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HISTORICAL
SKETCH

1903



THE
BOSTON
FLOATING
HOSPITAL

HISTORICAL SKETCH
OF THE
ORIGIN AND DEVELOPMENT
OF
THE BOSTON FLOATING HOSPITAL



BOSTON
THE BOSTON FLOATING HOSPITAL, (INCORPORATED)

THE BOSTON FLOATING HOSPITAL, 1903

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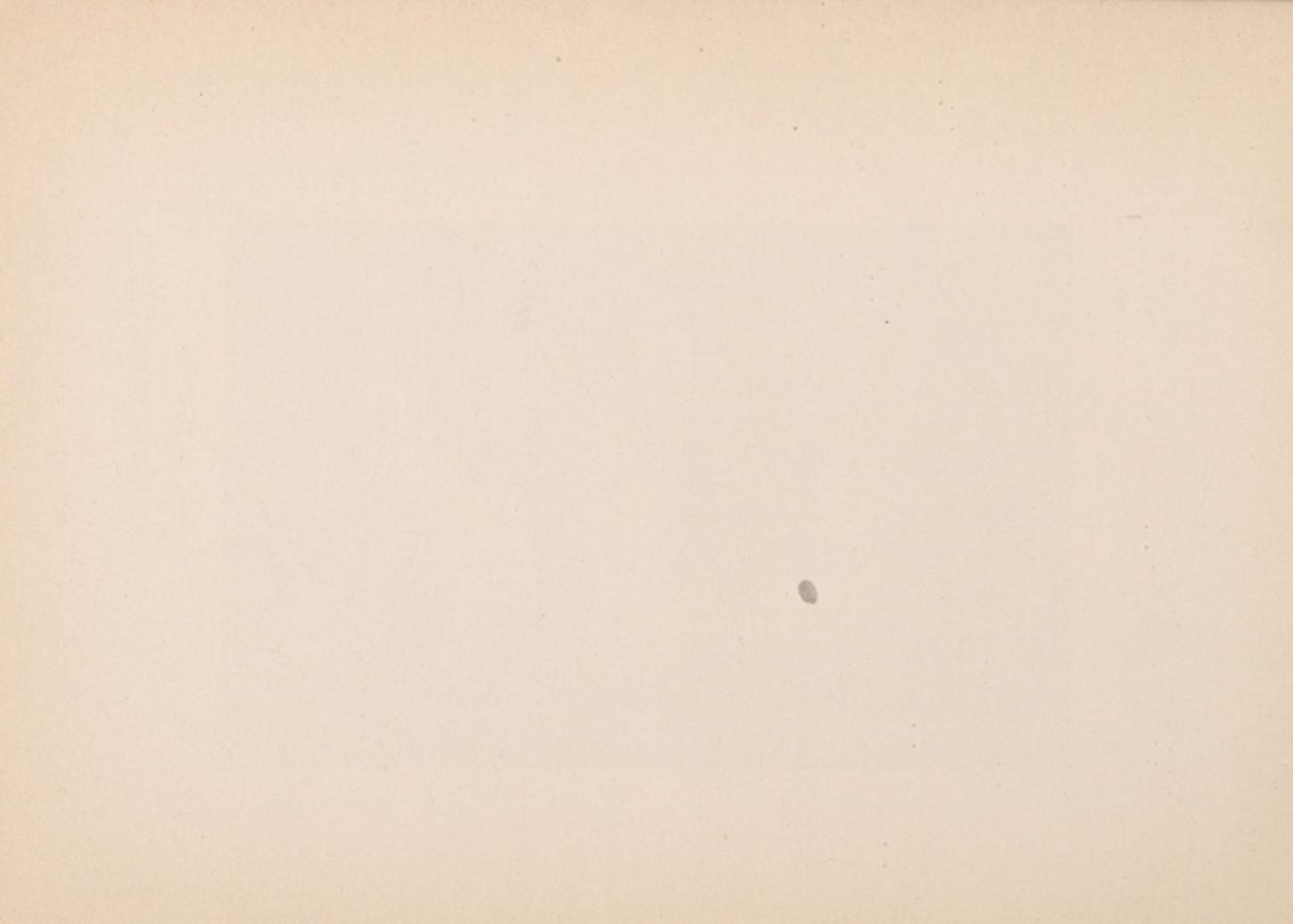
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FLOATING HOSPITAL, NO. ONE.



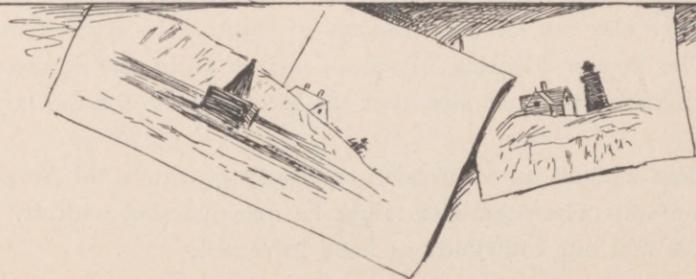
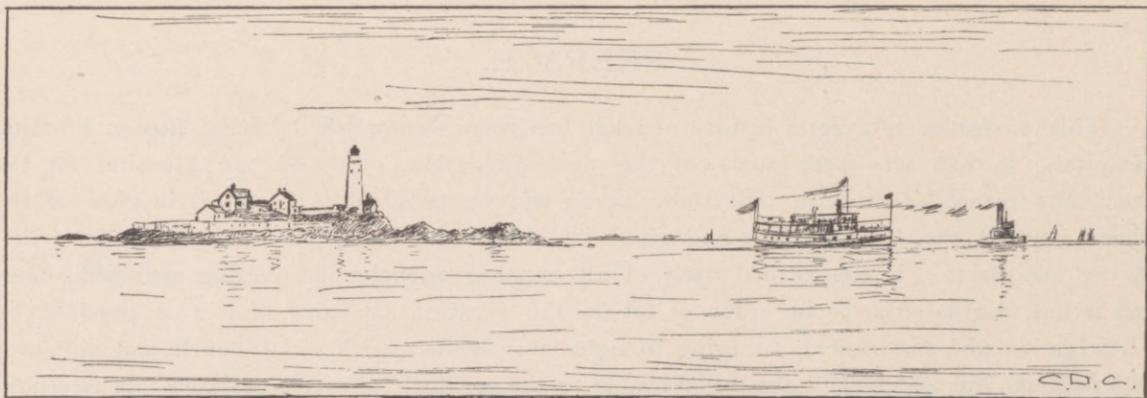
FLOATING HOSPITAL, NO. ONE.



