

NORTH CAROLINA,

Burke COUNTY.

IN RE: STERILIZATION OR ASEXUALIZATION OF

BEFORE THE EUGENICS BOARD OF NORTH CAROLINA.

PETITION FOR OPERATION OF STERILIZATION OR ASEXUALIZATION

TO THE EUGENICS BOARD OF NORTH CAROLINA: GREETINGS—

Dr. John S. McKee, Jr., Superintendent

YOUR PETITIONER, State Hospital at Morganton, Morganton, N.C. having made investigation

of the case of [redacted], hereinafter designated as

the patient or inmate; and having made a study of the medical history of the said inmate of

The State Hospital at Morganton (Institution), wherein the inmate has been and is at present confined; and having made a study of the social case history of the circumstances surrounding the inmate's life relative to the likelihood of the said inmate to procreate a child or children,

AND WHEREAS, it appears to your Petitioner that (1) it is for the best interest of the mental, moral and physical improvement of the inmate that ~~he~~ (she) undergo an operation for sterilization or asexualization; (2) that it is for the public good that such inmate undergo such operation; and (3) that said inmate would be likely, unless operated upon, to procreate a child or children who would have a tendency to serious physical, mental, or nervous disease or deficiency;

NOW THEREFORE, Your Petitioner prays that an order be entered by the Eugenics Board of North Carolina requiring your Petitioner to perform, or to have performed by some competent physician or surgeon

as may be designated by the Board in such order, upon [redacted] the inmate named in this Petition, one of the operations specified in Section 1, Chapter 224, Public Laws of North Carolina, 1933, which in the discretion of the Board, shall be best suited to the interests of the said inmate or to the public good.

SIGNED: John S. McKee, Jr. Petitioner - Superintendent

This 20th day of January, 1955.

VERIFICATION

NORTH CAROLINA,

Burke COUNTY.

Dr. John S. McKee, Jr., Superintendent

State Hospital at Morganton, Morganton, N. C., the Petitioner herein, being duly sworn,

says that the foregoing and the following statements made in this Petition are true to his ~~own~~ own knowledge, except as to those matters stated upon information and belief, and as to those, he ~~thinks~~ believes it to be true.

John S. McKee, Jr. Petitioner - Superintendent

Sworn to before me, this 20th day of January, 1955.

LeRoy Bates (N. P.; J.P.; or Clerk Superior Court)

(SEAL) My commission expires November 13, 1956.

PERSONAL AND FAMILY HISTORY

Name [REDACTED] Age 36 Race White Sex Female
 Home Address [REDACTED] County of Cabarrus
 Present location State Hospital at Morganton, N. C.
 Date of Birth [REDACTED] Place of Birth [REDACTED]
 Legitimate Yes Illegitimate _____
 Marital Status: Single _____ Married X Widowed _____ Separated _____ Divorced _____
 Education: Illiterate _____ Reads _____ Writes _____ Public School grade completed High School
 College work _____

GIVE NAMES, AGES AND PRESENT LOCATION OF CHILDREN OF PATIENT (INMATE)

NAME	AGE	PRESENT LOCATION
Miscarriage--19 <u>[REDACTED]</u>	11-1	Stillbirth
Miscarriage--19 <u>[REDACTED]</u>	<u>[REDACTED]</u>	With father, in maternal grandparents' home.
Miscarriage--19 <u>[REDACTED]</u>		

Father's name [REDACTED] Address [REDACTED]
 If dead give: Age at death _____ Cause of death _____
 Mother's name [REDACTED] Address [REDACTED]
 If dead give: Age at death _____ Cause of death _____
 If married give: Name of husband or wife [REDACTED]
 Address [REDACTED]
 If father and mother are dead and subject is not married give: Next of kin _____
 Address _____
 Has guardian been appointed for this person? No If so give Name _____
 Address _____

INSTITUTIONAL RECORD OF PATIENT:

INSTITUTION	CAUSE	DATE ADMITTED	DATE DISCHARGED
State Hospital at Morganton	Mental Illness	<u>[REDACTED], 1954</u>	

Has patient been given mental examination? Yes If so give: Name of Examiner Dr. Taylor Vernon
 Result of examination Diagnosis: Schizophrenic Reaction, Schizo-Affective.
 If petition is granted, give name and address of physician or surgeon who will perform operation:
Dr. Yates S. Palmer, Valdese, N. C.

