61
No. of patients referred to Hospital from Venereal Clinics.....				126
No. of doses of Neoarsphenamine given in Salvarsan Clinics.....				30,974
No. of doses of Bismuth Subsalcylate given in Salvarsan Clinics.....				74,069
No. of doses of Tryparsamide given in Salvarsan Clinics.....				1,427
No. of doses of Tartar Emetic given in Salvarsan Clinics.....				808
No. of doses of Bismarsen given in Salvarsan Clinics.....				13,408
No. of doses of Sodium Thiosulphate given in Salvarsan Clinics.....				1,232
No. of doses of Sulpharsphenamine given in Salvarsan Clinics.....				630
No. of doses of Mapharsen given in Salvarsan Clinics.....				2,729

Total treatments given in Salvarsan Clinics.....	125,277
Total treatments given in Non-Venereal Clinics.....	5,487
No. of Spinal Punctures made in Salvarsan Clinics.....	1,505
No. of Mantoux Tests made in Pediatric Clinics.....	898
No. of X-Rays made in Clinics.....	26,749
No. of Laboratory Tests made in Clinics.....	74,524
No. of patients admitted to Hospital from Clinics.....	7,029
No. of patients discharged from Clinics.....	22,103
No. of Consultation Reports made in Clinics.....	20,728
No. of Clinic Charts checked out.....	9,814

RECOMMENDATIONS

In view of the above problematic situations, we recommend that: (1) The West Wing of the clinic be opened immediately and needed additional equipment be supplied. (2) A Unit Record System be installed. This would insure better patient care, prevent duplication of X-rays and laboratory work and thus prevent additional financial abuse. (3) An In-Service and Out Patient tie-up be effected. This would necessitate all three services, L.S.U., Tulane, and Independent, having clinics as well as ward services. (4) The completion of the installation of the compressed air system in E.N.T. clinic. If the patients could be properly treated many clinic visits could be eliminated. (5) Equipment in Dental and Eye Clinics, and also minor surgical instruments and furniture, be supplied. (6) A shelter be built to accommodate patients while they are waiting to be admitted to the clinics. (7) Night Venereal Disease Clinics be opened for the patients' convenience and as a possible remedy for daily over-crowded Salvarsan Clinics. (8) More nurses be employed as a means of insuring more efficient patient care. This would also expedite the beginning of our Student Nurse program in the clinic. (9) A Health Unit for Employees.

APPRECIATION

We are grateful for the spacious quarters, improved facilities, and equipment afforded us in the new hospital. Especially do we wish to express our gratitude for the purchase of the much needed eye equipment.

The Department also wishes to express gratitude to our Director and to the two Assistant Directors, to the Board of Administrators, to the Medical Staff, both house and visiting, for their splendid service and cooperation.

I also wish to express sincere appreciation to my own staff for their loyalty and generous service.

Respectfully submitted,  
 SISTER IGNATIA, R.N., B.S.,  
 Director, Out-Patient Department.

**NEW CASES TREATED IN OUT-PATIENT DEPARTMENT**  
For Fiscal Year 1939-1940

MONTHS	WHITE MALE	COLORED MALE	WHITE FEMALE	COLORED FEMALE	TOTAL WHITE	TOTAL COLORED	MALES	FEMALES	GRAND TOTAL
July.....	656	588	808	717	1,464	1,305	1,244	1,525	2,769
August.....	781	741	982	851	1,763	1,592	1,522	1,833	3,355
September.....	519	665	685	779	1,204	1,444	1,184	1,464	2,648
October.....	506	587	684	764	1,190	1,351	1,093	1,448	2,541
November.....	473	439	575	549	1,048	988	912	1,124	2,036
December.....	398	441	472	529	870	970	839	1,001	1,840
January.....	449	401	564	483	1,013	884	850	1,047	1,897
February.....	508	601	539	706	1,047	1,307	1,109	1,245	2,354
March.....	613	679	717	814	1,330	1,493	1,292	1,531	2,823
April.....	661	689	757	823	1,418	1,512	1,350	1,580	2,930
May.....	734	744	900	905	1,634	1,649	1,478	1,805	3,283
June.....	706	720	880	847	1,586	1,567	1,426	1,727	3,153
TOTALS.....	7,004	7,295	8,563	8,767	15,567	16,062	14,298	17,330	31,629



A Bed Room in the Nurses' Home

## ANNUAL REPORT, DEPARTMENT OF ALLERGY

July 1, 1940

To the Board of Administration  
Charity Hospital  
New Orleans, La.,

Gentlemen:

I beg to submit this my report of the work done in the Allergy clinic of the Charity Hospital during the fiscal year 1939-1940: From July 1st, 1939 to June 30th, 1940 we treated 10,949 patients, an increase over the previous year of over 2,300 patients. 110 new patients applied for treatment and over 300 were referred from the other departments for consultations.

The result in the 50 ragweed patients taking oral treatments was as follows: 24% are still practically free of symptoms, 27 were markedly improved, 17% stationary and 7% seems to have been aggravated by the pills. Deserted 25%.

At an early date we will report the result of oral treatment on the spring cases.

Cases treated according to the old methods by injections were classified as follows:

Asthma .....	64.1%
Hay Fever .....	26.6%
Skin Allergy .....	9.3%

The estimated result was as follows:

Clinically cured .....	3%
Very much improved .....	25%
Improved .....	57%
Stationary .....	15%

Sincere thanks are offered to the Charity Hospital Pathological and Pharmaceutical departments for their unfailing assistance and to the Lafayette Pharmaceutical Co. for their generous supply of experimental material.

Respectfully submitted,  
NARCISSE F. THIBERGE, M. D.  
Chief, Department of Allergy.

## ANNUAL REPORT, DEPARTMENT OF ANESTHESIA

July 1st, 1940

During the past year a number of advances have been made in this Department. The greatest of these has been the acquisition of new equipment of the latest type and design, including all of the leading models of gas machines. With the additional work occasioned by the moving into the new hospital and the opening of more operating rooms, the staff of graduate nurse anesthetists was increased from 13 to 16, and in spite of this increase, it will be necessary to further staff this department to adequately care for all patients.

Because of the scope of the work in this department, it has been found necessary to divide the staff into three units; one, headed by Miss Lillian Gebbs, in charge of anesthesia in the general operating rooms; a second, headed by Miss Esther Meyer, in charge of instruction in the Department of Anesthesia of the School of Nursing; and a third, headed by Miss Mary Koenig, in charge of Obstetrical anesthesia and analgesia.

Through the efforts of Sister Henrietta, Director of the School of Nursing and Nursing Service, the standards of the Department of Anesthesia of the School of Nursing have been increased and the curriculum broadened. The period of instruction is now eight (8) months, and the course compares favorably with that of any school of nursing anesthesia in this Country. This Department received 432 requests for information concerning the course in anesthesia during the past year. 26 students were installed for the course and 9 nurse anesthetists were graduated. 23 students are now taking the course.

A total of more than 16,000 anesthetics of all types were administered during the past year, and it was only through the earnest cooperation of the entire anesthesia staff that such results were possible.

Respectfully submitted,

C. B. ODOM, M. D.,

Director, Department of Anesthesia.

Aug. 15, 1940



**REPORT OF  
ANESTHESIA DEPARTMENT**

**July 1, 1939 to June 30, 1940**

**GENERAL OPERATING ROOMS**

Drop Ether.....	2,813
Cyclopropane.....	774
Cyclopropane-Ether Vapor.....	624
Ethylene.....	484
Ethylene-Ether Vapor.....	2,353
Ethylene-Drop Ether.....	2
Nitrous Oxide.....	940
Nitrous Oxide-Ether Vapor.....	1,775
Nitrous-Drop Ether.....	0
Local and General.....	29
Spinal and General.....	156
Avertin and General.....	26
Evipal and General.....	3
Avertin.....	21
Evipal.....	19
Pentothal.....	11
Local.....	981
Spinal.....	2,546
IV. and Sacral.....	9
Epidural.....	6
No Anesthetic.....	4
<b>Total Generals.....</b>	<b>9,979</b>
<b>Total without Generals.....</b>	<b>3,597</b>
<b>Total.....</b>	<b>13,576</b>

**OBSTETRICAL OPERATING ROOMS**

Nitrous Oxide-Ether Vapor.....	1,132
Nitrous Oxide.....	1,646
Ether.....	15
Pudendal.....	23
Ethylene.....	4
N <sub>2</sub> O-Drop Ether.....	2
Sacral.....	17
Local.....	31
Spinal.....	1
Spinal and General.....	2
Local and General.....	4
Evipal.....	1
<b>Total.....</b>	<b>2,878</b>

## REPORT OF RECORD LIBRARY

For Year Closing June 30, 1940

To the Board of Administrators and  
Dr. Roy W. Wright, Director  
Charity Hospital of Louisiana  
at New Orleans

Gentlemen:

On July 13th, 1939, the Record Library moved from its temporary quarters in the Pythian Building to the new hospital building.

On October 1st the Clinic Admitting Room and Clinic Record Room were designated to the supervision of the Record Librarian. This includes supervision of clerical workers in white and colored tuberculosis clinics and obstetrical and tumor clinics. Due to the inaccessibility of these divisions to the office of the Record Librarian and the obvious necessity for immediate supervision of this work, Mrs. Eddie Voss Cooksey, a worker in the Record Library, was made full-time supervisor over the workers in these offices.

On January 9th, 1940, the Discharge Desk was instituted as an accessory unit to the Record Library under the immediate supervision of Mrs. Marion Brunson. The need for such a desk has long been recognized but was not considered practical prior to the occupation of the new building. The advantages are: It provides a central point from which all patients may be officially discharged from the hospital; collects the records of all patients leaving the hospital at the time of the patient's discharge, and insures their prompt delivery to the Record Library; provides each patient with a discharge slip (filled out by the doctor) which includes diagnosis, laboratory findings, treatment and recommendations for their return to the hospital or clinic for further care; it assists patients generally in leaving the hospital, as, for example, calling cabs or relatives for transportation and, when necessary, referring them to Social Service.

In addition to routine Discharge Desk duties, this unit is responsible for the compilation of the daily hospital census which was formerly done by twenty-four nurse supervisors. This involves the daily listing and tabulating by wards of admissions, transfers, desertions, deaths and discharges.

The analysis of service rendered indicates that approximately 101,000 hospital charts were removed from the files for study and 26,400 were requested by the administrative offices, internes, clinic, social service, insurance office and general public, representing a total of 127,400 hospital charts pulled and refiled for the year. In the clinic record room 27,654 x-ray reports were filed, 4,872 electrograph reports were filed, 99,000 pathology reports were filed, 122,617 charts were pulled for salvarsan clinic, 6,048 charts were pulled for the insurance office and 346,716 charts were pulled for appointments. This represents a total of 744,522 clinic charts pulled and refiled for the year.

I should like to make the following recommendations:

(1) Institution of the centralized unit system of maintaining records. This would automatically necessitate the combination of the Hospital and Clinic Admitting Rooms and the Hospital and Clinic Record Rooms. While this change would entail an increase in personnel, I believe that this would be more than compensated for by the elimination of duplicate x-ray, labora-

tory and various other tests which are performed at considerable expense. In addition, a continuous record of the patient's illness, laboratory findings and treatment from time to time, is more complete and for that reason more desirable for the use of the physician during treatment of the patient and for future reference.

(2) A more satisfactory method of incorporating x-ray reports, dictations of operative procedures, et cetera in records.

(3) Improved and more complete working facilities.

(4) Adequate personnel.

(4) Standardization of qualifications and salaries of personnel.

The Record Library wishes to express its gratitude to the Director of the Hospital, Dr. Roy W. Wright, to the Assistant Directors, Dr. J. O. Weilbaecher and Dr. C. B. Odom, and to the Board of Administrators for their cooperation and splendid counsel at all times. We gratefully acknowledge, with appreciation, the assistance rendered to this department by the Sisters of Charity, and the Resident and Visiting Staffs.

Respectfully submitted,

ELIZABETH B. GREENWALD,

Registered Medical Records Librarian.

Remaining at beginning of year (Fiscal).....	1,914
Admissions.....	63,852
Remaining at end of year (Fiscal).....	2,411
Total hospital days.....	830,068
Discharges.....	60,000
Died.....	3,355
Average gross death rate (per cent).....	5.3
Deaths within 12, 24, 36 hours of admission.....	823
Average net death rate (per cent) after deducting above.....	4.0
Cases reported to coroner.....	846
Daily Average.....	2,267

## REPORT OF RECORD LIBRARY

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Average net death rate (per cent) after deducting above.....	4.0
Cases reported to coroner.....	846
Daily Average.....	2,267

## REPORT OF THE STATISTICAL DEPARTMENT

July 1st, 1939 to June 30th, 1940

## MONTHLY STATEMENT

MONTHS	HOSPITAL DAYS	DAILY AVERAGE OF PATIENTS	ADMISSIONS	DISCHARGES	DEATHS	BIRTHS	CORONER'S CASES
1939							
July.....	64,307	2,074	5,817	5,334	262	400	54
August.....	64,948	2,095	5,856	5,547	302	477	60
September.....	65,204	2,173	5,654	5,337	265	470	37
October.....	67,272	2,170	5,250	5,094	242	458	56
November.....	64,947	2,164	4,863	4,497	265	436	80
December.....	63,451	2,046	4,479	4,618	287	392	94
1940							
January.....	69,381	2,238	5,444	4,353	369	493	121
February.....	73,475	2,533	5,077	4,686	347	433	98
March.....	76,643	2,472	5,105	4,943	289	428	77
April.....	73,127	2,437	5,157	4,947	243	334	49
May.....	74,219	2,394	5,496	5,219	257	324	61
June.....	73,094	2,436	5,654	5,425	227	432	59
Total.....	830,068	27,232	63,852	60,000	3,355	5,077	846

## COMPARATIVE TABLEU

July 1st 1938 To June 30th, 1939	July 1st, 1939 To June 30th, 1940		
Admissions.....	58,899	Admissions.....	63,852
Discharges.....	55,785	Discharges.....	60,000
Deaths.....	3,105	Deaths.....	3,355
Births.....	4,592	Births.....	5,077
Coroner's Cases.....	639	Coroner's Cases.....	846
Hospital Days.....	707,055	Hospital Days.....	830,068
Daily Average.....	1,937	Daily Average.....	2,267