PREFACE.

This pamphlet is a brief history of what has been accomplished by the Boston Floating Hospital. It also sets forth some of the more important needs of the Hospital for the immediate future. Our faith that these needs will be supplied is justified, in view of the liberal support the Hospital has had since its inception. It has become peculiarly a life-saving institution. It has availed itself of all existing agencies for treating sick little ones, and it has originated some in order to secure the greatest efficiency, but it is possible, by investigation and experiment, to bring to light new means which shall benefit not only our own patients, but which shall also be available to the medical fraternity at large. It is speaking within bounds to say that nowhere else can summer diseases of children be studied under as favorable circumstances as on The Boston Floating Hospital, and it is in the interest of medical science, as well as of suffering infantile humanity, that the plea is made for the largest possible support of our work.

This preface would be incomplete without an expression of hearty gratitude to the press for making known our work to thousands who otherwise might be unacquainted with it. As a result, we have gained new friends and our contributions have increased.



HARBOR LIGHTS.

THE BOSTON FLOATING HOSPITAL.

THE institution known as the Boston Floating Hospital had its origin as follows: While returning to his out-of-town home, after a summer day's work that had extended far into the evening, the founder of this Hospital—the Rev. Rufus B. Tobey—witnessed some sights and had experience of some situations that made a deep impression upon him. These sights and experiences had to do with mothers, adult daughters and young girls, who were accompanied by, or surrounded with, little ones, and the methods employed by these guardians to secure for the baby specimens of humanity the best attainable conditions for withstanding the heat.

On this occasion South Boston Bridge—a typical locality as it then existed in illustration of the evening practices of this class of the city population—furnished an attractive promenade and resort for mothers with children in arms, or with the little ones huddled together in such baby carriages as could be secured for the purpose. The endless procession thus made up drifted backwards and forwards for hours successively, while the curbing of the sidewalks and the angles and broken outlines of the highway were crowded with individuals and groups illustrating with every rod of the way the fact that the women and children of countless households had temporarily deserted their homes, while the “men folks” were seeking in their own way, and in far different localities, the freedom from in-door constraints which these more restricted members of the family could only pursue in the manner thus outlined. Observation and inquiry soon evidenced the fact that it was not until midnight that these localities were cleared of their restless occupants, and

mothers, daughters and babies had retired to their homes, where the heat was sweltering and the oppressive air was charged with polluting and death-dealing influences, certain to "get in their work" before the remaining hours of the night were fully spent.

Being a practical man, and especially along lines similar to that to which his attention was thus attracted, Mr. Tobey gave himself up to a close consideration of the situation, a consideration that included investigation, pertinent inquiry and study, with a view to definite action in the premises. How had this matter of infant suffering in summer time been estimated in the past? How great was the need of helpful planning and uplifting performance in this particular department of human misery? Question after question asserted itself with regard to the whole subject when once the probing had begun; and it is only fair to state that speedily a complete case was set forth in order and definite action could be planned in consonance therewith.

THE DEMANDS OF THE SITUATION.

The official reports of the Board of Health of Boston at this time (1893) showed that nearly three times as many deaths took place among children under five years of age in July and August of each year as in June, or other of the summer months; and that consequently these two summer months called for more particular consideration, with regard to remedial or palliative measures, than did any others of the season. Physicians of the city who were consulted were in complete agreement as to the wonderful effects of sea air upon infants and young children, and especially when from any cause these babies were ailing, or threatened by summer diseases. It was found to be a common practice with many physicians to send mothers with infants thus endangered upon daily jaunts in the Marine Park, or some similar

“open” bordering upon salt water, or to any available place where these benefits could be obtained.

In short, no great time was required in reaching the conclusions that the months of July and August comprised the period within which the most urgent demand for the amelioration of the physical condition of the baby population of this city existed; that the bringing of the sick of this class within the influence of sea air had been fully recognized by the most competent authorities as among the most beneficent agencies for their relief; and that, so far as methods are concerned, no plan offered more certain or more effectual results than to take the sick babies, with their mothers and doctors, directly out upon the ocean or bay, for longer or shorter periods, reaching as many as possible of the little sufferers while the summer months most fatal to them continued. This opened up a new phase of the matter, bringing into connection with it a system of benevolence and practical philanthropy which, indeed, must prove the “life and soul” of the enterprise from perhaps the most important standpoint.

THE ENTERPRISE TAKES DEFINITE SHAPE.

The existence of a Floating Hospital in New York became known, and examination of its work and results convinced Mr. Tobey of the need and possibilities of a like institution in Boston; and in the spring of 1894 a proposition to attempt the experiment in Boston received the indorsement of the Monday Evening Club. A single trip was planned. It was due largely to the encouragement of Rev. E. E. Hale and Dr. Francis H. Brown that this first effort was made; and it was confidently hoped that the Seashore Home Corporation, of which both these gentlemen were members, would assume the work,—a hope that had no fruition

at that time or afterwards. Meanwhile, money sufficient for the estimated expense of five trips had been contributed, and Mr. Tobey decided to give the work a thorough trial.

When one looks back upon these beginnings, and at the discouragements and difficulties which attended efforts of the summer of 1894, one wonders that the Boston Floating Hospital enterprise did not meet with an early death. Of course there were certain features of the New York work which could be copied; but the managers there had every necessary appliance at their disposal, while for the Boston experiment only a barge used for excursion purposes and for moonlight and Sunday outings could be hired; and before it could be made available for hospital uses every belonging of an excursion boat must be removed and the barge prepared for the reception of hospital furniture. Thus in the morning hammocks were swung, cots were placed in position, and clothing for the children and apparatus for cooking food and sterilizing milk were taken aboard, all of which appliances had to be removed on the evening of the same day.

So much for the inauguration of the movement in 1894. The first trip of the season was made July 25. Tickets for the admission of patients were sent to the agents of the Associated Charities, the dispensaries, the hospitals, and many of the physicians of the city. These were distributed to the mothers of sick babies; and, signed by a physician, entitled the baby and mother to one trip. The rule was early adopted that a well child might be brought with the sick one, if it could not be otherwise cared for. No distinction of nationality or creed was made. These conditions have remained unaltered to the present time.