MEDICAL HISTORY

RECORD OF DEFECTS

Check in front of defects exhibited by patient and indicate in space after each defect if exhibited by patient's children, brothers, sisters, parents, uncles, aunts, or grandparents. If any of these persons have had institutional care and treatment, give name of institution.

Table with 2 columns: Defect Name and Description. Includes items like Mental disease, Feeble-mindedness, Epilepsy, etc. with handwritten notes and redactions.

The Eugenics Board has jurisdiction only in cases of mental disease, feeble-mindedness, and epilepsy.

What is your diagnosis of the patient's mental and physical condition? Diagnosis: Schizophrenic Reaction, Schizo-Affective. P. E. revealed no significant physical defects. Negative for syphilis.

Use the following space for any medical history contained in your records not given above:

Upon the basis of the information given do you recommend sterilization or asexualization for this patient? I recommend: sterilization.

AFFIDAVIT OF PHYSICIAN

Dr. Thomas Shannon, a registered physician of Morganton, Burke County, North Carolina, being duly sworn says that he has had actual knowledge of the case of [redacted] (patient or inmate), and says further that the foregoing medical history of [redacted] (patient or inmate) is true of his own knowledge, except as to those matters therein stated upon information and belief, and as to those, he believes it to be true.

Thomas M. Shannon, M.D., Physician

Sworn to before me, this 20th day of January, 1955.

LeRoy Bates (N. P.; J. P.; or Clerk of Superior Court)

(SEAL) My commission expires November 13, 1956.

CERTIFICATE OF SECRETARY OF EUGENICS BOARD OF NORTH CAROLINA, THAT THE COPY OF THE PETITION WHICH IS SERVED WITH THE NOTICE OF HEARING, IS A TRUE AND CORRECT COPY OF THE ORIGINAL.

NORTH CAROLINA,

..... County. .

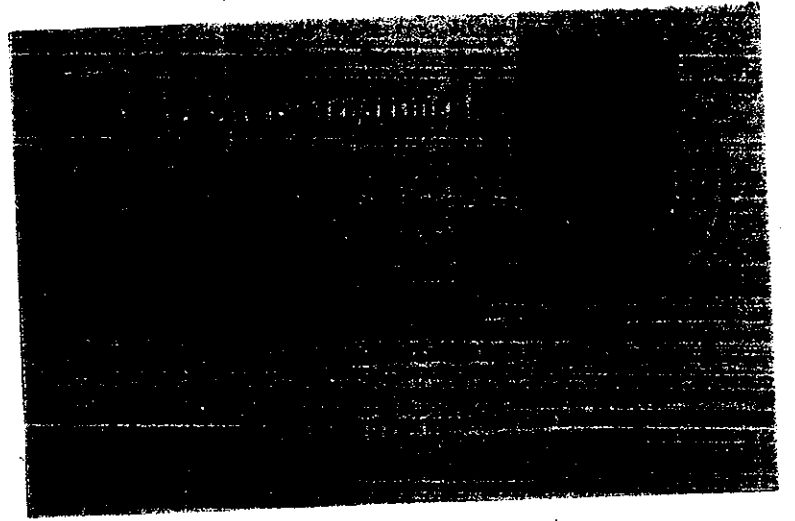
IN RE: STERILIZATION OR ASEXUALIZATION
OF

I, _____, Secretary of the Eugenics Board of North Carolina, do hereby certify that the foregoing is a true and correct copy of the Petition for Operation of Sterilization or Asexualization instituted before the Eugenics Board of North Carolina, by _____

..... Petitioner, on _____ 19

SIGNED: _____
Secretary of Eugenics Boards of North Carolina,

This _____ day of _____ 19



APR 14 1955

NORTH CAROLINA,
WAKE COUNTY.

