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THE HARRISON ANTINARCOTIC LAW.

DECISIONS BY TWO UNITED STATES DISTRICT COURTS CONSTRUING SECTION 8.

Two decisions by United States courts construing section 8 of the Harrison Antinarcotic Law¹ have recently appeared. This section makes it unlawful for any person who has not registered and paid the tax under the law to have in his possession or under his control any of the habit-forming drugs named in the act, and such possession or control is made presumptive evidence of a violation of the act.

The United States District Court for the Western District of Washington took the view that Congress intended to prevent the importation, manufacture, or sale of habit-forming drugs except as allowed by the law, and that the law should be so construed as to carry out this intention.²

The same section was considered by the United States District Court for the State of Montana about the same time. Judge Bourquin decided that section 8 applies only to persons who are required to register under the law. In his opinion he says that mere consumers of the drugs "are not within section 1, and section 8 does not purport to extend the registration and taxation features of the act to them, or to any one, but only to make unlawful mere possession of the drugs by any person of the classes by section 1 required to register and pay, and who have not, and to create a statutory rule of evidence."

The opinion in the latter case is published in this issue of the Public Health Reports, page 3715.

MALARIAL FEVER.

RECENT APPEARANCE AT GALVESTON, TEX.

From a report by L. P. H. Bahrenburg, Surgeon, United States Public Health Service.

During the late summer and autumn of 1915 malarial fever was present in Galveston. This fact is of especial interest because cases of local genesis have heretofore been extremely rare, if indeed they have occurred at all within recent years.

¹ Public Health Reports, Feb. 19, 1915, p. 573; 38 Stat. L., 785.

² Public Health Reports, Dec. 10, 1915, pp. 3601, 3631.

It is asserted by those who have made a close study of the subject that prior to the Gulf coast storm of August 16 and 17, 1915, no cases of malaria occurred at Galveston except in persons who had acquired their infection on the mainland in Texas or other States. It was further asserted that no *Anophelinæ* were to be found upon Galveston Island, and the observations of the writer tally with that statement. It is stated by observers that immediately after the storm there was almost a total absence of mosquitoes, this condition lasting about a week or 10 days; longer, according to others. Mosquitoes in considerable number reappeared later and have since been continuously present. The great majority of these mosquitoes are *Culicinae*, only a few *Anophelinæ* having been found, although this may be due to lack of competent observation.

The bayous of Galveston Bay and the tributary creeks have long had a bad reputation as malarial districts; the contiguous mainland has, therefore, developed many cases of that disease. As the wind during the early part of the last storm blew from northerly points of the compass toward the city, it appears probable that infected mosquitoes were blown there, some of them falling into shelters, where they remained after the wind veered and while the city was partially submerged. It has been contended that *Anophelines* could not find proper breeding places on the island, but this assertion must be regarded with some doubt for the present, as it seems unlikely that the insects blown to Galveston in August could still be the active infecting agents.

Since the date above mentioned, however, a noteworthy number of cases of severe malarial infections have been met with, which in many cases were of the pernicious type and in persons who had not been on the mainland. Malaria is not a reportable disease, and it has not been possible to secure figures giving reliable data as to the actual number of cases. One physician, however, who has an extensive private and consultation practice, informed the writer that he had seen 25 cases during October and November, 1915, and that microscopical examinations of the blood showed the presence of the estivo-autumnal parasite.

PUBLIC HEALTH ADMINISTRATION IN NORTH DAKOTA.

By CARROLL FOX, Surgeon, United States Public Health Service.

The following report gives the results of a study of public health administration and organization in North Dakota, carried on throughout a period of about seven weeks, beginning September 17, 1915.

The State of North Dakota has an area of approximately 70,195 square miles and, according to the State census of 1915, a population

of 636,741. It is essentially an agricultural State, the principal product being grain. Cattle raising, coal mining, and dairying are also engaged in. Manufacturing is of minor importance. The nature of the principal industry is instrumental in bringing into the State in the spring and fall of the year a large floating population to work on the farms.

There are six cities having a population of over 5,000—Fargo, the largest, with 20,549; Grand Forks, next in size, with 13,554; Minot, with 10,053; Bismarck, with 6,344; and Jamestown, with 5,506. The capital, Bismarck, is located on the Missouri River, in the south central part of the State, and on the Northern Pacific and Soo Railroad.

For information and assistance received in this study the writer is indebted to the secretary of the State board of health and his clerk, the local health officers, and other State and county officials.

STATE BOARD OF HEALTH.

Composition of the board.—The board of health is composed of three members, one of whom is president, one vice president, and one the "superintendent" of public health. The attorney general is ex officio president of the board. The vice president and superintendent of public health are appointed by the governor. The superintendent must be a resident of the State, a graduate of a reputable medical college, and licensed to practice medicine within the State.

Tenure of office.—The appointees of the governor hold their office for two years from the first Tuesday in April succeeding their appointment and until their successors are elected and qualified.

Meetings of the board.—The board is required to meet as often as once in every six months at such place within the State as it may select.

Duties of the officers of the board.—The president presides at the meetings of the board, and in his absence the vice president performs the same duties. The superintendent of public health keeps the proceedings of the board and performs such other duties as are required by law or prescribed by the board of health. He is required to submit biennial reports to the governor, showing the activities carried on by the board of health for the previous two years.

Compensation.—The president and vice president receive no salary, but each is allowed 5 cents for every mile traveled in the performance of his duties, and other necessary expenses. The superintendent of public health receives a salary of \$1,200 per year and the same allowances as the other members of the board. In addition to this, he is allowed \$1,100 for clerk hire, printing, traveling, and all other expenses of the board of health.

Powers and duties of the board.—The State board of health is empowered to fix the time and place of the meetings of the board; to make rules and regulations for the government of the board; to make and enforce all needful rules and regulations for the prevention and cure and to prevent the spread of any contagious, infectious, or "malarial" diseases among persons and domestic animals; to establish quarantine and isolate any person affected with contagious or infectious disease; to isolate, kill, or remove any animal affected with contagious or infectious disease; to remove or cause to be removed any dead, decaying, or putrid body or other substance that may endanger the health of persons or domestic animals; to condemn or cause to be destroyed any impure or diseased article of food that may be offered for sale; to superintend the several boards of health in cities, villages, and towns, and to make such rules and regulations as it may deem necessary to govern the preparation of dead bodies for transportation and to govern what classes of dead bodies may be transported and the manner thereof.

Secretary of the board of health.—The secretary of the board of health, who is known under the law as the "superintendent" of public health, is a part-time official, who, like the other members of the board, changes with each change of governors. The private office of the secretary is also the official office of the State health organization, and the location of the latter shifts to different parts of the State with each change of administration, depending on the locality in which the secretary happens to be engaged in the practice of medicine. It is rare to have any two members of the board in the same place at the same time except during the infrequent meetings of the board of health. The secretary is given one assistant, a clerk, who receives \$600 a year.

It is obvious that under the circumstances the health problems of the State can not be taken up seriously as far as the board of health is concerned. The lack of organization has resulted in other State bodies, working independently of each other, attempting to perform the duties of a State health department. Thus we find engaged in such work the State public health laboratory, the commissioner of food and drugs, the dairy commissioner, the hotel inspector, school boards, and the antituberculosis society. This independent work can be only superficial, and no decisive results can be expected until the various public-health functions are correlated and placed in a properly organized health department under the direction of one full-time man.

The duties of the board of health and its secretary relating to diseases among animals have been largely taken over by the live-stock sanitary board, a State organization of more recent formation.

The State superintendent of health is also *ex officio* secretary of the embalmers' examining board.

REGISTRATION OF BIRTHS AND DEATHS.

The registration act of the State of North Dakota was passed in 1907 and conforms very closely in its provisions to the model law for the registration of births and deaths proposed by the United States Census Bureau. For this reason it is not necessary to summarize it in this report.

The State superintendent of health is ex officio State registrar of births and deaths. The city auditors and the clerks of the various townships and villages are ex officio local registrars for their respective districts. Local registrars in unorganized territory are appointed by the State registrar. The law makes provision for the appointment of deputy registrars by the local registrars, but records in the office of the State board of health fail to show the number that have been appointed to this position.

Local registrars receive a fee of 25 cents for each correctly made out birth or death certificate and "no report" card sent to the State registrar, except where the official acting as registrar receives a fixed salary. The fees are paid annually by the counties after certification by the State registrar.

Death registration.—During the 12-month period ended June 30, 1915, there were registered with the State registrar 3,504 deaths, exclusive of stillbirths. This number of deaths in a population of 636,741 gives a death rate of 5.5 per 1,000 inhabitants for the entire State. Such a low death rate is obviously incorrect. It signifies that the death registration is far from satisfactory.

The larger cities are striving to bring their registration to a high state of efficiency. The State records show that during the year ended June 30, 1915, the city of Fargo had 306 deaths, 61 of which were recorded as in nonresidents; therefore at least 245 deaths can be credited to the city, which number in a population of 20,549 gives a death rate of 11.9 per 1,000. Grand Forks during the same period had 183 deaths, 50 of which were recorded as in nonresidents; therefore there can then be credited to the city at least 133 deaths. The population being 13,554, this gives a death rate of 9.8. It is thought that an average of the death rates in these two cities might be used as a fair indication of the rate that should obtain in the State as a whole, that is approximately 10. Therefore it may be assumed that at present only about 50 per cent of the deaths that actually occur in the State are registered.

The counties in the State having the highest death rates are Cass, with a rate of 9.7; Grand Forks, 9.8; and Burleigh, 9.7. These rates are more consistent with what actually occurs and are explained by the more efficient registration in the cities of Fargo, Grand Forks, and Bismarck, situated in these counties. If the registration in the

rural communities were as complete, the rates would no doubt increase.

Notwithstanding that the death registration is very incomplete, an analysis of the certificates submitted is of interest. Of 3,504 deaths registered, 1,967, or 56.13 per cent, were due to causes that might have been prevented. These preventable deaths can be classified as follows:

Disease.	Deaths.	Per cent of total deaths.
Typhoid fever.....	46	1.31
Measles.....	28	.80
Whooping cough.....	44	1.25
Scarlet fever.....	16	.45
Diphtheria.....	23	.66
Influenza.....	20	.57
Simple meningitis.....	40	1.14
Pulmonary tuberculosis.....	188	5.37
Other forms of tuberculosis.....	58	1.66
Pneumonia.....	363	8.56
Diarrhea and enteritis.....	152	4.34
Other preventable diseases.....	96	2.74
Malignant growths.....	118	5.65
Deaths due to accidents.....	227	6.48
Convulsions, congenital debility, malnutrition, accidents at birth, premature birth, and other causes peculiar to early infancy.....	531	13.15
Total.....	1,967	56.13

The records show but six deaths attributed to syphilis. Of these, five occurred in infants under 1 year of age who were afflicted with the congenital form of the disease. There is every reason to believe that if many of the deaths reported as due to cirrhotic and sclerotic conditions were attributed to their real cause—namely, syphilis—the number of recorded deaths from preventable diseases would be greatly increased.

Infant mortality.—Of the total deaths from all causes 938, or approximately 25.6 per cent, occurred in children under 1 year of age. Of these deaths 851, or 93.72 per cent, might be classed as preventable, as follows:

	Deaths.	Per cent of total deaths under 1 year.
Pneumonia.....	112	12.34
Diarrhea and enteritis.....	115	12.66
Whooping cough.....	31	3.74
Other acute communicable diseases.....	17	1.87
Other infections.....	40	4.41
Premature birth.....	164	18.96
Injuries at birth.....	13	1.98
Convulsions, congenital debility, and other like causes.....	351	38.66
Total.....	851	93.72

The recorded infant mortality rate of the State is 88, there having been 10,235 births registered during the 12-month period ended June 30, 1915, and 908 deaths in children under 1 year of age, exclusive of stillbirths.

Birth registration.—The number of births registered during the 12-month period was 10,235, exclusive of stillbirths, giving a birth rate for the entire State of 16. In certain of the counties, as, for instance, Burleigh, Dunn, Emmons, Golden Valley, Griggs, McIntosh, and Steele, the birth rate is very much higher, being over 20, and in one county, Golden Valley, reaching as high as 27.9. In the majority of counties, however, the birth registration is noticeably deficient.

Discussion.—After a careful examination of the death certificates on file it may be said in general that many of them are carelessly made out, necessary information is often missing, and not infrequently the cause of death is either not stated or is obscure or indefinite. The latter is explained to some extent by the fact that deaths, especially in infants, may occur in families living some distance from both doctor and registrar. Such children a physician often does not see at all.

The practice of issuing a burial permit and interring a corpse before a death certificate has been submitted is entirely too common in the State of North Dakota. In States having the best registration such a practice is not permitted. It is a direct violation of the law, and no doubt results at times in a failure through forgetfulness on the part of the undertaker to submit any death certificate at all. It is also questionable whether the city auditors and the clerks take sufficient interest in birth and death registration, for the reason that they have other duties to occupy their time. It is thought that perhaps some deputy registrars appointed from among the public-spirited women of the communities might result in better registration. It is also thought advisable to require that all places of interment within the State be licensed by the State board of health, and that such places be required to have a sexton or caretaker and to keep complete records of all bodies buried.

More responsibility should be placed on the parents in respect to the registration of births.

It is most essential that the State board of health be given a field force who may visit the localities, study the church records, records of the local cemeteries, and reports in the local newspapers, and by advice and instruction gradually educate the physicians and registrars and others in their obligations as regards the registration of births and deaths. If this does not produce the expected results, the board should then request the aid of the State's attorney. The registration act is very specific, and if enforced would bring the State into the registration area.

Believing that ministers are called to officiate at most burials, the State board of health has requested their assistance in having a death certificate properly made out and sent to the registrars, when it has not already been attended to. This is an excellent idea, and similar cooperation would be equally valuable in birth registration. This could be accomplished by ministers at the christening or other corresponding ceremony requiring evidence of previous registration of the birth of the child.

It is also necessary that someone be employed in the State board of health to devote his entire time to the registration of births and deaths. At present the force is absolutely inadequate.

Table of information relating to birth and death registration for the 12-month period ended June 30, 1915.

County.	Population.	Number of registrars.	Number of birth certificates.	Birth rate.	Number of death certificates.	Death rate.	Number of still-births.	Number of "No report" cards.	Number of physicians.	Number of licensed embalmers.
Adams.....	4,723	28	103	21.80	20	4.2	1	68	4	1
Barnes.....	18,706	48	352	18.80	111	5.9	12	99	19	6
Benson.....	12,705	42	254	18.41	50	3.9	4	61	17	4
Billings.....	3,270	6	47	14.46	10	3.0		18	2	1
Butterfield.....	17,837	58	226	13.03	70	4.0		70	15	8
Bowman.....	5,041	23	36	7.14			4	9	5	3
Burke.....	9,037	30	142	16.37	22	2.4	2	52	8	2
Burdick.....	14,157	42	228	22.02	138	9.7	4	74	21	7
Cass.....	49,456	50	584	14.40	361	9.7	21	119	50	14
Cavalier.....	15,811	45	22	16.50	77	4.8	3	22	13	3
Dickey.....	19,334	37	145	14.40	42	4.1	1	50	9	4
Divide.....	8,884	25	152	17.10	24	2.1	3	71	7	2
Dunn.....	8,156	7	24	25.01	52	6.3	5	12	4	2
Eddy.....	5,034	13	166	18.69	22	3.8	3	33	6	2
Emmons.....	10,225	12	244	24.60	31	5.0	3	9	7	1
Foster.....	6,654	13	121	19.40	17	2.8	4	39	6	2
Golden Valley.....	6,038	14	169	27.90	34	5.6		27	5	2
Grand Forks.....	24,658	47	509	17.70	274	9.8	13	51	36	9
Griggs.....	6,067	23	149	22.60	28	4.2	5	49	6	1
Hettinger.....	7,111	24	105	13.40	39	5.0		45	5	3
Kidder.....	6,348	13	58	8.30	17	2.4	1	6	4	1
LaMoure.....	11,453	36	222	24.60	72	6.3	4	28	14	4
Logan.....	7,027	15	150	22.50	55	7.9	5	10	2	
McHenry.....	16,959	47	179	10.56	49	2.9	3	55	11	7
McIntosh.....	8,623	7	232	25.10	72	8.9	4		3	1
McKenzie.....	19,469	36	244	22.50	50	4.6	2	27	5	
McLean.....	18,879	32	173	19.60	37	2.4	4	49	11	1
McRae.....	6,790	10	123	18.10	40	5.9	1	2	3	
Morton.....	2,717	33	352	14.23	134	5.0	12	25	17	6
Mountain.....	11,155	38	249	22.50	47	4.2	3	86	7	3
Nelson.....	19,351	34	238	20.10	55	5.3	0	54	9	3
Oliver.....	4,688	1	60	14.70	21	5.0	1		1	
Pembina.....	14,741	33	255	18.40	89	5.0	7	36	13	5
Pierce.....	9,705	25	156	16.10	68	7.0	3	27	10	1
Ramsey.....	17,679	49	385	23.20	118	7.8	8	75	16	5
Ransom.....	11,943	26	199	18.41	62	5.6	2	45	9	6
Renville.....	8,933	30	144	17.50	39	4.9	1	34	9	2
Richardson.....	27,267	45	243	11.30	93	4.3	9	74	25	9
Rolette.....	9,694	13	59	19.30	28	2.3	3	3	5	5
Sargent.....	9,631	59	137	14.23	39	3.1	1	57	9	5
Sheridan.....	8,199	11	62	7.50	26	3.1			2	1
Sioux.....	2,155								1	
Slope.....	4,999	12	49	8.40	15	2.2		10		
Stark.....	14,134	10	54	3.80	61	4.3	1	11	14	6
Steele.....	7,616	23	186	25.50	47	6.1	4	35	7	1
Stutsman.....	24,991	55	347	17.50	185	7.7	6	101	20	8
Towner.....	9,147	28	121	13.24	26	2.8	2	37	8	2
Traill.....	12,838	27	217	16.10	69	5.4	2	21	12	3
Walsh.....	24,373	49	222	13.30	114	5.6	4	55	16	7
Ward.....	28,068	63	384	13.60	169	6.0	5	74	30	8
Wells.....	13,294	23	151	11.40	48	3.6		36	17	3
Williams.....	18,143	57	319	17.08	120	6.6	5	123	16	7
Total.....	636,741	1,514	10,235		3,504		203	2,192	571	188

EPIDEMIOLOGICAL ACTIVITIES.

The law gives to the State board of health ample authority to promulgate regulations and to perform the work required to control communicable disease; but the totally inadequate appropriation provided by the legislature to employ the necessary specialists in public health, together with the inadvisable separation of certain public-health functions from the State board of health, precludes the possibility of that body engaging in active operations except through the agency of the part-time health officers. The latter are busy practitioners of medicine who can ill afford to neglect their practices for the meager compensation allowed by the county.

The activities of the board of health have been confined to the promulgation of regulations. In fact, there has been more epidemiological work done by the public health laboratory and even by the food and drug commissioner than has been performed by the State board of health.

MORBIDITY REPORTS.

Requirements of laws.—Physicians or other persons are required to report immediately to the local board of health all cases of tuberculosis, typhoid fever, or any other communicable disease coming to their knowledge, and if the physician is the attending physician he is required to report not less than twice each week the condition of the patient so afflicted, together with the state of the disease.

It is also required that physicians report within 24 hours to the local board of health each of his patients who has died of a communicable disease.

Keepers of boarding houses, hotels, lodging houses, etc., are required to report any communicable disease occurring among their guests.

Physicians practicing in cities under the commission form of government are required to report in writing to the commissioner of public health all patients under their charge who are sick with smallpox, scarlet fever, diphtheria, typhoid fever, Asiatic cholera, or any other dangerous or contagious disease within 24 hours after the nature of the same is suspected. The report is to be made upon a form prescribed by the State board of health.

For failure to make such report there is provided a fine of not less than \$25 nor more than \$100, or imprisonment for not exceeding 60 days, or both.

Requirements of regulations.—Every case of smallpox, diphtheria, scarlet fever, measles, or whooping cough must be reported in writing within 24 hours by the attending physician or other person having knowledge of the existence of the disease to the local health officer. The name of the disease with the name and address of the patient must be given. Tuberculosis and typhoid fever must be reported in writing as soon as a diagnosis is made. The name of the disease with the name and address of the patient must be given.

Method of procedure.—County and city health officers are required to submit to the State superintendent of health before the 10th of the following month a summary of the communicable diseases reported to them for the previous month. These summaries contain information as follows: Date, name of person affected, address, sex, color, age, name of disease, by whom reported, and results.

Discussion.—The following table has been prepared from the morbidity reports received from county and city health officers and the death certificates submitted during the 12-month period ended June 30, 1915:

Disease.	Number of cases.	Number of deaths.	Death rate per 100,000.	Fatality rate per 100 cases.
Typhoid fever.....	385	46	7.2	12.0
Measles.....	767	28	4.4	3.6
Scarlet fever.....	452	16	2.5	3.5
Whooping cough.....	234	44	6.9	18.8
Diphtheria.....	419	23	3.6	5.5
Smallpox.....	560			
Pulmonary tuberculosis.....	153	188	29.3	
Pneumonia.....		300	47.0	
Malignant growths.....		198	31.0	

From the case fatality rates of typhoid fever, measles, scarlet fever, and whooping cough it can safely be assumed that many more cases of these diseases occur than come to the notice of the board of health. The mortality from whooping cough seems to be especially high. It is probable, however, that the mortality from this disease is actually greater than is usually suspected.

Tuberculosis is especially poorly reported.

Pneumonia and cancer are not notifiable diseases in the State of North Dakota.

The death rates from the various communicable diseases are not high, but it must be kept in mind that the death registration is very deficient and that an increase in the total registration would necessarily mean an increase in the deaths reported from communicable diseases.

At present the morbidity reports are of little utility to the State. The lack of organization in the State board of health makes it impracticable to give the proper study to such reports so that preventive measures may be applied. Likewise, under the present system the work done in the public health laboratory of the university is of little utility in a preventive way, the State board of health not being in close touch with the results obtained and, unfortunately, not being in a position to make the best use of such results, even though notified.

THE CONTROL OF DISEASE.

Requirements of laws.—In addition to the law giving the State board of health the power to make regulations, institute measures to eradicate and prevent the spread of disease, and to exercise supervisory control over local boards of health, certain other laws directed toward prevention of disease have been enacted and are summarized as follows:

The removal or transportation of any person suffering with a communicable disease or any body dead of a communicable disease without a certificate from the local or State board of health is prohibited.

Each parent or guardian having the care, custody, or control of any minor or other person is required to cause such person to be vaccinated.

School officials, parents, or guardians are prohibited from permitting any child suffering from scarlet fever, diphtheria, smallpox, whooping cough, measles, or other communicable disease, or any child residing in a house where such disease exists or has recently existed to attend any public or private school without the permission of the local board of health.

It is unlawful to allow dead bodies to remain unburied for a period longer than four days, or if such body has died of a communicable disease, longer than 24 hours. The local board of health may give a permit to extend this time. Bodies dead of a communicable disease must be disinfected when directed by the local board of health, and if the body remains unburied over 24 hours it must be inclosed in a tightly sealed metallic coffin and the funeral must be private. The law further specifies conditions under which such bodies may be removed or transported.

Ophthalmia neonatorum.—All birth certificates, in addition to the other data, must contain the question, "Were precautions taken against ophthalmia neonatorum?" and it is made unlawful for any attendant at a birth to collect for professional services unless this question is properly answered.

It is made a duty of every attendant upon a birth to examine the eyes of the newborn, and if there is any reason for suspecting a disease of the eyes, to apply a recognized prophylactic treatment.

If one or both eyes of an infant have become inflamed, swollen, or reddened, or show any unnatural discharge within two weeks after birth and no legally qualified physician is in attendance, it is made the duty of the parent or other person having the care of the infant to report the fact in writing within six hours to the health officer. This procedure is not required from recognized hospitals.