The mother, having obtained a card of admission bearing the certificate of a physician that the child is sick, but has no contagious disease, presents this card to the inspector at the gang-plank. Her bag, bundle or package is examined to see that no contraband article



THE DAILY QUEST FOR HEALTH.

of food or drink is brought on board. The instruction is explicit that no food of any description is to be brought, this being provided by the Hospital. In spite of this prohibition, in the earlier years of this enterprise the most injurious foods, and even intoxicating liquors, were seized and confiscated. Passing the inspector, the mother goes on board the barge, where she is met by a doctor and nurse, who satisfy themselves as to the eligibility of the patient, and assign the babe to its proper department. There the child is placed under the care of the physician and nurse who are to be responsible for its welfare throughout its stay in the Hospital. Later doctors and nurses were detailed to do the most of this work on the wharf before starting.

THE ENTERPRISE FAIRLY INAUGURATED.

On these trips the work was mainly done by medical students under proper supervision. Only a head nurse and an assistant were employed during this first season, and for the second season also, although there were a number of volunteers from the order of King's Daughters and kindred organizations.

Within this season 1,100 children were given the benefit of a day's outing and medical treatment on the waters of Boston Harbor. A large number of these cases showed marked improvement. Doctors, nurses, and the few visitors who were allowed to participate in the trips, were unanimous in praise of the undertaking and its visible outcome; and throughout the following fall, winter and spring months there came to the managers letters of gratitude, encouragement, inquiry, and, best of all, communications giving and promising financial support for the work of the second season. In fact, the two largest contributions to the

work in 1894 were based on the record of the first three trips of that season, and were received when the summer was too far advanced to make additional trips. When the results of the work were summed up it seemed probable that The Boston Floating Hospital had come to stay. One thing which pointed in this direction was a balance on hand of upwards of \$700.

The Hospital was subject to the same limitations throughout the season of 1895 as in the previous year. The experiences of the first season were utilized in a re-organization of the work; and its financial condition, present and prospective, warranted provision for the making of thirteen trips, the first taking place on July 12, affording members of the International Christian Endeavor Convention, which met in Boston that year, an opportunity to make its acquaintance.

And now the Seashore Home Corporation felt compelled to decline the adoption of the work, but promised financial assistance. Dr. Samuel Breck consented to act as superintendent of the medical department, and the staff included members of the Boston Dispensary force, as well as other physicians, all of whom gave valuable service. One thousand four hundred and seventy-eight sick children were carried this season, representing 937 new cases, covering almost the entire range of diseases affecting children; and a total of 3,500 persons received the benefits of the work, as against 1,800 for the previous year.

When this season closed the wisdom of making the Floating Hospital a permanent feature in Boston's philanthropies had been settled beyond doubt; and the annual report for 1895 presents the first suggestion of the ownership of the barge with this end in view.

PROGRESS IN GOOD DIRECTIONS.

In the spring of 1896 connection was effected with the Ten Times One Society, later known as the Lend-a-Hand Society, by which the Hospital obtained the advantages of incor-

poration. The season opened with a complete re-organization, including a board of directors, a medical staff, two permanent nurses, and a corps of volunteers representing the best trained nurses in the city. The patients were classified, the more serious cases being assigned to the "Sick Ward," the average cases to the "Middle Ward," and those mildly afflicted to the upper deck. Miss L. A. Wilber was placed in charge of the main ward. She has continued with the Hospital ever since, and is now Superintendent of Nurses. A Modified Milk Department was established. Food and medicines were distributed to the mothers and children throughout the Hospital by assistants assigned to this work under the direction of Mr. John R. Anderson. An inspector of supplies was appointed. Last, but not least, a kindergarten was established for the teaching and entertainment of the children.

The statistical report of the operations of the Hospital for this year shows 1,558 treatments of 895 patients for about 50 diseases. Only three deaths occurred, and the medical staff reported "no apparent benefit" in only 55 cases. Six of the cities and towns included in Greater Boston sent patients; and a total of 3,546 persons received the benefits of the work of the 13 trips made within the season.

The year 1896 also marks the inauguration of the "Named Days," the opening trip, July 10, being named by Mr. B. C. Clark, one of the earliest and most constant friends of the enterprise. This feature of the work soon became a favorite, and needs no explanation here.

THE TEACHINGS OF EXPERIENCE.

From the first it had been evident that the barge used as a hospital should belong to the Hospital enterprise, and be completely under the control of the Hospital management.

Contributions were solicited for its purchase; and with the advent of the summer of 1897 this had been accomplished. Upon its transfer the barge was refitted according to plans and under the direction of Mr. W. H. Brainerd, architect, and equipped to care for 200 children. Bathrooms for hot and cold salt-water baths were constructed, and many valuable additions to the equipment and appliances of the wards and decks were made. A room for surgical operations was fitted up, experience having shown that occasional operations in this department were necessary, and Wards A, B, C and D were established. The feature of Memorial Beds was introduced within this season; and before its close 21 beds had thus been set apart. Upon payment of \$100 any person might endow a bed upon this Hospital and name it. Or, by the payment of a like amount, one might name any individual trip of a season; and six of the trips of this year were thus named. Owing to increased expenses, the cost of named days and beds must necessarily be larger when the new boat is put in commission.

Return checks were now given to patients requiring more than one day's treatment; and in the more serious cases patients were kept on board over night with mothers, physicians and nurses in attendance.

Within this season 25 trips were made; and the augmented service enabled the Hospital to care for 771 cases, the total number of treatments being 2,018, while more than 4,600 persons received the benefits of the work. A system of house-to-house visitation was instituted and successfully carried out by the Hospital physicians, 586 calls being thus made. The number of deaths this season was six.



A DEAL MORE LOVE FOR THE BAIRNS THAN FOR THE FULL-GROWN MAN.

THE SCHEME TAKES ON NEW FEATURES.

The thought in the mind of the founder of the Floating Hospital had originally been to take day patients only upon the boat, and in process of time to secure a seaside hospital to which permanent patients might be taken. But

“The best-laid schemes o’ mice and men
Gang aft a-gley!”