IN RE: STERILIZATION OR ASEXUALIZATION
OF

BEFORE THE
EUGENICS BOARD OF NORTH CAROLINA.
ORDER FOR OPERATION OF
STERILIZATION OR ASEXUALIZATION

WHEREAS, on January 20, 1955, a Petition for Operation of Sterilization or Asexualization to be performed upon [REDACTED] was instituted with this Board by Dr. John S. McKee, Jr., Superintendent, State Hospital at Morganton, the Petitioner, and

WHEREAS, on _____, the Secretary of the Eugenics Board of North Carolina, did issue a Notice of Hearing in this matter, which Notice together with a certified copy of the Petition was duly served upon the patient: _____ and others, to wit: (Consent having been given in writing by patient's husband, [REDACTED] as provided for in Chapter 463, Public Laws 1935, Notice of Hearing is unnecessary and has not been given.)

together, with a copy of the aforesaid Petition certified by the Secretary of the Eugenics Board to be a true and correct copy; and

WHEREAS, this Board, at the place and time designated in the aforesaid Notice of Hearing, did consider the said Petition, and a medical history of the patient, a social case history of the circumstances surrounding the said patient's life relative to the likelihood of the said patient to procreate a child or children, and did hear and consider various other evidence duly offered in support of and against the said Petition, and patient not being present or represented,

AND it being the opinion and judgment of this Board that this case falls within the intent and meaning of one or more of the circumstances mentioned in Section four, Chapter 224, Public Laws of North Carolina, 1938, and that an operation of asexualization or sterilization will be for the best interest of the mental, moral and physical improvement of the said patient, and/or for the public good,

NOW THEREFORE, IT IS CONSIDERED, ADJUDGED, and ORDERED THAT the Petitioner, Dr. John S. McKee, Jr., Superintendent proceed to have performed upon [REDACTED] (patient), on any day between January 25, 1955 and July 25, 1955, the operation of sterilization

such operation to be performed by Dr. Yates S. Palmer, Valdese, N. C.; provided that nothing in this order shall interfere in any manner with the right of the patient, or his guardian or next of kin to select competent physician of his own choice for such operation at his own expense.

SIGNED: [Signature]
[Signature]
Worth H. Hester

This 25th day of January 19 55. Members of the Eugenics Board of North Carolina.

CERTIFICATE OF SURGEON

THIS IS TO CERTIFY that I have this day sterilized, or asexualized [REDACTED] (NAME OF PATIENT)

by doing a division and ligation of tubes (TYPE OF OPERATION)

SIGNED [Signature] M. D.
Date March 15, 1955

NOTE:—File with Secretary of Eugenics Board of North Carolina, Box 221, Raleigh, N. C.
PETITIONER: PLEASE FILL IN FORM ON BACK OF THIS SHEET.

NORTH CAROLINA,

Burke COUNTY.

IN RE: ~~STERILIZATION OR CASTRATION~~
OF
[REDACTED]

BEFORE THE
EUGENICS BOARD OF NORTH CAROLINA.

LETTER OF AUTHORIZATION
TO SURGEON

In accordance with the provisions of Section 3, Chapter 224 Public Laws of N. C., 1933, and of the order of the Eugenics Board, I hereby authorize Dr. Yates S. Palmer, Valdese, N. C.
(NAME OF SURGEON)

to perform the operation of sterilization

upon said [REDACTED]

on any day between January 25, 1955 and July 25, 1955

SIGNED John P. Mylee, M.D.

TITLE Surpt

Date Jan 29, 1955 Petitioner.

NORTH CAROLINA,

Cabarrus COUNTY.