The health officer is required to place the infant in charge of a legally qualified physician for treatment or, if an indigent, in charge of the township or city physician.

For violation there is provided a fine of not less than \$10 nor more than \$50.

Tuberculosis.—When any local antituberculosis society considers it necessary to secure the services of a visiting nurse or to disinfect any building, room, etc., which has been occupied by a case of tuberculosis, it may report, with recommendations, to the chairman of the board of health and to the board of county commissioners. The latter is authorized to appropriate money out of the county funds to pay for the necessary disinfection, the services of visiting nurses, or medical attention or advice in preventing the spread of tuberculosis. The county commissioners are also authorized to cooperate with neighboring counties to establish homes or hospitals for incurable tuberculosis patients.

There is established by law a State tuberculosis sanitarium, which is located at Dunseith, in Rolette County. The law provides for its control by the State board of control, and also for the necessary officials to manage the institution. Tuberculosis in all its stages is cared for, but the incurable must be kept separate from the curable.

Each patient is required to reimburse the institution for the cost of his maintenance, or any society may defray such expense. Where the patient is an indigent a charge of \$7 per week is made against the county from which the patient came. The law further provides for the acceptance of gifts or donations, the construction of cottages by fraternal societies, etc.

Regulating marriages.—Marriage of a woman under the age of 45 years or a man of any age (except he marry a woman over the age of 45 years) is prohibited when one of the contracting parties is a common drunkard, habitual criminal, epileptic, imbecile, feeble-minded person, idiot or insane person, or person who is afflicted with hereditary insanity, with pulmonary tuberculosis in its advanced stages, or any contagious venereal disease.

No clergyman or other person authorized to solemnize marriages is permitted to perform a marriage ceremony between persons afflicted as above.

Before a marriage can take place the contracting parties must file with the county judge an affidavit to the effect that they are not feeble-minded, imbeciles, epileptics, insane, drunkards, or afflicted with tuberculosis in its advanced stages, and in addition the affidavit of the male applicant must show that he is not suffering from venereal disease.

Physicians are entitled to a fee of not to exceed \$2 for each examination made under the law.

Public drinking cups.—The use of public drinking cups on railroad trains, stations, or in public, parochial, or private schools or other educational institutions, and other public buildings of the State of North Dakota is prohibited.

For violation a penalty is provided of a fine not to exceed \$25 for each offense.

Violation of the health laws.—For violation of any health law or any rules or regulations made by any board of health or health officer or by any public officer under the authority of the health laws, and where no punishment is otherwise prescribed, there is provided a fine of not exceeding \$2,000 or imprisonment not exceeding one year, or both.

Every person who willfully opposes or obstructs any health officer, or physician charged with the enforcement of health laws, in performing any regular duty is guilty of a misdemeanor.

Requirements of regulations.—The regulations which have been promulgated by the State board of health for the purpose of controlling communicable diseases are summarized as follows:

In the case of smallpox, diphtheria, or scarlet fever the patient must be adequately isolated in the house or removed to an isolation hospital. The house must be placarded. Contacts must be rigidly quarantined until either the removal or isolation of the patient or until they have been disinfected, together with their clothes and that part of the building not occupied by the patient. They can not carry on their vocations without permission from the health officer.

It is forbidden to employ teachers having pulmonary tuberculosis in the public schools. Parents or guardians must not permit any child afflicted with pulmonary tuberculosis to attend any school or other public place.

Health officers must not give certificates releasing contacts from quarantine until after the period of incubation has elapsed, which in the case of scarlet fever is regarded as 7 days or longer; in the case of diphtheria as 4 weeks or until negative cultures have been secured from the throat and nose; and in case of smallpox for those never having had the disease and who have no well-marked vaccination scar as 14 days from date of last exposure. All who have been exposed must be vaccinated or revaccinated at once. Those who have had smallpox or have a typical vaccination scar may be released after disinfection. The health officer at his discretion may grant restricted liberty to any contact after disinfection and vaccination.

No child is permitted to enter any school until evidence of successful vaccination has been produced.

A health officer is prohibited from releasing any contact from quarantine until he is satisfied of the efficacy of the isolation, disinfection, vaccination, or the degree of immunity to the disease, and is satisfied also that such contact is not dangerous to the community.

The health officer is authorized to quarantine all suspected cases of communicable diseases until the correct diagnosis is made.

The minimum period for detention for the communicable diseases is as follows: For scarlet fever, until 5 days after the desquamation is complete, but in no case less than 30 days from the beginning of the disease; for diphtheria, 30 days, except where negative cultures are secured; for smallpox, until 5 days after the scabs have disappeared,

but in no case less than 21 days from the onset of the disease; for measles, 2 weeks; and for whooping cough, 1 week after the paroxysmal cough has ceased.

In typhoid fever the patient must be isolated, although absolute quarantine is not necessary. The stools must be disinfected. Certain disinfectants are recommended in the regulations.

In tuberculosis the patient must be instructed as to the disposition of the sputum and told that he should sleep alone in a well-ventilated room.

Attendants, physicians, health officers, and clergymen may be permitted to enter quarantined rooms by taking proper precautions to prevent spreading the disease.

No person exposed to smallpox, diphtheria, or scarlet fever may enter a public conveyance without a certificate from the health officer.

No room or building in which there has been any of the diseases mentioned in these regulations may be let until after disinfection and until a certificate is secured from the health officer. This provision also applies to rooms in hotels and lodging houses.

In case of a death from smallpox, diphtheria, scarlet fever, measles, and whooping cough no public funeral is permitted and the coffin containing the body may not be taken into any church or public building, or deposited in a public morgue.

Milk may not be sold from premises where any of the above diseases exist, nor shall it be sold if handled by any person living on such premises or exposed to infection, unless such person receive a certificate from the health officer.

The regulations specify methods for the disinfection of articles and rooms as well as of the patient.

Bodies of persons having died of any of the above diseases must be wrapped in a sheet soaked in a solution of corrosive sublimate, 1:500.

No isolation hospital may be established within 200 yards of any building.

When the superintendent of the State board of health is of the opinion that smallpox, diphtheria, scarlet fever, measles, whooping cough, or typhoid fever, is epidemic or threatens to become epidemic in any locality he may, as executive officer of the State board of health, take all necessary steps to prevent the spread of the disease and to eradicate it, including enforcement of quarantine, isolation, vaccination, disinfection, and the closure of schools.

It is the duty of a local health officer to disinfect, or cause to be disinfected, anybody dead of smallpox, diphtheria, scarlet fever, or any other dangerous communicable disease.

The use of the common drinking cup is prohibited on all vehicles of common carriers, in waiting rooms, hotels, restaurants, boarding houses, stores, schools (public and private), State institutions, or other public places. The same applies to the common towel.

The school officials, parents, and guardians are authorized to prevent the attendance at school of all children suffering from smallpox, scarlet fever, diphtheria, measles, chicken-pox, tuberculosis, infantile paralysis, erysipelas, whooping cough, mumps, scabies, pediculosis, ringworm, trachoma, or any other communicable disease, without permission from the local health officer or school inspector.

The period of exclusion from school for children having the common communicable diseases is as follows: Scarlet fever, six weeks or longer if redness of the throat, nasal discharge, or other sequelae persist; measles, two weeks from the date of the appearance of the eruption; German measles, one week from the date of the appearance of the eruption; chicken-pox, until all scabs have disappeared; diphtheria, one week after securing the second negative culture from the nose and throat; whooping cough, eight weeks from the disappearance of the characteristic cough; mumps, three weeks or longer if swelling persists; pediculosis, until all parasites and nits are gone; ringworm, scabies, and impetigo, until examination reveals successful treatment; smallpox, after complete desquamation, but at least four weeks must have elapsed from appearance of eruption.

Discussion.—It has already been pointed out that the State board of health is not in a position to take any active part in the enforcement of these regulations, but must depend entirely on the local health officers, who in turn, in rural communities at least, depend to a very large extent upon the cooperation of the practicing physicians. There is no intention to minimize the efforts of the local and State officials or others who have been attempting to accomplish something toward the control of disease. The fact remains, however, that preventable diseases are all too common in the State, and deaths from these diseases too frequent. This merely indicates the lack of organization, without which productive results of a permanent nature can not be expected.

Tuberculosis.—It would perhaps not be far wrong to estimate that there were 5,000 cases of tuberculosis in the State of North Dakota, one-half of which were open cases and a menace to the community. During the year ended June 30, 1915, however, there were but 153 cases and 188 deaths reported to the health department.

The State institution, located at Dunseith, for the care of tuberculosis is built on the cottage plan and can accommodate only 60 patients. Both incipient and advanced cases are admitted. The advanced and incipient cases are segregated from each other.

There is also in the State an antituberculosis society, which during the coming year will receive financial assistance from the State to the extent of \$1,500. Except for this aid from the State the society is maintained entirely by money received from private sources. Its activities are legitimately those of a State health department and of such great importance to the community that the State should recognize its obligation to its citizens, take over these activities, and place them in a well-organized health department capable of making the necessary investigations and exercising the proper advisory and supervisory control over the disease. Money appropriated to a properly equipped health department would bring greater returns.

While the treatment of incipient cases of tuberculosis and the education of the people have their value, no great progress can be made in the eradication of the disease until means is provided for the isolation of all cases discharging tubercule bacilli in the sputum. Each of these is a focus of infection and the means of spreading the disease. Recent intensive surveys have indicated that the majority of individuals suffering from tuberculosis have contracted their infection from intimate contact with previously existing cases.

Each county is given the authority by statute to combine with other counties for the purpose of erecting hospitals for the care of the tuberculous, and it is most necessary that the county commissioners make immediate use of their authority in this respect and thus take an active part in the fight against tuberculosis. The

expense will thus be subdivided, and the patients may be isolated nearer to friends and relatives. When provision is made to isolate all open cases of tuberculosis, to pasteurize the milk supply, and to supervise and educate those suffering from the incipient form of the disease, as well as healthy people, tuberculosis will cease to be a serious problem.

Communicable diseases on vessels.—Because of the steamboat traffic on the Missouri River and the possibility of a person suffering from one of the communicable diseases disembarking, certain laws have been enacted to prevent the introduction of infection in this way. It has, however, not been thought necessary to summarize these laws in this report.

Diagnostic Laboratory.

The public health laboratory from its inception has been a part of the University of North Dakota, coming under the control of the trustees of that institution. It is under the immediate supervision of a director. The main laboratory is located in one of the university buildings at Grand Forks, and there are two branch laboratories, one at Bismarck and one at Minot, each of the latter being in charge of an assistant bacteriologist. At the main laboratory there is employed an assistant bacteriologist, one pathologist (part time), one technical assistant, and one stenographer (part time). For the maintenance of these three laboratories there is appropriated \$8,000 per annum.

The laboratory was established for the purpose of assisting the physicians and health officers in the diagnosis of disease, especially of the communicable diseases. As a public health laboratory its work includes the examination of cultures for diphtheria; of sputum for tubercle bacilli; of blood for the Widal reaction; of smears for pus organisms, especially gonococci; of animal's brains for the evidence of rabies; of stools for parasites; the bacteriological and chemical analysis of milk and water; and the examination of tumors for malignancy. The latter is certainly an important part of the work of a public health laboratory inasmuch as an early diagnosis is necessary in order to prolong life, which, after all, is the ultimate result to be attained by the worker in public health.

In addition to the above the laboratory is required by law to perform a large amount of clinical laboratory work, including the examination of stomach contents, blood counts, urine analysis, tissue sectioning, and the like. All tissue and tumor work is done in the main laboratory. This laboratory will soon be in a position to perform the Wasserman reaction as a routine measure.

During the year ended June 30, 1915, there were made 8,836 examinations. On a basis of \$8,000 per year for maintenance, this means a

cost per examination of approximately 90 cents. Of the total examinations, 3,863 were made in the main laboratory, 3,691 at the Minot branch, and 1,282 at the Bismarek branch.

The work done in the laboratory is highly efficient; but the results obtained can not be of great value from the public health standpoint until utilized by the epidemiologists of a properly organized health department. The epidemiologist, who is the active agent in the field, and the bacteriologist must work in close cooperation, and it is essential, therefore, that the laboratory be a part of the bureau of epidemiology of the health department. The directors of the laboratory, past and present, have done some excellent work along the lines of stream pollution, pointing out the dangers and encouraging localities to provide proper methods of sewage disposal. Good work has also been done in reference to pure water supplies and there is no doubt that the laboratory must be given much credit for the part it has played in securing better sanitary conditions. Up to the present time, however, little has been accomplished compared with what is necessary.

The officials in charge of the main as well as the branch laboratories devote part of their time to a general supervision over the milk supply or the water supply, or both, of the cities in which they are located.

The laboratory has issued several instructive popular bulletins relating to the subjects of rabies, tuberculosis, pure water, sewage disposal, and the extermination of flies.

A two years' course preparatory to the study of medicine is given at the University of North Dakota. The public health laboratory is therefore of great utility to the university, furnishing a means of teaching bacteriology to its students. However, a transfer of the control of this laboratory to the health department would not mean a change in its location, and material submitted for examination would be of equal value for teaching purposes.

PUBLIC HEALTH ENGINEERING.

Requirements of laws.—The only law which could be found bearing on the subject of sewage disposal is summarized as follows:

City councils or boards of trustees in incorporated villages are authorized to establish and maintain a general system of sewers, in such manner and under such regulations as the council may deem expedient. Sewage may be discharged into any river, but always below any dam that may be located within the corporate limits. Where no river is available, sewage may be discharged into a lake, coulee, or slough, in which case a septic tank must be employed for sewage from closets, kitchen sinks, or for anything carrying objectionable matter.

No provision is made for submitting the plans for sewerage systems to the State board of health for approval as regards the feasibility or efficacy of the methods adopted.

There is no law providing for the purity of water supplies, garbage disposal, or the disposal of trade wastes.

Discussion.—The State has not paid sufficient attention to this important phase of public health. The State board of health, which is responsible for the prevention of disease, has not been in a position to carry on work along these lines. A few communities have worked out the problem locally with more or less satisfaction. In its solution they have received aid from the public health laboratory, which has been making bacteriological and chemical examinations of water, and through investigations and publications has attempted to remedy some of the evils present. The director of the State laboratory and his assistants in charge of the branch laboratories have been detailed to exercise a general supervision over the water supplies of the cities in which they are located.

Water analyses have also been made in the laboratory of the commissioner of food and drugs, and through such analyses and the agency of his field force he has at times been instrumental in combating local outbreaks of typhoid fever.

In fact, it would seem that the State legislature has provided other State organizations with the money and men to carry out measures to prevent the spread of disease, while the State board of health, which was organized for that purpose and which morally has to assume the responsibility for the continued presence of preventable diseases within the State, has been neglected.

There are a number of places in the State where a thorough study of the water supply and the methods of sewage disposal should be conducted by a capable sanitary engineer, so that the communities may without waste of money provide themselves with a safe water supply and an efficient method of sewage disposal.

It would be the duty of the sanitary engineer of the State health department to make such investigations without cost to the localities, and he should have under his control a water and sewage laboratory in which to carry on the scientific part of the study. Likewise the methods of garbage collection are also in need of careful study, so that a system which is cheapest and most efficient for the locality may be instituted. The State of North Dakota is rapidly growing in population, and each year its public health engineering problems become of greater importance and more difficult to solve.

CONTROL OF THE MILK SUPPLY.

The laws enacted for the purpose of maintaining the purity of milk do not differ materially from those of other States and therefore will not be summarized here. Special provisions are made for applying the tuberculin test to dairy cattle and to cattle imported from other States.

The laws relating to the milk supply have been placed for their enforcement in the hands of the State food and drug commissioner and the State dairy commissioner. County health officers are also given authority to operate under State law, a provision inserted at the suggestion of the food and drug commissioner. It is a wise provision and will enable the State health department, under the proper organization, and the food and drug commissioner to cooperate to the fullest extent.

In the event of the formation of a district health organization, the district health officers should also be granted this authority. They could be made very active agents in the enforcement of laws to preserve the purity of milk.

Several cities have organized milk-inspection divisions which are carrying on with success activities directed toward the improvement of the milk supply.

The State food and drug commissioner will appoint local milk inspectors as his agents to serve without pay from the State. In this way his available force in the field is increased and better cooperation from the locality is secured, while at the same time the locality is benefited in that it may apply the State law to milk coming from places outside of its jurisdiction. This attitude on the part of the commissioner of food and drugs shows a most commendable desire to cooperate with other officials in the enforcement of law. Certain other States might well copy the system to their advantage.

LOCAL HEALTH AUTHORITIES.

Requirements of laws.—The laws relating to the formation and duties of local boards of health and the appointment and duties of local health officers are summarized as follows:

Local boards of health are authorized to remove for purposes of isolation any case of communicable disease, or, if the patient is not in a condition to be removed, to take such other action as may prevent the spread of the disease. The State board of health must be notified immediately of the existence and nature of the disease and measures adopted to prevent its spread. Local boards of health are authorized to provide temporary isolation hospitals, and all such places and the inmates therein are subject to the control of the local board of health. Local boards of health are also authorized to destroy infected clothing and allow reasonable reimbursement, or to provide necessary means for disinfection.

In order to prevent the spread of disease, local boards of health are authorized to employ the necessary physicians or other persons and provide such articles as may be necessary for the maintenance, welfare, and comfort of patients.

All such expenses must be paid, after proper certification, by the local government, either county, township, or city.

A patient, if able to pay, is required to reimburse the local government the cost of his maintenance, but if he is an indigent the expenses are paid by the county.

For violation of any provision of law by any health officer or member of board of health, or by any other person there is provided a fine of not less than \$10 nor more than \$50, or by imprisonment not to exceed 30 days, or both.

County boards of health.—The county board of health is composed of three members, one of whom is president, one vice president, and one the "superintendent" of public health. The State's attorney is ex officio president of the board. The county superintendent of schools is ex officio vice president. The "superintendent" of public health is appointed by the county commissioners. The qualifications required for the county superintendent of health are that he be learned in medicine and that he hold license to practice medicine in the State.

The members of the county board of health hold their office for one year and until their successors are elected and qualified.

The first meeting of the board occurs within 30 days after the appointment of the county superintendent of health and thereafter as often as once in every three months. The county boards of health are given the power, within their respective counties, outside the corporate limits of cities having a city board of health and subject to the supervisory control of the State board of health and its secretary, to supervise all matters relating to the preservation of life and health of the people in the county, including water supplies and sewerage systems and the maintenance of quarantine, which it may declare, relax, modify, or abolish; to remove or abate any public or private nuisance; to isolate, kill, or remove any animal affected with a disease that may be communicated to human beings; to make and enforce ordinances or rules meeting any emergency, or when the local board of health has neglected or refused to act with promptness and efficiency or when no such board has been established. The law further provides that all expenses incurred in carrying out the duties of the county board of health must be paid the same as other county expenses.

The president presides at the meetings and in his absence the vice president performs the same duties. The county superintendent of health acts as secretary of the board and keeps records of all its proceedings, reports monthly to the State superintendent of health such proceedings as well as other official duties performed by him. He is also required to report immediately to the State superintendent of health whenever any communicable disease appears among persons or animals, or whenever the health of persons or domestic animals is endangered. He is likewise required to report before the 10th day of each month to the secretary of the State board of health the name and address of each patient suffering from a communicable disease with the name of person reporting same. He is required to superintend, subject to the supervision and control of the State board of health, the carrying out of all duties required of county boards of health; to exercise supervisory control over all local boards of health within the county; to furnish—at the expense of the county—blanks for the reporting of notifiable diseases to township, village clerks, and physicians; to investigate public milk supplies; to enforce cleanliness in schools; to investigate overcrowded, poorly ventilated, and insanitary school buildings; to carry out orders of the county board of health when the local board of health refuses to act; and to make sanitary inspection. He is held responsible for the thorough enforcement of the laws, regulations, and rules for the protection and conservation of public health.

The president and vice president each receive \$3 per day when actually engaged in the performance of their official duties and mileage amounting to 5 cents. The county superintendent of health receives from \$300 to \$600 per year, at the discretion of the county commissioners. In addition he also receives \$5 per day for every day or fraction thereof that he may be actually engaged in the performance of his official duties, not including work confined to his office, and mileage at the rate of 5 cents.

Township boards of health.—The board of health of the township is composed of the supervisors of the township and the trustees of each incorporated village, who, within their respective township or village, exercise, under the supervisory control of the county superintendent of health, all the powers necessary for the preservation of public health.

The board of health may examine into nuisances, sources of filth, and causes of sickness and make such temporary regulations regarding the same as it may deem necessary and must immediately report its action to the county superintendent of public health, who then investigates the matter and gives the board of health specific instructions.

For violation of any order of the board of health duly published there is provided a fine of not exceeding \$100 or imprisonment not exceeding three months.

The board has the authority to abate nuisances, to enter infected premises or vessels, to quarantine infected persons, to provide a nurse and other necessities for the patient, to provide isolation hospitals.

Boards of health in incorporated villages.—The board of trustees is empowered to construct and keep in repair culverts, drains, sewers, catch basins, manholes, cess-pools; to regulate the construction and use thereof; to declare what constitutes a nuisance and to abate the same; to impose the necessary fines relative thereto; to take such other means for the preservation of health and regulate, restrain, and prohibit the running at large of dogs and to impose a tax or license not to exceed \$2 on each male dog and \$3 on each female dog; to establish and regulate markets and build market houses; to direct the location and regulate the management and construction of packing houses, smokehouses, renderies, and slaughterhouses; and prohibit any offensive or unwholesome business or establishment within or less than 1 mile from the limits of the corporation; to compel the owner of any grocery, cellar, stable, pigsty, sewer, or other unwholesome or nauseous house or place to cleanse, abate, or remove the same, and regulate the location thereof.

City boards of health.—The city board of health is composed of the city engineer and the health officer and four aldermen designated by the mayor.

The city health officer is appointed by the mayor and confirmed by the city council and holds office for two years. When the State board of health is satisfied that the city health officer is not performing his duties, it may report the case to the city council, and at the next meeting the mayor must declare the office vacant and appoint another physician to fill the unexpired term. The health officer is secretary and executive officer of the board.

The board meets regularly once a quarter, and special meetings may be held at the call of the president and secretary.

The president and vice president perform the usual duties pertaining to their offices. The secretary keeps the proceedings of the board; determines whether all city ordinances, State laws, and regulations are being enforced; instructs physicians as to the proper method of reporting diseases; furnishes such blanks as may be prescribed by the State board of health; keeps data relative to the occurrence of communicable diseases; and reports by the tenth day of each month all communicable diseases to the State board of health, and such other data as may be required by that board.

The board of health is authorized to examine into all nuisances, sources of filth, and causes of sickness and to make the necessary regulations for the protection of public health and safety of the inhabitants.

For violation of any such regulations there is provided a fine of not exceeding \$100 or imprisonment in the county jail for not exceeding 30 days, or both.

All regulations made by the board of health must be properly published in some newspaper or posted in five separate places. Boards of health are authorized to order the abatement of any nuisance within 24 hours. If such order is not complied with, the board of health may remove the nuisance and charge the cost against the owner or occupant of the premises on which the nuisance occurred.

When permission to enter any building on the discharge of official duties is refused, a complaint is made to the justice of the peace, who is required to issue a warrant directed to the sheriff, or other peace officer, commanding him to take sufficient aid and at least one member of the board of health and to have the nuisance abated.

Commission form of city government.—In the commission form of government the commissioners have power to appoint or discharge for cause all subordinates. The commissioner of health is appointed as a subordinate in the department of streets and improvement. His salary is fixed by the commissioners and he has the authority to appoint his assistants. He is also given the authority granted by law to boards of health and to prepare rules and regulations for the preservation of public health. Such regulations must first, however, be approved by the commission before they can be enforced.