## REPORT OF THE STATISTICAL DEPARTMENT

July 1st, 1939 to June 30th, 1940

## DEATHS WITHIN 36 HOURS OF ADMISSION

PATIENTS DIED IN MONTHS 1939	12 HOURS	24 HOURS	36 HOURS	TOTAL
July.....	37	16	7	60
August.....	36	22	10	68
September.....	40	16	15	71
October.....	35	18	11	64
November.....	37	21	14	72
December.....	42	27	11	80
1940				
January.....	57	31	18	106
February.....	32	23	19	74
March.....	42	23	11	76
April.....	28	11	6	45
May.....	25	15	9	49
June.....	29	19	10	58
Total.....	440	242	141	823

## DEATHS

MONTHS 1939	WHITE					COLORED				
	MALES	BOYS	FEMALES	GIRLS	TOTAL	MALES	BOYS	FEMALES	GIRLS	TOTAL
July.....	54	15	39	3	111	64	16	55	16	151
August.....	71	7	43	8	129	73	20	64	16	173
September.....	53	13	41	9	116	49	30	45	25	149
October.....	62	13	40	6	121	53	17	41	10	121
November.....	63	14	37	7	121	55	18	53	18	144
December.....	77	8	35	6	126	73	24	49	15	161
1940										
January.....	111	12	46	5	174	79	24	52	18	173
February.....	90	16	65	13	184	67	26	66	26	185
March.....	77	10	39	10	136	61	20	55	17	153
April.....	79	6	38	4	127	48	16	41	11	116
May.....	69	6	45	3	123	51	16	58	9	134
June.....	59	16	24	5	104	57	14	37	15	123
Total.....	865	136	492	79	1,552	730	241	616	196	1,783

## REPORT OF THE STATISTICAL DEPARTMENT

July 1st, 1939 to June 30th, 1940

## ADMISSIONS

## WHITE

MONTHS	MALES	BOYS	FEMALES	GIRLS	TOTAL
1939					
July.....	1,132	419	1,410	324	3,285
August.....	1,123	417	1,434	309	3,283
September.....	1,066	376	1,344	294	3,080
October.....	1,001	311	1,267	279	2,858
November.....	960	282	1,108	226	2,576
December.....	873	284	908	219	2,284
1940					
January.....	1,030	261	1,094	219	2,604
February.....	1,151	288	1,218	239	2,896
March.....	1,027	272	1,124	203	2,626
April.....	1,005	287	1,230	235	2,757
May.....	994	305	1,230	260	2,789
June.....	1,028	329	1,297	288	2,942
Total.....	12,390	3,831	14,564	3,195	33,980

## COLORED

MONTHS	MALES	BOYS	FEMALES	GIRLS	TOTAL
1939					
July.....	739	315	1,208	270	2,532
August.....	672	355	1,248	298	2,573
September.....	705	338	1,258	273	2,574
October.....	684	349	1,120	239	2,392
November.....	594	303	1,108	282	2,287
December.....	653	293	1,000	249	2,195
1940					
January.....	695	336	1,169	273	2,473
February.....	726	317	1,218	287	2,548
March.....	657	357	1,183	282	2,479
April.....	739	302	1,107	252	2,400
May.....	741	351	1,346	269	2,707
June.....	730	364	1,317	301	2,712
Total.....	8,335	3,980	14,282	3,275	29,872

White Male Adults.....	12,390	Colored Male Adults.....	8,335
White Boys.....	3,831	Colored Boys.....	3,980
White Female Adults.....	14,564	Colored Female Adults.....	14,282
White Girls.....	3,195	Colored Girls.....	3,275
Total.....	33,980	Total.....	29,872
Grand Total.....	63,852		



## REPORT OF THE STATISTICAL DEPT.

July 1st, 1939 to June 30th, 1940

## Age Groups of Patients Expired

WHITE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
Under 1 year.....	15	9	24	19	15	12	14	25	14	8	4	18	177
1 to 5 years.....	0	4	2	2	2	1	2	3	1	2	1	3	23
5 to 10 years.....	1	4	0	1	3	1	1	1	4	1	2	0	19
10 to 15 years.....	1	1	1	1	2	3	3	3	2	0	2	0	19
15 to 20 years.....	6	5	3	4	1	1	2	2	3	3	1	3	34
20 to 25 years.....	3	1	2	2	1	1	2	6	3	1	2	2	26
25 to 30 years.....	2	9	9	7	3	3	8	5	4	5	4	4	63
30 to 40 years.....	12	18	11	14	17	12	14	18	8	15	13	8	160
40 to 50 years.....	8	17	12	10	12	13	19	18	14	15	14	10	162
50 to 60 years.....	20	21	19	19	18	21	38	25	31	29	23	13	277
60 to 80 years.....	34	31	28	36	39	48	60	59	43	40	49	32	499
80 to 90 years.....	4	4	5	4	6	6	6	11	5	5	6	8	70
90 to 100 years.....	0	1	0	0	1	1	0	1	0	1	0	0	5
100 years and upward.....	0	0	0	0	0	0	0	1	0	0	0	0	1
Unknown.....	5	4	0	2	1	3	5	6	4	2	2	3	37
TOTAL.....	111	129	116	121	121	126	174	184	136	127	123	104	1572

## Age Groups of Patients Expired

COLORED	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
Under 1 year.....	27	25	44	21	35	38	33	51	28	23	22	26	373
1 to 5 years.....	3	8	7	1	1	1	3	3	3	3	0	2	35
5 to 10 years.....	3	2	0	2	0	2	7	2	0	0	3	1	22
10 to 15 years.....	5	3	3	4	3	2	3	2	6	1	1	1	34
15 to 20 years.....	0	8	4	4	5	1	4	7	3	3	2	2	43
20 to 25 years.....	6	9	7	4	3	7	7	8	10	3	5	5	74
25 to 30 years.....	7	12	4	9	8	10	11	10	7	6	4	2	90
30 to 40 years.....	31	25	14	20	14	24	16	16	18	16	22	19	235
40 to 50 years.....	15	22	16	15	17	21	26	15	15	20	26	21	229
50 to 60 years.....	19	25	19	12	18	23	18	25	18	20	23	20	240
60 to 80 years.....	22	19	19	23	31	19	26	33	33	17	20	18	280
80 to 90 years.....	3	1	0	2	0	2	1	3	1	1	2	3	19
90 to 100 years.....	1	0	0	0	0	0	2	0	1	0	1	1	6
100 years and upward.....	0	0	0	0	0	0	0	0	0	0	0	0	0
Unknown.....	9	14	12	4	9	11	16	10	10	3	3	2	103
TOTAL.....	151	173	149	121	144	161	173	185	153	116	134	123	1783

## REPORT OF THE STATISTICAL DEPARTMENT

## ADMISSIONS BY PARISHES

July 1st, 1939 to June 30th, 1940

Acadia.....	183	Orleans.....	33,778
Allen.....	173	Other States.....	284
Ascension.....	987	Ouachita.....	158
Assumption.....	583	Plaquemine.....	474
Avoyelles.....	720	Pointe Coupee.....	509
Bienville.....	19	Rapides.....	232
Bossier.....	2	Red River.....	6
Beauregard.....	41	Richland.....	106
Caddo.....	40	Sabine.....	38
Calcasieu.....	363	St. Bernard.....	740
Caldwell.....	60	St. Charles.....	734
Cameron.....	10	St. James.....	653
Catahoula.....	53	St. John the Baptist.....	909
Claiborne.....	10	St. Helena.....	139
Concordia.....	93	St. Landry.....	565
DeSoto.....	8	St. Mary.....	794
East Baton Rouge.....	2,119	St. Martin.....	90
East Feliciana.....	392	St. Tammany.....	1,685
East Carroll.....	152	Tangipahoa.....	2,913
Evangeline.....	188	Terrebonne.....	2,099
Franklin.....	97	Tensas.....	76
Foreign.....	7	Union.....	33
Grant.....	54	Unknown.....	67
Iberia.....	373	Vermilion.....	183
Iberville.....	861	Vernon.....	46
Jackson.....	26	Washington.....	1,902
Jefferson.....	3,552	Webster.....	15
Jefferson Davis.....	147	West Baton Rouge.....	273
Lafayette.....	99	West Carroll.....	44
Lafourche.....	1,483	West Feliciana.....	147
LaSalle.....	34	Winn.....	79
Livingston.....	683		
Lincoln.....	18		
Madison.....	143		
Morehouse.....	128		
No Home.....	111		
Natchitoches.....	69	Total.....	63,852

## Residence at time of Admission

City.....	33,778
Louisiana.....	29,605
Foreign.....	7
No Home.....	111
Other States.....	284
Unknown.....	67
Total.....	63,852

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

### DELGADO

Ward Number	266	267	268	268a	369	370	371	371a	472	473	474	474a	Total
Admitted	361	191	177	228	661	314	216	307	330	122	95	114	3,116
Received by Transfer	93	38	37	68	81	31	38	35	34	5	9	13	482
Discharged	349	170	165	253	536	291	213	223	280	83	82	112	2,757
Transferred	50	26	26	18	163	49	39	46	65	35	31	26	574
Deserted	59	31	29	24	49	46	32	35	32	13	5	8	363
Died	18	11	10	15	25	16	18	9	26	6	3	1	158

### MILLIKEN

Ward Number	156a	156	157	158	Obs. R.	R. R.	261	262	260	259	365	363	Nursery	Total
Admitted	79	234	205	241	1,348	0	258	331	433	351	440	1,436	1,320	6,676
Received by Transfer	31	90	64	73	0	40	20	32	13	27	53	19	1	463
Discharged	94	265	232	259	13	1	247	85	358	348	418	1,355	885	4,560
Transferred	7	24	19	46	1,098	45	10	11	14	12	54	21	9	1,370
Deserted	6	27	18	22	19	0	23	43	44	17	23	85	62	389
Died	5	8	6	13	18	1	1	11	41	4	4	3	34	149

### WHITE FEMALE MEDICAL

Ward Number	101	102	201	202	301	302	Total
Admitted	503	491	571	336	568	638	3,107
Received by Transfer	63	56	75	92	64	102	452
Discharged	420	361	481	352	521	624	2,759
Transferred	86	127	126	33	84	67	523
Deserted	44	31	41	26	19	64	225
Died	27	44	28	10	7	3	119

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

## CONVALESCENT HOME

Ward Number	L. M. 2	L. M. 2a	L. M. 2b	L. M. 3	L. M. 3a	L. M. 3b	L. M. 3c	L. M. 4
Admitted	252	79	110	313	378	284	275	342
Received by Transfer	13	22	24	51	37	70	31	74
Discharged	210	54	110	313	357	314	248	360
Transferred	25	6	36	89	54	39	36	47
Deserted	10	0	2	27	21	17	25	38
Died	31	1	1	8	4	8	2	8

Ward Number	L. M. 4a	L. M. 4b	L. M. 4c	L. M. 5	L. M. 5a	L. M. 5b	L. M. 5c	Total
Admitted	167	181	145	220	290	140	227	3,407
Received by Transfer	54	36	53	18	24	11	16	534
Discharged	176	178	174	199	254	130	139	3,216
Transferred	29	27	20	22	42	12	39	523
Deserted	23	14	12	11	21	6	22	249
Died	8	11	10	15	4	9	3	123

## DIBERT

1st and 2nd Floor

Ward Number	176	177	178	179	180	181	284	285	286	287	288	289	290	Total
Admitted	364	9	3	4	8	170	0	4	4	11	9	7	4	597
Received by Transfer	46	30	13	30	24	16	15	25	19	19	24	38	34	333
Discharged	118	23	8	11	19	42	2	13	8	15	13	13	13	298
Transferred	233	29	0	13	4	145	12	7	2	3	17	17	13	495
Deserted	14	4	3	5	4	10	0	3	9	9	2	7	3	73
Died	19	10	5	3	7	3	5	4	2	10	4	6	7	85

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 1st, 1940

### DIBERT 3rd and 4th Floor

Ward Number..	392	394	395	396	397	398	399	403	404	405	406	407	408	409	Total
Admitted.....	0	3	7	10	5	6	10	2	3	4	3	7	2	0	62
Received by															
Transfer.....	2	36	26	27	13	26	16	9	12	19	14	33	10	10	253
Discharged.....	0	19	12	10	33	15	18	4	7	12	10	20	7	5	172
Transferred.....	1	16	19	17	1	5	3	2	1	2	2	2	1	13	85
Deserted.....	0	4	5	6	4	4	4	2	2	3	1	4	2	1	42
Died.....	0	7	6	6	1	5	2	3	5	8	4	10	1	0	58

*Ward Number.....	403	404	405	Total
Admitted.....				
Received by Transfer.....	146	271	264	681
Discharged.....	37	35	24	96
Transferred.....	150	278	270	698
Deserted.....	12	11	9	32
Died.....	0	2	2	4
	0	2	2	2

\*-Were T. and A. Wards.