In Re: Sterilization

of [REDACTED]

BEFORE THE
EUGENICS BOARD OF NORTH CAROLINA
CONSENT OF PARENT, GUARDIAN,
SPOUSE, OR NEXT OF KIN

I, the undersigned [REDACTED] Husband, do hereby petition
(Name and relationship to patient)

Dr. John S. McKee, Jr., Superintendent, State Hospital at Morganton, Morganton, N. C.
(Name and title, as Supt. of Public Welfare or Supt. of State Institution where patient is an inmate.)

to institute proceedings before the Eugenics Board of North Carolina for the sterilization of [REDACTED]

[REDACTED], and I do hereby give my consent to the perform-
ance of such operation, said operation to be performed in accordance with the authorization of said
Board.

Signed: [REDACTED] Husband
(Signature of parent, guardian, spouse, or next of kin)

VERIFICATION

NORTH CAROLINA,

Cabarrus COUNTY.

[REDACTED]

being duly sworn, deposes and says

that he (or she) has read or has heard read the foregoing petition and knows the contents thereof; that
the same is true of his (or her) own knowledge except as to those matters and things therein stated
upon information and belief, as to those he (or she) believes it to be true. Deponent further says that
the above was signed of his (or her) own free will and accord.

Signed: [REDACTED] Husband
(Signature of parent, guardian, spouse, or next of kin)

Sworn to and subscribed before me, this

24th day of December

[Signature]
N. P.; J. P., or Clerk Superior Court

(SEAL) My commission expires Sept. 19-1955

NOTE:

Under the provisions of the 1935 amendment to Section 9 of the 1933 sterilization law, the usual procedure of
having the Sheriff serve notice of hearing and a certified copy of the petition will not be necessary if consent
as provided for on this form is obtained.

If patient is 21 years of age and is not an inmate of one of the State Hospitals or Caswell Training School and
if the said patient has not been declared mentally unsound by a court of competent jurisdiction, the patient's con-
sent must also be obtained.

NOTE: Use this form as a supplement to petition for sterilization or asexualization. Copies of this form will not be served on patient or relatives.

Name of Patient [REDACTED]

Social and economic status in community Husband earns \$10⁰⁰ weekly as journeyman plumber. They are buying a four-room house—estimated value being \$6500. Patient is a member of the Baptist Church, but does not enter into any church activities.

BEHAVIOR: Give any evidence of abnormal or anti-social behavior or harmful habits:

Patient was nervous and confused following her last miscarriage, for a short period. In [REDACTED] patient lost interest in everything, cried for three or four days, was in and out of bed and expressed many somatic complaints. She thought she had a cancer, but the doctor could find no basis for patient's symptoms. She developed many unreasonable fears, became very apprehensive if her husband left for a short time, and imagined that he had been killed. Her mother picked up an ash tray to

COURT RECORD

NAME AND LOCATION OF COURT	DATE	CHARGE	DISPOSITION

Give in full reasons for requesting sterilization or asexualization:

Patient was hospitalized in 19[REDACTED], 19[REDACTED] and 19[REDACTED] owing to anemia resulting from miscarriages. It is our opinion that patient will have all the responsibility she can assume in caring for the home and child she now has.

What is the attitude of patient toward operation recommended?

She has not been consulted as she is considered incompetent.

What is the attitude of parents, husband, wife, etc.?

Husband cooperative.

Additional history or remarks empty it shortly before patient was admitted, and patient thought her mother was going to strike her with the ashtray, "She jumped on her mother and tried to choke her." She sat for long periods preoccupied with her own thoughts; sometimes she would hold a lighted cigarette in her hand and without taking a draw, would put it out remarking, "That might hurt someone, I shouldn't have done that." She would not allow the child to sleep for fear that something was wrong with her that she did not realize. She demanded intercourse "continuously" for a period of two wks. She was depressed and excited and expressed visual and auditory hallucinations.

(The back of this sheet or other sheets may be used for additional history if necessary.)

Submitted by Thomas M. Shannon, M.B.

Date January 20, 1955.

For: Dr. John S. McKee, Jr., Superintendent
State Hospital at Morganton, Morganton, N.C.

NORTH CAROLINA)
WAKE COUNTY)

I hereby delegate to Worth H. Hester
my power to act as a member of the Eugenics Board, at its
meetings and hearings, upon the following case, to-wit:


This the 25th day of January, 1955.

Harry G. Mullen