

1945

APPLICATION FOR INSANITY INQUEST

TO THE JUDGE OF THE ^{CIRCUIT} ~~SUPREME~~ COURT OF Adams County, Indiana:

Your informant respectfully represents that one John Brothers now residing in said county, is insane and a fit subject for custody and treatment in a State Hospital for Insane, as he verily believes, and he therefore asks that necessary steps be taken to examine into his condition, as the law provides in such cases. Your informant further states that to his best knowledge and belief, the legal settlement of said John Brothers is in Indiana; that said John Brothers came to Indiana from (Born here) Nov. 22, 1884 and became a resident of Adams County. This person's places of residence for three years prior to coming to Indiana were

In making this petition, I do hereby certify that I am a relative of said John Brothers; that I am a legal resident of Adams County, and that my address is 515 Indiana St., Decatur, Ind. In case of emergency, notify Charles Brothers (brother) Telephone 13123 Telegraph station Western Union

PERSONAL HISTORY

Of John Brothers Born (Month) November (Day) 22 (Year) 1884 Place Adams Co., Ind. Color white Sex M. Married Single x Widowed Divorced Separated IF A WOMAN: Is she pregnant? Number of children borne Present age of youngest Has she passed menopause? Birthplace of father Tuscarawas Co., Ohio Birthplace of mother Adams Co., Pa. If person is of foreign birth, give date of entry into the United States Steamship line Steamship If of foreign birth, is person naturalized? Education: None Reads only Reads and writes Common school x High school College Religion Protestant Occupation Carpenter Where last employed and how long? Estate: Value \$470.00 Nature Real estate, personal Guardian: Name None Address

HISTORY OF INSANITY

How long have you known this person? 70 years Have you known this person intimately? Yes When was the first sign of insanity observed by you? Dec. 13, 1949 What was the first sign of insanity observed by you? Inability to concentrate, extremely nervous Was the present attack gradual or sudden in its onset? sudden State what leads you to believe this person is insane Inability to concentrate, extremely nervous, morbid tendency What moral deficiencies have been shown? Refuses to do anything but a few habitual tasks. What was the mental and moral disposition in health? Good Number of previous attacks of mental disorder? None Where, when and how long? Has this person been a patient in any hospital for insane? No If so, give particulars On Jan. 13, 1949, he fell from a floor to a basement and suffered a skull fracture and broken vertebra. Has this person suffered serious physical injury? Yes State when and of what nature In 1917 he underwent a kidney removal operation & had neck glands removed. Later he underwent an appendectomy operation. Has this person suffered any great mental shock or strain? None to my knowledge (1945 he underwent double hernia operation. Has this person required feeding, seclusion or restraint? No Explain fully Has this person been addicted to any drugs? No Explain fully (Answer yes or no.) Is person paralytic? No Violent? No Destructive? No Excited? No Depressed? Yes Homicidal? No Suicidal? No Is there any physical defect or deformity? No Positive? Has person ever suffered from syphilis? No Has there been a Wasserman test? No Negative? Does person indulge or has person indulged in any venereal excess? No Is person epileptic? No Was person feeble-minded in childhood? No

FAMILY HISTORY

Give name and address of following relatives. (If dead, state cause of death and age at death.)

	NAME	ADDRESS	IF DEAD	
			Cause	Age at Death
Father	Oscar Brothers		Cancer	73
Mother (Maiden Name)	Sara Helm		Pneumonia	68
Father's father	Wm. Brothers		Old age	89
Father's mother	Kathryn May		Old age	88
Mother's father	Jacob Helm		Old age	89
Mother's mother				
Brother	Brady Brothers		Died in infancy	
	Charles Brothers	Decatur, Indiana		
Sister	Cora Brothers		Died in infancy	
Sister	Alverda McIntosh		Accident	
	Lucy Shell	Decatur, Indiana		
	Minnie Venis	Decatur, Ind.		
	Rose Thatcher	Fort Wayne, Ind.	Cancer	75
	Katy Daniels	Rivarre, Ind.		