He is required to recommend to the commission such sanitary measures to be taken as may be necessary. He is given authority to inspect premises and to issue the necessary orders to abate nuisances or to correct conditions dangerous to the public health, and in the event that an order is not obeyed, to do the necessary work and charge the expense against the owner.

The commissioner of health is required, in addition to the other duties imposed upon him by the commissioners, to make such reports to the State board of health and to perform such other duties as may be required of health officers by statute.

Peace officers are required to render every assistance to the commissioner of health and the chief of police is authorized to detail one or more policemen, upon the requisition of the commissioner of health, to serve notices and perform such other duties as the commissioner may require.

For refusing to permit the health officer or any of his agents to enter any building at any time in the discharge of his official duties there is provided a fine of not less than \$10 nor more than \$100.

Discussion.—In each county there has been appointed a health officer who, with few exceptions, receives the minimum salary allowed by law, namely, \$300. This compensation is hardly sufficient to justify the exercise of much energy on the part of a health officer, as he must necessarily depend upon the practice of medicine for his living.

Health organization in the counties is markedly deficient. The work of the county health officer is usually confined to the supervision of the quarantinable diseases, which is not infrequently done by telephone through the assistance of other practicing physicians in the county. The county health officer also receives the morbidity reports from the physicians and transmits them to the State superintendent of health. A few other activities are occasionally engaged in; for instance, in Barnes County the county health officer is carrying on a medical inspection of schools. In Cass County there is no such inspection, but a school nurse has been employed by the educational authorities. She receives \$90 per month.

It can be said that the county health officers are men of high qualifications as physicians and capable of giving efficient services as health officers provided they receive sufficient remuneration to enable them to give their full time to the work. The same can be said of the health officers in the various cities visited. These men were receiving from \$200 a year, as in Jamestown, to \$900 a year, the salary paid in Fargo. In general the activities being carried on are not extensive, although in the larger cities there is some semblance

of organization. In Fargo there are to be found a system of garbage collection, a city laboratory, a system of school inspection carried on by the bureau of education, a milk-inspection division, a modern water-purification plant, and a 50-bed isolation hospital. There is also a nurse, employed by the associated charities, who cooperates with the health officer.

In Grand Forks the policemen act as sanitary inspectors. There is an eight-bed isolation hospital, a municipal slaughterhouse, and a system of garbage collection, the garbage being disposed of in an incinerator. A food inspector, a milk inspector, and a dairy inspector are employed by the health department. A social service nurse, who cooperates with the health officer, is employed by the associated charities and a school nurse by the board of education. The director of the State laboratory is also employed by the city to supervise the system of water purification.

Better organization in all of the communities will no doubt come in time. At present the cities are not large enough to warrant the employment of a full-time health officer. However, in every city of 5,000 inhabitants or over the part-time health officer should have at least one inspector trained in sanitary science as an assistant. In cities of under 5,000 a trained sanitarian may act as health officer.

In the counties it would seem better to work under the present system, and in addition to divide the State into not less than six districts, a full-time district health officer to be placed in each. This officer would be actively engaged in working out the different health problems in his district, receiving from local health officers such assistance as they could give, lending them moral support, and exercising a general advisory and supervisory control over them. The district health officers should be directly responsible to and under the control of the State board of health.

Public health activities carried on in cities visited.

City.	Population.	Appropriation to health and sanitation.	Health officer (salary per annum).	Number of employees, exclusive of health officer.	Activities of health department.								Other activities.		Water supply.	Sewerage system.	Sewerage disposal.		
					Quarantine and disinfection.	Milk inspection.	Dairy inspection.	Food inspection.	Sanitary inspection.	Garbage.			Isolation hospital (number of beds).	Diagnostic laboratory.				Health supervision of schools (number of education).	Social service nurses (associated charities).
										Collection.	How paid for.	Disposal.							
Fargo.....	20,549	\$22,850	1,800	2	Yes.	Yes.	Yes.	Yes.	Yes.	Yes.....	Health fund.	Dumped and burned.	50	Yes.	Yes.	Yes.	Red River rapid sand filtration and hypochlorite treatment.	Yes.	Red River, untreated.
Grand Forks.	13,554	8,000	1,400	16	Yes.	Yes.	Yes.	Yes.	Yes.	Yes.....	.....do.....	Incinerated.	8	(*)	Yes.	Yes.	.....do.....	Yes.	Do. James River septic tank.
Jamestown..	5,506	.....	1,200	.....	Yes.	.....	.....	.....	.....	Private collection.	.....do.....	Dumped.....	7	(*)	.....	.....	Driven wells; no treatment.	Yes.	Do. James River septic tank.
Bismarck....	6,344	1,750	1,400	1	Yes.	Yes.	Yes.	.....	.....	Yes.....	By householder.	.....do.....	None.	(*)	.....	.....	Missouri River sedimentation.	Yes.	Irrigation.
Mandan.....	4,142	900	1,300	2	Yes.	Yes.	Yes.	.....	.....	Yes.....	Health fund.	.....do.....	None.	(*)	.....	.....	.....do.....	Yes.	Heart River; untreated.
Valley City..	4,783	300	1,300	.....	Yes.	Yes.	Yes.	.....	.....	Private collection.	.....	.....do.....	6	(*)	.....	.....	Driven wells; no treatment.	Yes.	Shenandoah River; untreated.
Minot.....	10,053	.....	1,600	.....	Yes.	.....	.....	.....	.....	Yes.....	.....	.....do.....	6	(*)	Yes.	.....	Mouse River rapid sand filtration and hypochlorite treatment.	Yes.	River; untreated.
Devils Lake.	4,525	800	1,300	1	Yes.	Yes.	Yes.	.....	.....	Private collection.	.....	.....do.....	6	(*)	.....	.....	Driven wells; no treatment.	Yes.	Lake bottom; untreated.

1 Part time.

* Includes policemen who act as sanitary inspectors.

* Use State laboratory.

Public health activities carried on in counties visited.

County.	Population.	Expenses, health and sanitation, 1915.	Health officer, salary per annum.	Quarantine and disinfection.	Health supervision of schools.	Other activities.
Cass.....	40,436	\$3,059.40	\$300.00	Yes.....	None.....	None.
Grand Forks.....	28,658	1,400.00	300.00	Yes.....	Yes: by nurse, bureau of education..	1 o.
Stutsman.....	24,091	2,000.00	500.00	Yes.....	None.....	Do.
Burleigh.....	14,157	550.00	300.00	Yes.....	.....do.....	Do.
Morton.....	26,717	1,187.00	300.00	Yes.....	.....do.....	Do.
Ward.....	28,098	4,175.00	480.00	Yes.....	.....do.....	Do.
Barnes.....	18,703	807.17	200.00	Yes.....	Yes: by county health officer.....	Do.
Ramsey.....	15,070	500.00	300.00	Yes.....	None.....	Do.

HEALTH SUPERVISION OF SCHOOLS.

In a few instances only does one find any health supervision maintained over the children of the public schools. When such is observed it is usually found to be incomplete in that the services of either a physician or a nurse may be employed, but rarely the services of both.

Requirements of laws.—The law bearing on the subject of the employment of medical inspectors, together with other laws relating to schools and public health, is summarized as follows:

Authority is given to school boards, whenever petitioned by a majority of persons having children attending the schools of the district, to employ physicians as medical inspectors. It is the duty of such medical inspectors to examine at least once a year all school children, except those presenting a certificate of health from a licensed physician. Proper record must be kept for each child and a copy submitted to the superintendent of schools. Parents must be notified of the physical defects of their children with recommendations for conserving the child's health.

Medical inspectors of schools must cooperate with the State or local health officers in dealing with communicable diseases.

Local superintendents of schools are required to cooperate with school boards in promoting medical inspection. Blanks and other supplies must be furnished by the school board.

All plans and specifications of buildings to be used, in whole or part, as public-school buildings must be submitted to the State superintendent of public instruction for his approval before the buildings can be erected. The plans and specifications must show in detail the system of ventilating, heating, and lighting. No plans may be approved unless there is provided at least 12 square feet of floor space and 200 cubic feet of air space for each pupil in each study or recitation room. Light must be admitted from the left or from the left and rear of class rooms and the total light area must, unless strengthened by the use of reflecting lenses, be equal to at least 20 per cent of the floor space. All ceilings must be at least 12 feet in height. The ventilating system must be such that there will be at least 30 cubic feet of pure air every minute per pupil, warmed to maintain an average temperature of 70° F. during coldest weather, and the facilities for exhausting the foul air must be positive and independent of atmospheric changes. All public-school buildings must be kept clean and free from offensive smells arising from drains, privies, etc., and they must be provided with sufficient number of water-closets or other contrivances properly ventilated.

All toilet rooms must have outside ventilation and windows permitting free access of air and light.

When the county superintendent of schools reports to the county board of health that any school building or its outhouse is in an insanitary or unsafe condition, or that any pupil is alleged to be defective in mind or body, the board of health shall investigate and direct the school board to take the necessary action.

DISSEMINATION OF INFORMATION.

The State board of health publishes quarterly a 12-page bulletin, containing statistical data for the previous three months and original or compiled information of scientific and popular interest bearing on public health. About 1,925 copies of each issue of this bulletin are distributed to health officers, physicians, boards of health, embalmers, etc.

A biennial report is made to the governor.

The superintendent of public health has purchased at his own expense an interesting moving-picture film telling an instructive story of a man whose parents neglected to have his birth registered. It is a story with a moral and should be of great educational value. This film is loaned to the different cities, arrangements being previously made by the local health officer to have it exhibited in the local moving-picture houses. To show it requires about 15 minutes, and the only cost to the local officials is the payment of expressage, a matter of some 75 cents.

SANITATION OF HOTELS AND OTHER PLACES.

In order to maintain the hotels in a good sanitary condition, there is appointed by the governor a hotel inspector, who serves for a period of two years and who is required to inspect every hotel at least once each year. His salary is \$1,800. He is also entitled to traveling expenses. His reimbursement is paid from fees collected, which vary from \$2 to \$20, depending on the number of sleeping rooms in the hotel inspected.

This inspector should be placed under the administrative control of the State health department, as his work is closely associated with the sanitary problems of the State.

Requirements of laws.—The laws bearing on the sanitation of hotels, food-producing establishments, etc., are summarized as follows:

Hotel inspection.—Every hotel must be well drained, constructed, and plumbed according to established sanitary principles; must be kept clean and in a sanitary condition, and free from effluvia arising from any sewer, drain, privy, or other source within the control of the owner, manager, agent, or other person in charge; and must be provided with properly screened water-closets or privies for the separate use of males and females. These water-closets or privies must be disinfected as often as may be necessary to keep them at all times in a sanitary condition.

All bedrooms must be kept free from vermin and the bedding must be clean and sufficient in quantity and quality; all sheets must be at least 8 feet in length, and each guest must be furnished with two towels. In case bedrooms are carpeted the carpet thereon must be taken up and thoroughly cleansed at least once each year.

No rusted tin nor iron vessel or utensil may be used in cooking food, and all foodstuffs must be kept in a clean and suitable place, free from dampness and contact with dirty water. The floors, closets, cupboards, and walls of all kitchens must at all times be kept free from dirt and no dust or grease be allowed to collect thereon. A metal container must be provided to hold ashes where such ashes are stored in or around the hotel building. In all cases where a patient having an infectious or contagious disease has been confined in a hotel room, such room must, upon the removal of the patient, be closed and fumigated, and upon the completion of such fumigation the certificate of a reputable physician to that effect must be forwarded to the hotel inspector. In all hotels or lodging houses where 50 cents or more per night is charged for lodging the sheets and pillow cases must be changed after the departure of each guest, and it is unlawful to have upon a bed in any such hotel or lodging house a mattress of a lower grade than that commonly known to the trade as cotton-felt combination; each mattress must weigh at least 35 pounds unless it be a hair mattress, in which case it may weigh 30 pounds or more. Each hotel, rooming house, or restaurant where 50 cents or more per meal is charged is required to keep in its main public wash-room, individual towels or paper toweling in full view and reach of all guests at all hours. Each room must be properly ventilated by at least one window and by a doorway leading into the hall. All hotel windows must be screened against flies and mosquitoes.

For violation of this law there is provided a fine of not less than \$10 nor more than \$50, or by imprisonment, or both.

Hotels are required to furnish to their guests pure water free from disease germs, taken from a source far enough away from privy vaults or other means of contamination to insure freedom from pollution. Such water supply is subject to the inspection of the hotel inspector, and when found unfit for drinking purposes its use must be discontinued.

In addition to the sanitary provisions, provision is also made for adequate fire escapes, fire extinguishers, protected elevator shafts, and other contrivances for the safety of the guests.

Railroad stations and passenger coaches.—All railroad companies are required to maintain at railroad stations where passenger tickets are sold an approved form of toilet. Where a sewerage system is maintained within 300 feet of the station the water-closet must be within the house. Separate compartments must be provided for men and women. In the compartments for men there must be provided urinals draining into a sewer, vault, or other suitable place which will prevent the creation of a nuisance.

The board of railroad commissioners of the State or any local health officer is granted authority to inspect such installations, and if they are found insanitary it is the duty of the railroad company to make such alterations or repairs as will remedy the condition.

Waiting rooms must be scrubbed at least once a week with a standard disinfectant and must be maintained at all times in a comfortable and sanitary condition.

For violation there is provided a fine of not less than \$20 nor more than \$100.

It is prohibited to sweep any railroad coach occupied by passengers except the sweeping be done by some vacuum device, or except when the floor is first moistened by water or oil or some sweeping compound.

For violation there is provided a fine not to exceed \$25.

Sanitation of barber shops.—Barbers or barbers' apprentices and all persons engaged in hair dressing or manicuring must disinfect their tools in a manner approved by the State board of health before they are used on any of their customers.

For violation there is provided a fine of not less than \$25 nor more than \$200.

Disinfection of vehicles.—All cars, coaches, or boats transporting passengers in or through the State must be disinfected in an approved manner not more than 30 days from the date of use of such vehicle.

It is made the duty of every corporation engaged in the transportation of passengers to keep posted in the vehicle a printed notice stating the time and place at which the car, coach, or boat was last disinfected.

For violation there is provided a fine of not more than \$100.

Disinfection of second-hand goods.—It is made the duty of all dealers in second-hand goods to disinfect, in a manner approved by the State board of health, all second-hand furniture, bed clothes, wearing apparel, kitchen utensils, etc., before they are sold.

Sanitation of food-producing establishments.—Every building, room, basement, or cellar used as a bakery, cannery, packing house, slaughterhouse, dairy, creamery, cheese factory, restaurant, hotel, grocery, meat market, or other place of similar character, must be properly lighted, drained, plumbed, and ventilated, and must be conducted with strict regard to the influence of the surroundings on the health of the employees and the purity and wholesomeness of the food sold or manufactured therein.

All such establishments or vehicles used in the transportation of food products must be maintained in a sanitary condition. Food must be protected from flies, dirt, or other foreign or injurious substance. All apparatus used in the preparation must be thoroughly cleaned daily and the clothing of employees maintained in a cleanly state.

The interior of all rooms must be plastered, wainscoted, or ceiled with metal or lumber, oil painted or lime washed, and all painted surfaces must be kept clean by washing with soap and water. Floors must be made of an impervious material, such as cement, tile, brick, or wood, which can be flushed and washed clean with water.

All doors, windows, or other openings, during fly season, must be fitted with self-closing screen doors and wire window screens of a mesh not coarser than 14.

All places selling or manufacturing food must be provided with toilets separate from the room where the food is handled. The toilet compartment must have a floor made of a nonabsorbent material, which must be washed daily. These compartments must be properly ventilated. Lavatories supplied with soap, running water, and towels must be provided adjacent to toilets. The employees are required before handling any food or after visiting toilets to wash their hands and arms thoroughly in clean water.

When necessary, cuspidors must be provided. Expectoration, except into the cuspidors, is prohibited. Cuspidors must be washed out daily and disinfected, and at least 5 ounces of the disinfectant must be left in the cuspidor while in use.

No room in which food is handled may be used for sleeping purposes. No person is allowed to work in any place where food is handled who is affected with any venereal disease, smallpox, diphtheria, scarlet fever, yellow fever, tuberculosis, bubonic plague, Asiatic cholera, leprosy, trachoma, typhoid fever, epidemic dysentery, measles, mumps, German measles, whooping cough, chicken-pox, or any other communicable disease.

Inspectors or agents of the food commissioner are authorized to enter at all reasonable times every place where food products are manufactured or sold, and provision is made for the procedure to be carried out in the abatement of nuisances or in case of violation of the law.

For violation of this act adequate penalties are provided.

EXPENDITURES AND APPROPRIATIONS.

For the two-year period ended June 30, 1915, there were appropriated by the State legislature to the State board of health \$5,400, or \$2,700 per annum. The last legislature, however, reduced this amount, so that for the two-year period ending June 30, 1917, there is available to the State board of health only \$4,600, or \$2,300 per

annum. This legislature likewise saw fit to limit expenditures from this fund to definite amounts for specific purposes. A health organization which is really active is continually meeting emergencies. A health officer is not a prophet, and it is impossible for him to foretell what amounts he may require to meet these emergencies. To limit his activities by this means greatly interferes with efficient public health work. The money appropriated was allotted as follows:

Superintendent of public health, \$1,200 per annum.....	\$2, 400
One stenographer, \$600 per annum.....	1, 200
Postage.....	200
Office supplies.....	100
Traveling expense.....	200
Printing.....	400
Miscellaneous expense—telephone, express, etc.....	100
Total.....	4, 600

From the above table it may be assumed that the activities of the board of health must be confined to the office, and it can be most emphatically stated that work of this kind is futile. A State board of health without a field force can accomplish nothing.

The following table shows the expenditures during the year ended June 30, 1915:

	Execu- tive office and board of health.	Educa- tional.	Vital sta- tistics.	Epidem- iology.	Total.
Dues, State and provincial boards of health.....	\$10.00				\$10.00
Express.....	.81	\$0.84	\$1.37		3.02
Office supplies.....	2.59		1.65	\$12.00	16.24
Postage.....	30.00	3.96	64.00		97.96
Printing and binding.....		136.50	192.60		329.10
Rent of vault.....			60.00		60.00
Salaries.....	1,920.00				1,920.00
Salaries (emergency clerks).....	70.00				70.00
Stationery.....	45.90				45.90
Telephone and telegraph.....				1.56	1.56
Traveling expenses.....	32.00				32.00
Total.....	2,111.30	141.30	319.62	13.56	2,585.78

In addition to the money appropriated to the State board of health there were appropriated for the biennial period ending June 30, 1917, to the public health laboratory \$16,000, or \$8,000 per annum, and to the Antituberculosis Association \$2,000, or \$500 for the year 1915 and \$1,500 for the year 1916. Thus there has been appropriated for strictly public health purposes for the two-year period a total of \$22,600 or approximately \$11,300 per annum.

The money available to the State for general purposes is approximately \$2,500,000 for a 12-month's period. Computing the amounts that should be spent for the preservation of the public health on the two per cent basis there would result the sum of \$50,000, which

would not be sufficient to support an adequate State health department including a district health organization. The former requires not less than \$25,000 and the later \$36,000.

As far as the districts are concerned it is believed that the counties can well afford to assume the expense. Property in the counties is assessed at but 33 per cent of its actual valuation and the tax levy has not nearly reached its maximum. Thirty-six thousand dollars, a sufficient amount to support six districts, when divided among 52 counties, would be a small sum. In time the revenues of the State will have so increased that the expense of the districts can be defrayed out of State funds.

For the present the State should appropriate \$25,000 for its State health department, it being assumed that such department will then perform the functions now being performed by the several State bodies, as, for instance, the laboratory work, hotel inspection, and antituberculosis work, in addition to other duties now not attempted. The sum represents but a little over twice as much as is now being spent by the several State bodies engaged in public health work. It might be allotted at the discretion of the board of health as follows:

Secretary, not less than.....	\$3, 000
Epidemiologist, not less than.....	2, 500
Sanitary engineer, not less than.....	2, 000
Bacteriologist, not less than.....	1, 500
2 assistant bacteriologists, at \$1,200.....	2, 400
2 clerks, at \$840.....	1, 680
1 clerk, at \$720.....	720
Maintenance of laboratory.....	4, 000
Traveling expenses, maintenance of office, etc.....	7, 200
Total.....	25, 000

RECOMMENDATIONS.

As a result of a careful study of public health administration in North Dakota it may be concluded that there is a great lack of organization and funds with which to carry on public health work. Such health measures as have been enacted are more or less scattered among different branches of the government, whereas all these measures should be coordinated and their enforcement imposed on a single State health organization. In order to bring about this condition the following recommendations are made:

1. That all public health activities now being performed by the State board of health and the public health laboratory, as well as the public health activities now being performed by other Government agencies, be brought together in a department of health.

2. That the department of health be divided into a board of health, the office of the secretary, a bureau of communicable diseases, a bureau of public health engineering, and a bureau of "vital statistics."

3. That the board of health be composed of five members to hold office for five years and that the method of their appointment be so arranged that there will be but one new appointment each year.

4. That the secretary of the State board of health be appointed by the board as State health officer; that he be a full-time official prohibited from engaging in the practice of medicine or any other business that will interfere with his official duties; that he hold office during efficiency and subject to discharge for cause only by the board of health, and that he receive a salary of not less than \$3,000 per year and necessary traveling expenses.

5. That a full-time chief, an epidemiologist, be placed at the head of the bureau of communicable diseases.

6. That a full-time chief, a sanitary engineer, be placed at the head of the bureau of public health engineering.

7. That a full-time chief be placed over the bureau of statistics.

8. That the control of the public health laboratory be transferred from the University of North Dakota to the State department of health.

9. That the work of the laboratory be divided into two parts, that relating to the diagnosis of disease being under the control of the epidemiologist, and that relating to sewage and water analyses being under the control of the sanitary engineer.

10. That a bacteriologist be employed to carry on the laboratory work.

11. That the duties of the epidemiologist be to have charge of the collection and disposition of morbidity reports, to keep currently informed regarding the prevalence and geographic distribution of controllable diseases throughout the State, to supervise the preventive measures of the department for the control of disease, and to supervise the work of district and other health officers.

12. That the sanitary engineer be given supervisory and advisory control over water supplies, sewerage systems, and the disposal of garbage and trade wastes throughout the State.

13. That the hotel inspector be transferred to the health department to perform, in addition to hotel inspection, such other sanitary inspections or investigations as may be directed by the secretary of the State board of health.

14. That special attention be paid by the secretary of the State board of health to the dissemination of information on matters relating to the public health through the medium of popular bulletins, lectures, and exhibits.

15. That the State be divided into not less than six districts, each district to be composed of one or more counties at the discretion of the State board of health.

16. That a physician trained in the science of public health be appointed by the State board of health for each district as district health officer and given an office and adequate number of assistants, including an inspector, nurses, and a clerk. No one should be appointed until he has passed a thorough examination before the State department of health and has otherwise proved himself capable of filling the position. He should first receive a probationary appointment, and he should be prohibited from engaging in any private business which would interfere with his official duties. He should hold office during efficiency and good behavior and receive an adequate salary, which, as he proves himself capable, should be increased at definite intervals until it has reached a maximum which, in the judgment of the department of health, is sufficient. He should be allowed actual and necessary expenses when traveling on official business.

17. That the district health officer be made responsible to the State department of health for the enforcement of State health laws and regulations, and, under the State department of health, have supervisory and advisory control over county, city, and town health officials.

18. That the powers and duties of the district health officer be defined by law and include the enforcement of the law regarding the notification of cases of disease; the inspection of dairies, canneries, industrial camps, and all places of business or manufacture within his jurisdiction; the inspection of county schools and school children; the investigation of cases of illness and the institution of measures for the control of disease; the investigation of nuisances and the abatement of same; the keeping of complete records of transactions and the forwarding of all necessary reports to the State department of health; the dissemination of sanitary information in his district; the enforcement of the laws relating to the registration of births and deaths, and the performance of all other duties that may be required of him by the State department of health.