### CONTAGIOUS

Ward Number.....	148	248	348	448	548	Total
Admitted.....	317	564	433	304	260	1,878
Received by Transfer.....	51	158	86	85	51	431
Discharged.....	311	585	410	178	235	1,719
Transferred.....	14	60	26	132	22	255
Deserted.....	17	16	53	29	28	143
Died.....	14	47	36	29	21	147

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

## COLORED

Ward Number	234	234a	234b	234c	234d	234e	236	237	238	239	434	436	437	438	439	Total
Admitted	201	235	242	238	226	235	339	427	511	307	301	392	416	324	240	4,634
Received by Transfer	39	57	46	61	52	39	62	62	65	27	94	109	103	66	38	920
Discharged	115	233	235	230	220	213	342	425	493	265	299	384	390	317	165	4,326
Transferred	70	33	36	47	38	63	68	86	66	62	55	52	62	38	79	855
Deserted	21	21	17	30	20	19	19	35	25	19	20	32	29	29	32	368
Died	11	6	15	11	13	9	6	6	17	10	22	31	25	20	19	221

Ward Number															334	Nursery	Total
Admitted															2,695	1,921	4,616
Received by Transfer															16	1	17
Discharged															2,615	1,783	4,398
Transferred															100	102	202
Deserted															65	33	98
Died															16	117	133

## COLORED T. B.

Ward Number	234	235	236	237	238	239	240	241	242	243	244	434	436	437	438	439	Total
Admitted	18	8	8	8	9	9	5	4	3	1	2	48	29	1	1	1	155
Received by Transfer	19	17	17	7	18	4	8	9	12	3	5	9	8	0	0	1	137
Discharged	10	9	7	7	12	2	6	10	7	5	1	27	31	1	1	0	136
Transferred	2	0	0	0	1	0	1	1	1	0	2	33	17	0	0	0	58
Deserted	0	1	1	3	1	3	0	0	0	0	0	9	5	0	0	2	25
Died	10	4	2	0	3	4	1	0	0	1	1	11	4	0	0	2	43

# WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

## OLD COLORED T. B. (Closed January 1940)

Ward Number.....	L. S. U.a	T. U.a	L. S. U.b	T. U.b	Total
Admitted.....	6	16	7	9	38
Received by Transfer.....	29	23	19	17	88
Discharged.....	22	19	16	12	69
Transferred.....	17	19	13	14	63
Deserted.....	4	6	3	3	16
Died.....	9	12	8	9	38

## PYTHIAN TEMPLE (Closed August 1939)

Ward Number...	320	321b	321c	420	422	520	522	620	621	622	720	721	722	723	Total
Admitted.....	205	32	47	90	88	133	66	118	116	73	100	89	105	88	1,350
Received by Transfer.....	7	5	2	9	3	12	4	12	7	4	13	2	12	6	98
Discharged.....	169	24	44	142	76	98	63	121	100	56	76	44	80	76	1,169
Transferred.....	42	9	12	45	4	54	7	7	8	7	31	39	42	24	331
Deserted.....	8	3	2	9	28	3	17	27	36	7	14	5	10	9	178
Died.....	23	4	1	33	2	22	0	8	4	11	5	17	10	13	153

## NEW BUILDING 3RD FLOOR WHITE

Ward Number.....	300a	300b	302	303	304	305	306	307	308	309	310	311	312	Total
Admitted.....	138	157	182	63	99	139	161	113	125	126	103	124	3	1,533
Received by Transfer.....	19	25	31	5	20	35	30	23	20	26	28	23	0	285
Discharged.....	107	129	172	49	92	122	133	87	83	110	96	79	2	1,261
Transferred.....	20	27	19	12	12	21	30	31	30	38	13	30	1	284
Deserted.....	6	2	10	3	4	4	6	5	7	7	9	11	0	74
Died.....	15	19	5	0	9	13	15	10	14	4	8	12	0	124

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

## NEW BUILDING 4TH FLOOR WHITE

Ward Number	400a	400b	402	403	404	405	406	407	408	409	410	411	412	413	Total
Admitted	247	295	313	182	263	287	321	219	234	274	225	209	3	9	3,081
Received by Transfer	27	39	25	33	55	49	64	40	40	47	46	29	4	17	515
Discharged	180	244	285	153	202	237	209	188	182	199	217	197	2	2	2,497
Transferred	36	30	22	25	61	48	63	48	35	48	43	25	5	4	483
Deserted	16	23	25	12	21	15	27	16	16	23	16	16	0	0	226
Died	38	36	9	5	23	28	33	38	41	27	31	27	0	0	336

## NEW BUILDING 5TH FLOOR WHITE

Ward Number	502	503	504	505	506	507	508	509	510	511	513	Total
Admitted	209	166	142	144	189	101	118	75	127	117	46	1,434
Received by Transfer	23	23	27	24	36	24	23	25	25	14	3	244
Discharged	186	158	134	126	157	96	115	77	123	104	37	1,313
Transferred	23	11	17	21	28	13	11	7	12	19	3	165
Deserted	4	7	3	7	10	2	3	3	4	8	1	52
Died	3	2	2	14	9	2	4	1	4	0	0	41

## NEW BUILDING 6TH FLOOR WHITE

Ward Number	W.N.I.	604	605	606	607	608	609	610	611	612	613	Total
Admitted	138	40	254	42	102	37	115	38	99	22	63	950
Received by Transfer	6	13	21	13	17	12	36	14	28	3	12	175
Discharged	128	36	317	46	202	35	129	46	90	19	42	1,090
Transferred	7	4	10	3	9	6	20	3	17	1	11	93
Deserted	2	0	5	3	3	3	2	2	6	0	4	30
Died	1	2	2	0	1	1	3	1	1	2	1	15



### WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

#### NEW BUILDING 7TH FLOOR WHITE

Ward Number	702	703	704	705	706	707	708	709	710	711	713	Total
Admitted	271	200	138	204	171	181	108	174	150	168	59	1,824
Received by Transfer	22	30	35	36	33	44	28	33	22	33	4	320
Discharged	224	182	132	194	149	146	93	152	133	155	51	1,611
Transferred	18	11	18	18	18	19	7	22	12	24	5	172
Deserted	17	12	9	11	19	21	13	13	9	14	3	141
Died	11	12	9	4	5	10	8	6	5	3	0	73

#### NEW BUILDING 8TH FLOOR WHITE

Ward Number	W.R.R.	802	803	804	805	806	807	808	809	810	811	812	813	Total
Admitted	92	81	68	110	81	114	102	112	122	88	92	31	67	1,160
Received by Transfer	184	13	9	22	24	18	32	16	15	27	22	5	16	403
Discharged	98	75	59	98	66	90	101	100	110	90	78	24	52	1,041
Transferred	148	3	3	17	15	22	13	13	14	24	12	12	13	309
Deserted	28	3	4	10	4	10	6	3	5	4	8	4	5	101
Died	17	2	0	12	9	3	8	0	4	2	6	0	7	70

#### NEW BUILDING 9TH FLOOR WHITE

Ward Number	900	a, b, c, & d	902	903	904	905	906	907	908	909	910	911	Total
Admitted	477		111	103	255	140	86	156	230	70	193	159	1,980
Received by Transfer	83		16	14	27	24	22	21	12	14	19	17	269
Discharged	433		86	87	193	84	121	121	216	62	184	123	1,710
Transferred	48		5	17	18	14	16	18	11	4	6	20	177
Deserted	17		6	7	11	9	8	10	8	5	5	12	98
Died	2		3	0	1	10	2	16	0	8	1	10	53

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

## NEW BUILDING 10TH FLOOR WHITE

Ward Number	Mothers	Nursery	Total
Admitted	1,124	754	1,878
Received by Transfer	16	2	18
Discharged	1,079	679	1,758
Transferred	10	40	50
Deserted	47	27	74
Died	6	17	23

## NEW BUILDING 11TH FLOOR WHITE

Ward Number	1102	1103	1104	1105	1106	1107	1108	1109	1110	1111	1112	1113	Total
Admitted	153	117	157	128	179	130	154	120	168	112	4	85	1,507
Received by Transfer	43	29	23	45	21	17	25	29	23	20	0	15	290
Discharged	136	99	142	135	169	116	142	123	152	105	0	77	1,396
Transferred	46	23	18	21	17	12	19	10	18	29	1	12	226
Deserted	5	5	4	13	3	10	4	7	13	4	0	5	73
Died	3	2	1	2	0	1	2	0	0	0	0	2	13

## NEW BUILDING 3RD FLOOR COLORED

Ward Number	300a	300b	302	303	304	305	306	307	308	309	310	311	312	313	Total
Admitted	152	161	155	75	177	210	207	240	194	197	184	207	5	7	2,171
Received by Transfer	17	25	63	11	32	45	38	38	49	32	35	61	1	7	454
Discharged	93	113	157	82	159	152	138	174	155	153	142	148	4	12	1,682
Transferred	38	27	25	14	37	33	64	59	34	50	143	44	2	2	572
Deserted	6	9	13	2	3	11	8	13	10	12	5	5	0	0	97
Died	24	28	8	4	17	24	23	32	15	17	20	22	0	0	234

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

### NEW BUILDING 4TH FLOOR COLORED

Ward Number	400a	400b	402	403	404	405	406	407	408	409	410	411	412	413	Total
Admitted	112	199	242	68	196	249	221	250	215	253	210	120	3	10	2,348
Received by Transfer	14	33	53	11	42	29	40	26	29	17	29	20	4	6	353
Discharged	89	146	221	60	166	195	161	201	168	195	153	171	4	10	1,940
Transferred	18	35	21	7	31	28	33	36	40	41	35	31	3	5	364
Deserted	3	7	16	0	6	5	12	7	4	6	2	4	1	0	73
Died	9	31	18	2	24	26	43	22	26	24	27	26	0	0	278

### NEW BUILDING 5TH FLOOR COLORED

Ward Number	502	503	504	505	506	507	508	509	510	511	513	Total
Admitted	131	128	105	122	129	119	112	142	112	103	33	1,236
Received by Transfer	13	19	25	41	26	36	24	12	17	33	2	248
Discharged	100	114	94	135	125	122	102	131	76	103	25	1,127
Transferred	14	8	18	8	24	13	15	29	19	10	2	160
Deserted	4	9	3	0	7	3	4	9	6	3	2	50
Died	5	3	3	10	6	6	4	1	5	3	0	46

### NEW BUILDING 6TH FLOOR COLORED

Ward Number	602	604	605	606	607	608	609	610	611	612	613	Total
Admitted	66	105	370	95	121	93	346	126	112	5	54	1,493
Received by Transfer	9	26	26	22	39	21	32	25	39	5	22	266
Discharged	47	100	332	80	104	80	304	110	93	7	37	1,294
Transferred	10	29	43	26	42	27	51	33	40	3	26	330
Deserted	1	0	7	0	5	1	12	5	4	0	5	40
Died	2	2	4	1	6	2	0	2	0	0	1	20

## WARD CENSUS 12:00 MIDNIGHT

July 1st, 1939 to June 30th, 1940

## NEW BUILDING 7TH FLOOR COLORED

Ward Number	702	703	704	705	706	707	708	709	710	711	713	Total
Admitted	135	126	106	117	139	86	102	82	96	110	28	1,127
Received by Transfer	16	15	16	14	10	15	10	20	11	17	3	147
Discharged	104	116	85	111	117	78	86	82	82	98	27	986
Transferred	11	14	18	14	15	9	11	12	11	17	2	134
Deserted	6	5	3	9	4	4	5	5	3	5	3	52
Died	8	4	8	3	6	9	11	4	8	6	1	68

## NEW BUILDING 8TH FLOOR COLORED

Ward Number	Col. R. R.	802	803	804	805	806	807	808	809	810	811	812	813	Total
Admitted	82	394	258	136	183	156	161	141	174	206	164	37	128	2,220
Received by Transfer	131	38	32	22	32	26	31	33	26	19	19	5	26	440
Discharged	70	389	230	129	174	150	148	128	135	135	139	28	120	1,975
Transferred	110	22	31	6	19	13	12	34	28	24	22	7	19	347
Deserted	9	1	5	2	4	4	10	5	14	8	6	3	7	78
Died	18	3	1	4	10	3	11	2	11	5	8	1	4	81

## NEW BUILDING 9TH FLOOR COLORED

Ward Number	902	905	907	909	911	913	Total
Admitted	1	304	461	170	556	59	1,551
Received by Transfer	0	35	50	44	38	2	169
Discharged	0	278	347	200	398	30	1,253
Transferred	1	15	40	19	44	0	119
Deserted	0	12	11	6	12	0	41
Died	0	14	70	8	52	0	144

**WARD CENSUS 12:00 MIDNIGHT**

July 1st, 1939 to June 30th, 1940

**NEW BUILDING 10TH FLOOR COLORED**

Ward Number	Mothers	Nursery	Total
Admitted	1,498	1,123	2,621
Received by Transfer	83	62	145
Discharged	1,458	1,042	2,500
Transferred	22	13	35
Deserted	13	4	17
Died	3	45	48

**NEW BUILDING 11TH FLOOR COLORED**

Ward Number	1102	1103	1104	1105	1106	1107	1108	1109	1110	1111	1113	Total
Admitted	131	112	142	111	147	80	120	76	119	101	7	1,146
Received by Transfer	25	11	13	28	17	31	18	19	15	33	1	211
Discharged	125	81	117	107	133	82	106	79	115	101	2	1,068
Transferred	23	24	11	15	13	8	15	9	6	14	4	142
Deserted	1	0	4	5	7	7	8	1	1	3	1	38
Died	2	6	1	1	1	2	2	2	2	4	0	23

**ADMITTING ROOM**

	White	Colored	Total
Admitted	23	20	43
Died	23	20	43

ANNUAL REPORT OF THE RECORD LIBRARY  
June 30, 1939 to July 1, 1940

	TOTAL	L. S. U.	TULANE	INDEPEND- ENT	WHITE	COLORED	MALE	FEMALE	OPERATIONS	DESERTIONS	NOT DELIVERED	TOTAL DEATHS	TULANE	L. S. U.	INDEPEND- ENT
Observation Room.....	115	45	39	31	68	47	72	43	0	5		100	35	41	24
Medicine.....	11200	4817	4534	1849	6422	4778	6205	4995	138	688		9	2	3	4
Neurology.....	1531	687	497	347	1015	516	930	601	5	118		595	264	197	134
Dermatology.....	592	351	241	0	408	184	349	243	8	30		65	26	24	15
Contagious.....	1957	666	687	604	941	1016	1084	873	64	123		19	8	7	4
Pediatrics.....	2398	1244	1154	0	1218	1180	1304	1094	54	111		16	6	10	0
Urology.....	3203	1246	1294	663	1653	1550	2227	976	948	191		8	4	4	0
Surgery.....	13416	5171	4994	3251	8045	5371	7630	5786	6153	763		144	51	55	38
Dental Surgery.....	400	0	0	400	232	168	210	190	130	18		59	17	24	18
Fracture.....	1380	557	472	351	934	446	888	492	298	53		206	102	104	0
Orthopedics.....	2225	923	969	333	1271	954	1369	856	331	104		107	52	55	0
Ophthalmology.....	2148	1140	799	209	1081	1067	1285	863	1024	52		156	55	70	31
Otolaryngology.....	3881	1889	1230	762	2778	1103	1870	2011	2149	105		66	26	30	10
Gynecology.....	6234	2588	2466	1180	3221	3013	0	6234	2027	282		605	239	220	146
Obstetrics.....	6833	3262	3136	435	2476	4357	0	6833	962	179	1571	169	81	58	30
New Borns.....	4726	2257	2232	237	1660	3066	2425	2301	34	84		1	0	0	1
Prematures.....	307	135	150	22	84	223	155	152	1	1		0	0	0	0
TOTAL.....	62546	26978	24894	10674	33507	29039	28003	34543	14326	2907	1571	88	31	31	26
												2	0	1	1
												7	2	3	2
												7	1	6	0
												2	0	2	0
												31	9	12	10
												10	3	3	4
												109	39	36	34
												49	17	15	17
												30	10	14	6
												19	8	7	4
												95	48	45	2
												58	29	27	2
												169	74	78	17
												102	41	54	7
												3354	1366	1369	619
												1281	554	490	237