Which of person's parents, grandparents, brothers, sisters, uncles or aunts, if any (give name) ever had the following diseases:

Insanity	None	Epilepsy	None
Spasms	None	Fainting spells	None
Nervous prostration	None	Hysteria	None
Feeble-mindedness	None	Tuberculosis	None
Syphilis	None		

Was either of the person's parents or grandparents intemperate in the use of alcohol? None

Was either of person's parents or grandparents addicted to the use of opium, cocaine or other narcotics? No

The statement of G. J. Kohne M. D., the attending physician, is filed herewith and made a part hereof.

The undersigned citizen of said county, upon oath, declares that the foregoing allegation, personal history, family history and history of persons's insanity, are true to the best of his knowledge and belief.

Subscribed and sworn to before me this 14 day of February 19 50
 CHARLES W. BROTHERS
 EDWARD F. JABERG
 XXXXXXXX County Clerk

STATEMENT OF ATTENDING PHYSICIAN

I, G. J. Kohne M. D., of Decatur, Indiana in the County of Adams Indiana, do hereby certify that I am licensed to practice medicine in the State of Indiana; that on the 10 day of Feb. 19 50 I did carefully and personally examine John Brothers and believe he to be suffering from mental disease, and I am of the opinion that he is a proper person for admission to a State Hospital. I have observed the following facts regarding his mental and physical condition:
 Failure to concentrate; Extremely nervous and anxious. Acts abnormally about home, constantly working about his stove.

I further certify that patient is free from any contagious disease and from vermin.

Subscribed and sworn to before me this 14 day of February 19 50
 G. J. KOHNE M. D.
 EDWARD F. JABERG
 XXXXXXXX Clerk Adams C. C.

VACCINATION

This is to certify that the said John Brothers has been vaccinated for smallpox by myself, or by another physician, to my positive knowledge within 60 days of this date.
 Date 2/14 1950
 G. J. KOHNE M. D.

STATEMENT OF MEDICAL EXAMINER

I, H. F. Zwick M. D., of Decatur in the County of Adams Indiana, do hereby certify that I am duly licensed to practice medicine in Indiana; that I am not related by consanguinity or marriage to John Brothers of said County, who is alleged to be insane and whom I have carefully and personally examined this 19th day of Feb. 19 50; that I am of the opinion that he is mentally ill and is a proper person for detention, care and treatment in a State Hospital; and that I have formed my opinion that he is mentally ill from the following facts observed by me. (Describe physical and mental conditions, appearance and behavior of patient.) Restless - looks anxious and depressed. Rather well oriented. States that he gets very depressed about the future and worries about it all the time - cannot concentrate on cooking and household tasks because of anxiety. This seems to be a definite anxiety neurosis which might be helped by therapy.

I have also received the following information from others relative to the patient's condition:
Has been very nervous and anxious - depressed.

H. P. ZWICK M. D.

Subscribed and sworn to before me this 21 day of February 19 50

EDWARD P. JABERG
~~Notary Public~~ Clerk
Adams C.C.

STATEMENT OF MEDICAL EXAMINER

I, J.M. Burk M.D., of Decatur in the County of Adams Indiana, do hereby certify that I am duly licensed to practice medicine in Indiana; that I am not related, by consanguinity or marriage, to John Brothers of said County, who is alleged to be insane, and whom I have carefully and personally examined this 19 day of Feb. 19 50; that I am of the opinion that he is mentally ill and is a proper person for detention, care and treatment in a State Hospital; and that I have formed my opinion that he is mentally ill from the following facts observed by me. (Describe physical and mental conditions, appearance and behavior of patient.) Very depressed and worried. Cannot talk without becoming fearful. Cries easily, wonders what will become of him. Unable to concentrate. Realizes he is ill and is willing to undergo treatment in order to regain his health. Definitely an anxiety neurosis.

I have also received the following information from others relative to the patient's condition:
Very agitated and nervous all the time.

J.M. BURK M. D.

Subscribed and sworn to before me this 21 day of February 19 50

EDWARD P. JABERG
~~Notary Public~~ Clerk
Adams C.C.