19. That the field organization be mobile, so that the district health officers, or their assistants, could be concentrated in any part of the State or in any city within the State in case of emergency, or their transfer from one district to another effected in the interest of the public service.

20. That the county and city organizations remain as they are, but that all local officials perform their duties under the supervision of the district health officer.

21. That the clerical personnel of the department of health be increased so as to adequately perform all the duties imposed upon it.

22. That the entire personnel of the department of health, except the members of the board, be "full-time" employees.

23. That a comprehensive law be enacted making it compulsory on the part of all persons interested to have plans for proposed installations of water supplies, sewerage, and refuse-disposal systems, approved by the State department of health. That the State department of health be empowered to require any changes or extensions in already existing installations that may be necessary to insure safe water supplies or proper sewage or refuse-disposal systems; or to order the installation of water-supply and sewerage or refuse-disposal systems in the absence of same. That the State department of health have the power to close, or to prevent the use of water from, any well, spring, or other source that in its opinion is dangerous to health, or to require the filling or draining of places where there is any accumulation of water, breeding of mosquitoes, or other condition dangerous to health.

24. That the model law for morbidity reports with necessary modifications be enacted.

25. That a law be enacted giving power to the State department of health to organize a system of health supervision of schools and school children in rural schools, and to supervise such work performed by cities.

26. That provision be made by law for calling a conference of district and other health officers annually, or oftener, by the State health officer, the expenses so incurred to be paid by the State, county, or local authorities.

27. That all plans of public buildings be submitted to the State department of health for approval as to sanitary arrangements.

28. That quarters large enough to accommodate the different divisions, as contemplated in this report, be furnished for the State department of health at Bismarck.

29. That provision be made for the free distribution of diphtheria antitoxin throughout the State.

30. That the methods of keeping accounts be such as to allow an accurate determination of the exact cost of any bureau or division or any special work at any time.

PLAGUE-PREVENTION WORK.

CALIFORNIA.

The following report of plague-prevention work in California for the week ended November 27, 1915, was received from Senior Surg. Pierce, of the United States Public Health Service, in charge of the work:

SAN FRANCISCO, CAL.

RAT PROOFING.

New buildings:

Inspections of work under construction.	246
Basements concreted (79,740 square feet)	97
Floors concreted (6,750 square feet)....	4
Yards, passageways, etc. (36,724 square feet)	133
Total area of concrete laid (square feet).	123, 214

Class A, B, and C (fireproof) buildings:

Inspections made.....	125
Roof and basement ventilators, etc., screened.....	2, 603
Wire screening used (square feet)	12, 816
Cpenings around pipes, etc., closed with cement.....	1, 932
Sidewalk lens lights replaced	1, 500

(ld buildings:

Inspections made	325
Wooden floors removed.....	52
Yards and passageways, planking removed.....	12
Cubic feet new foundation walls installed.....	4, 765

SAN FRANCISCO, CAL.—Continued.

RAT PROOFING—continued.

Old buildings—Continued.

Concrete floors installed (17,468 square feet).....	20
Basements concreted (22,430 square feet).....	20
Yards and passageways, etc., concreted (8,048 square feet).....	32
Total area concrete laid (square feet) ..	47, 982
Floors rat proofed with wire cloth (3,355 square feet).....	3
Buildings razed.....	19
New garbage cans stamped approved.....	163
Nuisances abated.....	318

OPERATIONS ON THE WATERFRONT.

Vessels inspected for rat guards.....	16
Reinspections made on vessels.....	21
New rat guards procured.....	20
Defective rat guards repaired.....	14
Vessels on which cargo was inspected.....	1

Amount of cargo inspected and description of same.	Condition.	Rat evidence.	Amount of cargo inspected and description of same.	Condition.	Rat evidence.
Steamer Queen from Seattle: 168 cases milk, salmon, apples, and household goods.....	O. K.	None.	Steamer Queen from Seattle—Continued. 150 sacks flour and bran. 30 tubs lard.....	O. K. O. K.	None. None.

Rats trapped on wharves and water front...	46
Rats trapped on vessels	29
Traps set on wharves and water front.....	195
Traps set on vessels.....	67
Vessels trapped on.....	13
Poisons placed on water front (pieces).....	3, 600
Poisons placed within Panama-Pacific International Exposition grounds (pieces).....	3, 600
Bait used on water front and vessels, bacon (pounds).....	5
Amount of bread used in poisoning water front (loaves).....	12
Pounds of poison used on water front.....	6

RATS COLLECTED AND EXAMINED FOR PLAGUE.

San Francisco:

Collected.....	403
Examined.....	295
Found infected.....	None.

RATS COLLECTED AND EXAMINED FOR PLAGUE—Continued.

Hollister:

Collected.....	13
Examined.....	13
Found infected.....	None.

RATS IDENTIFIED.

Mus norvegicus.....	186
Mus musculus.....	63
Mus alexandrinus.....	89
Mus rattus.....	60

SQUIRRELS COLLECTED AND EXAMINED FOR PLAGUE.

Contra Costa County.....	50
Found infected.....	None.

RANCHES INSPECTED AND HUNTED OVER.

Contra Costa County.....	1
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Record of plague infection.

Places in California.	Date of last case of human plague.	Date of last case of rat plague.	Date of last case of squirrel plague.	Total number rodents found infected since May, 1907.
Cities:				
San Francisco.....	Jan. 30, 1908	Oct. 23, 1908	(¹)	398 rats.
Oakland.....	Aug. 9, 1911	Dec. 1, 1908	(¹)	126 rats.
Berkeley.....	Aug. 28, 1907	(¹)	(¹)	(¹)
Los Angeles.....	Aug. 11, 1908	(¹)	Aug. 21, 1908	1 squirrel.
Counties:				
Alameda (exclusive of Oakland and Berkeley).....	Sept. 24, 1909	Oct. 17, 1909 ²	July 12, 1915	287 squirrels, 1 wood rat.
Contra Costa.....	July 13, 1915	(¹)	Nov. 12, 1915	1,597 squirrels.
Fresno.....	(¹)	(¹)	Oct. 27, 1911	1 squirrel.
Merced.....	(¹)	(¹)	July 12, 1911	5 squirrels.
Monterey.....	(¹)	(¹)	Apr. 10, 1914	6 squirrels.
San Benito.....	June 4, 1913	(¹)	Aug. 14, 1915	50 squirrels.
San Joaquin.....	Sept. 18, 1911	(¹)	Aug. 26, 1911	18 squirrels.
San Luis Obispo.....	(¹)	(¹)	Jan. 29, 1910	1 squirrel.
Santa Clara.....	Aug. 31, 1910	(¹)	July 23, 1913	25 squirrels.
Santa Cruz.....	(¹)	(¹)	May 17, 1910	3 squirrels.
Stanislaus.....	(¹)	(¹)	June 2, 1911	13 squirrels.

¹ None.² Wood rat.

The work is being carried on in the following-named counties: Alameda, Contra Costa, San Francisco, Stanislaus, San Benito, and Monterey.

LOUISIANA—NEW ORLEANS—PLAGUE-ERADICATION WORK.

The following report of plague-eradication work at New Orleans for the week ended November 27, 1915, was received from Surg. Creel, of the United States Public Health Service, in charge of the work:

OUTGOING QUARANTINE.

Vessels fumigated with sulphur.....	24
Vessels fumigated with carbon monoxide....	14
Vessels fumigated with cyanide gas.....	5
Sulphur used (pounds).....	3,634
Coke consumed in carbon-monoxide fumigation (pounds).....	18,200
Cyanide used in cyanide-gas fumigation (pounds).....	213
Sulphuric acid used in cyanide-gas fumigation (pints).....	295
Clean bills of health issued.....	38
Foul bills of health issued.....	2

FIELD OPERATIONS.

Rats trapped.....	8,640
Premises inspected.....	6,211
Notices served.....	648
Garbage cans installed.....	5

BUILDINGS RAT PROOFED.

By elevation.....	103
By marginal concrete wall.....	112
By concrete floor and wall.....	53
By minor repairs.....	114
Total buildings rat proofed.....	382
Concrete laid (square yards).....	6,096
Lots and sheds, planking removed.....	26
Buildings demolished.....	23
Total buildings rat proofed to date (abated).....	95,370

LABORATORY OPERATIONS.

Rodents received by species:	
<i>Mus rattus</i>	123
<i>Mus norvegicus</i>	990

LABORATORY OPERATIONS—continued.

Rodents received by species—Continued.	
<i>Mus alexandrinus</i>	132
<i>Mus musculus</i>	7,058
Wood rats.....	209
Muskrats.....	70
Putrid (included in enumeration of species).....	53
Total rodents received at laboratory.....	8,582
Rodents examined.....	1,939
Number of suspicious rats.....	11
Plague rats confirmed.....	1

PLAGUE RATS.

Case number, 267.	
Address, 1323 Carondelet Street.	
Captured, Nov. 5, 1915.	
Diagnosis confirmed, Nov. 23, 1915.	
Treatment of premises, intensive trapping; removal of rubbish and debris.	
Last case of human plague, Sept. 8, 1915.	
Last case of rodent plague, Nov. 23, 1915.	
Total number of rodents captured to Nov. 27.....	515,508
Total number of rodents examined to Nov. 27.....	303,816
Total cases of rodent plague to Nov. 27, by species:	
<i>Mus musculus</i>	5
<i>Mus rattus</i>	18
<i>Mus alexandrinus</i>	9
<i>Mus norvegicus</i>	235
Total rodent cases to Nov. 27, 1915.....	267

HAWAII—PLAGUE PREVENTION.

The following reports of plague-prevention work in Hawaii were received from Surg. Trotter, of the United States Public Health Service:

Honolulu.

WEEK ENDED NOV. 20, 1915.

Total rats and mongoose taken.....	381	Classification of rats killed by sulphur dioxide:	
Rats trapped.....	314	<i>Mus alexandrinus</i>	1
Mongoose trapped.....	3	Average number of traps set daily.....	984
Rats found dead.....	1	Cost per rat destroyed, 20½ cents.	
Rats shot from trees.....	62	Last case rat plague, Aiea, 9 miles from Honolulu, Apr. 12, 1910.	
Rats killed by sulphur dioxide.....	1	Last case human plague, Honolulu, July 12, 1910.	
Examined microscopically.....	312	Last case rat plague Kainehe, Kukaiau, Hawaii, Nov. 17, 1915.	
Showing plague infection.....	None.	Last case human plague Kainehe, Kukaiau, Hawaii, Nov. 16, 1915.	
Classification of rats trapped:			
<i>Mus alexandrinus</i>	129		
<i>Mus musculus</i>	106		
<i>Mus norvegicus</i>	46		
<i>Mus rattus</i>	33		
Classification of rats shot from trees:			
<i>Mus alexandrinus</i>	48		
<i>Mus rattus</i>	14		

Hilo.

WEEK ENDED NOV. 13, 1915.

Rats and mongoose taken.....	3,190	Classification of rats trapped and found dead—Continued.	
Rats trapped.....	3,138	<i>Mus rattus</i>	704
Rats found dead.....	1	<i>Mus musculus</i>	1,515
Mongoose taken.....	51	Last case of rat plague, Amana Stables, Paauilo, Oct. 31, 1915.	
Rats and mongoose examined microscopically.....	3,190	Last case of human plague, Amana Camp, Paauilo, Oct. 29, 1915.	
Rats and mongoose plague infected.....	None.		
Classification of rats trapped and found dead:			
<i>Mus norvegicus</i>	583		
<i>Mus alexandrinus</i>	337		

PORTO RICO—PLAGUE PREVENTION.

The following table shows the number of rats and mice examined in Porto Rico for plague infection during the three weeks ended November 19, 1915. No plague infection was found.

Place.	Rats.	Mice.
San Juan.....	225	27
Puerta de Tierra.....	181	19
Santurce.....	291	11

PREVALENCE OF DISEASE.

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring.

IN CERTAIN STATES AND CITIES.

ANTHRAX.

New York Report for October, 1915.

During the month of October, 1915, 5 cases of anthrax were notified in the State of New York.

CEREBROSPINAL MENINGITIS.

New York Report for October, 1915.

Place.	New cases reported.	Place.	New cases reported.
New York:		New York—Continued.	
Delaware County.....	1	St. Lawrence County.....	1
Erie County.....	1	New York City.....	7
Madison County.....	1	Total.....	13
Monroe County.....	1		
Montgomery County.....	1		

City Reports for Week Ended Nov. 27, 1915.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Boston, Mass.....	1	1	Milwaukee, Wis.....	1	1
Chicago, Ill.....	1	1	Newark, N. J.....	1	1
Dayton, Ohio.....	1	1	New York, N. Y.....	1	1
Detroit, Mich.....	1	1	Philadelphia, Pa.....	1	1
Galesburg, Ill.....	1	1	Portland, Oreg.....	1	1
Lexington, Ky.....	1	1	Washington, D. C.....	1	1
Lowell, Mass.....	1	1	Wheeling, W. Va.....	1	1

DIPHTHERIA.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 3698.

ERYSIPELAS.**City Reports for Week Ended Nov. 27, 1915.**

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Akron, Ohio.....		1	McKeesport, Pa.....	1	
Alameda, Cal.....	1		Malden, Mass.....		1
Ann Arbor, Mich.....	1		Milwaukee, Wis.....		1
Baltimore, Md.....		1	Montclair, N. J.....	1	
Chicago, Ill.....	10	1	Newark, N. J.....	5	
Cincinnati, Ohio.....	1		New Castle, Pa.....	1	
Cleveland, Ohio.....	5		New York, N. Y.....		2
Detroit, Mich.....	3	1	Philadelphia, Pa.....	7	
Duluth, Minn.....	1		Pittsburgh, Pa.....	6	1
Erie, Pa.....	2		Portland, Oreg.....	1	
Kalamazoo, Mich.....	1		St. Louis, Mo.....	4	
Lancaster, Pa.....	1		San Francisco, Cal.....	1	1
Los Angeles, Cal.....	1				

MALARIA.**City Reports for Week Ended Nov. 27, 1915.**

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Charleston, S. C.....		1	Nashville, Tenn.....		1
Dallas, Tex.....	11	1	New Orleans, La.....		1
Galveston, Tex.....	1	1	New York, N. Y.....		1
Little Rock, Ark.....	2		San Francisco, Cal.....	1	

MEASLES.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 3693.

PELLAGRA.**City Reports for Week Ended Nov. 27, 1915.**

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Charleston, S. C.....		3	New Orleans, La.....	2	2
Dallas, Tex.....	2	2	Wilmington, N. C.....	1	1
Mobile, Ala.....		3	Worcester, Mass.....	1	

PLAGUE.**Louisiana—New Orleans—Plague-Infected Rat Found.**

Surg. Croel reported that a rat captured November 23, 1915, at 906 Alix Street (in Algiers), New Orleans, La., was proven plague infected December 9, 1915.

PNEUMONIA.**City Reports for Week Ended Nov. 27, 1915.**

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Binghamton, N. Y.....	5		Newport, Ky.....	1	1
Chicago, Ill.....	98	66	Norfolk, Va.....	2	2
Cleveland, Ohio.....	27	21	Oakland, Cal.....	1	8
Detroit, Mich.....	9	13	Philadelphia, Pa.....	55	46
Duluth, Minn.....	1	1	Pittsburgh, Pa.....	18	19
Grand Rapids, Mich.....	2	3	Racine, Wis.....	1	
Kalamazoo, Mich.....	4		Reading, Pa.....	4	2
Lexington, Ky.....	1		Sacramento, Cal.....	1	1
Los Angeles, Cal.....	13	11	San Francisco, Cal.....	6	5
McKeesport, Pa.....	2		Wilkes-Barre, Pa.....	1	1
Manchester, N. H.....	2	2	Wilmington, N. C.....		
Newark, N. J.....	5	4	Worcester, Mass.....	2	

POLIOMYELITIS (INFANTILE PARALYSIS).**New York Report for October, 1915.**

Place.	New cases reported.	Place.	New cases reported.
New York:		New York—Continued.	
Broome County.....	1	Otsego County.....	1
Cayuga County.....	3	Schenectady County.....	1
Chautauqua County.....	3	Steuben County.....	2
Erie County.....	10	Tompkins County.....	3
Essex County.....	3	Wayne County.....	1
Genesee County.....	1	Westchester County.....	3
Monroe County.....	13	New York City.....	21
Montgomery County.....	1		
Ontario County.....	3	Total.....	71
Orleans County.....	1		

City Reports for Week Ended Nov. 27, 1915.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Akron, Ohio.....		1	Nashville, Tenn.....	1	1
Binghamton, N. Y.....	1		New York, N. Y.....	2	
Cleveland, Ohio.....	3	1	Philadelphia, Pa.....	1	
Erie, Pa.....	1		Providence, R. I.....	2	
Los Angeles, Cal.....	1		San Francisco, Cal.....	1	
Manchester, N. H.....	1	1	Zanesville, Ohio.....	1	

RABIES.**Washington—Seattle—Rabies in Animals.**

Surgeon Lloyd reported that during the month of November, 1915, three cases of rabies in dogs were reported in Seattle, Wash., making a total of 461 cases of the disease reported in dogs, 8 cases in cattle, 4 in cats, 2 in horses, and 1 in a hog reported since the beginning of the outbreak.

City Reports for Week Ended Nov. 27, 1915.

During the week ended November 27, 1915, rabies was reported by cities as follows: Mobile, Ala., one death; Pittsburgh, Pa., one case.

SCARLET FEVER.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 3693.

SMALLPOX.**Minnesota.**

Collaborating Epidemiologist Bracken reported that during the week ended December 11, 1915, several new foci of smallpox infection were reported in Minnesota, cases of the disease having been notified as follows: Beltrami County, Pinewood 1; Chippewa County, Stoneham Township 4; Hennepin County, Bloomington Township 1; Jackson County, Rost Township 8; Kandiyohi County, Greenlake Township 1; Nicollet County, St. Peter 2; Wilkin County, Breckenridge 2; Wright County, Franklin Township 1, Marysville Township 1.

SMALLPOX—Continued.

Texas—Laredo.

Acting Asst. Surg. Hamilton reported that on December 8, 1915, 3 cases of smallpox among Mexicans were notified in Laredo, Tex.

New York Report for October, 1915.

Place.	New cases reported.	Deaths.	Vaccination history of cases.			
			Number vaccinated within 7 years preceding attack.	Number last vaccinated more than 7 years preceding attack.	Number never successfully vaccinated.	Vaccination history not obtained or uncertain.
New York:						
Chenango County.....	5	.....	.....	1	4	.....
Erie County.....	1	.....	.....	.....	1	.....
Total.....	6	.....	.....	1	5	.....

City Reports for Week Ended Nov. 27, 1915.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Bellingham, Wash.....	1	.....	Grand Rapids, Mich.....	3	.....
Brownsville, Tex.....	3	.....	Johnstown, Pa.....	1	.....
Chicago, Ill.....	1	.....	Lincoln, Nebr.....	1	.....
Danville, Ill.....	8	.....	Portland, Oreg.....	1	.....
Davenport, Iowa.....	6	.....	Springfield, Ill.....	6	.....
Evansville, Ind.....	14	.....	Toledo, Ohio.....	4	.....

TETANUS.

City Reports for Week Ended Nov. 27, 1915.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Baltimore, Md.....	.....	1	Philadelphia, Pa.....	1	2
Los Angeles, Cal.....	1	1	Pittsburgh, Pa.....	.....	1
New York, N. Y.....	1	.....	Pittsfield, Mass.....	.....	1

TRACHOMA.

Nevada—Among Indians.

Dr. O. S. Phillips, ophthalmologist, United States Indian Service, reported December 6, 1915, that among 1,208 Indians examined by him in the State of Nevada he had found 273 cases of trachoma. The numbers and localities of the cases found are as follows: Pyramid Lake Reservation, 52; Fallon, 57; Lovelock, 17; Fort McDermitt, 43; Elko, 3; Western Shoshone Reservation, 62; Carson Indian School, 39.

TRICHINIASIS.**Oregon—Portland.**

Surg. Magruder reported December 8, 1915, that within the seven-day period from December 1 to 8, 10 cases of trichiniasis, with 3 deaths, were reported in Portland, Oreg., all of the cases being in Italians who had eaten infected sausage, samples of which, upon examination, were found to contain large numbers of encysted larvæ.

TUBERCULOSIS.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 3698.

TYPHOID FEVER.**State Reports for October, 1915.**

Place.	New cases reported.	Place.	New cases reported.
Hawaii:		New York—Continued.	
Maul—		Montgomery County.....	1
Puunene and Kihei district.....	1	Nassau County.....	2
Oahu—		Niagara County.....	3
Honolulu.....	2	Oneida County.....	8
Koolauloa district.....	1	Onondaga County.....	8
Waiialua district.....	1	Ontario County.....	2
Total.....	5	Orange County.....	15
New York:		Orleans County.....	1
Albany County.....	9	Oswego County.....	3
Allegany County.....	5	Otsego County.....	6
Broome County.....	4	Putnam County.....	5
Cattaraugus County.....	4	Rensselaer County.....	11
Cayuga County.....	9	Rockland County.....	2
Chautauqua County.....	1	St. Lawrence County.....	10
Chemung County.....	11	Saratoga County.....	1
Chenango County.....	2	Schenectady County.....	6
Clinton County.....	3	Schoharie County.....	1
Columbia County.....	6	Schuyler County.....	5
Corland County.....	4	Seneca County.....	4
Delaware County.....	5	Steuben County.....	7
Dutchess County.....	5	Suffolk County.....	5
Erie County.....	48	Sullivan County.....	17
Essex County.....	2	Tioga County.....	5
Franklin County.....	1	Tompkins County.....	2
Genesee County.....	2	Ulster County.....	1
Greene County.....	1	Warren County.....	1
Hamilton County.....	1	Washington County.....	6
Herkimer County.....	5	Wayne County.....	7
Jefferson County.....	27	Westchester County.....	28
Livingston County.....	1	Wyoming County.....	1
Madison County.....	1	Yates County.....	1
Monroe County.....	11	New York City.....	429
		Total.....	772

TYPHOID FEVER—Continued.

City Reports for Week Ended Nov. 27, 1915.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Akron, Ohio.....	2	1	Nanticoke, Pa.....	1	.....
Atlantic City, N. J.....	2	.....	Nashville, Tenn.....	6	.....
Baltimore, Md.....	24	3	Newark, N. J.....	1	.....
Boston, Mass.....	12	.....	New Bedford, Mass.....	6	.....
Brockton, Mass.....	1	1	New Haven, Conn.....	2	.....
Cambridge, Mass.....	1	1	New London, Conn.....	1	1
Charleston, S. C.....	4	.....	New Orleans, La.....	7	3
Chelsea, Mass.....	1	1	New York, N. Y.....	40	5
Chicago, Ill.....	24	3	Norfolk, Va.....	1	.....
Cincinnati, Ohio.....	3	2	Oakland, Cal.....	1	.....
Cleveland, Ohio.....	2	.....	Passaic, N. J.....	1	.....
Columbus, Ohio.....	.....	2	Philadelphia, Pa.....	27	5
Dallas, Tex.....	1	.....	Pittsburgh, Pa.....	2	2
Danville, Ill.....	2	.....	Plainfield, N. J.....	1	.....
Dayton, Ohio.....	2	1	Portland, Oreg.....	4	.....
Detroit, Mich.....	7	2	Portsmouth, Va.....	1	.....
Duluth, Minn.....	3	1	Reading, Pa.....	2	1
Erie, Pa.....	1	.....	Roanoke, Va.....	3	.....
Evansville, Ind.....	1	.....	Rockford, Ill.....	2	.....
Fitchburg, Mass.....	1	1	Rock Island, Ill.....	1	.....
Galveston, Tex.....	1	.....	Saginaw, Mich.....	3	.....
Grand Rapids, Mich.....	5	.....	St. Louis, Mo.....	2	2
Harrisburg, Pa.....	2	1	Salt Lake City, Utah.....	1	1
Haverhill, Mass.....	1	.....	San Diego, Cal.....	1	1
Johnstown, Pa.....	3	.....	San Francisco, Cal.....	2	.....
Lancaster, Pa.....	1	.....	Saratoga Springs, N. Y.....	1	.....
Lexington, Ky.....	1	.....	Springfield, Mass.....	1	.....
Little Rock, Ark.....	2	.....	Springfield, Ohio.....	2	.....
Lorain, Ohio.....	1	.....	Tacoma, Wash.....	2	.....
Los Angeles, Cal.....	4	1	Toledo, Ohio.....	2	1
Lowell, Mass.....	1	.....	Trenton, N. J.....	1	.....
Malden, Mass.....	1	.....	Waltham, Mass.....	2	.....
Medford, Mass.....	1	.....	Washington, D. C.....	6	3
Milwaukee, Wis.....	1	1	Wheeling, W. Va.....	8	1
Mobile, Ala.....	3	.....	Worcester, Mass.....	1	.....
Montclair, N. J.....	1	.....		