# ANNUAL REPORT OF THE RECORD LIBRARY

June 30, 1939 to July 1, 1940

## Autopsies in red.

	TOTAL	L. S. U.	TULANE	INDEPEND- ENT	WHITE	COLORED	MALE	FEMALE	OPERATIONS	DESERTIONS	NOT DELIVERED	TOTAL DEATHS	TULANE	L. S. U.	INDEPEND- ENT
DEATHS:															
Due to Cardiovascular dis- ease.....	156	64	57	35	74	82	86	70							
Due to Malignancy.....	319	133	123	63	160	159	178	141							
Due to Tuberculosis.....	309	135	161	13	167	142	200	109							
Due to Renal disease.....	187	81	67	39	79	108	100	87							
Due to Poison, accidents, and violence.....	236	77	95	64	133	103	145	91							
White.....	1572	596	654	322											
.....	520	187	233	100											
Colored.....	1782	773	712	297											
.....	761	303	321	137											
Male.....	1971	802	832	337											
.....	742	284	338	120											
Female.....	1383	567	534	282											
.....	539	206	216	117											
Still Borns.....	273														

Respectfully,  
 ELIZABETH B. GREENWALD,  
 Record Librarian

**REPORT OF STATISTICAL DEPARTMENT—Continued**  
**TABLE OF ADMISSIONS, DISCHARGES AND DEATHS**

(See Report of Previous Years in Annual Report July 1, 1936 to  
 June 30, 1937—Page 93)

YEAR TO JUNE 30TH	REMAINING BEGINNING OF YEAR	ADMITTED	DISCHARGED	DIED	REMAINING AT CLOSE OF YEAR
1935-36----	2,837	70,504	66,563	3,590	3,188
1936-37----	3,188	58,030	55,679	3,230	Error 518 2,309
1937-38----	1,791	52,863	49,473	3,063	1,925
1938-39----	1,925	58,899	55,785	3,105	1,914
1939-40----	1,914	63,852	60,000	3,355	2,411





Student Nurses' Dining-Room and Cafeteria—Nurses' Home.

## REPORT OF DEPARTMENT OF SURGERY AND ACCIDENT DEPARTMENT

July 1, 1939 to June 30, 1940

### STAFF

SISTER PAULA, R. N.,  
Director

SISTER CARLOS, R. N.,  
Supervisor

SISTER PATRICE, R. N.,  
Supervisor

JEANETTE FONTAN, R. N.,  
Assistant Supervisor

OLIVE CLAUSSEN, R. N.,  
Assistant Supervisor

MAUD BOWEN, R. N.,  
Head Nurse, Throat Room

VIRGINIA REHAGE, R. N.,  
Assistant Supervisor Accident Room

GRACE GRAFTON, R. N.,  
Head Nurse, Cryoscopic Room

DOLORES TOOREAN, R. N.,  
Head Nurse, Bronchoscopic Room

LORENA SENTILLES, R. N.  
Head Nurse, Eye Room

BERNADETTE ERNST, R. N.,  
Head Nurse, Plaster Room

AGNES TITARD, R. N.  
Head Nurse, Operating Room

HILDA ISENBERG, R. N.,  
Head Nurse, Operating Room

LAURA GREEN, R. N.,  
Head Nurse, Operating Room

IVA MAE LAMBERT, R. N.,  
Head Nurse, Operating Room

ALICE MALOY, R. N.,  
Head Nurse, Operating Room

ROSA MACIAS, R. N.,  
Head Nurse, Operating Room

### MEDICAL SECRETARIES

AMANDA CAIRE  
ADRIENNE MOODY

ALICE SWIGART  
ETHEL DUFFY

The Department of Anesthesia is reporting on all anesthetics administered.

We wish to present the annual report of the Operating Rooms for the fiscal year beginning July 1, 1939 and ending June 30, 1940.

It is with deep sense of gratification and satisfaction that we view our transition from the congested Delgado Building into the spacious accommodations of the operating rooms on the twelfth floor of the new hospital.

From the standpoint of location, modern conveniences and general set-up, we feel that our department is an ideal one; this, however, is inadequate compensation for the perplexing problem of the understaffing of our nursing personnel which is noticeably crippling our efficiency. This fact coupled with that of insufficient equipment, makes it impossible to render the type of service that our Doctors expect of us.

Despite our disabilities, much has been accomplished, however, and we wish to express sincere gratitude to the Director of the Hospital and his two assistants who have offered their kind assistance in solving our many problems; to the Board of Administrators and to our Visiting, Resident and Intern Staffs for their generous service and excellent cooperation; and, to the Charity Hospital Guild and Blue Bird Society for their untiring and valuable services.

Respectfully submitted,

SISTER PAULA, R. N.,

Director

## OPERATIONS

MONTH	OPERATING ROOM	ACCIDENT ROOM	CYSTOSCOPIC ROOM
July.....	1,636	5,320	289
August.....	1,373	5,139	359
September.....	1,488	4,609	303
October.....	1,475	4,446	223
November.....	1,429	3,640	175
December.....	1,238	3,997	169
January.....	1,271	3,785	211
February.....	1,048	3,670	223
March.....	1,690	4,027	273
April.....	1,766	3,890	277
May.....	1,842	4,242	312
June.....	1,817	4,730	296
TOTAL.....	18,073	51,495	3,110

MONTH	EYE ROOM	EAR, NOSE, THROAT ROOM	PLASTER ROOM
July.....	118	199	348
August.....	96	251	412
September.....	117	260	397
October.....	102	154	369
November.....	78	153	345
December.....	96	159	350
January.....	121	145	325
February.....	103	147	373
March.....	128	204	260
April.....	143	208	236
May.....	140	345	217
June.....	150	381	231
TOTAL.....	1,392	2,606	3,863

**ANNUAL REPORT**  
of  
**Various Cases**  
in  
**ACCIDENT BOOK**  
from  
**July 1939-June 1940**

Rat Bites.....	48
Train Accidents.....	32
Motor Car Accidents.....	2,790
Street Car and Bus Accidents.....	117
Guns and Pistols.....	323
Fights.....	1,242
Falls.....	7,663
Cuts.....	6,712
Dog Bites.....	2,053
Minor Injuries or Contusions.....	10,117
Obstetrics and Abortions.....	1,847
Boils, Abscesses and Carbuncles.....	2,047
G. U. Cases—Traumatic.....	125
G. U. Cases—Not Traumatic.....	440
Snake Bites.....	12
Bicycle Accidents.....	186
Burns.....	1,031
Dentistry—Alveolar Abscesses and Infections.....	1,016
Infections.....	3,921
Medical.....	3,926
Accidents Swimming-Diving-Drowned Cases.....	50
Blows—Causes not given.....	796
Surgical—Hernias-Appendectomy, etc.....	711
Infections.....	25
Eye—Not Traumatic.....	179
Ear—Not Traumatic.....	613
Insect Bites.....	294
Causes of Injury Not Stated.....	2,447
Infectious Ulcers.....	9
Transfers.....	187
Heat Exhaustions.....	4
Fractures Not Due to Falls.....	372
Accidents on Street Cars, etc.....	0
<b>TOTAL.....</b>	<b>51,335</b>

## REPORT OF THE MEDICAL SOCIAL SERVICE DEPARTMENT

To the Board of Administrators and Dr. Roy Wright, Director  
The State of Louisiana Charity Hospital  
New Orleans.

Gentlemen:

Herewith is presented the Annual Report of the Medical Social Service Department from June 30, 1939, to July 1, 1940.

### Introduction

An annual report not only reviews the work of the department for the year, but evaluates it and points out certain objectives which in the future it hopes to carry out. However, in the field of social work it is often difficult to interpret to the public exactly what the functions of a social worker are because the services offered to the people who need them are often so intangible that it makes interpretation difficult. The social worker's knowledge and skill is effective only so far as the patients understand how to use it, and therefore, the social worker must find ways of interpreting those skills so that the patient will understand and want them. It is this comprehension of the human and psychological nature of service, the conviction that its value and effectiveness depend upon the way it is offered and the way it is taken, that places upon the individual staff worker the responsibility for a high professional competence. This means also that all staff workers must work together within the department and with physicians and other social agencies to demonstrate how the service they can offer can benefit individual clients. Therefore, this annual report represents the composite picture of the work of each individual social worker as it relates to the service they perform for the patient, and the effectiveness of the department and the hospital to the community.

On July 24, the Social Service Department moved into the new hospital. The clinics moved in in August, followed one by one by other departments so that by January all the departments and wards were under one roof. However, because of an inadequate budget the whole hospital is not operating to its full capacity, and the clinics are still running three days a week for colored and three for white. This means that it is still impossible to predict exactly the amount of personnel necessary to run the department effectively, or to know what demands will be made upon the social workers. As it is, there has been quite a drastic turnover in the Social Service Department this year and four social workers and two stenographers who left could not be replaced so that this department, as well as many other departments in the hospital, has been handicapped in its work. Nevertheless, it is a source of great satisfaction that the new hospital so long anticipated is completed and that once more all departments are on the hospital grounds.

### Brief statement of the general situation

In order to understand the responsibility of the Social Service Department it should be borne in mind that Charity Hospital, which is a state institution free to all sick and indigent residents of Louisiana, is used by the Tulane and Louisiana State University Medical Schools for teaching purposes. There is also an independent unit of doctors. The bed capacity is 3,330 (half for colored and half for white) and the clinic attendance averages 2,000 daily.

### Functions of the Social Service Department at Charity Hospital

The basis of medical social service is the medical need of the patient—a need which may be aggravated by social conditions and which may require social as well as medical treatment. The medical social worker seeks to obtain and apply such understanding of the patient, as will enable the institution, the physician and other social agencies concerned to comprehend and treat his illness more effectively and, in turn, to make the patient understand those things which he needs to know in order if possible to be restored to health. The social worker serves in a liaison relationship between the doctor and the patient. She also serves in a liaison capacity between the hospital, the community, and the social agencies throughout the city and the state. It is essential for the department to keep informed and to take an active part in the social planning and legislation, as practically no social agency policy in the state can fail to effect Charity Hospital in some way because of its statewide program. Therefore, attendance at meetings of the Council of Social Agencies and other social agencies is important from the standpoint of policy development and of promoting wider health interests and understanding.

The department accepts cases on all patients who are actively under treatment on the wards or attending clinics, and patients may be referred by members of the hospital staff, the patient himself, or outside agencies or interested individuals. The social workers are assigned to the various wards and clinics so that all divisions of the hospital are covered. Written records are kept on all cases in the department, although in the majority of cooperative cases with other social agencies no running history is kept as the letters contain the necessary information. The case records are similar to progress notes and medical histories found in hospital charts and are necessary because of the complicated nature of the cases which necessitate a written history of the progress in social planning and medical care. Before any diagnosis is given out it is necessary to have the written consent of the patient, except when the request is made by another medical agency or doctor.

The social workers are on call and when practicable make ward rounds and hold clinic consultations with the medical staff. Because Charity Hospitals assumes the major responsibility to the medically indigent of the state of Louisiana a large number of the patients are either employed on the Works Projects Administration or receiving relief from the Department of Public Welfare. An indication of the size of the problem is shown by the fact that in New Orleans alone one fourth of the total population of the city are on relief while over one third live in families having incomes of less than \$1,000 a year.

Before any plan can be made for a patient, it is necessary to know the diagnosis, the nature of his recommended treatment, and the probable length of his convalescence. When patients are referred by the social agencies the social worker attempts to give the doctor, through information given her by the agency, a picture of the patient as an individual; she then secures from the doctor recommendations for treatment, diet, medication and activity limitation, which she in turn explains to the social agency referring the patient. She also interprets to the patient and his family what the doctor says about his condition and the treatment that is necessary.

While the department has no relief fund it is able to plan for special care and medication through arrangements with relief agencies or interested individuals. It is able to arrange for temporary free placement of out-of-town white patients while they are completing clinic treatment or undergoing special tests. There are no free shelter homes for colored patients.

While the department does not limit its services to any one field (medical, pediatrics, tuberculosis, orthopedics, etc.) it was planned to have a few specialized services where the case load was more or less protected, but because of the number of workers in comparison to the size of the hospital it has been impossible to keep the case loads, even on a few of the services, down to a desirable level. No worker with a case load of from 100 to 200 cases can possibly do very intensive case work with detailed recording. Therefore emphasis has been placed on developing good worker-doctor relationship, the early recognition of medical social problems, and the development of skill in the interpretation of medical data to the patient and to other social agencies both by letter and conferences.

#### Qualifications of Workers

The Social Service Department meets the requirements for membership in the American Association of Medical Social Workers. This means that it must be staffed by professionally trained medical social workers. Of the 24 social workers now on the staff, 17 have Masters' degrees in medical social work and the remaining have had either one or two years graduate work in accredited schools of social work.