JUDGE'S ORDER OF COMMITMENT

In the matter of the application for the commitment of John Brothers

to the Richmond State Hospital:

Comes now Charles Brothers who filed application for the commitment of John Brothers to the Richmond State Hospital, alleging therein that said John Brothers is a resident of Adams County and has his legal settlement in the State of Indiana, and is insane. And having read such application and heard such other evidence as was deemed necessary to a full investigation of the facts stated in such application, I Myles F. Parrish Judge of the Circuit Superior Court of the County of Adams Indiana, do hereby find and determine that the said John Brothers is insane and is in need of hospital care, and do hereby order him committed to the Richmond State Hospital; and this shall be sufficient warrant and authority for his admission, confinement and detention for care and treatment in said hospital until he shall be restored to health, or removed or discharged according to law. And the clerk of this court is hereby directed to apply forthwith to the superintendent of the Richmond (Easthaven) State Hospital for the admission of the said John Brothers and to transmit with said application to said superintendent for his information, copies of all statements and certificates submitted, and to certify thereto under seal of this court.

MYLES F. PARRISH
Judge of the Adams Circuit Court

STATE OF INDIANA

ADAMS COUNTY } SS:
I, Edward F. Jaberg Clerk of the Circuit Court, and ex-officio Clerk of the Superior Court of said county, do hereby certify that the foregoing is a true copy of the application, including statement of the attending physician, for the commitment of John Brothers to the Richmond State Hospital; and the statements of the two medical examiners appointed by the court to examine said person, and the court's order of commitment in said matter.

In witness whereof, I hereunto set my hand and fix the seal of said court, this 27 day of February 1950

[SEAL]

EDWARD P. JABERG Clerk

ACCEPTANCE OF APPLICATION

Transcripts of all the foregoing statements and certificates duly certified under the seal of the court were transmitted to the Superintendent State Hospital together with application for h admission as a patient in said hospital and afterwards, to wit: On the day of 19 , an answer was received as follows:

STATE HOSPITAL 19

To the Clerk of the Court, County, Indiana:

The receipt of a transcript of the proceedings in the matter of the inquest as to the insanity of with application for the admission of said person into this Hospital, is hereby respectfully acknowledged. According to the provisions of an Act Concerning Insanity Inquests, etc., approved March 4th, 1927, the application is

M. D. Medical Superintendent

ORDER OF COURT

The receipt of the acceptance of the application for the admission of State Hospital, as a patient was referred to the Judge of to the Court of County, Indiana, and being fully advised he made an order directing that they so desire; and if they, or any of them, do not so desire, by a suitable attendant, or by the County Sheriff, together with assistants and a female attendant, if the patient be a female, as required by law and that due return be made of the complete execution of this order. Witness my hand and the seal of Court, County, this day of 19 St. Indiana. P. O. Address of Patient Clerk

SUPERINTENDENT'S RECEIPT

STATE HOSPITAL

RECEIVED, this day of A. D. 19 the patient named in the above order of court

M. D. Medical Superintendent

RETURN ON COMMITMENT

CAME TO HAND and committing to the 19 , and served by conveying the within named as shown by the Superintendent's receipt hereon endorsed this day of State Hospital, 19

ORDER OF DISCHARGE

STATE HOSPITAL

Indiana 19

To the Clerk of the Court, County, Indiana:

According to the provisions of an Act Concerning Insanity Inquests, etc., approved March 4th, 1927, the proper authority has this day discharged of County, Indiana, heretofore an inmate of this Hospital; and you are hereby respectfully requested to cause removal to said County, agreeable to said Act.

PROVIDED, That said removal has not otherwise been accomplished, as herein noted.

N. B.

Very respectfully,

M. D. Medical Superintendent

ORDER FOR PATIENT'S RETURN

STATE OF INDIANA, COUNTY, ss:

To the Sheriff of County, Greeting:

WHEREAS, the proper authority has directed that a patient in the State Hospital, from this County, be removed from said Hospital. You are therefore hereby commanded forthwith to remove said patient and return to Township, in this County.

WITNESS, my hand and the seal of the Court, this day of Clerk

A. D. 19

SHERIFF'S RETURN ON ORDER FOR PATIENT'S RETURN

CAME TO HAND 19 , and duly served same by removing said patient to Township, in said County.

This 19 Sheriff County