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS.

State Reports for October, 1915.

During the month of October, 1915, there were notified in Hawaii 9 cases of diphtheria and 378 cases of measles, and in New York, 1,782 cases of diphtheria, 1,301 cases of measles, and 613 cases of scarlet fever.

City Reports for Week Ended Nov. 27, 1915.

City.	Popula- tion as of July 1, 1915 (estimated by U. S. Census Bureau).	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Over 500,000 inhabitants:										
Baltimore, Md.....	584,605	180	35	1	43	.....	23	3	17	22
Boston, Mass.....	745,139	210	74	4	44	.....	42	.....	52	20
Chicago, Ill.....	2,447,045	601	133	16	57	1	99	2	183	80
Cleveland, Ohio.....	656,975	175	39	1	32	.....	36	7	21	19
Detroit, Mich.....	554,717	185	55	4	60	1	21	.....	24	12
New York, N. Y.....	5,468,190	1,318	276	18	138	3	89	1	296	173
Philadelphia, Pa.....	1,683,664	453	61	7	46	1	30	.....	117	47
Pittsburgh, Pa.....	571,984	153	60	5	105	2	24	.....	12	11
St. Louis, Mo.....	745,988	177	117	4	1	.....	23	.....	27	16

DIPHThERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Contd.

City Reports for Week Ended Nov. 27, 1915—Continued.

City.	Popula- tion as of July 1, 1915 (estimated by U. S. Census Bureau).	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
From 300,000 to 500,000 inhabit- ants:										
Cincinnati, Ohio.....	406,706	144	39	.....	7	.....	10	.....	25	25
Jersey City, N. J.....	300,133	75	22	.....	11	.....	10	.....	24	9
Los Angeles, Cal.....	465,367	114	26	1	4	.....	11	.....	39	15
Milwaukee, Wis.....	428,062	83	14	2	51	.....	9	.....	21	3
Newark, N. J.....	311,000	102	26	1	64	.....	16	.....	52	9
New Orleans, La.....	366,484	170	76	3	3	.....	.....	.....	16	22
San Francisco, Cal.....	416,112	125	25	.....	.....	.....	16	.....	39	.....
Seattle, Wash.....	330,834	52	1	.....	2	.....	3	.....	7	2
Washington, D. C.....	358,679	131	45	.....	.....	.....	9	.....	14	19
From 200,000 to 300,000 inhabit- ants:										
Columbus, Ohio.....	209,722	71	26	1	1	.....	13	.....	10	2
Portland, Oreg.....	272,833	38	6	2	.....	.....	3	.....	4	4
Providence, R. I.....	250,025	54	13	2	2	.....	7	.....	.....	7
From 100,000 to 200,000 inhabit- ants:										
Bridgeport, Conn.....	118,434	37	3	.....	15	.....	9	1	2	1
Cambridge, Mass.....	111,669	34	11	.....	.....	.....	4	.....	8	2
Camden, N. J.....	104,349	.....	2	.....	1	.....	.....	.....	7	.....
Dallas, Tex.....	116,605	.....	10	.....	.....	.....	9	.....	.....	2
Dayton, Ohio.....	125,509	35	13	.....	2	.....	7	1	3	4
Fall River, Mass.....	126,104	27	4	.....	.....	.....	.....	.....	3	6
Grand Rapids, Mich.....	125,759	28	2	.....	1	.....	.....	.....	2	2
Hartford, Conn.....	108,169	28	12	.....	4	.....	5	.....	9	3
Lowell, Mass.....	112,124	26	12	.....	2	.....	1	.....	2	2
Lynn, Mass.....	100,316	16	13	1	13	.....	12	1	4	1
Nashville, Tenn.....	115,978	37	5	2	.....	.....	2	.....	3	3
New Bedford, Mass.....	114,694	32	4	.....	1	.....	1	.....	8	4
New Haven, Conn.....	147,065	.....	2	1	1	1	.....	.....	7	3
Oakland, Cal.....	110,803	.....	1	2	1	.....	1	.....	2	4
Reading, Pa.....	165,014	33	1	1	31	.....	.....	.....	.....	2
Richmond, Va.....	154,674	40	13	.....	1	.....	4	.....	.....	3
Salt Lake City, Utah.....	113,567	26	4	.....	1	.....	3	.....	.....	1
Springfield, Mass.....	103,216	19	2	1	5	.....	1	.....	4	1
Tacoma, Wash.....	108,034	.....	1	.....	.....	.....	.....	.....	.....	.....
Toledo, Ohio.....	187,840	70	10	1	4	.....	8	.....	6	9
Trenton, N. J.....	109,212	33	18	1	87	.....	3	.....	6	1
Worcester, Mass.....	160,523	35	15	.....	3	.....	4	.....	5	3
From 50,000 to 100,000 inhabit- ants:										
Akron, Ohio.....	82,958	32	8	2	.....	.....	8	.....	.....	1
Altoona, Pa.....	57,606	16	3	.....	1	.....	1	.....	3	.....
Atlantic City, N. J.....	55,813	8	2	1	1	.....	1	.....	1	.....
Bayonne, N. J.....	67,882	.....	4	.....	11	.....	3	.....	2	.....
Berkeley, Cal.....	54,879	10	2	.....	.....	.....	.....	.....	1	11
Binghamton, N. Y.....	53,682	17	4	1	1	.....	.....	.....	.....	1
Brookton, Mass.....	65,746	13	17	.....	1	.....	3	.....	8	2
Charleston, S. C.....	60,427	32	.....	1	.....	.....	.....	.....	.....	2
Duluth, Minn.....	91,913	22	.....	.....	.....	.....	15	.....	3	2
Erie, Pa.....	73,798	15	5	.....	.....	.....	2	.....	2	.....
Evansville, Ind.....	72,125	27	8	.....	.....	.....	.....	.....	1	3
Harrisburg, Pa.....	70,754	34	3	.....	.....	.....	.....	.....	1	2
Johnstown, Pa.....	66,585	13	3	.....	7	.....	.....	.....	1	.....
Lancaster, Pa.....	50,269	.....	1	.....	.....	.....	.....	.....	1	.....
Lawrence, Mass.....	98,197	20	8	.....	17	.....	9	.....	4	3
Little Rock, Ark.....	55,158	20	1	.....	.....	.....	.....	.....	1	.....
Malden, Mass.....	50,067	10	4	1	.....	.....	.....	.....	.....	.....
Manchester, N. H.....	76,959	18	6	.....	1	.....	4	.....	1	1
Mobile, Ala.....	56,536	20	.....	.....	.....	.....	.....	.....	.....	1
New Britain, Conn.....	52,203	.....	2	.....	.....	.....	1	.....	.....	1
Norfolk, Va.....	88,076	.....	6	.....	.....	.....	1	.....	5	5
Passaic, N. J.....	69,010	17	7	1	16	.....	1	.....	1	2
Pawtucket, R. I.....	58,156	14	8	.....	8	.....	2	.....	.....	1
Rockford, Ill.....	53,761	11	1	.....	41	.....	.....	.....	.....	1
Sacramento, Cal.....	64,806	17	2	1	.....	.....	.....	.....	6	2
Saginaw, Mich.....	54,815	10	.....	.....	1	.....	6	.....	.....	1
San Diego, Cal.....	51,115	14	9	.....	.....	.....	1	.....	2	.....
Somerville, Mass.....	85,460	15	4	1	.....	.....	11	.....	2	.....
South Bend, Ind.....	67,030	12	2	.....	.....	.....	3	.....	3	1

1 Population Apr. 15, 1910; no estimate made.

DIPHThERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Contd.

City Reports for Week Ended Nov. 27, 1915—Continued.

City.	Popula- tion as of July 1, 1915 (estimated by U. S. Census Bureau).	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
From 50,000 to 100,000 inhabit- ants—Continued.										
Springfield, Ill.	59,468		19	1			2			
Springfield, Ohio	50,804	10	2				2			1
Wilkes-Barre, Pa.	75,218	26	6	1			2		4	2
From 25,000 to 50,000 inhabit- ants:										
Alameda, Cal.	27,051	1	1		1				1	
Brookline, Mass.	31,934	7			5		5			
Butler, Pa.	26,587	5								
Butte, Mont.	42,918	26	1				2		2	
Chelsea, Mass.	32,452	19	3		51		2		3	1
Chicopee, Mass.	28,688		3				1		1	
Cumberland, Md.	25,564	6	1	1			2			1
Danville, Ill.	31,554	8					1		3	1
Davenport, Iowa.	47,127		2				2			
Dubuque, Iowa.	39,650						1			
East Orange, N. J.	41,155	6	8		4		1		4	
Elgin, Ill.	27,844	5					1			
Everett, Mass.	38,307		2							1
Fitchburgh, Mass.	41,144	14	10	1			1		3	
Galveston, Tex.	41,076	26					2		1	3
Haverhill, Mass.	47,774	12	6		1		1		5	1
Kalamazoo, Mich.	47,364	22							3	1
Kenosha, Wis.	30,310				1		1			
La Crosse, Wis.	31,522	7	2		2				1	1
Lexington, Ky.	39,703	17	8	1			2			2
Lincoln, Nebr.	46,028	9					4		2	
Lorain, Ohio.	35,662		1				6			
Lynchburg, Va.	32,385	9	2		1		1		1	2
Madison, Wis.	30,084				57					
McKeesport, Pa.	46,743	9	6	1						
Medford, Mass.	25,737	9					1			
Montclair, N. J.	25,550	3			12					
New Castle, Pa.	40,351		6		4					
Newport, Ky.	31,722	10							2	2
Newport, R. I.	29,631	9								
Newton, Mass.	43,085	6	3		4					
Niagara Falls, N. Y.	36,240	10	2		1		1			1
Norristown, Pa.	30,833	6	1							
Ogden, Utah.	30,466	3					1			
Orange, N. J.	32,524	7	4				1			
Pasadena, Cal.	43,859	7							1	1
Perth Amboy, N. J.	39,725		11				1		3	
Pittsfield, Mass.	37,580	6							2	
Portsmouth, Va.	38,610	13	4							
Racine, Wis.	45,507	9	1						2	1
Roanoke, Va.	41,929	13	11	1			1		1	
Rock Island, Ill.	27,961	5	2				2		1	1
Steubenville, Ohio.	26,631	10	2				1			
Superior, Wis.	45,285	3	2		1					1
Taunton, Mass.	35,957	17	1		18	1	3		5	1
Waltham, Mass.	30,129	7	4		1				1	1
Wheeling, W. Va.	43,097	14	1				1		1	
Williamsport, Pa.	33,495	14	2				1			
Wilmington, N. C.	28,264	11	3							1
Zanesville, Ohio.	30,406		2						1	
From 10,000 to 25,000 inhabit- ants:										
Ann Arbor, Mich.	14,979	5	1				2			2
Beaver Falls, Pa.	13,316				12		2			
Biddeford, Me.	17,570	2								
Braddock, Pa.	21,310		1		27				1	
Cairo, Ill.	15,593	3								
Clinton, Mass.	13,075	2								
Coffeyville, Kans.	16,765		4							
Concord, N. H.	22,480	8					1			2
Dunkirk, N. Y.	20,175						1			
Galesburg, Ill.	23,923	8								1
Harrison, N. J.	16,555		1						2	

1 Population Apr. 15, 1910; no estimate made.

DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—Contd.

City Reports for Week Ended Nov. 27, 1915—Continued.

City.	Popula- tion as of July 1, 1915 (estimated by U. S. Census Bureau).	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuber- culosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
From 10,000 to 25,000 inhabit- ants—Continued.										
Kearny, N. J.....	22,753	7	2	.....	.....	.....	.....	.....	3	.....
Melrose, Mass.....	17,166	4	.....	.....	.....	.....	.....	.....	1	.....
Morristown, N. J.....	13,158	4	.....	1	.....	.....	.....	.....	1	.....
Muscatine, Iowa.....	17,287	4	.....	.....	.....	.....	.....	.....	.....	.....
Nanticoke, Pa.....	22,441	6	1	.....	.....	.....	.....	.....	1	.....
Newburyport, Mass.....	15,195	4	.....	.....	.....	.....	.....	.....	1	.....
New London, Conn.....	20,771	13	2	1	.....	.....	1	.....	.....	1
North Adams, Mass.....	22,019	7	1	.....	.....	.....	1	.....	.....	1
Northampton, Mass.....	19,846	.....	1	.....	.....	.....	2	.....	3	.....
Phoenix, Ariz.....	17,198	.....	.....	.....	.....	.....	.....	.....	.....	2
Plainfield, N. J.....	23,280	6	1	.....	1	.....	1	.....	1	.....
Rutland, Vt.....	14,624	1	.....	.....	.....	.....	.....	.....	.....	.....
Saratoga Springs, N. Y.....	12,842	8	.....	.....	1	.....	.....	.....	.....	1
Steelton, Pa.....	15,337	3	.....	.....	.....	.....	2	.....	.....	.....
Wilkinsburg, Pa.....	22,361	4	2	.....	.....	.....	.....	.....	.....	.....
Woburn, Mass.....	15,862	4	.....	.....	.....	.....	.....	.....	.....	.....

¹ Population Apr. 15, 1910; no estimate made.

FOREIGN REPORTS.

AUSTRIA-HUNGARY.

Cholera.

Cholera has been notified in Austria-Hungary as follows: Austria, September 19 to 25, 1915, 937 cases with 508 deaths; Croatia-Slavonia, October 4 to 18, 1915, 12 cases with 3 deaths; Hungary, September 27 to October 17, 1915, 90 cases with 53 deaths.

CHINA.

Cholera—Plague—Hongkong.

During the two weeks ended October 23, 1915, 3 fatal cases of cholera and 4 fatal cases of plague were notified at Hongkong.

Examination of Rats—Shanghai.

During the period from September 25 to November 6, 1915, 1,234 rats were examined at Shanghai. No plague infection was found.

CUBA.

Communicable Diseases—Habana.

Communicable diseases were notified at Habana during the 10 days ended November 10, 1915, as follows:

Disease.	New cases.	Deaths.	Remaining under treatment Nov. 10, 1915.
Diphtheria.....	3	.....	4
Leprosy.....	.....	1	252
Malaria.....	2	.....	12
Measles.....	2	.....	2
Paratyphoid fever.....	.....	.....	5
Scarlet fever.....	2	.....	4
Typhoid fever.....	10	2	22
Varicella.....	2	.....	2

¹ From interior of Republic.

MAURITIUS.

Plague.

During the period from August 27 to September 30, 1915, 9 cases of plague were notified in the island of Mauritius.

PERU.

Plague.

During the week ended October 24, 1915, plague was notified in Peru as follows:

Place.	New cases.	Remaining Oct. 24, 1915.
Callao.....	1	2
Casma.....	1	.....
Lima (city).....	1	1
Lima (country).....	2	1
Trujillo.....	2	3

Summary, April 1, 1903, to June 30, 1915.

During the period from April 1, 1903, to June 30, 1915, 10,774 cases of plague were notified in Peru. The greatest prevalence occurred in the year 1908, with 1,691 cases. During the same period, 387 cases of plague were notified at Callao, the greatest prevalence being reported for the years 1908 and 1909, with 55 cases each.

TYPHUS FEVER.

Reports Received During Week Ended Dec. 17, 1915.¹

Place.	Date.	Cases.	Deaths.	Remarks.
Austria-Hungary:				
Hungary--				
Budapest.....	Oct. 31-Nov. 6....	1	1	
Dutch East Indies:				
Java.....	Oct. 1-18.....	28	6	
Batavia.....	Oct. 12-18.....	19	3	
Egypt:				
Alexandria.....	Oct. 22-28.....	1	.....
Cairo.....	July 16-Aug. 5....	59	39	
Port Said.....	July 16-22.....	1	1	
Germany:				
Berlin.....	Sept. 5-Nov. 6....	31	5	
Hanover.....	Oct. 17-23.....	1	1	
Italy:				
Florence.....	Sept. 1-30.....	16	5	
Japan:				
Hakodate.....	Oct. 17-23.....	1	.....
Mexico:				
Mexico City.....	Nov. 14.....	.....	.....	Present
Puebla.....	.....do.....	.....	.....	Do.
San Luis Potosi.....	.....do.....	.....	.....	Do.
Turkey in Asia:				
Adana.....	Oct. 24-30.....	.....	.....	Do.
Tarsus.....	.....do.....	.....	.....	Do.

¹ From medical officers of the Public Health Service, American consuls, and other sources.

TYPHUS FEVER—Continued.

Reports Received from June 26 to Dec. 10, 1915.

Place.	Date.	Cases.	Deaths.	Remarks.
Austria-Hungary:				
Austria.....	Apr. 25-May 22....	1,212	.....	Mainly among soldiers, prisoners of war, and persons from Galicia; 6 among the civil population, of which 1 in Vienna. Mainly among military.
Do.....	June 6-Sept. 18....	4,575	.....
Bosnia-Herzegovina.....	May 2-15.....	64	.....
Hungary— Budapest.....	May 16-Sept. 11....	27	7	
Azores:				
Terceira.....	May 23-29.....	1	.....	July 24, 1915; present.
Canada:				
Ontario— Kingston.....	Aug. 22-28.....	1	1	
Canary Islands:				
Santa Cruz de Tenerife....	May 16-Sept. 11....	.....	3	
China:				
Antung.....	June 29-Oct. 24....	6	2	
Hankow.....	July 4-10.....	.....	1	
Harbin.....	July 5-11.....	1	.....
Hungtaohotze Station.....	Apr. 19-25.....	1	.....	On Eastern Chinese Ry. Present.
Mukden.....	June 6-July 3.....	.....	.....
Tientsin.....	do.....	.....	1	
Cuba:				
Santiago.....	July 4-10.....	2	2	
Curacao.....	Aug. 8-14.....	4	1	
Dominican Republic:				
Santo Domingo.....	July 19-Aug. 31....	.....	2	
Dutch East Indies:				
Java.....	Apr. 25-Oct. 4.....	202	27	
Batavia.....	June 6-Oct. 4.....	107	16	
Samarang.....	Sept. 5-11.....	1	1	
Egypt:				
Alexandria.....	May 21-Oct. 21....	165	50	
Cairo.....	May 7-July 15....	251	259	
Port Said.....	do.....	10	8	
France:				
La Rochelle.....	July 11-17.....	1	1	
Germany.....	May 16-22.....	12	.....	In German soldiers and 1 prison-camp employee; among prisoners of war in 14 districts and in Saxony and Hesse. Among military and prisoners.
Do.....	June 6-26.....	23	.....
Do.....	June 27-Oct. 30....	161	.....
Aix la Chapelle.....	May 30-June 5.....	.....	1	
Bavaria.....	July 11-Aug. 7.....	3	.....
Berlin.....	Aug. 22-28.....	1	.....
Bremen.....	May 30-June 12....	1	1	
Breslau.....	May 30-Aug. 7.....	6	.....
Bromberg— Government district.....	July 18-Aug. 28....	10	.....
Cassel— Government district.....	July 18-24.....	1	.....
Erfurt— Government district.....	July 11-17.....	1	.....
Frankfurt— Government district.....	July 18-24.....	1	.....
Hamburg.....	July 25-31.....	1	1	
Königsberg— Government district.....	June 6-Sept. 4.....	5	.....
Leipzig.....	June 6-12.....	.....	1	
Mersburg— Government district.....	July 25-31.....	1	.....
Posen.....	Aug. 29-Sept. 4....	.....	.....	In prison camp. At Jena.
Saxe-eimar.....	July 11-17.....	10	.....
Saxony.....	July 18-24.....	27	.....
Stettin— Government district.....	July 25-31.....	1	.....
Great Britain and Ireland:				
Cork.....	Aug. 22-28.....	1	.....
Dublin.....	May 23-July 31....	7	.....
Glasgow.....	May 29-Nov. 6.....	4	.....
Liverpool.....	Oct. 10-23.....	2	1	
Newcastle.....	June 27-July 3.....	1	.....
Greece:				
Athens.....	June 14-July 19....	.....	4	
Saloniki.....	May 30-Oct. 2.....	.....	253	
Italy:				
Florence.....	May 1-31.....	5	1	
Turin.....	May 17-23.....	1	.....

TYPHUS FEVER—Continued.

Reports Received from June 26 to Dec. 10, 1915—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Japan:				
Tokyo.....	June 7-Sept. 3....	3	.....
Hakodate.....	Aug. 29-Sept. 4....	1	.....
Nagasaki.....	Oct. 18-24.....	8	.....
Mexico:				
Aguascalientes.....	June 21-Nov. 7.....	.....	7	
Mexico City.....	Aug. 28.....	1	1	
Russia:				
Moscow.....	May 2-Oct. 9.....	355	64	
Petrograd.....	May 9-Oct. 9.....	29	7	
Riga.....	Mar. 1-Oct. 18.....	23	1	
Vladivostok.....	June 15-Aug. 28....	4	1	
Warsaw.....				Sept. 27-Oct. 31, 1914: Cases, 31. Nov. 1-28, 1914: Cases, 31; death, 1. Maximum incidence, Nov. 22-28: Cases, 20; death, 1.
Serbia.....	Apr. 27.....			Prevalent.
Spain:				
Madrid.....	June 1-Aug. 31....	.....	4	
Sweden:				
Stockholm.....	Sept. 19-Oct. 16....	5	.....
Switzerland:				
Geneva.....	Oct. 10-16.....	1	.....
St. Gall.....	July 25-Sept. 11....	3	.....
Zurich.....	May 30-Oct. 23.....	3	.....
Turkey in Asia:				
Adana.....	May 9-July 10.....	.....	.....	Present.
Beirut.....	May 27-Sept. 4.....	8	2	
Harpur.....	Apr. 1-30.....	.....	.....	Do.
Jaffa.....	Apr. 25-Sept. 11....	20	11	July 31, present in vicinity.
Mersina.....	May 9-29.....	2	2	
Tarsus.....	May 9-July 10.....	.....	.....	Present.
Trebizond.....				October, 1914-May 22, 1915; 6,000 fatal cases (estimated).
Tripoli.....	May 9-15.....	1	1	

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX.