#### Description of Services

In order to describe the type of service rendered a brief summary of each worker's services for one month during the year follows:

##### White Obstetrics and Gynecology (Case Load 99)

The worker on white obstetrics and gynecology spends much of her time on the obstetrical service. She gets most of her referrals from the medical staff for placement for medical reasons such as toxemia, heart conditions, venereal conditions, until term. After delivery these patients are placed in shelter homes, pending successful working out of a plan. As most of these cases are with unmarried mothers, it requires intensive care and a great deal of time both medically and socially. The principal handicaps are the lack of convalescent care and a well defined child welfare program in the community and in the state.

##### White Male Medical Wards and Clinics (Case Load 339)

The chief concern of the worker on the white male medical wards is the number of chronics who must be removed from the wards speedily. Because there are so few resources for chronics (Orleans is the only parish in the state that has custodial homes for them and there are always waiting lists to these homes) this is a time consuming job which often shows too little result for the hours spent in trying to make plans for these patients. In the clinics, however, the bulk of the work is examination for employability, following agency cases, and sending laboratory reports to agencies on applicants to the Child Guidance Center and Children's Homes. The referrals from the doctors are for the most part due to need for shelter care, for more adequate relief for patients, and for obtaining prescriptions for which the patients are not able to pay.

##### White and Colored Clinics 2 workers and 1 Supervisor (Case Load 1352)

The workers in the white and colored clinics cover the majority of the services in the clinic. The doctors refer cases because the success of the medical work often depends upon financial assistance in securing drugs, appliances and adequate diets. A great deal of time is spent in explaining and giving to patients an understanding of what seems to them confusing and forbidding clinic procedures. For example, one patient refused an electro-



cardiogram because he did not know what it was. After it was explained he readily consented to have this done. The bulk of the work is with cooperative cases from the social agencies and much of the work is done by correspondence and case conferences. The question of employability, while annoying to the doctor because of the crowded clinics, is important as the decision as to whether a patient is eligible for relief hinges on the medical report. If he is well he is employable and is referred to the Works Projects Administration. If he is disabled the case is referred to the Department of Public Welfare for consideration.

#### Colored Male and Female Medical Wards (Case Load 148)

The largest percentage of cases referred to the worker on the colored male and female medical wards are heart cases needing bed rest at home, cases admitted to Charity Hospital, usually aged, not in need of hospitalization and in most cases starved, and completely paralyzed patients referred for placement because no relatives are willing or able to care for them in their homes. Also a great number of patients are admitted whose names are frequently incorrect and for whom there is no address or even the name of the nearest relative or friend. With extremely limited resources for the colored and because of the large pending load on the Department of Public Welfare lists, this service presents unusual complications.

#### Neurological Service (Case Load 239)

The neurological and psychiatric service comprises the wards and clinics for white and colored males and females. The chief problems of the worker on this service are the homeless transients with chronic neurological conditions who have not established a residence anywhere, and local patients for whom commitments from the Coroner's office must be obtained. Useless hours are spent in waiting for the Coroner as he keeps irregular office hours. It is to be hoped that the Charity Hospital can make some arrangement whereby transfer to the City Hospital for Mental Diseases can be made without it being necessary for the social worker to spend so much time away from her regular duties.

#### Colored Tuberculosis (Case Load 212)

Examination of tuberculosis contacts, making provision for the care of the single men and women when discharged from the wards, making provision for those not admitted (only cases that can benefit from medical therapy are admitted, and there are many colored tuberculous patients in the far advanced stages who cannot be admitted) and arranging for relief for these families, are the major responsibilities of the worker on the colored tuberculosis service. Community provision for Sanatorium care for colored tuberculous patients, which is necessary to keep them from re-infecting members of their own race and their white employers, and more adequate public relief for these patients are primary community needs.

#### White Male and Female Surgical, Genito-Urinary, Ear, Nose and Throat Wards (Case Load 144)

On the white male and female surgical, genito-urinary, and ear, nose and throat services the chief problems are providing shelter care for non-residents, arranging convalescent care for patients no longer needing hospital care and placing temporarily or permanently chronically ill or aged individuals. The limitations are the lack of shelter homes and the fact that the one convalescent home available in New Orleans, because of its small personnel, requires that all patients sent to them must be ambulatory.

**Salvarsan Clinic (Case Load 841)**

The worker in the Salvarsan Clinic has but little time except for an administrative job. (Until January 1940 an additional worker was assigned to handle selected cases in which intensive and highly individualized service was necessary. The cases selected were those in which it was believed that definite results could be obtained. This worker also assisted in the clinic.) The Works Projects Administration has assigned four clerical workers to the social service worker and the clinic itself provides a nurse to do the follow-up work. (The nurse in this clinic as well as the eye, tuberculosis and tumor clinics formerly were in the Social Service Department but have now been taken over by the Out-Patient Clinic.) Since the chief obstacles for treatment is usually the patient's own ignorance in regard to the disease and its possible consequences, emphasis is placed upon making him understand his condition and need for treatment. This interpretation is done by direct contact with the patient (all new patients are interviewed routinely) and also through other social agencies in the community who are interested in the patient. During one month the worker had 1188 interviews with patients in which the main focus was on securing regular clinic attendance through a proper understanding of its importance. She also arranged for the examination of 103 contacts. Another important part of this worker's job is with the cooperative case for the social agencies in the community. Reports on 205 patients were sent during this month as the agencies, in order to plan intelligently and constructively for the patient needs, must know what his physical condition is. Arrangements were also made for the continuation of treatment for 55 patients not living in New Orleans. The Salvarsan Clinic which treats both the colored and white patients has a monthly attendance of about 9,784 patients. Obviously with the size of the clinic in relation to its small personnel many problems go untouched.

Under the auspices of the Department of Public Welfare a night Salvarsan Clinic was held two nights a week, one night for colored and one night for white patients, for about a year. Because of lack of funds this worthwhile project was closed. Two social workers had been assigned to the clinic. The closing of this clinic was a distinct loss to the community in view of the fact that the patients were those individuals who worked, and by attendance in this clinic lost no hours from their job. At the present time those patients who cannot leave their employment, or afford the service of a private physician, are receiving no treatment.

**Diabetic Service (Case Load 193)**

The worker on the Diabetic Service is responsible for all referrals of diagnosed diabetic patients, white and colored, male and female, where some plan is necessary to enable the patients to secure insulin, diet, home care and follow-up treatment and adjustment in home situations. Besides the ward patients there is a diabetic clinic which meets twice a week. Because it is frequently necessary for these patients to change to a different type of work, social agencies interested in them must be kept informed of the patient's medical condition; therefore, whenever the routine of a diabetic patient is changed in the clinic the worker sends a report to the social agency.

**White Female Medical Clinic and Wards, and Colored Male and Female Surgical Wards (Case Load 171)**

Much of the clinic work on the white female medical clinic and wards and colored male and female surgical wards involves securing reports for social agencies in the community interested in the patients. While the great volume of work is for the agencies, these agencies are the source of getting

aid for the patient when special recommendations are made. The doctors refer many patients for financial aid, without which they would be unable to carry out his recommendations. The problem on the female medical wards is the large number of old women with chronic heart disease, with no home or relatives who are willing to take them. The problem of the colored patient is the lack of community resources and the limited finances in the homes of these patients. The outstanding problem in both colored and white is the non-resident where, because there are so few resources available in the community to this type of patient, it is almost impossible to get patients off the wards quickly.

#### White Pediatrics and Contagious (Case Load 106)

The problem on the white pediatrics and contagious units are varied. Prematures, glandular disturbances, cardiacs, behavior problems, severe malnutrition, severe dietary deficiency diseases, and babies who cannot tolerate simple milk are some of the diagnoses encountered. Inadequate income and lack of understanding on the part of the mother are oftentimes the cause of these conditions. This entails on the part of the social worker investigation of home conditions and constant interpretation of the doctor's recommendations for treatment. It is also necessary to enlist the services of the Child Welfare Association and the Child Guidance Center. Shelter, food and return transportation for out-of-town parents who bring their babies in to the hospital are frequently needed, and it is often necessary to arrange convalescent care for children whose own homes cannot provide such care—foster homes are limited in number—On the Contagious Unit many of the referrals are emergencies which require many hours of work to arrange for shelter and transportation in the case of penniless transients. This year there have been a number of cases of leprosy. Interpretation of the disease to the patient and his family, making plans for their removal to Carville, the U. S. Leprosarium, and examination of contacts are among the duties of the social worker.

#### Eye Service (Case Load 202)

In order for a patient to derive the most benefit from examination and treatment and advice given him by the doctor in the eye clinic it is essential that he understand something of his condition and the importance of follow-up recommendations. Besides the clinic which meets daily (three times a week for white and three times a week for colored) this worker has charge of all the eye cases on the wards, both male and female and colored and white. Since 1932, when the National Society for the Prevention of Blindness used Charity Hospital as one of its demonstration centers and for three years paid part of the salary of a specially trained eye social worker, the department has not been without a worker with this special training. However, in December 1939 the State Department of Public Welfare needed a worker for the Aid to Needy Blind cases which come under the Social Security Act and the worker, who had been doing this work, together with her work in the Social Service Department, was transferred to the State Department. Because the state examining ophthalmologist is stationed in New Orleans, the worker remains in Charity Hospital and thus is able to supervise the new worker who has replaced her on the eye service. This service calls for special training and it is now hoped to send the newly assigned worker to St. Louis for a three months course next autumn.

#### Dibert (White Tuberculosis) (Case Load 280)

The two workers in the Dibert and the tuberculosis clinic, both on the Tulane and Louisiana State University services have had the responsibility

of arranging for examination of contacts, planning with the patient for care of dependents, explaining to the family the diagnosis and the need for hospitalization, and arranging for care of patients outside the hospital when discharged. The same workers continue planning with the patient after discharge. They help carry out the doctor's recommendations, keep social agencies, who are responsible for financial aid to the patients informed of the patient's progress or regression, and assist with re-employment plans when the patient is able to work. The chief problem confronting these workers is planning for patients ready for discharge. The diagnosis of tuberculosis closes the door of convalescent homes and boarding homes and often the family home from which the patient came. As the Dibert only admits patients needing active treatment and who have a good prognosis, the problem of what to do with the far advanced cases is equally serious with the white patient as it is with the colored cases and the number of beds in the state for such cases is woefully small.

#### Orthopedic Service (Case Load 359)

The two workers on the orthopedic and fracture service for colored and white male and female in the clinics and wards find these typical problems: Bed care for patients after discharge, more adequate relief both in New Orleans and throughout the state; securing transportation to and from the clinics and obtaining shoe corrections, braces et cetera. Relative to the last problem, while some assistance is received from the Louisiana Society for Crippled Children, the State Crippled Children's Division of the Social Security program, (both organizations help only patients under 21) and from funds derived from President Roosevelt's Birthday Ball for poliomyelitis cases, there are still a large group who cannot receive assistance from these sources. This hampers the workers' efficiency in helping these patients to carry out the long time treatment plans. Inability to secure appliances frequently hinders the patient's return to employment.

#### Colored Obstetrics, Pediatrics and Gynecology (Case Load 175)

The worker on the colored obstetric, pediatrics and gynecology finds that pediatrics occupies the larger share of her work. The doctors are anxious for pertinent social information and often gauge the length of the patient's hospital stay accordingly. Clinic patients have to be followed over a long period of time when the diagnosis is serious, with constant interpretation to parents and to social agencies of the patient's medical needs. The Department of Public Welfare in Orleans Parish has been very understanding in their help and in the cases of malnutrition there have been many successful results. Arranging for antilithic therapy for patients from parishes where there are no health units, is a time consuming but worthwhile undertaking. The obstetrical and gynecological services present the problem of relief and the need for interpretation of the doctor's recommendations that, if these patients return to work too soon, their conditions may become chronic. It is sometimes difficult to arrange for further medical care for those patients returning to the parishes because medical care and proper follow-up may not be available. Social agencies in these parishes can often help by following the recommendation of the Charity Hospital doctors sent them through the Social Service Department.

#### Tumor Service (Case Load 178)

While the worker on this service accepts cases of malignancy from all the wards and clinics (colored and white, male and female) she is solely responsible for the patients known to the Radium and Deep X-Ray Therapy Departments. Her most outstanding problem is that of arranging terminal

care. While there is a sad lack of facilities and resources throughout the state for the care of the chronically ill persons there is a worse one for those patients requiring special nursing care and narcotics. If re-admission is to be avoided care must be taken in not only interpreting the patient's needs but in arranging for nursing care and determining how narcotics can be obtained if they are needed. It is not easy for the social agencies, nor the families of those patients with far advanced carcinoma for whom further care in the hospital is not indicated, to understand why they should be returned home. Until the reason back of the doctor's action is carefully interpreted, thereby alleviating the antagonism of the family group, no plan for the patient's care outside the hospital can be arranged. There are a great number of patients who cannot be discharged as there is absolutely no place for them to go. The worker also has the responsibility of arranging temporary placement for out of town patients who are attending the clinic or for those who report daily to the Radiology Department for treatment.

#### Transportation Worker and Chauffeur

Since patients so frequently come to Charity Hospital without money for return fare, the hospital has been put to great expense in the past keeping these patients on the wards for long periods after discharge. The function of the transportation worker is to arrange for transportation for all out-of-town patients so that, insofar as is possible, no patient will be held on the wards after discharge. A total of approximately 546 interviews are made a month to learn whether patients have money for return fare. All cases, upon which there is a social problem, are referred by the transportation worker to the social worker.

The chauffeur goes regularly every morning to one ticket office to have the charity rate tickets o.k.'d by the general passenger agent and then to the city ticket office to purchase the tickets. This takes one and one quarter hours. The same procedure is followed in the afternoon, only to different railroads. He then takes patients to the trains, back and forth to special clinics, to shelter homes, et cetera. He makes an average of 319 trips a month. About 178 charity rate tickets are purchased a month, amounting to \$278.81, all paid by agencies and patients.

#### Works Projects Administration Worker

The State Department of Public Welfare pays the salary of one worker who handles all local Works Projects Administration reports concerning employability of patients. If these patients are employable they are not eligible for relief from the Department of Public Welfare and, therefore, are referred to the Works Projects Administration. On the other hand, if they become unemployable they are cut off from the Works Projects Administration payroll and sent to the Department of Public Welfare. A typical month's work was steering 256 Works Projects Administration patients through the clinic of which 32 were hospitalized. 205 reports were sent in to the Works Projects Administration. 63 slips were issued certifying to hospital treatment, so that the employee's time could be made up. 75 Salvarsan attendance cards were given and 1300 patients were interviewed.