While the seaside hospital was still a dream, necessity was laid upon the Floating Hospital to take care over night of two sick babies whose lives might thus be saved,—so the doctor telephoned. Already in the distribution of work for day patients an especial sick-ward had become necessary for extreme cases. This was made use of for these two wee bits of humanity. Several similar cases occurred within the summer of 1897; and with the opening of the season of 1898 it was decided to set apart this ward for permanent patients. Scarcely a fortnight had elapsed before this new class had outgrown the accommodations thus provided, and “Ward B” was at once added to the department, increasing the capacity to provision for 24 patients. As the number of permanent patients still continued to increase, six more cots were placed on the lower deck as emergency beds.

To meet the requirements of this permanent department, a larger force of physicians, nurses and other help became necessary. Within this season arrangements were made by which patients might be received on the Hospital at any hour of the day or night, except when the barge was out making a trip. The results of these forward steps have far exceeded

expectations. It must be remembered, however, that, while the permanent work appeals more strongly to many people than that for day patients, the records show that the outcome of the day system must not be underrated. Long before the enterprise attained its present efficiency many lives were undoubtedly saved through the service which the Floating Hospital rendered by its day trips. Without decreasing in the least the attractive qualities of the institution all excursion features have been eliminated from its services.

The record for this year shows 805 new child patients, 1,785 treatments, and a total of 5,191 persons cared for. The mortality for this season was 39, which at first glance would seem excessive, but in the admission of patients the worst cases were accepted in preference to those of a less serious nature; and the records show that about 17% of the number dying were practically beyond help on entrance. Indeed, of the entire number of deaths only three were of children over nine months old.

MATERIAL ADVANCES.

The year 1899 was remarkable in the history of the enterprise by reason of the advance made in several directions. The wider scope of the work evidenced the necessity for an advisory medical staff; and physicians eminent in surgery, ophthalmology, pathology, otology and mental diseases willingly consented to give their services as members of this staff. This enabled the Hospital managers to accept as patients children suffering from other diseases than those peculiar to infant life, thus extending its usefulness and indicating growth in directions not at first within the thought of its founder.

The food demonstration this year was under the direction of a specialist, and the value of this department was greatly enhanced.

With the introduction of the permanent patient system came a problem which had not before presented itself for solution. This was the devising of some method of overcoming the disastrous effects of humidity, especially noticeable while the Hospital was at its night anchorage. Next to the purchase of the barge, the most important event in the history of the Floating Hospital was the installation of what is now known as the "Atmospheric Plant," which, to quote one of our physicians, "brings October weather into dog-days." Since the adoption of the permanent patient department the good results accruing to this class of patients in the daytime on the open water were largely neutralized by the humidity of the August nights. The Visiting Staff, in their report for the season of '99, on this point say:—

"During the season of 1898, which was very severe, one of the most distressing features of the work in our wards was the disastrous results of the hot and sultry days of August. On such days a whole ward of patients would grow markedly worse, and in many cases a fatal issue could be directly referred to such changes in the weather. The work of that season made a profound impression on the minds of the medical staff. It was felt that something must be done, if possible, to counteract this evil influence.

"After much thought had been expended in the matter, it was decided feasible to install a plant for the purpose of so cooling and modifying the air of the permanent wards that our patients could be given an atmosphere of an even temperature and of a certain degree of moisture, irrespective of weather conditions outside. So far as this related to the care of the sick, it was distinctly a pioneer project, although its use in commercial enterprises dates back quite a number of years. The installation of this plant was a Herculean task from the mechanical point of view, as well as a most expensive one. In regard to the latter consideration, we felt that if Lowney & Co. could spend \$20,000 for a plant of similar character in order to

cool their chocolates, we were justified in spending a fraction of that amount in the effort to save life. After many vexatious delays, this plant has been installed, and has proved its capability of doing efficiently the work in hand."

Mr. S. F. Gardner, a graduate of the Institute of Technology, and a former student of Prof. S. Homer Woodbridge, who gave valuable assistance in the installation of the apparatus, presented a most interesting report in this connection. Following is the report of Mr. Gardner, embodied in the general report for the season of 1900:—

"Among the many benefits obtained by the patients of the Boston Floating Hospital is that derived from the Atmospheric Plant which is used to modify the air supplied to the wards. This plant illustrates the first application of the principles of refrigeration to transforming of air quality for hospital patients.

DETAILS OF THE ATMOSPHERIC PLANT.

"The object of this plant is, taking the air in its varying conditions of temperature and percentage of moisture, to reduce its relative humidity to about 50, and to raise or lower its temperature to a desirable point, which is, in a hospital ward, about 74 degrees F. The results, showing the success of the plant, can never be enumerated, as there is no doubt that a great many of the patients owe their lives to the cool and dry air furnished them when the natural air condition was to them unbearable. A few figures recorded during the season will, however, give practical evidence of the conditions of the wards during some of the extremely hot or damp days. On August 8th, 1900, when the natural air conditions were, average temperature 69 degrees F., and average relative humidity 88, the wards were maintained at an average



DISPENSING GRAINS OF HEALTH.

relative humidity of 56 and an average temperature of 75 degrees F. August 10th, natural air condition, average temperature 85 degrees; ward condition, average temperature 74 degrees F. August 14th, natural air condition, average temperature 63 degrees F., average relative humidity 77; ward condition, average temperature 74 degrees F., average relative humidity 50. August 15th, natural air condition, average temperature 70 degrees F., average relative humidity 72; ward conditions, average temperature 74 degrees F., average relative humidity 51. July 16th, natural air condition, average temperature 84 degrees F.; ward conditions, average temperature 76 degrees F. July 31st, natural air condition, average temperature 81 degrees F.; ward condition, average temperature 74 degrees F.

“The air furnished the wards is drawn, by the suction of a fan, down a duct from above the upper deck into a receiver in the hold. In this receiver is placed two series of coils, one series being connected with the brine tank, and through which circulates brine at a temperature of about 10 degrees F., and the other series being joined to an exhaust steam-pipe, enabling steam to be used for heating when necessary. The air, when entering the receiver, passes over the brine coils, and a large per cent of its moisture is condensed on the coils. This action is analogous to that observed in winter of the moisture of the air of a warm room condensing on a window-pane cooled by the outside air. Then the air passes over the steam coils, is heated to any desirable temperature, and thus forced by the fan through ducts into the wards. The quantity of air circulated is about 2,000 cubic feet per minute, which gives an average of more than 50 cubic feet per person per minute, an amount satisfactory to the most critical, and which is obtained by very few ventilating systems.