Reports Received During Week Ended Dec. 17, 1915.¹

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
Austria-Hungary:				
Austria.....	Sept. 19-25.....	937	508	
Croatia-Slavonia.....	Oct. 4-18.....	12	3	
Hungary.....	Sept. 27-Oct. 17....	90	53	
Borneo:				
Putatan.....	Sept. 19-Oct. 16....	5	5	
China:				
Hongkong.....	Oct. 16-23.....	3	3	
Dutch East Indies:				
Java.....	Oct. 1-18.....	43	29	
Batavia.....	Oct. 12-18.....	33	36	
Bretes.....	Oct. 1-7.....	2	1	
Germany:				
Potsdam, Government district.....	Oct. 31-Nov. 6.....	.....	.....	Present among prisoners of war.
Potsdam, Government district.....	Oct. 24-30.....	1	1	
Schleswig, Government district.....	Sept. 26-Oct. 16....	9	2	
Stettin, Government district.....	Sept. 19-25.....	3	.....
India:				
Calcutta.....	Sept. 19-Oct. 23.....	.....	74	
Madras.....	Oct. 16-30.....	3	1	
Indo-China:				
Saigon.....	Oct. 11-17.....	1	1	

¹ From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX—Continued.**Reports Received During Week Ended Dec. 17, 1915—Continued.****PLAGUE.**

Place.	Date.	Cases.	Deaths.	Remarks.
Brazil:				
Bahia.....	Oct. 31-Nov. 13...	2	2	
Ceylon:				
Colombo.....	Oct. 17-23.....	8	8	
China:				
Hongkong.....	Oct. 3-23.....	5	5	
Dutch East Indies:				
Java—				
Surabaya.....	Oct. 1-14.....	5	5	
Egypt:				
Assiout province.....	Oct. 4.....	1		
Indo-China:				
Saigon.....	Oct. 11-17.....		1	
Mauritius:				
Mauritius.....	Aug. 27-Sept. 30...	9		
Peru:				
Callao.....	Oct. 18-24.....	1		Apr. 1, 1903, to June 30, 1915: Cases, 10,774.
Casma.....	do.....	1		Apr. 1, 1913, to June 30, 1915: Cases, 387.
Lima (city).....	do.....	1		
Lima (country).....	do.....	2		
Trujillo.....	do.....	2		

SMALLPOX.

Australia:				
New South Wales—				
Goulburn district.....	Oct. 22-28.....	1		
Newcastle district.....	do.....	38		
Victoria—				
Melbourne.....	Oct. 28.....	1		On S. S. Wodonga from Sydney.
Austria-Hungary:				
Hungary—				
Budapest.....	Oct. 31-Nov. 6....	37	3	
Brazil:				
Rio de Janeiro.....	Oct. 9-Nov. 11....	101	24	
Canada:				
Montreal.....	Nov. 28-Dec. 4....	1		
Ceylon:				
Colombo.....	Oct. 17-23.....	6	2	
Dutch East Indies:				
Java.....	Oct. 1-18.....	174	25	
Batavia.....	Oct. 12-18.....	4	2	
Egypt:				
Cairo.....	July 30-Aug. 5....	2		
Germany:				
Breslau.....	Oct. 31-Nov. 6....	1		
Magdeburg, Government district.....	do.....	1		
India:				
Calcutta.....	Oct. 17-23.....		1	
Karachi.....	Oct. 18-24.....	1		
Madras.....	Oct. 24-30.....	7	4	
Mexico:				
Aguascalientes.....	Nov. 8-14.....		3	
Frontera.....	Oct. 31-Nov. 6....	4	2	
Progreso.....	Nov. 14-28.....	3	1	
Vera Cruz.....	Nov. 15-21.....	19	7	
Spain:				
Madrid.....	Oct. 1-31.....		24	
Malaga.....	Sept. 1-30.....		2	
Valencia.....	Oct. 24-Nov. 28....	41	8	
Switzerland:				
Basel.....	Oct. 18-Nov. 13....	18		

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX—Continued.

Reports Received from June 26 to Dec. 10, 1915.

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
Austria-Hungary.....				July 11-Aug. 15, 1915: Cases, 14,844; deaths, 7,421.
Austria.....	May 2-Sept. 18....	28,883	15,439	July 11-Aug. 7, 1915: Cases, 11,928; deaths, 5,889.
Adelsberg.....	Sept. 19-25.....	2		
Laiibach.....	do.....	15		
Trieste.....	June 27-Oct. 2....	15	7	4 carriers.
Vienna.....	May 9-15.....	9	3	Among soldiers and prisoners.
Bosnia-Herzegovina.....	Apr. 25-Sept. 13....	326	141	215 cholera carriers.
Croatia-Slavonia.....	May 3-Sept. 27....	992	412	14 among soldiers. July 26-Aug. 16, 1915: Cases, 421; deaths, 180.
Hungary.....	Apr. 26-Oct. 3....	3,192	1,695	May 16-23; 5 additional cases notified. July 12-Aug. 15, 1915: Cases, 2,349; deaths, 1,266.
Budapest.....	June 28-Oct. 9....	5	2	To Sept. 9, 1915, 6 cases; 5 deaths; 30 miles from Sandakan.
Borneo.....				Epidemic.
Bandjermasin.....	Aug. 13.....			On Sandakan Bay.
Bode.....	Aug. 22-28.....	8	2	Within jail limits.
Sandakan.....	July 18-31.....	7	5	
Ceylon:				
Colombo.....	Apr. 25-May 22....	8	1	
China:				
Hongkong.....	May 2-Sept. 18....	2	2	
Dutch East Indies:				
Java.....	Sept. 1-Oct. 4....	193	103	
Batavia.....	Apr. 25-Oct. 4....	106	89	Sept. 3, 1915; Epidemic.
Brebes.....	Sept. 16-30.....	4	4	
Cheribon.....	Aug. 22-28.....	7	6	
Germany.....	July 24-Aug. 14....	392	54	
Ahlen.....	Sept. 5-11.....	1	1	
Allenstein.....	Aug. 22-28.....	1		
Altona.....	Oct. 2-9.....	1		Present Oct. 17-23.
Berlin.....	July 18-Aug. 7....	3	2	Among soldiers. Present Sept. 11.
Do.....	Oct. 17-23.....	2	2	Civilian.
Berlitz.....	July 18-24.....	1		Among soldiers.
Brandenburg on the Oder.....	Aug. 15-21.....	2	1	
Breslau.....	July 18-Oct. 12....	5	1	3 military.
Bromberg.....	July 25-Aug. 28....	2		Among soldiers.
Constatt.....	do.....	1		Do.
Government districts—				
Arnsberg.....	Aug. 2-14.....	3	1	
Breslau.....	June 13-Aug. 14....	6		
Bromberg.....				Present in prison camps Sept. 11.
Frankfort.....	Aug. 8-21.....	2	1	Do.
Gumbinnen.....	June 3-Sept. 25....	4		
Königsberg.....	June 13-Aug. 28....	5	1	
Koslin.....	Aug. 8-28.....	4	8	
Liegnitz.....	June 13-Aug. 28....	4	3	
Lüneburg.....	Aug. 1-7.....	1	1	
Magdeburg.....	do.....	1		Do.
Mauenwerder.....	June 13-Sept. 25....	605	116	
Merseburg.....	Aug. 8-14.....	12		
Minden.....	Aug. 1-7.....	2	1	
Münster.....	Sept. 11.....	1		
Oppeln.....	June 13-Sept. 18....	38	5	Do.
Potsdam.....	June 13-Aug. 21....	4	1	Do.
Stale.....	Aug. 1-7.....	2		
Stettin.....	Aug. 1-Sept. 25....	14	2	
Wiesbaden.....	June 13-Aug. 7....	1		
Danzig.....	June 18-Sept. 4....	19	8	
Danzig-Troyl.....	Aug. 15-28.....	17	7	
Erfurt.....	Aug. 22-Sept. 18....	1	2	
Frankfort on Oder.....	Aug. 22-28.....	2		
Furstenwalde and Klotzsch.....	Aug. 8-14.....	4	4	Aug. 15-21, 1915: 1 case at Klotzsch.
Hamburg.....	Aug. 1-14.....	4		
Hanover.....	July 25-31.....	1		Among soldiers.
Hermannshöhe.....	Sept. 5-23.....	7		Civilians.
Jagendorf.....	June 13-July 2....	1		
Kehl.....	Oct. 2-9.....	3	1	
Kiel.....	Sept. 25-Oct. 2....	1	1	
Kosel.....	Sept. 12-18.....	1	1	Civilian.
Kronshagen.....	Oct. 2-9.....	1		
Landsberg.....	July 25-31.....	1		Among soldiers.
Leipzig.....	do.....	1		Do.
Marggrabowa.....	Oct. 17-23.....			Present.
Niederzaden.....	Sept. 5-11.....	1	1	Civilian.
Patschkau.....	July 18-24.....	1		Among soldiers.

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX—Continued.**Reports Received from June 26 to Dec. 10, 1915—Continued.****CHOLERA—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Germany—Continued.				
Posen.....	July 25-31.....	1	.....	Among soldiers.
Rosenberg.....	June 13-July 2.....	1	.....
Sachsenhausen.....	do.....	1	1	
Saxony, Kingdom.....	Aug. 15-28.....	2	.....
Schneidemuhl.....	July 25-31.....	1	.....	Do.
Silesia.....	July 3-17.....	5	.....
Slaventsitz.....	June 13-July 2.....	1	.....
Sommerfeld.....	July 18-24.....	1	.....	Do.
Spandau.....	July 25-31.....	1	.....	Do.
Striegan.....	July 18-24.....	1	1	Do.
Thorn.....	Sept. 19-25.....	2	.....	Civilians.
Tilsit.....	do.....	2	.....	Do.
Treptow.....	do.....	2	.....	Do.
India:				
Akyab.....	May 16-July 31.....	.....	7	
Bassein.....	Apr. 18-July 31.....	.....	34	
Bombay.....	June 6-Sept. 4.....	9	8	
Calcutta.....	Apr. 25-Sept. 18.....	.....	228	
Henzada.....	Aug. 1-21.....	.....	21	
Karachi.....	Aug. 1-7.....	1	1	
Madras.....	May 2-Oct. 22.....	21	11	
Madras district.....	Sept. 5-Oct. 11.....	11	8	
Mandalay.....	Aug. 23-Sept. 18.....	.....	224	
Mergui.....	Aug. 15-Sept. 11.....	.....	93	
Myingyan.....	July 25-Sept. 11.....	1	33	
Pakokku.....	Aug. 8-Sept. 11.....	.....	71	
Pegu.....	July 4-10.....	1	.....
Rangoon.....	Apr. 24-Sept. 11.....	17	16	
Toungoo.....	Sept. 12-18.....	.....	2	
Indo-China.....				
Provinces—				
Anam.....	Jan. 1-Feb. 28.....	9	5	
Cochin China.....	do.....	621	297	
Laos.....	Feb. 1-28.....	46	21	
Tonkin.....	Jan. 1-Feb. 28.....	84	39	
Saigon.....	May 2-Sept. 19.....	1,322	829	
Italy:				
Leghorn.....	Aug. 11.....	1	.....
Venice.....	do.....	3	.....
Persia:				
Dilman.....	Sept. 16.....	.....	.....	Present.
Khoi.....	do.....	.....	.....	Do.
Tabriz.....	Aug. 26-Sept. 15.....	175	10	And vicinity.
Russia:				
Archangel.....	Oct. 10.....	.....	.....	Present.
Moscow.....	June 6-Oct. 9.....	315	110	
Serbia.....	June 25-July 2.....	2	.....
Siam:				
Bangkok.....	Apr. 19-Sept. 4.....	.....	9	
Straits Settlements:				
Singapore.....	May 9-Sept. 4.....	5	3	
Sumatra, island—				
Toba district.....	Apr. 12-June 26.....	159	110	

YELLOW FEVER.

Brazil:				
Bahia.....	July 11-17.....	1	1	
Canal Zone:				
Balboa quarantine.....	Sept. 27-Oct. 25.....	2	.....	In persons arrived from Buena-ventura, Colombia.

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX—Continued.

Reports Received from June 26 to Dec. 10, 1915—Continued.

PLAGUE.

Place.	Date.	Cases.	Deaths.	Remarks.
Argentina:				
Buenos Aires.....	Sept. 28.....	1	.....
Azores:				
Terceira, island.....	July 25.....	.....	.....	Present.
Bahrein, island.....	Apr. 1-30.....	.....	.....	Do.
Brazil:				
Bahia.....	June 20-Oct. 9....	14	10	
Rio de Janeiro.....	Aug. 22-28.....	4	4	
Ceylon:				
Colombo.....	May 9-Oct. 2.....	52	40	
China:				
Amoy.....	May 2-June 5.....	.....	.....	Present. Present in Sio-Khe Valley, 60 miles inland.
Do.....	June 13-19.....	.....	.....	Increasing.
Do.....	June 20-26.....	.....	.....	40 deaths daily (estimated). At Kulungsu, international settlement, 1 case.
Do.....	June 27-Aug. 14.....	.....	.....	Present. July 4-17, 1915: Cases, 95 (estimated).
Hongkong.....	May 9-Oct. 2.....	75	69	Chinese.
Shanghai.....	Oct. 3-9.....	.....	1	
Cuba:				
Habana.....	Aug. 15.....	1	.....
Dutch East Indies:				
Java.....				Jan. 1-Feb. 25, 1915: Cases, 2,094 deaths, 1,864. Aug. 8-14, 1915: Cases, 58; deaths, 57.
Do.....	Mar. 12-July 31....	2,227	1,111	
Kediri residency.....	July 30-Oct. 7.....	457	443	
Madrocan residency.....	Mar. 12-Sept. 3....	8	7	
Paseroacan residency.....	Mar. 12-Oct. 7.....	114	112	
Surabaya residency.....	do.....	88	88	
Surakarta residency.....	do.....	183	175	
Surabaya.....	Aug. 13-Sept. 30..	12	12	
Ecuador:				
Guayaquil.....	May 1-31.....	1	.....
Egypt.....				Jan. 1-May 20, 1915: Cases, 93 deaths, 48. Jan. 1-July 15; 1915: Cases, 188. Corresponding period 1914: Cases, 157.
Alexandria.....	May 21-Sept. 16....	4	3	
Assiout, province.....	May 14-June 3.....	7	2	
Fayoum, province.....	May 14-Sept. 2.....	54	10	
Gali-beh, province.....	May 14-27.....	1	.....
Gizeli, province.....	Sept. 15-27.....	2	2	
Minieh, province.....	May 14-July 15....	14	5	
Port Said.....	May 28-Nov. 4.....	14	7	
Greece:				
Zante.....	Aug. 1-Oct. 11....	14	13	Present, Oct. 23.
Hawaii:				
Honokaa.....	Dec. 2.....	1	1	
Kukatau.....	Nov. 16.....	1	1	
Paaule Camp.....	Oct. 30.....	1	1	
India:				
Bassein.....	Apr. 18-Sept. 4....	.....	7	
Bombay.....	May 2-Oct. 16.....	243	211	
Calcutta.....	Apr. 25-July 3.....	.....	59	
Henzada.....	May 2-8.....	1	.....
Karachi.....	May 2-Oct. 23.....	645	562	
Madras presidency.....	Sept. 5-Oct. 11....	380	272	
Mandalay.....	Apr. 25-Sept. 4....	.....	22	
Moulmein.....	May 23-July 24....	.....	9	
Myingyan.....	Apr. 5-17.....	1	1	
Pegu.....	Apr. 18-May 1.....	.....	5	
Rangoon.....	Apr. 18-Oct. 9.....	299	250	Apr. 1-May 31, 1915: Cases, 94 deaths, 92.
Toungoo.....	Apr. 25-May 1.....	.....	38	
Indo-China:				
Saigon.....	May 9-Aug. 14.....	17	9	Jan. 1-31, 1915: Cases, 73; deaths, 58.
Provinces—				
Anam.....	Jan. 1-Feb. 28.....	62	54	
Cambodia.....	do.....	37	34	
Cochin China.....	do.....	40	19	
Lacs.....	Feb. 1-8.....	20	20	
Japan:				
Taiwan Island—				
Kagi.....	May 30-July 3.....	7	7	
Tokyo.....	May 31-Aug. 8.....	9	5	
Mauritius.....	June 14-Aug. 19....	5	.....
Persia:				
Mohammerah.....	Apr. 10-June 1.....	3	.....
Peru.....				Year 1914: Cases, 760; deaths, 38.
Callao.....	May 3-Oct. 3.....	6	.....
Canta.....	Sept. 13-Oct. 3....	4	.....
Chiclayo.....	Aug. 16-Sept. 12..	4	.....	Cases, 287; deaths, 140.

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX—Continued.**Reports Received from June 26 to Dec. 10, 1915—Continued.****PLAGUE—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Peru—Continued.				
Ferrenale.....	Aug. 16-Oct. 3....	3	.....	May 30, vicinity. May 30, 7 cases in hospital.
Lima (city).....	May 3-Oct. 3....	13	.....
Mollendo.....	do.....	3	.....
Salaverry.....	Apr. 26-May 27....	2	.....
San Pedro.....	Aug. 16-Oct. 3....	7	.....
Trujillo.....	May 3-Oct. 3....	9	.....
Tumbes.....	Sept. 13-Oct. 3....	6	.....
Provinces—				
Ancachs.....	Jan. 1-Dec. 31, 1914.	34	20	
Arequipa.....	do.....	54	24	
Cajamarca.....	do.....	16	7	
Callao.....	do.....	14	8	
Lambayeque.....	do.....	107	47	
Libertad.....	do.....	335	176	
Lima.....	do.....	106	48	
Piura.....	do.....	94	55	
Ancachs.....	Jan. 1-June 30, 1915.	6	4	
Arequipa.....	do.....	19	11	
Callao.....	do.....	22	8	
Junin.....	do.....	1	1	
Lambayeque.....	do.....	68	24	
Libertad.....	do.....	67	42	
Lima.....	Jan. 1-Sept. 12....	56	33	
Piura.....	Jan. 1-June 30, 1915.	44	27	
Siam:				
Bankok.....	July 4-Aug. 7....	3	2	
Straits Settlements:				
Singapore.....	Apr. 25-June 5....	4	1	
Turkey in Asia:				
Bagdad.....	May 2-July 26....	768	574	Present.
Chios, island.....	Aug. 6.....	.....	.....
Union of South Africa:				
Cape Province—				
Tarka district.....	June 2-16.....	2	1	At Dordrecht.
Wodehouse district.....	June 5.....	2	2	
Zanzibar:				
Zanzibar.....	Mar. 1-31.....	.....	1	

SMALLPOX.

Arabia:				
Aden.....	Aug. 19-25.....	1	1	
Australia:				
New South Wales—				
Greta district.....	Oct. 1-14.....	3		June 10-Aug. 5: Cases, 17.
Newcastle district.....	Aug. 27-Oct. 21....	156		
Cessnock.....	June 10-Aug. 2....	5		
Hamilton.....	July 16-22.....	1		
Islington.....	Aug. 3-19.....	1		
Kurri Kurri.....	May 26-July 22....	8		
Moreweather.....	Aug. 3-19.....	1		
Newcastle.....	Aug. 20-26.....	1		
Plattsburg.....	July 16-22.....	1		
Stanford Morthyr.....	June 25-July 21....	1		
Wickham.....	Aug. 3-19.....	1		
Sydney.....	Aug. 27-Sept. 30....	2	2	
Port Stephens district.....	Oct. 1-14.....	1		
Scone district.....	do.....	1		
Werris Creek district.....	do.....	1		
Victoria—				
Melbourne.....	Apr. 20.....	1		At Point Nepean quarantine station, from S. S. Lord Derby, from Rangoon.
Western Australia—				
Freemantle.....	Apr. 27.....	1		At Woodmans Point quarantine station, from S. S. City of Baroda, from Calcutta via Colombo.
Austria-Hungary:				
Austria.....	May 2-Sept. 4....	4,533		Aug. 1914-May 8, 1915: Cases, 1,487; deaths, 316.
Dalmatia, Province.....	May 2-8.....	1		
Vienna.....	May 2-Oct. 9....	40	10	
Hungary—				
Budapest.....	May 2-Oct. 16....	426	1	
Prague.....	Aug. 1-21.....	5		

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX—Continued.**Reports Received from June 26 to Dec. 10, 1915—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Brazil:				
Bahia.....	Sept. 26-Oct. 2.....		1	
Rio de Janeiro.....	Apr. 18-Oct. 9.....	272	81	
Rio Grande do Sul.....	Sept. 2.....			Epidemic.
Canada:				
Alberta—				
Edmonton.....				Epidemic 30 miles south; closed Aug. 14, 1915: Cases, 100 (estimated).
Ontario—				
Fort William and Port Arthur.....	Oct. 17-Nov. 6.....	5		
Hamilton.....	June 1-30.....	2	4	
Peterborough.....	July 10-17.....		1	
Sarnia.....	June 13-19.....	1		
Toronto.....	June 6-Aug. 7.....	7		
Quebec—				
Montreal.....	June 13-Nov. 27.....	28		
Sherbrooke.....	June 1-30.....		1	
Canary Islands:				
Santa Cruz de Tenerife.....	July 18-24.....		1	
Ceylon:				
Colombo.....	May 2-Oct. 16.....	223	54	
China:				
Amoy.....	July 4-Aug. 28.....			Present.
Chungking.....	May 23-June 19.....			Do.
Foochow.....	May 9-22.....			Do.
Harbin.....	May 3-9.....	1		
Hongkong.....	May 9-Aug. 7.....	9	6	
Manchuria Station.....	June 21-27.....	2		Eastern Chinese Railway.
Nanking.....	June 20-Sept. 4.....			Present.
Shanghai.....	May 9-Oct. 9.....	6	5	Natives.
Tientsin.....	May 9-22.....		2	
Dutch East Indies:				
Java.....	Apr. 18-Oct. 11.....	1,758	363	
Batavia.....	Apr. 25-Sept. 13.....	8	31	Do.
Egypt:				
Alexandria.....	May 21-Sept. 9.....	42	14	
Cairo.....	Apr. 30-July 15.....	18	8	
France:				
Paris.....	Oct. 10-16.....	1		
Germany:				
Berlin.....	Aug. 22-28.....	1		Total May 16-Sept. 11, 1915, 47 cases.
Hamburg.....	June 6-12.....	1		
Government districts—				
Allenstein.....	June 13-19.....	1		
Arnsherg.....	do.....	1		
Breslau.....	June 20-July 3.....	1		
Danzig.....	June 13-July 31.....	3		
Gumbinnen.....	May 23-29.....	2		
Hildeheim.....	Sept. 26-Oct. 2.....	1		
Marienwerder.....	May 23-July 31.....	3		
Merseburg.....	June 23-July 3.....	1		
Oppeln.....	May 16-Oct. 2.....	12		
Posen.....	May 30-June 5.....	3		
Potsdam.....	June 13-Aug. 14.....	4		
Wiebaden.....	Aug. 29-Sept. 4.....	1		
Great Britain:				
Bristol.....	Mar. 21-May 22.....	29	7	1 vessel from Bombay. Maximum incidence, Apr. 4-17: Cases, 22; deaths, 2.
London.....	May 30-June 12.....	3		
Greece:				
Saloniki.....	May 23-29.....		1	
India:				
Bassein.....	May 2-8.....		1	
Bombay.....	May 2-Oct. 23.....	274	160	
Calcutta.....	Apr. 25-Aug. 14.....		257	
Karachi.....	May 2-Sept. 18.....	30	8	
Madras.....	May 2-Oct. 22.....	102	46	
Moulmein.....	May 23-29.....		1	
Pegu.....	Apr. 18-June 12.....	1	1	
Rangoon.....	Apr. 18-Oct. 9.....	174	70	May 1-31, 1915: Cases, 37; deaths, 14.