#### Admitting Room

The end of January, at the request of the Director of the hospital, the supervisor in charge of the Intake Desk was transferred to the Admitting Room. (The Intake Desk is now handled by one of the stenographers and three National Youth Administration Workers). The object of placing the worker in the Admitting Room was to take care of any problems arising

among those patients whom the admitting doctors do not consider hospital cases. She has cut down hospital admissions by making plans for the patients on the outside and has materially aided the admitting doctors. This service will perhaps be the forerunner of social-admitting in Charity Hospital. It has been a need that has existed for years, as heretofore, any so called sick indigent resident of the state who applied for admission was accepted.

#### Education

The department participates in the teaching of the Louisiana State University Medical School senior medical students. The Director gives a course of lectures the second semester and during the entire school year the students, divided into groups of four, for a period of eight weeks each, come to the department for two hours a week. Nine of the more experienced workers help in this project and each worker has two students assigned to her.

The department is used by the Tulane University School of Social Work as one of its teaching centers for field work and while six of the students are under the supervision of an instructor from Tulane, four students, (two each), are under the supervision of the department supervisors. This is particularly valuable to the supervisors and the department as it is definitely a means of keeping abreast of the newer trends in medical social practice.

One of the supervisors participates in the teaching program of the Charity Hospital School of Nursing and the results have been noticeable in that the nurses' social outlook has broadened, and her interest in the patient as an individual, and not just a hospital case, has deepened.

#### Community Activities

The department also participates in the social programs in the community and state, thereby promoting wider health interests and initiating new health activities in the health field. Papers have been given by the Director and various staff members at the Council of Social Agencies, the American Association of Social Workers, the Gulf District of the American Association of Medical Social Workers, and the State Conference of Social Welfare. One of the workers, together with a doctor from the pediatrics service, gave a series of lectures to the local Department of Public Welfare, the doctor presenting the medical side and the social worker explaining the medical social aspects of diseases common to children.

#### Statistical Statement

The number of cases handled in the Social Service Department during the year were \_\_\_\_\_ 59,982

Of this total of 59,982 cases:

New referrals	8,647
Cases already known to the Department (old and recurrent)	51,335
<b>Total</b>	<b>59,982</b>
Referred by Doctors and Hospital Staff	23,580
Referred by social agencies	30,080
Referred by patient group	1,322
<b>Total</b>	<b>59,982</b>
New cases from Orleans Parish	5,027
New cases from other parishes (inclusive of intra-state transients)	3,475
New cases outside the state (inclusive of interstate transients)	145
<b>Total</b>	<b>8,647</b>

Number of Home Visits made	
by staff workers .....	3,229
Number of Contact Interviews made	
by staff workers .....	29,680
Number of Office Interviews	
by staff workers .....	19,978
Number of Clinic Interviews	
by staff workers .....	22,561
Number of Ward Interviews	
by staff workers .....	20,893
Number of letters written .....	36,865
Number of telegrams sent .....	431
	134,637

In accordance with the Transportation Agreement financial investigation of the patients was done before charity rate tickets were purchased.

Number of charity rate tickets purchased:

Paid by patient and agencies .....	2,704	\$4,550.00
Paid by Social Service Dept .....	28	33.25
	Total .....	2,732 — \$4,883.25

#### Recommendations

It is apparent from analyzing the workers services that certain common problems stand out:

1. The Admitting System of Charity Hospital should be improved. Provision should be made to provide more social workers and interviewers to interview all applicants found medically eligible for treatment in both wards and clinics. More careful recording of names, addresses, and names of relatives should be made.
2. A unit record system would facilitate getting needed medical information.
3. A more adequate staff, and re-evaluation of program to conform to the new hospital requirements.

The Social Service Department has too many demands made upon it for the size of the staff. To meet the needs a more adequate staff in the Social Service Department should be provided. Dr. MacEachern in his book "Hospital Organization and Management" and the report of the Medical Social Service Survey for New York recommends that the number of social workers for a department should be based upon the supposition that every patient admitted to the hospital is a potential social service case, and likewise every five clinic visits should be so considered. This entity was termed a potential work unit and it was estimated that 2800 potential work units was the annual maximum load per social worker which should not be exceeded, and 2,000 was a more desirable average. This would mean that for the fiscal year 1935-1936 (which was before the building of the new hospital) in which year there were 66,563 hospital admissions and 466,512 clinic visits, a minimum of 56 or a maximum of 76 workers would be indicated. Compare this figure with the present staff of 24 workers! In the new hospital, not yet filled to its capacity of 3,300 beds, the turnover for June 1940 shows that 5,425 patients were discharged. This would indicate a greatly increased potential work unit over 1935-1936.

Replacements of workers who have left and are leaving has not so far been possible. In order to keep up standards in the department, and avoid superficial and ineffective work the staff must be enlarged. The fact that since January there has been no intake secretary has been a serious handicap. It has been difficult during this interim of moving into the new hospital for the department to define satisfactorily its aims. A re-evaluation of the program and an analysis of what it is practicable to do with available staff is definitely indicated in the coming year in view of the increasing demands of the new hospital. Changing programs in the state public welfare departments may mean corresponding adjustments in the Social Service Department.

### Handicaps due to Unmet Community Needs

The effectiveness of a social service department in a public hospital the size of Charity Hospital, depends upon using the community resources in both serving the patient, and, in providing the doctor with the assistance he needs in carrying out the patients' medical and social treatment. The following handicaps illustrate some of the problems encountered by the Social Service Department.

1. Insufficient Relief. The large number of pending applications in the Department of Public Welfare and the limited relief grants seriously affect the medical needs of the patient.
2. Problems inherent in handling parish cases through correspondence. Because of inaccessibility of patients' homes, the parish agencies are unable to do adequate medical follow-up.
3. The fact that Charity Hospital is regarded as a "dumping ground" for chronically ill people who are a problem to their communities, and not a hospital for the acutely ill, necessitates continued education throughout the state to change this concept.
4. The need for tuberculosis sanitoriums. The Charity Hospital only accepts early, hopeful cases of tuberculosis and there are not sufficient facilities in the state for the treatment of far advanced cases.
5. Lack of facilities for working with unmarried mothers.
6. Lack of provision outside of Orleans Parish for the chronically ill. The waiting list in New Orleans where three homes, one for white and two for colored, are provided is increasingly long.
7. No shelter or free convalescent homes for care of colored patients.
8. Inadequate Child Welfare care. The State Department of Public Welfare has not yet provided nearly enough facilities for the care of children and the private agencies cannot meet the need.
9. Insufficient provision for free drugs. The Sickles Fund is inconveniently located requiring patients to walk long distances for drugs and the supply is limited.
10. A visiting physician service in the homes of the patients. This would provide care for cardiac cases which have been ordered bed rest but need medical supervision and, therefore, have to come in to the clinic for it. It would also provide care for cancer and



other serious conditions, and, therefore keep many of the patients from seeking re-admission to the hospital.

#### Conclusion

Gratitude is extended to the Director of the Hospital for his unfailing cooperation and his continued interest and support. To the Board of Administrators is extended the appreciation of the department. The Sisters of Charity have rendered invaluable assistance and the cooperation of the nursing and medical staffs has made possible much that has been accomplished. Special acknowledgment is tendered the State and Local Departments of Public Welfare, the various social agencies in the city and state and to the volunteers who have given so much valuable personal service. Special commendation is due the members of the Social Service staff, but for whose zeal and untiring efforts the accomplishments of the department would not have been possible.

Respectfully submitted,  
BEATRICE HODGE, Director  
Medical Social Service Department

7-10-40

#### PERSONNEL

BEATRICE HODGE,  
Director  
LYDIA FINLEY,  
Assistant Director  
LEOLA DRAGON,  
Supervisor

MARGUERITE PARSONS,  
Supervisor  
SISTER FRANCES,  
Supervisor  
LOUISE MEYER,  
Chief Clinic Worker  
and Supervisor

MYRA RICHARDS  
Admitting Room

#### WORKERS

MARY MORRIS  
ENOLIA ARCHINARD  
LOUISE GOETTER  
MATTIE C. McCARTY  
KITTY REID  
FRANCES SHANNON  
\*PEARL MAYER  
NELLIE JACKSON  
EVALENA FORD  
\*GENEVIEVE WRIGHT  
CAMILLE PARK  
MARGARET MICELI

\*BETTY FORD  
\*MARY SEAGO BROOKE  
†ANNA HARRISON  
\*MARJORIE NICAUD  
\*CORINNE THOMAS  
HELEN CASSIDY  
SYLVIA ROSENSON  
DORIS CULVER  
MARIGAYLE HOPKINS  
LOUISE SELLING  
JULIETTE DEFRANCES  
ISABEL EWING

\*SUE LISSO

#### TRANSPORTATION CLERKS

CHARLOTTE MATTHEWS

LOUIS MOREL

#### SECRETARIES

KATHERINE CHAMBERS  
AUDREY MARIONNEAUX  
CARE ROTH  
\*LUCIE AMELIE OLIVIER  
\*ANNE FLAKE  
\*MARGARET ST. CLAIR  
\*ELVIRA LECORGNE

MARY QUEALY  
BARBARA KESSLER  
\*JANET PAYNE  
ANNA DELL THIAO  
\*EVIE HUNTER  
MARGARET QUEALY  
WALLACE McNABB

JANE HERNDON

\*Resigned.

†Transferred to D. P. W.

## STATE DEPARTMENT OF PUBLIC WELFARE WORKERS

MARY SISTRUNK

†ELAINE SORJONNEN

LORAINNE THOMAS

## VOLUNTEERS

MISS TRISTE BRINGIER

MISS MARIE GILL

MISS OLGA D'AQUIN

MISS JENNIE CASELLA

MRS. MARGIE HART MYLES

MISS LYDIA SCHAUMBURG

MRS. SUDIE MYLES

MRS. WALTER GOG

MISS BARBARA VALLAS

MRS. GEORGE JANVIER, JR.

MISS VERA DANIELS

MRS. D. S. STUART, SR.

MISS ISABEL PHILLIPS

MISS MARGARET QUEALY

MISS WILHELMINA MCGOVERN

MRS. WALDO FRANCOIS

MISS REGINA GOOSMAN

MRS. G. GROSNOWER

MISS DORIS WHITE

MISS ETHEL SHACK

## WORKS PROJECTS ADMINISTRATION WORKERS

ALMA DUPRE

MELBA FINK

DOROTHEA SMITH

HELEN WOOD

## NATIONAL YOUTH ADMINISTRATION WORKERS

ISABEL PHILLIPS

REGINA GOOSMAN

WILHELMINA MCGOVERN

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 †Recalled to the local Department of Public Welfare Office.

## REPORT OF NURSING DEPARTMENT

### ADMINISTRATIVE AND TEACHING STAFF

Director of Department.....	SISTER STANISLAUS, R. N., Sc. D.
Assistant Director of Department.....	SISTER MATHILDE, M. A.
Director of School of Nursing and Nursing Service .....	SISTER HENRIETTA, R. N., M. S.
Associate Director of School of Nursing .....	SISTER SYLVIA, R. N., B. S.
Associate Director, Nursing Service.....	SISTER URBAN, R. N., B. S.
Assistant Directors:	
School of Nursing .....	MARY E. STUART, R. N., B. S.
School of Nursing and Nursing Service .....	SAIDE SALMELA, R. N., B. S.
School of Nursing and Nursing Service .....	ROWENA MILLER, R. N.
Nursing Service in Charge of Subsidiary Workers .....	WILLIE MASK, R. N., B. S.
Director of Clinical Instruction.....	MARGUERITE PAETZNICK, R. N., B. S.
Assistant Director of Clinical Instruction .....	GAIL SQUIRES, R. N., B. S.
Assistant Director of Clinical Instruction .....	LUTIE GOUGH, R. N., B. S.
Social Director and Instructor in Social Sciences .....	MARY E. GILLEN, R. N., B. S.
Instructor in Principles and Practice of Nursing.....	CECILIA PERBODIN, R. N., B. Ed.
Assistant Instructor in Principles and Practice of Nursing.....	MARGARET ALLEN, R. N.
Assistant Instructor in Principles and Practice of Nursing.....	JUANITA SOWELL, R. N.
Supervisor, Nurses Residence.....	DOROTHEA ARMBRUSTER, R. N.
Acting Chief Anesthetist and Di- rector of School of Anesthesia.....	LILLIAN GEBBS, R. N.
Chief Anesthetist in Obstetrical Anesthesia .....	MARY E. KOENIG, R. N.
Chief Gas Therapist and Educa- tional Director in School of Anesthesia .....	ESTHER MYERS, R. N.

## REPORT OF THE NURSING DEPARTMENT

To the Board of Administrators and Doctor Roy W. Wright, Director  
Charity Hospital of Louisiana at New Orleans

Gentlemen:

The annual report of the Nursing Department for the fiscal year from July 1, 1939, to June 30, 1940, is herewith presented.

The reorganization necessitated by the opening of the new hospital has made this past fiscal year a memorable one. For the Nursing Department, entrance into the new building brought in its train increased responsibility in the organization of several new divisions designed to improve service on the hospital floors. The load already carried by the Department has likewise been made heavier by the increasing census which has followed the opening of the new Main Building.

### ORGANIZATION

The Nursing Department is now functioning chiefly through three main divisions: the Nursing Service Division, which carries responsibility for the nursing care of patients, and which also includes the Central Service Department, the Sewing Room and the Central Linen Rooms, the Gas Therapy Department, and the Admission Bathrooms and Patients' Clothes Rooms; the School of Nursing, which is concerned with the instruction of nurses, including the School of Anesthesia; and the Housekeeping Department, which was organized upon our entrance into the new hospital, and which is charged with the cleaning in the hospital.

### NURSING SERVICE DIVISION

The headquarters of the Nursing Service Division are located on the fourth floor of the new Main Building adjoining the offices of the Director and Assistant Director of the Nursing Department. The centralization of the main offices of the Nursing Department has great advantage over the former separation of offices in different buildings. Space is still inadequate, however, for all members of the administrative staff, some of whom are located in offices on the fifth and eleventh floors. A mimeograph room, set up by the Nursing Service Division, is also located on the eleventh floor.