“The brine used in cooling and condensing the moisture of the air is cooled by the ammonia compression process, which will be briefly described. Power for running the 8-ton compression

refrigerating machine is furnished by a 35-horse power Corliss engine. This machine, which acts much like a pump, receives gaseous ammonia (NH_3), either from a tank when the machine is being charged, or from the cooling coil when the machine is in running condition, at a pressure of about 20 pounds per square inch, and compresses it to a pressure of about 140 pounds per square inch, the heat generated by this compression being absorbed by the water in the water jacket surrounding the compression cylinder. This compressed gas then enters a large coil, over which cool sea-water is constantly flowing, and by the cooling effect thus received, the gas is changed into a liquid state. The liquid then passes on to a receiver from which it is allowed to escape by means of an expansion valve; that is, a valve which can be regulated so that a definite quantity may be allowed to pass it, into another large coil which is situated in a tank filled with brine. The pressure in this coil is regulated by the amount of ammonia allowed to pass the expansion valve, and is kept at about 20 pounds per square inch. The liquid ammonia, which is at a pressure of 140 pounds per square inch, is thus suddenly released to a pressure of 20 pounds per square inch, and by this action is changed into its gaseous form again. It is a very well-known fact that if a moistened hand is placed in a current of warm air a sensation of coolness is felt, caused by heat being taken from the hand to facilitate the evaporation of the moisture on the hand. Just so, heat is taken from the brine surrounding the coil, in which the ammonia changes from a liquid to a gaseous state, reducing the brine temperature to about +10 degrees F. This gaseous ammonia, as before stated, is then drawn again into the machine and the cycle of operations is repeated."

INCORPORATION, ETC.

The rapid growth of the Boston Floating Hospital now rendered its incorporation a necessity. The Lend-a-Hand Society, with which the Hospital had been connected since May, 1896, recognized this fact, and transferred all its rights in the Hospital to the new corporation; and on September 23d, 1901, the Hospital was incorporated and became an independent enterprise.

The new Boston Floating Hospital corporation held its first annual meeting November 4th of this year, and elected the following officers:—

Chairman, RUFUS B. TOBEY.

Vice-Chairman, S. HOMER WOODBRIDGE.

Clerk, Treasurer and Business Manager, CHARLES G. FARWELL.

These and,

DR. SAMUEL H. DURGIN,

DR. SAMUEL BRECK,

DR. ROBERT W. HASTINGS,

J. ARTHUR BROOKS,

CHARLES W. JAYNES,

FREDERIC H. CURTISS,

JOHN R. ANDERSON, *Assistant Manager*.

} *Board of Managers.*

A decided increase in the amount of medical work marked the season. The increase in the permanent service, which must always be regarded as the most important branch of the work, was gratifying, 269 patients remaining 3,390 days on the Hospital, as against 219 remaining 2,693 days in 1900. Forty patients were refused admittance to the permanent

wards on account of lack of room, and many more were not recommended for admission from among the day patients to these wards for the same reason. "The rejection of infants really in need of our assistance is very distressing, and stimulates the already ardent desire for larger accommodations," reported the Visiting Staff. This season a pathological laboratory was added to the appliances of the Hospital,—a most valuable acquirement from a scientific and practical standpoint.

NECESSITY FOR A NEW BOAT EMPHASIZED.

For the year 1902 Mr. Tobey, Chairman of the Board of Managers, reports:—

"It would have been fatal to the work of the season of 1902 had we attempted to secure contributions for the new boat and for current expenses of the year; but we have on hand for the new boat \$8,000, with promises of \$2,000 more, about one-fifth the probable cost. This question of the new hospital, like Banquo's ghost, "will not down at bidding." Not only are we handicapped by our present small quarters, but we are absolutely crippled, and the efficiency of our work is materially checked. The present boat will not answer our purpose after another season, and we face the possibility of being compelled to omit a season's work, if by August 1st, 1903, we do not have a construction fund sufficiently large to justify us in giving a contract for the new boat.

"Of course it goes without saying that because we did not experience severe heat the past summer, contributions fell off materially. It is due to this fact that we are carrying a debt. The managers could have closed the Hospital September 1, but the calls for our service were louder during the first half of September than during any previous part of the season. Our best work was done during this half month, and let all possible emphasis be laid

upon the fact that the receipts from September 1st to September 15th, inclusive, were \$2,000 less than the expenditures. Yet, looking backward, we cannot regret that we have served suffering humanity even at such a cost."

The season of 1902 lasted just ten weeks. So rapidly did the cribs fill that on July 19, after allowing three cribs to contain two babies each, the resident physician was obliged to refuse to take another. From this date on until the middle of August cases were refused nearly every day. On August 4th there were 22 applicants for admission to the wards, of which only ten could be taken. Other days were almost as bad. Some of these babies were in desperate condition, and their rejection undoubtedly meant their death. For a week after September 4th the Hospital was again forced to refuse cases daily. In all 128 cases were refused admission. Within the season of ten weeks 272 babies were cared for in the wards,—a total of 3,517 days; that is to say, each of these babies remained in Hospital 12 9-10 days. In 1901, 269 babies remained 3,390 days; and in 1900, 216 remained 2,693 days. To those who think of the work of the Hospital as chiefly with the day patients these statements may be a revelation.

The work for day patients, however, was not meanwhile in any way neglected. A thoroughly competent and faithful externe, with excellent assistants, acting under the special direction of the resident physician, cared for 418 patients on the upper deck. They made 1,648 trips; that is, the average number of these day patients was 27. This comparatively small number of day patients is explained by the cool weather of the season. Mothers will not bring their sick babies, if they are not dangerously sick, unless the day is hot. These patients were sent by 231 different physicians, which shows how generally the work is appreciated by the medical profession.