CHOLERA, YELLOW FEVER, PLAGUE, AND SMALLPOX—Continued.**Reports Received from June 26 to Dec. 10, 1915—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Deaths.	Remarks.
Indo-China:				
Provinces—				
Anam.....	Jan. 1-31.....			Present.
Cambohia.....	Jan. 1-Feb. 28.....	32	5	
Cochin China.....	Jan. 1-31.....	12		
Lao.....	Feb. 1-28.....	6		
Tonkin.....	Jan. 1-Feb. 28.....	66	12	
Saigon.....	May 23-July 10.....	2	2	
Italy:				
Milan.....	May 1-31.....	1		
Turin.....	Aug. 16-Nov. 14.....	4		
Japan:				
Taiwan, island.....	May 23-29.....	1		
Martinique:				
Port de France.....	Oct. 26.....	5		On S. S. Niagara from Bordeaux, Oct. 13, 1915.
Mexico:				
Acapulco.....	July 14-Sept. 5.....		3	
Aguascalientes.....	June 7-Nov. 14.....		37	
Columbia.....	Sept. 15.....	2		
Frontera.....	May 23-Oct. 30.....	173	68	Oct. 3-23: Cases, 8; deaths, 5.
Mazatlan.....	June 23-July 13.....		3	
Monterey.....	June 14-Oct. 31.....	11		
Nuevo Laredo.....	Sept. 11-Nov. 16.....	4		In persons from San Luis Potosi.
Progreso.....	June 6-July 24.....	7	1	
Salina Cruz.....	June 1-Oct. 31.....	10	1	
Tampico.....	Aug. 11-Oct. 30.....		10	
Vera Cruz.....	June 7-Oct. 30.....	155	79	
Portugal:				
Lisbon.....	May 23-Nov. 6.....	38		
Russia:				
Moscow.....	May 2-15.....	19	5	
Petrograd.....	May 8-Oct. 9.....	423	164	
Riga.....	May 9-Oct. 18.....	141	10	Mar. 1-31, 1915: Cases, 89; deaths, 22. Sept. 27-Oct. 31, 1914: Cases, 51; deaths, 16. Nov. 1-28, 1914: Cases, 70; deaths, 23.
Vladivostok.....	May 29-June 4.....	1		
Serbia.....	Apr. 21-May 3.....	356		
Siam:				
Bangkok.....	Aug. 7-Sept. 4.....		1	
Spain:				
Madrid.....	June 1-Aug. 31.....		13	
Malaga.....	Aug. 1-31.....	1		
Seville.....	May 1-Sept. 30.....		11	
Valencia.....	May 30-Oct. 23.....	138	17	
Straits Settlements:				
Penang.....	Apr. 25-May 15.....	6	2	
Singapore.....	May 23-Sept. 25.....	2		
Switzerland:				
Basel.....	May 16-Oct. 16.....	43		
Geneva.....	Sept. 26-Oct. 2.....	1		
Turkey in Asia:				
Baerdad.....	May 2-8.....			Present
Beirut.....	May 16-Oct. 2.....	142	58	
Haifa.....	May 3-July 25.....	9	1	
Jaffa.....	May 9-29.....	2		
Mersina.....	May 30-June 5.....	1		
Tripoli.....	May 2-8.....			Do.
Union of South Africa:				
Cape Town.....	June 21-July 30.....	3		
East London.....	Aug. 22-28.....	1		
Somerset East.....	Sept. 21.....			About 20 cases.

SANITARY LEGISLATION.

COURT DECISIONS.

UNITED STATES DISTRICT COURT—MONTANA.

Harrison Antinarcotic Law—Section 8 Held to Apply Only to Persons Required to Register Under the Act.

UNITED STATES v. WOODS (and five like cases), 224 Fed. Rep., 278. (July 3, 1915.)

Section 8 of the Federal antinarcotic act provides that "it shall be unlawful for any person not registered under the provisions of this act, and who has not paid the special tax provided for by this act, to have in his possession or under his control any of the aforesaid drugs; and such possession or control shall be presumptive evidence of a violation of this section, and also of a violation of the provisions of section 1 of this act." The court held that this section does not purport to do more than "make unlawful mere possession of the drugs by any person of the classes by section 1 required to register and pay, and who have not, and to create a summary rule of evidence."

The indictments charged that the defendants "did willfully, knowingly, unlawfully, and feloniously have in her possession and under her control * * * smoking opium * * * not having theretofore registered with the collector of internal revenue * * * as required under the provisions of the act of Congress of December 17, 1914, and not having theretofore paid the special tax provided for by said mentioned act." The court held that the indictments were insufficient in that they did not allege that the defendants belonged to any of the classes of persons required to register and pay the special tax.

BOURQUIN, District Judge: Mutatis mutandis, the indictments charge that defendants "did willfully, knowingly, unlawfully, and feloniously have in her possession and under her control * * * smoking opium * * * not having theretofore registered with the collector of internal revenue * * * as required under the provisions of the act of Congress of December 17, 1914, and not having theretofore paid the special tax provided for by said mentioned act." General demurrers are interposed.

Of the act referred to in the indictment (Acts 63d Cong., 3d sess., c. 1), section 1 provides that "every person who produces, imports, manufactures, compounds, deals in, dispenses, sells, distributes, or gives away opium or coca leaves or any compound, manufacture, salt, derivative, or preparation thereof, shall register with the collector of internal revenue of the district his name or style, place of business, and place or places where such business is to be carried on," and on or before the 1st day of July annually thereafter shall pay a special tax; and also that it shall be unlawful "to produce, import, manufacture, compound, deal in, dispense, sell, distribute, or give away" any such drugs without having registered and paid the tax. Section 8 provides that it shall be unlawful for any person not registered under the act and who has not paid the tax to have in his possession any of the drugs, and also that possession of any of the drugs shall be presumptive evidence of violation of both sections 1 and 8. Section 9, read in connection with section 335 of the Federal Penal Code (Act Mar. 4, 1909, c. 321, 35 Stat. 1152 [Comp. St. 1913, sec. 10509]), makes any violation of the act a felony. The act, whether of police or revenue, is of good purpose. What it will accomplish is another matter.

Any person convicted of its most trivial violation—the most lawabiding druggist or physician or like person in legitimate possession of the drugs, who inadvertently allows the annual tax to become delinquent for a day—though fined but \$1, is made a felon and infamous. And this for a mere legal infraction, and not a true crime, is a consequence shockingly disproportionate to the offense, is antagonistic to sound criminal economics, and is abhorrent to justice. It goes without saying that because thereof under such laws prosecutions halt and convictions fail in many cases, in effect is usurpation of the pardoning power, unequal administration of criminal law, and favored and disfavored classes of offenders; the inevitable result being resentment and prejudice against courts and government, law and order, and impairment of and danger to the general well-being of society. All these evils could and ought to be avoided by repeal of section 335 and its arbitrary stamp of felony and infamy upon so many petty violations of laws of the United States.

In the instant cases, aside from constitutional objections urged, but unnecessary to further note, defendants maintain (1) that mere consumers of the drug and in possession of same only for their own consumption are not by the act required to register and pay the tax, and (2) that the indictments do not show that defendants are of any of the classes by the act required to register and pay the tax. The prosecution contends contra the first proposition, and that in view of section 8 aforesaid there is no support in principle for the second.

Having in mind that taxes can be imposed and statutory offenses created only by direct, clear, and apt language, it seems clear that there is nothing in the act imposing the duty of registration and payment of taxes upon mere consumers of the drugs. They are not within section 1, and section 8 does not purport to extend the registration and taxation features of the act to them, or to any one, but only to make unlawful mere possession of the drugs by any person of the classes by section 1 required to register and pay, and who have not, and to create a statutory rule of evidence.

And this latter has misled the prosecution to believe that the essentials of the offense need not be set out in the indictments, but only this rule of evidence—the possession of the drugs, from which in some cases the offense may be inferred; that is, in the cases of those by section 1 required to register and pay the tax. Whenever an offense can be committed by only certain classes of persons, the indictment must expressly allege that accused is of those classes or it is fatally defective in substance; for lacking such allegation, all alleged may be true, and accused be innocent. Furthermore, lacking such allegation, the uncertainty of these indictments is such that defendants might be repeatedly tried on the like and be unable to plead former judgments in bar. Indeed, the prosecution states that, though they are duplicates in form and substance, some of these indictments are against mere consumers of the drug, and some against sellers or givers of it. Such “catch-all” forms have always been held bad.

The demurrers are sustained, the indictments dismissed, and defendants discharged.

STATE LAWS AND REGULATIONS PERTAINING TO PUBLIC HEALTH.

NEW YORK.

County Tuberculosis Hospitals—Establishment, Maintenance, and Supervision— Admissions. (Chap. 132, Act Mar. 29, 1915.)

SECTION 1. Section 45 of chapter 16 of the laws of 1909, entitled "An act in relation to counties, constituting chapter 11 of the consolidated laws," as added by chapter 341 of the laws of 1909, and amended by chapters 166 ¹ and 379 ² of the laws of 1913 and 323 ³ of the laws of 1914, is hereby amended to read as follows:

SEC. 45. *Establishment of county hospital for tuberculosis.*—The board of supervisors of any county shall have power by a majority vote to establish a county hospital for the care and treatment of persons suffering from the disease known as tuberculosis; or it may submit the question of establishing such a hospital to the voters of the county at any general election; and in any county in which town meetings at which all the voters of the county may vote are held in the spring of the year, the board of supervisors of such a county shall have authority also to submit the question of establishing such a hospital at said town meetings to the electors of the county who are qualified to vote at a general election. The board of supervisors shall fix the sum of money deemed necessary for the establishment of said hospital. The form of the proposition submitted shall read as follows: "Shall the county of..... appropriate the sum of dollars for the establishment of a tuberculosis hospital?" The election notices shall state that the proposition will be voted upon and in the form set forth above. Provision for taking such vote and for the canvassing and returning of the result shall be made by the duly constituted election authorities.

If a majority of the voters voting on such proposition shall vote in favor thereof then such hospital shall be established hereunder and the sum of money named in the said proposition shall be deemed appropriated, and it shall be the duty of the board of supervisors to proceed forthwith to exercise the powers and authority conferred upon it in this section.

When the board of supervisors of any county shall have voted to establish such hospital, or when a referendum on the proposition of establishing such a hospital in a county, as authorized above, shall have been carried, the board of supervisors shall—

1. Purchase or lease real property therefor, or acquire such real property, and easements therein, by condemnation proceedings, in the manner prescribed by the condemnation law, in any town, city, or village in the county. After the presentation of the petition in such proceeding prescribed in section 3360 of the code of civil procedure and the filing of the notice of pendency of action prescribed in section 3381 thereof, said board of supervisors shall be and become seized of the whole or such part of the real property described in said petition to be so acquired for carrying into effect the provisions of this act, as such board may, by resolution adopted at a regular or special session, determine to be necessary for the immediate use and such board for and in the name of such county may enter upon, occupy, and use such real property

¹ Reprint No. 264, p. 309.

² Ibid., p. 310.

³ Reprint No. 279, p. 109.

so described and required for such purposes. Such resolution shall contain a description of the real property of which possession is to be taken and the day upon which possession will be taken. Said board of supervisors shall cause a copy of such resolution to be filed in the county clerk's office of the county in which such property is situate, and notice of the adoption thereof, with a copy of the resolution and of its intention to take possession of the premises therein described on a day certain, also therein named, to be served, either personally or by mail, upon the owner or owners of, and persons interested in, such real property, at least five days prior to the day fixed in such resolution for taking possession. From the time of the service of such notice, the entry upon and appropriation by the county of the real property therein described for the purposes provided for by this act, shall be deemed complete, and such notice so served shall be conclusive evidence of such entry and appropriation and of the quantity and boundaries of the lands appropriated. The board of supervisors may cause a duplicate copy of such papers so served, with an affidavit of due service thereof on such owner or person interested, to be recorded in the books used for recording deeds in the office of the county clerk of its county, and the record of such notice and such proof of service shall be prima facie evidence of the due service thereof. Compensation for property thus acquired shall be made in such condemnation proceeding.

2. Erect all necessary buildings and alter any buildings, on the property when acquired for the use of said hospital: *Provided*, That the plans for such erection or alteration shall first be approved by the State commissioner of health.

3. Cause to be assessed, levied, and collected such sums of money as it shall deem necessary for suitable lands, buildings, and improvements for said hospital, and for the maintenance thereof, and for all other necessary expenditures therefor; and to borrow money for the erection of such hospital and for the purchase of a site therefor on the credit of the county, and issue county obligations therefor, in such manner as it may do for other county purposes.

4. Appoint a board of managers for said hospital as hereinafter provided.

5. Accept and hold in trust for the county, any grant or devise of land, or any gift or bequest of money or other personal property, or any donation to be applied, principal or income, or both, for the benefit of said hospital, and apply the same in accordance with the terms of the gift.

SEC. 2. Subdivision 1 of section 47 of such chapter is hereby amended to read as follows:

1. Shall elect from among its members, a president and one or more vice presidents. It shall appoint a superintendent of the hospital who shall be also the treasurer and secretary of the board, and it may remove him for cause stated in writing and after an opportunity to be heard thereon after due notice; and may suspend him from duty pending the disposition of such charges. Said superintendent shall not be a member of the board of managers, and shall be a graduate of an incorporated medical college, with an experience of at least three years in the actual practice of his profession.

SEC. 3. Subdivision 5 of section 48 of such chapter, as amended by chapters 149 and 239¹ of the laws of 1912 and chapter 379² of the laws of 1913, is hereby amended to read as follows:

5. Shall receive into the hospital in the order of application any person found to be suffering from tuberculosis in any form who is entitled to admission thereto under the provisions of this chapter, excepting that if at any time there be more applications for admission to said hospital than there are vacant beds therein, said superintendent shall give preference in the admission of patients to those who in his judgment, after an inquiry as to the facts and circumstances, are more likely to infect members of their households and others, in each instance signing and placing among the permanent records of the hospital a statement of the facts and circumstances upon which he bases

¹ Reprint No. 200, p. 155.

² Reprint No. 264, p. 310.

his judgment as to the likelihood of transmitting infection, and reporting each instance at the next meeting of the board of managers; and shall also receive persons from other counties as hereinafter provided. Said superintendent shall cause to be kept proper accounts and records of the admission of all patients, their name, age, sex, color, marital condition, residence, occupation, and place of last employment.

County Tuberculosis Hospitals—Change of Location. (Chap. 427, Act Apr. 28, 1915.)

SECTION 1. Section 45 of chapter 16 of the laws of 1909, entitled "An act in relation to counties, constituting chapter 11 of the consolidated laws," as added by chapter 341 of the laws of 1909, and amended by chapters 166¹ and 379² of the laws of 1913, and 323³ of the laws of 1914, and 132 of the laws of 1915, is hereby amended by adding a new subdivision, to be subdivision 6 thereof, to read as follows:

6. Whenever it shall deem it in the public interest so to do, and notwithstanding the provisions of any other general or special act, change the location of such hospital and acquire a new site by purchase, lease, or condemnation, as provided in this section, and establish the hospital thereon.

Boards of Health in Villages. (Chap. 323, Act Apr. 17, 1915.)

SECTION 1. Section 43 of chapter 64 of the laws of 1909, entitled "An act relating to villages, constituting chapter 64 of the consolidated laws," is hereby amended to read as follows:

SEC. 43. *List of village officers; mode of choosing; official year; terms of office.*—Every village shall have a president, not less than two trustees, a treasurer, a clerk, and a street commissioner. * * *

There shall be a board of health in each village, consisting of the board of trustees of such village. The president, trustees, treasurer, collector, police justice, and assessors shall be elective officers, * * *.

Milk—License for Buying and Shipping to Cities. (Chap. 651, Act May 18, 1915.)

SECTION 1. Section 55 of chapter 9 of the laws of 1909, entitled "An act in relation to agriculture, constituting chapter 1 of the consolidated laws," as added by chapter 408 of the laws of 1913, is hereby amended to read as follows:

SEC. 55. *Licensing of milk-gathering stations where milk is bought.*—On and after September 1, 1913, no person, firm, association, or corporation shall buy milk or cream within the State from producers for the purpose of shipping the same to any city for consumption or for manufacture unless such business be regularly transacted at an office or station within the State and unless such person, firm, association, or corporation be duly licensed as provided in this and the ensuing sections of this article. Every such person, firm, association, or corporation before engaging or continuing in the business of buying milk or cream for the purposes aforesaid shall annually, on or before August 1, file an application with the commissioner of agriculture for a license to transact such business. The application shall state the nature of the business, as hereinabove set forth, the full name of the person or corporation applying for the license, and, if the applicant be a firm or association, the full name of each member of such firm or association, the city, town, or village and street number at which the business is to be conducted, and such other facts as the commissioner of agriculture shall prescribe. The applicant shall further satisfy the commissioner of his or its character, financial responsibility, and good faith in seeking to carry on such business.

The commissioner shall thereupon issue to such applicant, on payment of \$10, a license entitling the applicant to conduct the business of buying milk and cream

¹ Reprint No. 264, p. 309.

² Ibid., p. 310.

³ Reprint No. 279, p. 109.

from producers for the purpose aforesaid at an office or station at the place named in the application until the 1st day of September next following: *Provided, however,* That if the application be presented in the month of July, and if the applicant so elects, such license may be granted to begin on the 1st day of September next following and run for a term of one year. A license shall not be issued, however, to any applicant if during the year preceding the filing of the application a complaint from any producer and seller of milk or cream shall have been filed with the commissioner against such applicant for any of the grounds specified in section 57 hereof, and such complaint shall have been established as true and just to the satisfaction of the commissioner after such complaint shall have been investigated by the commissioner in the manner provided by section 56 hereof. A license shall not be issued as provided in this section, on and after the taking effect of this section, unless the applicant for such license shall file with the application a good and sufficient surety bond, executed by a surety company duly authorized to transact business in this State, in a sum not less than \$5,000, or shall be relieved from such requirement as provided herein. Such bond shall be approved as to its form and sufficiency by the commissioner of agriculture.

Such applicant may in lieu of such bond deposit with the commissioner of agriculture money or securities in which the trustees of a savings bank may invest the moneys deposited therein, as provided in the banking law, in an amount equal to the sum secured by the bond required to be filed as herein provided.

The bond required to be filed hereunder shall be given to the commissioner of agriculture in his official capacity and shall be conditioned for the faithful compliance by the licensee with the provisions of this chapter, as hereby amended, and for the payment of all amounts due to persons who have sold milk or cream to such licensee during the period that the license is in force. The money or securities deposited with the commissioner of agriculture, as above provided, shall constitute a separate fund, and shall be held in trust for and applied exclusively to the payment of claims against the licensee making such deposit, arising from the sale of milk or cream to such licensee.

Upon default by the licensee in the payment of any money due for the purchase of milk or cream, which payment is secured by a bond or the deposit of money or securities as hereinbefore provided for, the creditor may file with the commissioner of agriculture, upon a form prescribed by him, a verified statement of his claim. If such creditor shall have reduced such claim to judgment or shall thereafter and before the commencement of the action by the commissioner of agriculture, as hereinafter provided for, reduce such claim to judgment, a transcript of such judgment shall also be filed with such commissioner.

Such statements may be filled [sic] at any time during the period of the license for purchases made during such period and within 90 days from the termination of such period.

After the expiration of 90 days from the termination of any license period the commissioner of agriculture shall, by proper action wherein all such creditors and any surety upon any bond given as hereinbefore provided for and the licensee shall be parties, proceed to determine the amount due each such creditor, and the judgment rendered in such action shall be enforced ratably for such creditors against the surety on the bond, if one there be, or against the moneys or securities deposited as hereinbefore provided for. If any such creditor shall have reduced his claim to judgment such judgment shall be presumptive proof of the amount due such creditor in any action brought by the commissioner of agriculture, as hereinbefore provided for.

Every bond given pursuant to the provisions hereof shall be applicable, in the first instance, to the payment of all claims arising during the license period for which such bond shall continue, and filed either during such period or within 90 days after

the expiration thereof. If all such claims shall be paid the balance available upon such bond shall be devoted to the extinguishment ratably of claims arising during such license period, but for which statements shall not have been filed until after 90 days after the expiration of such period.

All moneys and securities, deposited as herein provided for, shall be applicable, in the first instance, to the extinguishment of claims, properly filed, arising during the license period for which such moneys or securities were originally deposited and if, after the extinguishment of such claims, there shall be a surplus remaining such surplus shall be devoted to extinguishment of claims arising during any preceding license period which were properly filed as hereinbefore provided, all claims for any one license period to be of a parity. Any surplus remaining after the extinguishment of such prior claims shall be added to the moneys or securities then on deposit with the commissioner of agriculture or, if there be at that time on file with such commissioner a bond given pursuant to this section, or if there be then on deposit with such commissioner additional moneys or securities deposited as herein provided for, and if such bond or such moneys or securities, as the case may be, shall, in the opinion of the commissioner of agriculture, be sufficient, such surplus shall be returned to the licensee.

A person or corporation licensed hereunder shall make a verified statement of his or its disbursements during a period to be prescribed by the commissioner of agriculture, containing the names of the persons from whom such products were purchased and the amount due to the vendors thereof. Such statement shall be submitted to the commissioner of agriculture when requested by him and shall be in the form prescribed by such commissioner. If it appears from such statement or other facts ascertained by the commissioner of agriculture, upon inspection or investigation of the books and papers of such licensee as authorized by section 56 of this chapter, that the security afforded to persons selling milk and cream to such licensee by the bond executed or deposit made by such licensee as herein provided does not adequately protect such vendors, the commissioner of agriculture may require such licensee to give an additional bond or to deposit additional money or securities, to be executed or deposited as above provided, in a sum to be determined by the commissioner, but not exceeding by more than 25 per cent the maximum amount paid out by such licensee to sellers of milk in any one month: *Provided, however,* That the maximum amount of the bond or deposit required from any applicant under the provisions of this section shall be \$100,000; and that any applicant filing a bond or depositing money or securities in such maximum amount shall be exempted from filing either the statements of milk purchased or the statements of disbursements in this section provided for.

If the applicant for a license under this section be a person or a domestic corporation, the commissioner of agriculture may, notwithstanding the provisions of this section, if satisfied from an investigation of the financial condition of such person or domestic corporation that such person or corporation is solvent and possessed of sufficient assets to reasonably assure compensation to probable creditors, by an order filed in the department of agriculture, relieve such person or corporation from the provisions of this section requiring the filing of a bond.

The term "station" or "milk-gathering station," as used in this and the ensuing sections of this article, shall include an established office where the business of buying milk or cream as herein provided is carried on, with or without a place or premises in connection therewith for the physical handling of milk or cream.

SEC. 2. Sections 58 and 59 of such chapter, as added by chapter 408 of the laws of 1913, are hereby amended to read as follows:

SEC. 58. *Certiorari to review.*—The action of the commissioner of agriculture in refusing to grant a license, or in revoking a license granted under section 55, shall

be subject to review by writ of certiorari, and if such proceedings are begun to review the revocation of license, the license shall be deemed to be in full force and effect until the final determination of certiorari proceedings and all appeals therefrom.

SEC. 59. *Records to be kept.*—Every proprietor of a milk-gathering station shall keep, in such form as the commissioner of agriculture may prescribe, a record of transactions of purchases of milk or cream by him and he shall, at least semimonthly, deliver to each person from whom he receives or purchases milk or cream, and in the unit of measure used in computing the amount due therefor, an itemized statement of the several amounts or quantities of such milk or cream so received or purchased at such milk station from such person during the prior half month or, if statements are delivered more frequently than semimonthly, during that period of time which has elapsed since the delivery of such last prior statement. If the milk or cream is purchased or received on a butter-fat basis, such statement shall include the percentage or average percentage of butter fat contained in said milk or cream as determined by tests periodical or otherwise. Every such proprietor of a milk gathering station shall post in a conspicuous place in such milk station a schedule of the prices being paid for milk or cream including the premiums paid or deductions made, if any, for milk or cream containing milk fat either in excess or in lesser amount than the agreed standard, and shall keep a correct account of all the milk or cream daily received or purchased from each person at such milk station, which account shall be open to inspection by said person.