#### Organization of Hospital Floors

As each floor of the new Main Building accommodates approximately two hundred and fifty patients, careful staff assignment was needed in the distribution of nursing service. At present, a Sister Supervisor is responsible for the supervision of an entire floor in the day; she is assisted by an Assistant Supervisor from two-thirty to eleven o'clock; a Night Supervisor is in charge of the floor from eleven o'clock to seven the following morning. The floors are divided into units according to the proximity of wards. The largest units accommodate about fifty patients; the smallest, twenty-five. These units are under the charge of Head Nurses who are directly responsible to the Sister Supervisors.

The actual nursing in the ward units is carried on by General Staff Nurses and Student Nurses under the direction of the Head Nurse and Sister Supervisor. Subsidiary Workers, ward helpers and orderlies, perform non-nursing duties under the direction of the nursing staff. They also carry on certain cleaning duties, though the heavy cleaning of the hospital is assigned to the Housekeeping Department.

A definite effort has been made to relieve nurses of non-professional tasks. The divisions which will be described in the following subtopics, show that they have definitely been freed from many activities which formerly prevented their giving full time to nursing duties.

#### Central Service Room System

The Central Service Department has stated its purpose as follows: "To give efficient and economical service to the physician and to the nurse by supplying all necessary equipment needed in the care of the patient." Through this department a centralized control is exerted over medical and surgical supplies, and also over household and stationery supplies.

The main unit of the Central Service Room System is located on the twelfth floor of the Main Hospital Building. Dispensing units are located at the center of each floor. Ordinary equipment and supplies necessary for the type of service on the floor are kept in the dispensing unit. Through a system of exchange at regular intervals, sterile material is given out from the main unit where all wrapping and sterilizing is done. All Central Service rooms are open both day and night.

The Central Service units are all staffed with nurses and messengers responsible to a Sister Supervisor. While nurses are responsible for the setting up of trays and general management of the units, messengers carry equipment as needed to the ward units, transport patients, deliver supplies, et cetera.

The Central Service Room System has three main advantages: (1) it relieves nurses of technical work connected with the care of equipment; (2) it is an economical measure as it provides a definite control over the ordering, dispensing, and care of equipment and supplies; (3) it standardizes equipment in the hospital.

#### Sewing Room and Central Linen Room

The Sewing Room makes all hospital linens and is responsible for the reconditioning of torn linens. The Supervisor of the Sewing Room also directs the Central Linen Room which receives the linen from the laundry and distributes it to the ward units, according to the daily census.

The main units of the Sewing and Linen Departments are located in the basement. Wing linen rooms on each hospital floor are stocked with linen daily for morning changes, but emergency supplies of linen are kept in the Central Service rooms.

The centralization of the linen department has provided a means for a more definite control over the distribution of linens. The nursing staff has thus been relieved of the necessity of maintaining and distributing the linen supply for their floors.

#### Admitting Room, Admission Bathrooms, and Patients' Clothes Room

With the opening of the new hospital, the Nursing Service Division took over the nursing care of patients in the Admitting Room. The Admission Bathrooms and Central Patients' Clothes Room were also staffed by Nursing Service. All of these units function under the same Sister Supervisor.

The Admission Bathrooms and Patients' Clothes Rooms relieve the nurses on the wards of the greatest share of the responsibility for checking the clothing and valuables of new patients, and of giving admission baths. Patients' clothing is carefully checked, and cleaned when badly soiled, before

storage. When necessary, clothing is replaced. These two units are located in the basement directly under the Admitting Department.

It need hardly be stated that these two departments have already proven their value to the hospital, both in the improved care of patients' clothes and valuables and in saving of nursing time on the floors.

#### Gas Therapy Department

Gas Therapy is one of the newer services available in the hospital for the treatment of patients. The department functions under the general direction of the Assistant Director of the Hospital in charge of Medicine and is managed by a Chief Gas Therapist who is an anesthetist. The department is responsible for the administration of therapeutic gases: oxygen, carbon dioxide, and helium oxygen. Anesthetists and trained technicians administer the gases. The hospital now owns a Drinker Respirator, which is operated by anesthetists under the direction of the Gas Therapy Department.

#### Food Service

Food service for patients was transferred to the Dietary Department upon our entrance to the new hospital. A Dietitian is now in charge of each large ward pantry at the center of each floor, from which special diets are also served. Nurses assist in the serving of the diet to the patient, and are responsible for handling of feeding problems arising on the ward units. Such a cooperative arrangement with the Dietary Department has resulted in a greatly improved food service.

#### Clerical Workers

The physical arrangement of the floors of the new hospital necessitated the employment of clerical workers to relieve nurses of the responsibility for answering outside telephone calls, giving out information, and other such duties. As all outside telephone connections are located in the Supervisor's Office on the center of each wing, it was necessary to assign about thirty so-called "Ward Clerks" to these offices. This action has been of a great deal of benefit to Nursing Service, for in addition to the tasks mentioned above, these ward clerks direct visitors, relay messages, and perform many other non-nursing duties.

#### Subsidiary Workers

The program for subsidiary workers, begun in April 1939, has continued with success during this past year. The duties of this group have been carefully outlined, and a teaching program has been continued for new workers. A male nurse was employed in July 1939, to supervise the program for orderlies; he resigned in March of 1940, and so far, he has not been replaced, though we feel that a male nurse is needed to carry on this supervisory program. A formal course for these workers is not in effect. The majority of the subsidiary workers were supplied with uniforms during the past year through the generosity of the hospital administrators. Plans are underway to issue a Handbook for Subsidiary Workers in the near future and to institute an apprenticeship program for new employees.

#### Staff Education Program

In spite of the many duties attendant upon moving and readjustment, the Nursing Department carried on a staff education program this past year which has been productive of good results. In order to establish uni-

form nursing procedures throughout the hospital, a revision of nursing procedures was carried on through the year. All nurses attended weekly demonstrations of the revised procedures. A Procedure Book was written in two volumes, Basic and Advanced, and this was placed in each Ward Unit.

A Nursing Service Policy Book was also begun this spring for the benefit of all nurses, and these have been placed in the Supervisor's Office on each floor. Statements of policies governing nurses, as well as policies describing interdepartmental relations, are included in the Policy Book.

Through a program of weekly supervisory meetings a unified program of supervision has been initiated. Head Nurse meetings have been held weekly or biweekly on the various floors to build up a stronger program of teaching and supervision. Close contact has been maintained with the Nursing Service administrative staff through a system of reporting and through supervisory rounds from Nursing Service Office.

#### Nursing Service Statistics

The nursing service staff has increased during this past year, though the number of personnel is still far from adequate. Our report for 1939 stated that there was on July 1, a total of 570 nurses on the staff, including both graduate and student nurses. This year finds a total of 659, of whom 130 are included in the administrative and supervisory group, 14 are anesthetists, 241 are general staff nurses, and 274 are students. Subsidiary workers number 503, 212 being male workers and 291, female. Clerical workers in Nursing Service Offices and allied offices number 19, while there are 28 ward clerks stationed in the Supervisors' Offices on the hospital floors.

Approximately 700 requests were received in the Nursing Service Division for information regarding employment on our nursing staff. A total of 238 employments were made during this past year, of whom 167 were replacements and 71, additional workers. There has been a very rapid turnover of graduate nurses, an average of 14 resignations having been accepted monthly. An analysis of the reasons alleged for leaving our employ follows:

#### Reasons Given for Resigning (in order of frequency)

1. To accept better position .....	77
2. To be married .....	26
3. Illness .....	16
4. To enter private duty .....	15
5. Home responsibilities .....	13
6. To take postgraduate work .....	11
7. Miscellaneous .....	9
Total .....	167

### SCHOOL OF NURSING

#### Courses Offered

The School of Nursing continues to offer courses to both graduate and student nurses. It is anticipated that with the improved facilities of the new hospital, it will soon be possible to offer more postgraduate courses to nurses desiring advanced work in the specialties.

The largest enrollment of the school is still in the three year course leading to the diploma. Five students are enrolled in the combined collegiate

and professional course (the "five year course"), which is offered through affiliation with Louisiana State University.

A closer working relationship was established with the Medical School of the Louisiana State University during this past year. Sixty-five students are now enrolled in the summer session which is being conducted in the Nurses' Residence, and six nurses are candidates for degree at the end of this session. It is hoped that after the major reorganization program, necessitated by our entrance into the new hospital, is well underway, we may push forward with a fulltime university program in Nursing Education.

Postgraduate students are still accepted for a General Supplementary or Review Course of six months, and for the three months course in Operating Room Technique. The course in Anesthesia has been lengthened to eight months and has been greatly enriched by an integrated theoretical course conducted under the guidance of an Educational Director in the School of Anesthesia.

Affiliation is still maintained with many southern schools of nursing, and practically all types of experience are made available to students of smaller accredited schools needing additional services.

#### Improvements

The School of Nursing has taken up headquarters in the new Nurses' Residence which has given increased space and facilities. The residence serves both as a dormitory and as an educational unit. Ample office space, an excellent library, and fair recreational facilities have been provided. Classrooms are not adequate, however, and space has already been taken in the hospital for the teaching of Principles and Practice of Nursing. We still continue to use the laboratories of the Louisiana State University Medical School for the teaching of science courses, as science laboratories were not included in the residence. A registrar's office has been opened which is of great value. Although a kitchen and cafeteria are provided in the basement, we have not been able to use these as the personnel needed to operate them has not been available.

The faculty was enlarged this past year by the addition of another Assistant Director of Clinical Instruction, who was recently assigned to the Out-Patient Department where she will work with the Director in setting up a teaching program for students. A second Assistant in Nursing Service was also named this year. Through the efforts of our new instructor in Nursing Arts, a program for the preparation of young instructors for the course in Principles and Practice of Nursing has been initiated. Practice Teaching was also carried on by seven of our university students this year under the direction of one of the Assistant Directors of the School. Plans for this coming year include the appointment of four additional assistants to the Nursing Arts instructional staff.

#### Accreditation

Application has been made with the National League of Nursing Education for accreditation of our school of nursing and word has been received that the school will be surveyed in the fall of 1940. It is our earnest desire to have our school included on the first list of approved schools of nursing to be published by this body.

#### Statistics

Two hundred and seventy-four students are enrolled in the School of Nursing on July 1, 1940. This number is divided as follows: 207 Charity



Hospital students, 30 affiliating students, 18 postgraduate students, and 19 anesthesia students. One hundred and eleven students were admitted in September, 1939, and 63 students were granted the diploma of the school at the formal graduating exercises in May, 1940. A total of 68 students were dropped or withdrew from the school during the past fiscal year. Affiliation is now maintained with eight southern schools and contracts of affiliation will soon be signed with two additional schools. The clerical staff of the school of nursing now numbers six fulltime workers. One of the Assistant Directors functions as registrar of the school.

## HOUSEKEEPING DEPARTMENT

### New Section in Nursing Department

In the old hospital, supervision of housekeeping was a part of the Supervisors' duties in the ward units. With entrance into our new building, housekeeping has been organized as a separate division, and is directed by a specially selected personnel, thus giving the Supervisors and Head Nurses more time for nursing supervision. A certain amount of housekeeping is still being done by the ward service group, but duties are distinctly separated. The housekeeping group is responsible for the cleaning of floors and for high dusting in the ward units; cleaning of furniture and equipment is done by orderlies and ward helpers.

### Organization

The function of the Housekeeping Department is to maintain cleanliness and order throughout the hospital and to give proper care and attention to furniture and equipment.

The personnel of the Housekeeping Department includes: (1) the Sister Director of Housekeeping who is responsible for the organization and administration of the department, and for the selection, discharge, and transfer of employees; (2) a housekeeper, her assistants, and a houseman whose duties consist of supervision and direction of the work of the housekeeping personnel; (3) two foremen who supervise the maintenance of floors; and (4), porters and maids who do the actual cleaning.

The Department is responsible for: (1) general cleaning and care of furniture and equipment in the Ward Units, the Special Departments, and the Internes' Quarters; (2) floor maintenance; (3) extermination of insects and rodents.

### Achievements

The organization of this new Department in our hospital is a step forward in promoting systematic working conditions. Some of our achievements are as follows: (1) All porters and maids in the ward units have a definitely outlined schedule of duties which provides uniform cleaning methods throughout the hospital. (2) A specially assigned porter or maid assumes the responsibility for all the housekeeping duties in the special departments. (3) General inspections are made several times a day by the supervisory personnel and new workers are given direct supervision and instructions. (4) A schedule for the cleaning, waxing, and polishing of floors has been successfully worked out. All corridors are cared for at night when most traffic is eliminated. Ward floors are done after 9:00 a. m., so as not to interfere with the early morning care of patients.

## OUTSTANDING PROBLEMS IN NURSING DEPARTMENT

The outstanding need of the Nursing Department is an increased staff of nurses to properly care for patients. We are at present giving from six

tenths of an hour to one and two-tenths hours of nursing care to each patient in a twenty-four hour period, when the minimum accepted standard is two hours.

The need for raises in salary and a salary scale for all workers in the Department is also acute. At present we are facing such a rapid turnover of nurses that it is impossible to keep a stable, experienced staff of nurses on duty in the hospital. Nurses can claim better salaries elsewhere and, consequently, they are resigning in great numbers. Female subsidiary workers who have been in our employ for ten years and longer are still making the low salary of thirty dollars monthly.

More equipment and supplies of various kinds are greatly needed. One of the most dire and constant needs is an adequate supply of linen. For a long time we have wished to set up a teaching program in the Dibert Tuberculosis Unit. This has been impossible because of the need for additional plumbing and surgical gowns, necessary to introduce an aseptic technique.