For each year in the history of the Floating Hospital there has been a distinct advance

in some direction. This year it was in the food department, and the system was entirely revolutionized, so that the Hospital workers were enabled to test the purity of all foods given to the babies, and to so perfect the methods of preparation as to attain nearly ideal results. The freshest and best milk that could be obtained was fed to the babies free from contamination. Food was prepared fresh for each feeding, and served in bottles tagged with a ward and bed number. This food went to the wards in containers to keep the bottles warm. Thus within half an hour every one of a hundred babies could have his special formula of food at just the right temperature and in exactly the ordered quantity, and this without confusion in the wards.

METHODS AND PURPOSES.

It is not intended that the Floating Hospital shall give temporary relief alone; but also that it may be educational to those who have the care of young lives, and that poor and ignorant mothers may gain wisdom and knowledge through their temporary connection with this institution. To this end instructions are given to the mothers as a trip progresses in the process of sterilizing milk; and they are shown the best way of caring for their babies in their homes, printed cards of direction, having the same object in view, being also given. Sterilizers and bottles are sold to mothers at prices which bring them within reach of even the poorest. Children who have been patients of the Floating Hospital are not thereafter lost sight of, but are from time to time visited.

Trained nurses are on duty night and day, and both the resident physician and his assistant remain on the Hospital continually throughout the season.

The Floating Hospital has one conspicuous advantage,—that of accessibility. Parents of

children under treatment in its wards are allowed free access to their little ones at all times, and as a rule are assiduous in visiting the Hospital.

It is much to be regretted that so many infants are brought to the Hospital in practically a moribund condition, when all that can be done is to make them as comfortable as possible. Many of these cases if brought earlier would recover.

The Floating Hospital has met with a generous and kindly welcome from both rich and poor. Still, however, this institution has no endowment whatever, and is entirely dependent on voluntary contributions for its support. By the addition of its night service, the adoption of new and enlarged methods and provision, and the consequent augmentation of its staff, its expenses have, within recent years, been largely increased. It would be exceedingly pleasing to the management, and doubtless to the friends of the Hospital, could its permanency become assured through an adequate endowment. That the general public regards with great favor the working and results of this charity is sufficiently evident. That the disposition to contribute to its maintenance, sympathize with its objects, and become identified with its efforts, is constantly enlarging is equally apparent. To the multitude of friends who have already assisted in its support, the managers of the Hospital extend their warmest thanks. The event would indeed be hailed with gladness, if, in the near future, some individual, or body, would inaugurate the movement of permanently endowing this institution; and there is little doubt that once thus begun, the good work would not be stayed until full success in this direction had been attained.

The work of Mr. John R. Anderson, assistant manager, in presenting the cause of the Floating Hospital from pulpit and platform in every section of Massachusetts, has proved singularly successful in promoting the interests of the institution, and in winning contributions

for its support. Mr. Anderson never declines an invitation to visit any community or locality manifesting a desire to obtain information relative to the Hospital, its object, methods, management and conditions; and that his addresses are not only educational, but influential and persuasive, has been abundantly demonstrated within the past few years. By no other possible means could the constituencies reached by Mr. Anderson be so effectually enlightened and stirred to sympathy with regard to the Floating Hospital as is the result of his efforts; and it is often the case that his services are called for, again and again, in sections where he has before appeared in behalf of this cause.

AN OUTSIDE VIEW OF THE INSTITUTION.

“The Boston Floating Hospital is one of the most excellent charities that I have ever seen, and is worthy of every support,” said Dr. Simon Flexner of the University of Pennsylvania, who was the guest of honor on a trip of the Hospital during the past summer.

Dr. Flexner is a very distinguished physician. He is in charge of the cholera morbus serum experiments of the Rockefeller foundation, and is making a tour of the several States where this serum is being studied.

“I have never seen a Floating Hospital like it before,” he continued. “All the others I have seen take children and their mothers for an outing down the bay for the day only, while this one is equipped with permanent wards.

“Hospitals which take only day patients do a great deal of good in petty cases, or accident cases, but they are practically useless for children's diseases that require good food and watchful care.



THE STRUGGLE FOR EXISTENCE.

“The Boston Floating Hospital is equipped with day wards for transient cases and permanent wards where children can be kept in bed until their conditions are improved.

“There can be no doubt of the fact that the Hospital is the greatest blessing to children suffering with summer diseases. I am sure that many lives are saved by this unique charitable institution.

“As for the equipment and machinery of the Hospital, they are of the most superior kind. It is up-to-date, fitted with every convenience for the work, and run by a skilled corps of officials.

“As a station for the bacteriological serum experiments, it is very well adapted for the purpose. Summer diseases of children compose the majority of cases treated on the boat.

“The doctor in charge of the station has excellent chances to make practical experiments upon his patients, and the work is going along in excellent fashion.

“There is one thing, however, that the Hospital needs very quickly, and that is a new boat. The boat that they have at present, while admirably fitted for a smaller number of patients, is far too small for the number of patients that are being treated at present.

“Both permanent and transient wards are very crowded, and the work of the doctors, as well as the improvement of many of the patients, is greatly retarded by lack of space.

“Boston people ought to redouble their charitable efforts and contribute enough money for another boat. It is a noble work, and worthy of the attention of everybody.”

HOSPITAL WORK ON SUNDAY.

A member of *The Boston Herald* staff recently contributed an article on the Sunday Hospital service to that paper, from which the following is quoted:—

“The boat lay all day at Pickert's Wharf, East Boston. The first thing one notices is the Sabbath-like stillness on board. There is no more noise than in any household. The church-bells are heard in the distance, but are almost unnoticed, for on the Hospital work and worship are synonymous. Yet the labor is so arranged that nurses and physicians are given some ‘time off’ on Sunday, as in other hospitals, and this is made possible because no day patients are taken, and all the efforts of the force are confined to the permanent patients in their special wards.

“Dr. R. W. Hastings is the resident physician, and limited quarters are all he can have in this crowded boat, for a sleeping-room and for the clerical work that is necessary. He is in constant correspondence with scientists in regard to new ideas on the treatment of cases, food, etc.

“The Sunday force of nurses and medical assistants is on duty from 7.15 A. M. until 8 P. M., excepting those who have ‘time off.’ All their meals are taken on board the boat. When the day nurses begin their work they find the patients partly prepared for the day by the night nurses. At 7.30 o'clock comes their first feeding, and it is no slight task to care for 57 sick babies, some of them very ill indeed, some very feeble from illness, and others convalescent and ready to be discharged.