### RECOMMENDATIONS

We wish at this time to make certain recommendations which are urgent and pressing:

1. An increased budget for the Nursing Department which will permit of the following:
  - a. Needed salary raises for all workers in the department, including nurses, subsidiary workers, and housekeeping personnel
  - b. The establishment of a salary scale for all employees based on classification of positions, experience, special preparation, and satisfactory work
  - c. The employment of approximately four hundred and fifty additional nurses, thirty-five subsidiary workers for ward service, and seventeen supervisors and cleaners for the housekeeping division
2. Additional equipment and supplies needed to render more efficient nursing service to patients and to properly clean and maintain our new hospital building.

### ACKNOWLEDGMENTS

We are grateful for the interest shown in the Nursing Department by the Hospital Administrators during this past year. We also appreciate the cooperation received from other hospital departments. Our gratitude is likewise extended to all members of our faculty and to the medical staff who have participated in the teaching program of the school and who have given care to our sick nurses. Especially, do we wish to thank our entire personnel for their generous endurance of the heavy burdens imposed upon them during the moving period and following our entrance into the hospital. Our nurses can receive only commendation for the splendid spirit of self-sacrifice and loyalty which they have displayed during this trying time.

Respectfully submitted,  
SISTER STANISLAUS, Director  
Department of Nursing

July 1, 1940

LIBRARY OF THE  
ORLEANS PARISH MEDICAL SOCIETY

## REPORT OF PHARMACIST

July 3, 1940

Dr. Roy W. Wright, Director  
Charity Hospital of Louisiana at  
New Orleans, Louisiana.

Dear Dr. Wright:

The following is the report of the Pharmacy Department for the year ending June 30, 1940:

Special Prescriptions filled.....	54,350
Narcotic Prescriptions filled.....	5,920
Stock Prescriptions filled.....	103,456
Total.....	163,726

## SERUMS AND ANTITOXINS PURCHASED

Anti-Dysenteric Serum.....	5 vials
Anti-Influenza Serum.....	8 vials
Anti-Meningococcic Serum 30 cc.....	20 vials
Anti-Pneumococcic Serum Type 1—20,000 Units.....	261 vials
Anti-Pneumococcic Serum Type 2—20,000 Units.....	15 vials
Anti-Pneumococcic Serum Type 3—20,000 Units.....	280 vials
Anti-Pneumococcic Serum Type 4—20,000 Units.....	125 vials
Anti-Pneumococcic Serum Type 5—20,000 Units.....	105 vials
Anti-Pneumococcic Serum Type 6—20,000 Units.....	110 vials
Anti-Pneumococcic Serum Type 7—20,000 Units.....	198 vials
Anti-Pneumococcic Serum Type 8—20,000 Units.....	50 vials
Anti-Pneumococcic Serum Type 9—20,000 Units.....	20 vials
Anti-Pneumococcic Serum Type 10—20,000 Units.....	30 vials
Anti-Pneumococcic Serum Type 11—20,000 Units.....	15 vials
Anti-Pneumococcic Serum Type 12—20,000 Units.....	30 vials
Anti-Pneumococcic Serum Type 13—20,000 Units.....	33 vials
Anti-Pneumococcic Serum Type 14—20,000 Units.....	55 vials
Anti-Pneumococcic Serum Type 15—20,000 Units.....	10 vials
Anti-Pneumococcic Serum Type 16—20,000 Units.....	10 vials
Anti-Pneumococcic Serum Type 17—20,000 Units.....	10 vials
Anti-Pneumococcic Serum Type 18—20,000 Units.....	20 vials
Anti-Pneumococcic Serum Type 19—20,000 Units.....	30 vials
Anti-Pneumococcic Serum Type 20—20,000 Units.....	9 vials
Anti-Pneumococcic Serum Type 22—20,000 Units.....	33 vials
Anti-Pneumococcic Serum Type 23—20,000 Units.....	15 vials
Anti-Pneumococcic Serum Type 24—20,000 Units.....	18 vials
Anti-Pneumococcic Serum Type 29—20,000 Units.....	20 vials
Anti-Pneumococcic Serum Type 33—20,000 Units.....	10 vials
Antivenin (Snake).....	6 vials
Anti-Streptococcic Serum.....	5 vials
Anti-Tularemia Serum.....	9 vials
Catarrhal Vaccine.....	135 vials
Cholera Vaccine.....	24 vials
Coli Combined Vaccine.....	55 vials
Diphtheria Antitoxin 10,000 Units.....	200 vials
Diphtheria Antitoxin 20,000 Units.....	250 vials
Dysentery Vaccine.....	5 vials
Erysipelas Antitoxin.....	18 vials
Furunculosis Vaccine 5 cc.....	80 vials
Furunculosis Vaccine 10 cc.....	40 vials

Gas Gangrene Antitoxin.....	82 vials
Immune Globulin.....	10 vials
Meningococcic Antitoxin.....	330 vials
Mixed Vaccine Influenza.....	20 vials
Mixed Vaccine Respiratory Infections.....	22 vials
Pertussis Vaccine.....	23 vials
Scarlet Fever Antitoxin Therapeutic.....	11 vials
Small Pox Vaccine.....	5 vials
Staphylococcic Antitoxin 20,000 Units.....	11 vials
Staphylo-Strept Vaccine.....	9 vials
Streptococcus Immunogen.....	6 vials
Streptococcus Vaccine.....	55 vials
Tetanus Antitoxin 1,500 Units.....	18,500 vials
Tetanus Antitoxin 10,000 Units.....	70 vials
Tetanus Antitoxin 20,000 Units.....	227 vials
Tetanus Gas Gangrene Prophylactic.....	1,925 vials
Typhoid H Antigen 2 cc.....	100 vials
Typhoid Mixed Vaccine 2 cc.....	60 vials
Typhoid Mixed Vaccine 10 cc.....	20 vials

## ARSPHENAMINES PURCHASED

Bismarsen	.20 gram.....	8,500 ampoules
Mapharsen 1 dose amps.	.04 gram.....	150 ampoules
Mapharsen 10 dose amps.	.04 gram.....	50 ampoules
Mapharsen 1 dose amps.	.06 gram.....	325 ampoules
Mapharsen 10 dose amps.	.06 gram.....	50 ampoules
Neo arsphenamine	.30 gram.....	1,500 ampoules
Neo arsphenamine	.45 gram.....	700 ampoules
Neo arsphenamine	.60 gram.....	1,100 ampoules
Neo arsphenamine	3.00 gram.....	5,000 ampoules
Sulpharsphenamine	.20 gram.....	500 ampoules
Tryparsamide	1.00 gram.....	60 ampoules
Tryparsamide	2.00 gram.....	10 ampoules
Tryparsamide	3.00 gram.....	100 ampoules
Tryparsamide	50.00 gram.....	60 bottles

## INSULIN PURCHASED

Insulin	U-20-10 cc.....	310 vials
Insulin	U-40-10 cc.....	1,760 vials
Insulin	U-80-10 cc.....	10 vials
Protamine Zinc Insulin	U-40-10 cc.....	750 vials
Zinc Crystalline Insulin	U-40-10 cc.....	970 vials

Respectfully submitted,

A. P. LAUVE

Chief Pharmacist

APL.J.

## REPORT OF DIETARY DEPARTMENT

SISTER EUPHEMIA Director and Administrative Dietitian	BERNIECE OVERTON Dietitian Dibert Tuberculosis Unit
MILDRED REWERTS Assistant Administrative Dietitian	OUIDA MOORE Therapeutic Dietitian and Instructor in Nutrition

### WARD DIETITIANS

LOTTIE BENEDICK, Supervisor

AGNES BLAZEK	ANNA MARGARET LUTZ
MARLE CINCOSKI	MARJORIE MCGAHEY
CONSTANCE HAYES	MADGE MYERS
ISABELLA HUMPHRIES	MARY ROONEY
WILMA WENZEL	

To the Board of Administrators and Doctor Roy W. Wright, Director, Charity Hospital of Louisiana at New Orleans.

Gentlemen:

The Annual Report of the Dietary Department for the fiscal year beginning July 1, 1939, and ending June 30, 1940, is respectfully presented:

### REPORT OF ACTIVITIES

The past year has been a history-making one as far as the Dietary Department is concerned—since it marks for us the complete break from the old and the beginning of the new department. With careful foresight, plans were laid in order that the department might really take its place as a practical and scientific unit in the new Hospital. The staff was increased, plans and systems were tried and changed, and tried again. The year 1940 finds the department alert, functioning well, and steadily advancing toward its goal. The following résumé of the Dietitians' duties, will give some idea of staff activities:

The Administrative Assistant helps as far as possible with all administrative problems. She has charge of all personnel, makes menus, supervises food preparation in the Main Kitchen, and food service in six dining rooms. Some idea of the size of the administrative problem is gained from the statement that between 10,000 and 12,000 meals are served from the kitchen daily. Approximately 1,850 personnel (doctors, nurses, and employees) are served at the noon meal alone.

The Diet Kitchen Assistant has charge of the preparation of all special diets which require foods different from the regular—that is, low fats, diabetics, and salt free foods. As rapidly as possible the serving of these special diets is being shifted to the ward pantries, and the Diet Kitchen is being used for special nourishments, necessary for individual patients. Diet Kitchen trays are set up and delivered to patients throughout the house. The Diet Kitchen Dietitian also conducts classes for the student nurses in Nutrition and Diet Therapy. Student nurses spend more than a month in this service, applying the theories learned in their classes.

The Dietary Department assumed complete control of the food service in the Dibert Tuberculosis Unit in April. At that time a dietitian was given charge of all therapeutic and general diets,

a service to which the Dietary Department has heretofore been unable to give supervision.

Ward Dietitians supervise the service of all regular trays on the floor pantries, and all special diets not served by the Diet Kitchen. These include high and low caloric, salt poors, low residues, ulcer management, softs, liquids, et cetera. Trays are sent out from the pantries systematically for each ward, and special trays are carefully marked to avoid error. Each dietitian endeavors to keep well informed concerning the condition of the patient, and to work with the doctor and nurses in speeding recovery. Each floor pantry is a unit in itself, and the dietitian guards carefully against waste or misuse of foods on her floor, and is also careful to see that trays are attractively prepared. Such checking would be impossible without her.

The Formula Room is supervised each morning by one of the Ward Dietitians. She teaches student nurses to make formulae and understand their use, and works with the doctors to maintain high nutrition standards for infants.

The Diabetic Clinic is also in charge of a Ward Dietitian. She instructs clinic patients according to doctors' orders and helps them with the tremendous task of adjusting diet orders to financial and physical problems at home.

A total of 3,908,519 meals, including 156,929 special diets, were served by the department this year an increase of 715,911 meals over the year 1938-1939. This is an average increase of 1,962 meals served daily.

The control of meals by meal tickets, begun May 1, is a definite accomplishment; however, there are certain disadvantages to this procedure, and the situation should be given careful study, due to the fact that accompanying raises in salary were not effective at the time of the meal reduction.

The department anticipates another successful year, when established systems may be perfected, and when we may establish some much needed systems of control, not possible until now. We hope to increase our staff so that the wards may be better covered and full time may be given to clinic service. Five dietitians would be necessary to handle this work adequately. We hope to continue the stabilization of our employees so that every detail of our system will be sound, and to further improve patient meals, so that they may be an example to be followed by the patient at home.

The following comparison of figures is indicative of the work that has been done in the past ten years, and since vitamins, proteins, and minerals, are the most costly foodstuffs, it is self-explanatory as to the rise in the per capita meal cost:

## Charity Hospital Diet

	*Standard	1931	1935	1940
Calcium	.68 grams	.26 grams	.461 grams	.856 grams
Phosphorous	1.32 "	.50 "	.586 "	1.449 "
Iron	.0150 "	.00448 "	.008 "	.0119 "
Calories	2000	900-1000	1250	1945
Vitamins	Adequate	Very poor	Poor	Good
Protein	75 grams	32 grams	45 grams	55 grams

\*Accepted Standards for Normal Adult Diet (Rose)

Raw Food cost per capita per meal	1931	1935	1940
	.06 approx.	.07	.0925

### RECOMMENDATIONS

An adequate budget that will enable the Department to continue the work so well commenced this past year, is again strongly recommended. If staff or patient count is increased and more meals are served, an increase in budget should be allowed on the basis of each meal served.

A Formula Room and a Nurses' Food Laboratory should be equipped. Neither of these units were planned or provided in the New Hospital, and they are both required, if we are to maintain standards in Nursing Education. The installation of these units will cost approximately \$5,000.00.

### APPRECIATION

We are grateful to our Director, and to the two Assistant Directors, for their efforts in our behalf this past year. Gratitude is also extended to the Members of the Board, Sisters, Doctors, Nurses, and all Departments for their cooperation, interest, and support.

Respectfully submitted,

SISTER EUPHEMIA,

Director, Dietary Department

## REPORT OF CONTAGIOUS UNIT

July 1939 to June 1940

DISEASES	CASES ADMITTED	DISCHARGED		DESERTED		DEATHS	
		WHITE	COL.	WHITE	COL.	WHITE	COL.
Chicken Pox.....	143	58	78	6	4	1	
Diphtheria.....	121	53	49	5	3		3
Encephalitis.....	6	4	1			1	
Erysipelas.....	75	61	7	3		2	
Eye Cases.....	120	26	72	4	3	1	4
Hansen's Disease.....	20	10	1	1	1		
Lues.....	402	67	292	10	14	1	3
Measles.....	133	36	102	2	1	2	
Meningitis.....	70	18	12		2	24	27
Mumps.....	47	18	29	2			
Pertussis.....	90	25	50	6	1	3	5
Poliomyelitis.....	6	3	1			1	
Rabies.....	1					1	
Sodoku (Rat Bite Fever).....	1	1					
Scarlet Fever.....	64	46	11	5	1		
Strep. S. T.....	99	55	47	9	1		
Tracheotomies.....	31	10	3	4		7	5
Tuleramia.....	28	12	7	5	1		2
Typhoid.....	107	41	30	1	1	7	3
Typhus Fever.....	17	12	2	2			
Tuberculosis.....	150	78	40	15	2	5	6
Vaginitis.....	38	13	20	1	2		
Vincent's Ang.....	71	30	31	4	2	1	1
Suspected of contagious diseases.....	405	220	132	31	7	15	7
TOTAL.....	2,245	897	1017	116	46	72	66

S. FABREGAS, R. N., B. S.  
Supervisor, Contagious Unit.



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