“After this all the patients are bathed if they are well enough, then the wards are put in order for the visiting physicians, who come over from the city to see each patient, and who spend an hour or two on board. The house doctors have had their breakfast, and are now ready for their duty. At 9.30 comes the next feeding, the food coming in bottles fresh from the food laboratory on the lower deck. Every minute of the time is employed. The babies are changed frequently and their bedding renewed. On Sunday nearly 1,000 napkins are

used. On week days, when the day patients are on board, the number is 1,500, taking 1,400 yards of gauze and 100 pounds of absorbent cotton-waste. They are destroyed after being used. On week-days many of the mothers on board assist in making them.

"Dinner is served from 12 to 1.30 o'clock on Sundays, and supper from 5 to 6 o'clock. At 8 o'clock the night force reports for duty. It consists of two senior house doctors, a night matron, two to four nurses in each ward, the night watchman, engineer, assistant in the food laboratory, scrub-woman, stewardess, three sailors. The resident physician is always on board. All the day staff sleep on shore. A meal is served to the night force at 12 o'clock. The patients are not fed as often during the night, but are encouraged to sleep. The lights are shaded, and the boat is as quiet as possible. Occasionally the silence is punctured by the sharp ring of the telephone-bell. Some anxious mother cannot sleep, and has called from the nearest drug-store at midnight to find out how her darling is passing the night, for to such watchers morning seems so long in coming, and it does not always bring welcome news.

"Another feature of Sunday is visits by physicians and students, and they are always welcome, as Sunday being a quiet day they have better opportunities to study the work. Yesterday a surgeon of the United States navy inspected the Hospital. This season Dr. Hastings has been sending reply postal-cards to the physicians who have sent patients to the boat, offering to send them reports of the cases at intervals if they so desire. This courtesy is much appreciated, and shows the wish of the Hospital to co-operate with different doctors.

"When it is a bright, warm Sunday, the boat goes out into the harbor, that the patients may have the benefit of the fresh, cool air. No day patients or guests are taken, and parents wishing to see their children are told to come to the dock at 3.30 P. M., when the boat returns. But on a wet Sunday she remains at the wharf, and they come when they can, and

there are many pathetic sights on board. Yesterday the mother of a very sick baby came on board in all the storm. One look at the pallid, pinched little face, and the hope that had buoyed her up vanished. She knew it was marked for a passage to the other world. She questioned Dr. Hastings very closely, and as gently as possible he told her he feared the end was near, but that the efforts of the nurse and doctor would not cease, but would continue to the end. She declared she could not have it die on the boat, and, though she was told it was better off there, she would not let it remain. A carriage was sent for, and she took it home with her.

“Another earlier incident shows the need of larger quarters for this work. A man and his wife came to the boat with a very sick baby, their physician telling them it was the only chance it had for its life. They neglected to find out if there was room on board, and when they arrived at the boat every bed was filled, and there was no place for their little one. Of course they were in despair, but just as they were going away, one of the assistants spoke to Dr. Hastings in a low tone. He turned to the parents, and told them there was a vacant cot. A little one had passed on, and there was room for their baby.

“But all the parents who visit the Hospital on Sunday are not grief-stricken. Often the baby is better and glad to see ‘papa and mamma,’ though they soon become so attached to the nurse who cares for them that they do not miss their mothers. Formerly the Hospital people were a good deal worried by anxious, fearful mothers whose babies were on board, and at one time it was necessary to admit them by ticket on Sunday to prevent crowding the wards, for there is hardly room enough to do the work. But they are now so confident that all is done that is possible for their babies that they have ceased to disturb the doctors and nurses by their importunities and questions.”



EYES ARE THE WINDOW OF THE SOUL.

MEMORIAL BEDS.

To January, 1900.

In Memory of May Rosevear White. Mrs. J. C. White.
Stanley V. Travis Bed. Mr. and Mrs. Charles V. Travis.
George Stanley Mansfield Bed. Mr. George S. Mansfield.
Goodrest Bed. Mrs. Nathaniel Thayer.
In Memory of a Little Boy. Anonymous.
In His Name. Miss Annie Louise Richards.
In Memory of Edward Allen Richards. Mrs. C. A. Richards.
In Memory of our Mother. Mrs. Louise K. Wilson and Miss Sarah S. Kimball.
Eliot Church, Newton, Bed. Eliot Church, Newton.
Nidulus Avis. Miss Susan C. Damon.
In Memoriam Edith Mabel Constance. Miss Leadbetter.
Benevolent Helpers' Bed. Benevolent Helpers, Harvard Church, Brookline.
In Memory of Jessie. Mrs. John F. Winch.
Lend-a-Hand Bed. Phi Alpha Lend-a-Hand Club, Allston.

In Memory of Samuel Longfellow. Miss Alice M. Longfellow.
Charles Faulkner Bed. Mrs. Eliot Hubbard.
In Memory of Catherine Earle. Mrs. J. F. Dorsey.
In Memory of Eliot B. Mayo. By his children.
In Memory of A. W. Spencer. Mrs. Josephine V. Spencer.
Sunshine Bed. Sunshine Club, Medford.
In Memoriam Whitney Davis. Miss Kate Whitney.
In Memory of a Young Mother. Anonymous.
In Memory of Winthrop Sturgis. Mrs. R. S. Sturgis.
Lend-a-Hand Club 1874 Bed. Lend-a-Hand Club 1874.
Inasmuch Bed. Inasmuch Lend-a-Hand Club, Charlestown.
First Parish S. S., Brookline, Bed.
Eliot Church, Newton, Bed No. 2. Eliot Church, Newton.
Eliot Church, Newton, Bed No. 3. Eliot Church, Newton.
In Memory of Leland Hoyt Powers. Mr. and Mrs. Leland T. Powers.

What She Could Bed. What She Could K. D.,
Dedham.
Elizabeth P. Whitney Bed. Elizabeth P. Whitney
K. D., Brighton.
In Memoriam Harriet N. Brooks. Miss Sarah
Brooks, Harwich.
John Simpkins Bed. Miss Mabel Simpkins.
In Memory of Margaret Morton Nickerson. Mrs.
Kate Morton Nickerson.
Middlesex County K. D. Bed.
Norfolk County K. D. Bed.
In Memoriam Rowena Leavitt.
Leyden Congregational S. S., Brookline, Bed.
Edward Everett Hale Bed. Lexington Lend-a-
Hand Club.
Allston-Brighton Memorial Bed. Allston-Brighton
Fresh-Air Mission
Little Workers' Bed. Little Workers, Newton Centre.
Plymouth County K. D. Bed.
In Memory of Agnes Chase Ober. Mrs. Ursula Ober-
Squires and pupils.
Suffolk County K. D. Bed.
Bridgewater C. E. Union Bed. Bridgewater C. E.
Union.
Toronto Bed. Mrs. Francis Patriarche.

Dominion Line S. S. Co. Bed, "New England."
Proceeds of Entertainment.
In Memory of Dexter C. Richards. Mrs. Dexter N.
Richards.
Emmanuel Church Guild Bed. Emmanuel Church
Guild, Boston.
Eleanor Grew Bed. Mrs. Annie C. Grew.
In Memory of Lydia Worthington Dutton. Miss
Mary M. Dutton.
In Memory of Nellie M. Clarke. Mrs. Maria Carter.
All Saints, Brookline, Bed. All Saints' Woman's
Guild, Brookline.
Eliot Church, Newton, Bed No. 4. Eliot Church,
Newton.
Eliot Church, Newton, Bed No. 5. Eliot Church,
Newton.
Dominion Line S. S. Co. Bed "Canada." Proceeds
of Entertainment.
Mt. Vernon Bed. Mt. Vernon S. S., Boston.
Anna Rockwell Smith Bed. Misses Helen Smith
and Grace Nichols.
Charles Linder Pope Bed. Mrs. Abby L. Pope.
Paul Sussman Bed. Miss Florence Wood.
John W. Leighton Bed. Mrs. A. T. Leighton.
James McAuley Bed. Captain James McAuley.

1900.

In Memory of Dr. Elisha M. White. Mrs. E. M. White.
Alonzo H. Quint Bed. Y. P. S. C. E., Allston Congregational Church.
In Memory of a Little Boy and His Mother. Anonymous.
In Memory of Alice.
Central Congregational Sunday School, Lynn, Bed.
Quincy Mansion School Bed. Pupils of Quincy Mansion School, Wollaston.
King's Daughters of Lend-a-Hand Club, Waban (Fair).
Children of West Newton Bed. Fair by Children of West Newton.
In Memory of Helen Gay Hastings. Mr. Albert Gay.
Little Helpers, Whiting Park, Watertown, Bed.

King's Daughters, Rollstone Church, Fitchburg, Bed.
Dominion Line, S. S. "Commonwealth." Passengers on first trip of the S. S. "Commonwealth."
King's Daughters, Bristol County. Bristol County Union.
St. Paul's Church in Brookline. St. Paul's Church.
James DeNormandie Bed. Anonymous.
Agnes Hoppin Grew Bed. Mrs. Edward S. Grew.
Lucy Sumner Rogers Bed. Miss Catherine L. Rogers.
In Memory of Baby James. Mrs. Fannie W. Rousmaniere.
Pemberton Bed. Guests of Hotel Pemberton.
Masconomo's Children of 1900. Children of Masconomo, Manchester.
Kenberma Bed. Guests and Summer Residents at Kenberma, Hull.

1901.

In Memory of Mother and Girard. Mrs. Blanche E. Houghton.
In Memory of Edward Wheelwright. Mrs. Edward Wheelright.
Brighthelmstone Woman's Club. Brighthelmstone Woman's Club, Brighton and Allston.

Woburn Sunshine Club. Sunshine Club, Woburn.
Robert Beverly Hale. Da Dextram Misero and Busy Bees, New South Church.
Dr. Robert W. Greenleaf. Anonymous.
Little Horace Percival Hinckley. Mrs. Sybil Hinckley.

Cantabrigia Woman's Club. Cantabrigia Woman's Club, Cambridge.

Harvard Congregational S. S. Harvard S. S., Brookline.

In Loving Memory of Albert H. Kelsey and L. Upham Kelsey. By their Grandchildren.

Children of the American Revolution. Children of the American Revolution, Cambridge.

In Memory of Maria R. Towne. Mrs. Alice N. Lincoln.

Conrad Bed. Old South S. S., Worcester.

Little Women's Industrial Club. Little Women's Industrial Club, Malden.

K. D., 1886, Needham. K. D. Circle of 1886, Needham.

In Memory of Albert H. Rhodes. Mrs. R. N. and Miss Florence N. Rhodes.

Plymouth Memorial Bed. Mrs. Julia P. Robinson and friends.

Second Parish S. S., Worcester. Second Parish S. S., Worcester.

In Memory of I. H. Farnham. Y. P. S. C. E., S.S., and friends, Wellesley.

Woman's Baptist Social Union. Woman's Baptist Social Union.

Doris Munson White Bed. Mrs. Ida C. White.

K. D. and S. S., First Parish, Hingham. K. D. and S. S., First Parish, Hingham.

Pilgrim Congregational S. S., Worcester. Pilgrim Congregational S. S., Worcester.

1902.

Lillith May Nutting Bed. Miss Lillith May Nutting. In Memory of Lydia Woodworth. Mrs. M. L. Dennison.

Rev. Albert Buell Vorse Bed. Mrs. Charlotte H. McGlashen.

Lend-a-Hand Club, Church of the Disciples, Boston. From the Club.

Rev. George Herbert Hosmer Bed. Church of the Unity, Neponset.



“TRAIN UP A CHILD IN THE WAY HE SHOULD GO.”

CONTRIBUTIONS

May be sent to Rufus B. Tobey, 505 John Hancock Building, or Charles G. Farwell, Treasurer, 505 John Hancock Building (to whom all checks may be made payable), or paid to Mr. John R. Anderson, Assistant Manager, 505 John Hancock Building, who is authorized to solicit and receive contributions.

FORM OF BEQUEST.

I bequeath to my executors the sum of.....Dollars, *in trust* to pay over the same in.....after my decease to the person who, when the same is payable, shall act as the Treasurer of the Boston Floating Hospital, Incorporated, for which payment the receipt of the Treasurer, for the time being, shall be a full and sufficient discharge.



HAIL TO THE CHIEF.