Habit-Forming Drugs—Sale and Dispensing. Hypodermic Syringes—Sale of Drug Addicts—Commitment of. (Chap. 327, Act Apr. 17, 1915.)

SECTION 1. Sections 245, 246, 247, 248, 249, 249a, and 249d of chapter 49 of the laws of 1909, entitled "An act in relation to the public health, constituting chapter 45 of the consolidated laws," as added by chapter 363 of the laws of 1914,¹ are hereby amended to read, respectively, as follows:

SEC. 245. *Sale prohibited; exception.*—No pharmacist, druggist, or other person shall sell, have or offer for sale or give away any chloral, opium, or any of its salts, alkaloids, or derivatives or any compound or preparation of any of them except upon the written prescription of a duly licensed physician, veterinarian, or dentist: *Provided*, That the provisions of this article shall not apply to the sale of domestic and proprietary remedies, nor to physicians' prescriptions, compounded solely for the person named in the original prescription, actually sold in good faith as medicines and not for the purpose of evading the provisions of this article: *And provided further*, That such remedies and preparations do not contain more than 2 grains of opium, or one-fourth grain of morphine, or one-eighth grain of heroin, or 1 grain of codeine, or 10 grains of chloral, or their salts in 1 fluid ounce, or if a solid preparation, in 1 avoirdupois ounce, nor to plasters, linaments, and ointments for external use only.

SEC. 246. *Prescriptions; certificates.*—It shall be unlawful for any person to sell at retail or give away any of the drugs, their salts, derivatives, or preparations mentioned in section 245 of this chapter, except as herein provided, without first receiving a written prescription signed by a duly licensed physician, veterinarian, or dentist. The prescription must contain substantially the following: The name in full of the physician, veterinarian, or dentist issuing such prescription, his office address, and the name, age, and address of the person to whom and date on which such prescription is issued. It shall be unlawful for any duly licensed physician, veterinarian, or dentist to issue any such prescription containing any of the drugs, their salts, derivatives, or preparations mentioned in section 245 of this chapter, for [sic] any duly licensed physician to dispense, give, or deliver any of the said drugs, their salts, derivatives, or preparations, except after a physical examination of any person for the treatment of disease,

¹ Reprint No. 279, p. 133.

injury, or deformity. It shall be unlawful for any person to sell at retail any of the drugs or preparations of any of those mentioned in section 245 of this article without first verifying the authority of any prescription containing more than 4 grains of morphine, 30 grains of opium, 2 grains of heroin, 6 grains of codeine, or 4 drams or chloral. Such verification can be made by telephone or otherwise. Such prescriptions so received shall be filled out at the time of receiving the same for the full quantity prescribed, and no prescription so received shall be filled out more than 10 days after the date which said prescription be dated. Such prescription, from which no copy shall be taken shall be retained by the person who dispenses the same and shall be filled but once. A separate file of all such prescriptions shall be kept by the pharmacist or druggist filling the same, but such prescriptions may be numbered consecutively with other prescriptions received. Unless so separately filed a record must be kept showing:

1. The file number given to each prescription filled;
2. The name of the physician or surgeon signing the same; and
3. The name of the person for whom such prescription is filled.

Any person who sells at retail, furnishes, or dispenses any of the drugs mentioned in section 245 of this chapter upon a written prescription by a duly registered physician or veterinarian or dentist shall at the time of dispensing the same place upon the package a label or deliver therewith a certificate stating the name and address of the person selling or furnishing the same, the name and address of the physician, veterinarian, or dentist upon whose prescription such sale is made, the date of sale, and the name of the person to whom such sale is made. Any person other than a manufacturer of any of the drugs mentioned in section 245 or a wholesale dealer in drugs or a licensed pharmacist, licensed druggist, duly registered practicing physician, licensed veterinarian, or a licensed dentist, who shall possess any of the drugs mentioned in section 245 or their salts, derivatives, or preparations, shall be guilty of a misdemeanor, unless said possession is authorized by the certificate described in this section. Nothing herein contained shall be construed to prohibit the sale of any of such drugs by any manufacturing pharmacists or chemists or wholesale or retail pharmacists or druggists to other manufacturing pharmacists or chemists, or wholesale or retail pharmacists or druggists, or to hospitals, colleges, scientific or public institutions, except that such sale shall be made in the manner provided in the next succeeding section.

SEC. 247. Order blanks; filing.—The State commissioner of health shall prepare and furnish to all boards of health or officers official order blanks, serially numbered in duplicate, bound in book form, with carbon or transfer paper between the duplicate pages. The said official order shall be furnished by the local health board or officer to any local duly licensed physician, dentist, pharmacist, druggist, or veterinarian, upon which must be written all orders for the purchase of any of the drugs enumerated in section 245 of this chapter for the use of such physician, dentist, pharmacist, druggist, or veterinarian. It shall be unlawful for any person to sell, furnish, or dispose to any physician, pharmacist, druggist, veterinarian, or dentist any of the drugs enumerated in section 245 of this chapter without first receiving from such physician, pharmacist, druggist, veterinarian, or dentist an official order blank as provided in this section, which official order shall be retained by the person or corporation who sells, furnishes, or dispenses any of the drugs enumerated in section 245 of this chapter, and such official order shall be kept in a separate file or book and an entry made or caused to be made on the order at the time of making such sale, stating the date of sale, the name and address of the purchaser and the name of the person making such sale.

In lieu of preparing and furnishing order blanks under this section, however, the State commissioner of health may approve order blanks provided for in any act of Congress regulating the purchase by and sale of such drugs to physicians, pharmacists, druggists, veterinarians, and dentists, and may provide by rule or regulation that the

use of such approved order blanks in the manner and for the purposes set forth in this section shall be a sufficient compliance with the provisions hereof. Such approval, rule, or regulation may be suspended or revoked by the commissioner at any time, thereby restoring all the requirements of this section.

SEC. 248. *Physicians, etc., to keep records.*—All persons authorized by law to sell, administer, prescribe, dispense, or dispose of any of the drugs enumerated in section 245 of this chapter, shall forthwith keep on record the name and address of each person to whom such drug is dispensed, given, or in any manner delivered and the quantity so dispensed, given, or delivered, and shall likewise keep a record of any disposition made of any quantity of any such drug referred to, whether such disposition be in the preparation of compounds or otherwise, and if used in the preparation of compounds the quantity so used in each compound and where placed. Such record shall be preserved for two years and shall always be open for inspection by the proper authorities. Any violation of this section is hereby declared to be a misdemeanor.

SEC. 249. *Hypodermic syringe; sale of; record; penalty.*—It is unlawful for any person to sell at retail or to furnish to any person other than a duly licensed physician, dentist, or veterinarian, an instrument commonly known as a hypodermic syringe or an instrument commonly known as a hypodermic needle, without the written order of a duly licensed physician, dentist, or veterinarian. Every person who disposes of or sells at retail, or furnishes or gives away to any person, either of the above instruments, upon the written order of a duly licensed physician, dentist, or veterinarian, shall, before delivering the same, enter in a book kept for that purpose the date of the sale, the name and address of the purchaser, and a description of the instrument sold, disposed of, furnished, or given away. Any person or persons who sell, dispose of, or give away an instrument commonly known as a hypodermic syringe, or an instrument commonly known as a hypodermic needle, except in the manner prescribed in this section, shall be guilty of a misdemeanor.

SEC. 249a. *Commitment of habitual drug users; procedure; discharge.*—The constant use by any person of any habit-forming drug, except under the direction and consent of a duly licensed physician, is hereby declared to be dangerous to the public health. Whenever a complaint shall be made to any magistrate that any person is addicted to the use of any habit-forming drug, without the consent or direction of a duly licensed physician, such magistrate, after due notice and hearing, is [sic.] satisfied that the complaint is founded and that the person is addicted to the use of a habit-forming drug, shall commit such person to a State, county, or city hospital or institutions licensed under the State lunacy commission, or any correctional or charitable institution maintained by the State or any municipality thereof, for the treatment of disease or ineptitude. Any court having jurisdiction of a defendant in a criminal proceeding, if it appears that a defendant is a habitual drug user, may commit such user for treatment as herein provided at any stage of such proceeding against such defendant, and may stay proceedings, withhold conviction, or suspend sentence pending the period of such commitment. Whenever the chief medical officer of such institution shall certify to any magistrate that any person so committed has been sufficiently treated or give any other reason which is deemed adequate and sufficient, he may discharge the person so committed.

Every person committed under the provisions of this section shall observe all the rules and regulations of the institution or hospital. Any such person who willfully violates the rules and regulations of the institution or repeatedly conducts himself in a disorderly manner may be taken before a magistrate by the order of the chief medical officer of the institution. The chief medical officer may enter a complaint against such person for disorderly conduct and the magistrate, after a hearing and upon due evidence of such disorderly conduct, may commit such person for a period of not to exceed six months to any institution to which persons convicted of disorderly conduct

or vagrancy may be committed, and such institution shall keep such persons separate and apart from the other inmates, provided that nothing in this section shall be construed to prohibit any person committed to any institution under its provisions from appealing to any court having jurisdiction for a review of the evidence in which this commitment was made.

SEC. 249d. Penalties.—Any violation of any of the provisions of this article shall be deemed a misdemeanor, except that the sale, the offering for sale, or the giving away, or dispensing of the drugs mentioned in section 245 of this act, otherwise than as permitted by this act, to any child under the age of 16 years shall be deemed a felony. Nothing contained in this article shall be construed to amend or repeal section 1746 of the penal law.

Burial—Removal of Bodies from One Cemetery to Another. (Chap. 213, Act Apr. 5, 1915.)

SECTION 1. Section 9 of chapter 53 of the laws of 1909, entitled "An act in relation to religious corporations, constituting chapter 51 of the consolidated laws," is hereby amended so as to read as follows:

SEC. 9. Removal of human remains from one cemetery of a religious corporation to another cemetery owned by it.—A religious corporation, notwithstanding the restrictions contained in any conveyance or devise to it, may remove the human remains buried in a cemetery owned by it, or when such church corporation is situated outside of a city in the grounds surrounding the church belonging to such corporation, to another cemetery owned by it, or to a plot or lot acquired by it in any other cemetery located in the same town, or in a town adjoining the town or city in which the cemetery wherein such human remains are buried is located, if the trustees thereof so determine; and if either three-fourths of the members of such corporation, qualified to vote at its corporate meetings, sign and acknowledge and cause to be recorded in the office of the clerk of the county in which such cemetery or a part thereof is situated, a written consent thereto, or if three-fourths of the members of such corporation qualified to vote, and present and voting, at a corporate meeting of such corporation, specially called for that purpose, shall approve thereof. But if such corporation be a church, previous notice of the object of such meeting shall be published for at least four successive weeks in a newspaper of the town, village, or city in which the cemetery from which the removal is proposed, is situated, or if no newspaper is published therein, then in a newspaper designated by the county judge of such county. Such removal shall be made in an appropriate manner and in accordance with such directions as to the manner thereof, as may be given by the board of health of the town, village, or city in which the cemetery from which the removal is made, is situated. All tombstones, monuments, or other erections at or upon any grave from which any remains are removed, shall be properly replaced or raised at the grave where the remains are reinterred.

Sewers—Connection of, with Those of Another Municipality. (Chap. 25, Act Mar. 4, 1915.)

SECTION 1. Section 276 of chapter 64 of the laws of 1909, entitled "An act relating to villages, constituting chapter 64 of the consolidated laws," as amended by chapter 212 of the laws of 1909 and chapter 122 of the laws of 1912, is hereby amended to read as follows:

SEC. 276. Contracts with other municipalities, sewer districts, etc.—The board of sewer commissioners may contract for the connection of the sewers thereof with the sewers of another village, or of a town, or city, or of a sewer district established under the provisions of article 11 of the town law; or jointly with such other village or a town, or city, or sewer district established as aforesaid, may construct, maintain, operate

or use sewers, outlets, or disposal works; or may contract with any such other village, or a town, or city, or sewer district established as aforesaid for the right to construct and maintain through any such other village, town, or city, or sewer district established as aforesaid, an outlet sewer, including the right to acquire real property for such sewer outlet, which thereupon may be acquired either at private sale or by condemnation as authorized by this act. No sewer, outlet, or disposal works of any other village, town, or sewer district thereof, or city, shall be constructed in any village without the approval of the board of sewer commissioners of the village in which such sewer, outlet, or disposal works shall be constructed, and no such contract shall be made unless a proposition therefor be adopted by the village constructing the sewer, outlet, or disposal works, stating the maximum expense.

Advertisements—Untrue, Deceptive, or Misleading, Prohibited. (Chap. 569, Act May 10, 1915.)

SECTION 1. Section 421 of chapter 88 of the laws of 1909, entitled "An act providing for the punishment of crime, constituting chapter 40 of the consolidated laws," as amended by chapter 759 of the laws of 1911, chapter 321 of the laws of 1912, and chapter 590 of the laws of 1913, is hereby repealed and in its place there shall be a new section 421 to read as follows:

SEC. 421. *Untrue and misleading advertisements.*—If any person, firm, corporation, or association, or agent or employee thereof, with intent to sell or in any wise dispose of merchandise, real estate, service, or anything offered by such person, firm, corporation, or association, or agent or employee thereof, directly or indirectly, to the public for sale or distribution, or with intent to increase the consumption thereof, or to induce the public in any manner to enter into any obligation relating thereto, or to acquire title thereto, or an interest therein, knowingly makes, publishes, disseminates, circulates, or places before the public, or causes, directly or indirectly, to be made, published, disseminated, circulated, or placed before the public, in this State, in a newspaper, magazine, or other publication, or in the form of a book, notice, circular, pamphlet, letter, handbill, poster, bill, sign, placard, card, label, or tag, or in any other way, an advertisement, announcement, or statement of any sort regarding merchandise, service, or anything so offered to the public which contains any assertion, representation, or statement of fact that is untrue, deceptive, or misleading, or that amounts to an offer to sell, barter, or exchange real estate, by means of prizes, rewards, distinctions, or puzzle methods, such person, corporation, or association, or the members of such firm, or the agent of such person, corporation, association, or firm, shall be guilty of a misdemeanor, punishable by a fine of not less than \$25 nor more than \$1,000, or by imprisonment for not more than one year, or by both such fine and imprisonment.

SEC. 2. This act shall take effect September 1, 1915.

Grocery Stores in Certain Cities—Sleeping Apartments—Must Comply with Regulations of Local Boards of Health. (Chap. 343, Act Apr. 20, 1915.)

SECTION 1. Article 11 of chapter 49 of the laws of 1909, entitled "An act in relation to the public health, constituting chapter 45 of the consolidated laws," as amended by chapter 422 of the laws of 1910, is hereby amended by inserting after section 236, a new section, to be section 236a, to read as follows:

SEC. 236a. *Sleeping apartments in grocery or provision stores.*—* * * No proprietor of any grocery or provision store located within the boundaries of any city of the first class shall permit any clerk to sleep in any room or apartment in or connected with such store which does not comply with the sanitary regulations of the local board of health; *Providing, however,* That this act shall not affect any proprietor or the family of such proprietor who reside in an apartment connected with such store,

which apartment at the time of its building or erection was in conformity with the sanitary regulations of the local board of health. Failure to comply with any of the provisions of this section shall be deemed a misdemeanor.

TEXAS.

Utensils in Public Eating Places—Sterilization of. (Chap. 7, Act Feb. 12, 1915.)

SECTION 1. Any person or persons conducting or managing or their agents of any hotel, cafe, restaurant and any other public place where meals are served, must, after the taking effect of this act, sterilize in hot boiling water, all plates, cups, saucers, knives, forks, spoons, and such other utensils as may be used in serving meals and drinks, after being used and before permitting them to be used again: *Provided*, That the water in which said eating utensils are sterilized, shall be changed every two hours: *Provided further*, That no napkins shall be furnished for use after being used once until laundered.

SEC. 2. Any person or person[s] conducting or managing or their agents of any public eating house mentioned in section 1 of this act, who violates the provisions thereof, shall be fined not less than \$5 nor more than \$100 for each separate offense.

WISCONSIN.

Barber Shops—Sanitary Regulation. (Reg. Bd. of H., Aug. 26, 1915.)

RULE 1. The use of barber shops as a living, dining, or sleeping apartment is prohibited.

RULE 2. The floors, walls, furniture, and other fixtures of barber shops shall at all times be kept clean; all jardinières and cuspidors shall be thoroughly cleaned at least once each day.

Floors must be kept free from hair and swept or mopped each day.

RULE 3. Every barber shall see that no person expectorates on the floors or walls of his shop.

RULE 4. The use of stores, saloons, or other places of business as a barber shop is prohibited, unless the barber shop is located in a room or rooms provided especially for that purpose. The provision of this rule shall not apply in cases where there is no established barber shop in the town.

RULE 5. Every barber or other person in charge of any barber shop shall supply clean hot and cold water in such quantities as may be necessary to conduct such shop in a sanitary manner. Hot-water tanks shall be used for no other purpose than that of heating water.

RULE 6. No owner or manager of a barber shop shall permit any person suffering from a communicable skin disease or from a venereal disease to act as a barber in said shop.

RULE 7. No barber or other person in charge of any barber shop shall undertake to treat any disease of the skin.

RULE 8. Every barber or other person in charge of any barber shop shall use separate and clean towels for each customer, and shall, while serving said customer, wear washable outer linen apron or coat, which shall be kept clean.

RULE 9. No barber shall permit any person to use the head rest of any barber's chair under his control unless the head rest is covered with a towel that has been washed since last being used, or by a clean, new paper.

RULE 10. No barber shall shave any person when the surface to be shaved is inflamed or broken out or contains pus, unless such person is provided with a cup and shaving brush for his individual use.

RULE 11. Hair brushes and combs must at all times be kept clean.

RULE 12. Every barber shall thoroughly cleanse his hands immediately before serving each customer.

RULE 13. No barber shall, to stop the flow of blood, use alum or other material unless the same be used as a powder and applied with a clean towel or in liquid form.

RULE 14. All shaving cups and lathering brushes must be thoroughly cleaned with hot water before using on any customer.

RULE 15. The use of finger bowls, sponges, and powder puffs is prohibited.

RULE 16. When a hot towel is used it must be discarded after using once until laundered. Dipping towels in receptacles containing hot water and using same on a customer is insanitary and is strictly forbidden.

RULE 17. All tools used upon a customer who has symptoms of a skin disease of any kind must be sterilized by immersing in 50 per cent alcohol for 10 minutes, 5 per cent carbolic acid for 10 minutes, or by boiling at least 10 minutes after each separate use thereof. The barber should wash his hands with soap and hot water and then apply alcohol or some other approved disinfectant. The razor used on each customer must not be stropped until it has been sterilized.

RULE 18. The owner or manager of any barber shop shall post a copy of these rules and regulations in a conspicuous place in said shop.

WYOMING.

Public Schools—Physical Examination of Pupils by Teachers. (Chap. 127, Act Mar. 2, 1915.)

SECTION 1. Teacher to make examinations.—It shall be the duty of every teacher engaged in teaching in the public schools of incorporated cities and towns of the State separately and carefully to test and examine every child under his or her jurisdiction to ascertain if such child is suffering from defective sight or hearing or diseases of nose or throat: *Provided*, That such examination shall be made by observation by the teachers, without using drugs or instruments and without coming in physical contact with said child.

SEC. 2. Charts, questions, report.—In making the tests required by section 1 of this act the teacher shall employ eye-testing charts of a standard character, approved and supplied by the State superintendent of public instruction and shall conform to the rules of the State superintendent in methods of applying such tests, especial attention being given to defects that may be disclosed by the following questions:

1. Does the pupil habitually suffer from inflamed lids or eyes?
2. Does the pupil fail to read a majority of the letters in the number 20 line of the standard vision chart with either eye?
3. Do the eyes and head habitually grow weary and painful after study?
4. Does the pupil appear to be "cross-eyed"?
5. Does the pupil complain of earache in either ear?
6. Does matter (pus) or a foul odor proceed from either ear?
7. Does the pupil fail to hear an ordinary voice at 20 feet in a quiet room?
8. Is the pupil frequently subject to "colds in the head" and discharges from the nose and throat?
9. Is the pupil an habitual "mouth breather."

If an affirmative answer is found to any of these questions the teacher shall give such pupil a report to his parent or guardian, made on a report blank prepared and furnished by the State superintendent of public instruction, such report to be made in form prescribed by the State superintendent.

It shall be the further duty of the teacher to record the results of the examinations required by section 1 of this act in such manner as may be prescribed by the State superintendent of public instruction.

SEC. 3. Duty of State superintendent.—It shall be the duty of the State superintendent of public instruction to prescribe rules for making such tests as are required by this act and to prepare copies thereof, together with all blanks, charts, and printed forms deemed necessary by the State superintendent for carrying into effect the provisions of this act, and to distribute them to all the public-school teachers in incorporated cities and towns of the State, such distribution to be made through the district boards or, if there be such, through the executive officers thereof, the expenses of such printing and distribution to be borne out of the State superintendent's contingent: *Provided*, That the annual expense for such purpose shall not exceed \$150.

SEC. 4. When tests are to be made.—During the first month of each school year after the opening of school, teachers must make the tests required of this act upon the children then in attendance at school; and thereafter, as children enter school during the year, such tests must be made immediately upon their entrance.

SEC. 5. Boards of trustees to enforce this act.—It shall be the duty of the boards of trustees of the several school districts of the State to enforce the provisions of this act.

SEC. 6. This act shall take effect and be in force from and after July 1, 1915.

Foods and Drugs—Misbranding Defined. (Chap. 71, Act Feb. 24, 1915.)

SECTION 1. That section 9 of chapter 104 of the session laws of Wyoming, 1911, be amended and reenacted to read as follows:

SEC. 9. That the term "misbranded," as used herein shall apply to all drugs or articles of food, or articles which enter into the composition of food, the package or label of which shall bear any statement, design or device, regarding such article or the ingredients or substances contained therein which shall be false or misleading in any particular, and to any food or drug product which is falsely branded as to the State, Territory, or country in which it is manufactured or produced.

That for the purpose of this act an article shall also be deemed to be misbranded:

In case of drugs:

First. If it be an imitation of, or offered for sale under the name of another article.

Second. If the contents of the package as originally put up shall have been removed in whole or in part, and other contents shall have been placed in such package, or if the package fail to bear a statement on the label of the quantity or proportion of any alcohol, morphine, opium, cocaine, heroin, alpha or beta eucaine, chloroform, cannabis indica, chloral hydrate or acetanilide, or any derivative or preparation of any such substances contained therein.

Third. If its package or label shall bear or contain any statement, design, or device regarding the curative or therapeutic effect of such article or any ingredients or substances contained therein, which is false and fraudulent.

In case of food:

First. If it be an imitation of, or offered for sale under the distinctive name of another article.

Second. If it be labeled or branded so as to deceive or mislead the purchaser, or purport to be a foreign product when not so, or if the contents of the package as originally put up shall have been removed in whole or in part and other contents shall have been placed in such package, or if it fail to bear a statement on the label of the quantity or proportion of any morphine, opium, cocaine, heroin, alpha or beta eucaine, chloroform, cannabis indica, chloral hydrate, or acetanilide, or any derivative or preparation of any of such substances contained therein.

Third. If in package form, the quantity of the contents be not plainly and conspicuously marked on the outside of the package in terms of weight, measure, or numerical count: *Provided, however*, That reasonable variations shall be permitted and also exemptions as to small packages may be established by rules and regulations made in accordance with section 5 of chapter 107 of the session laws of Wyoming, 1913.

Fourth. If the package containing it or its label shall bear any statement, design or device regarding the ingredients or the substances contained therein, which statement, design or device, shall be false or misleading in any particular: *Provided*, That any article of food, which does not contain any added poisonous or deleterious ingredients shall not be deemed to be adulterated or misbranded in the following cases:

First. In the case of mixtures or compounds which may be now or from time to time hereafter known as articles of food, under their own distinctive names, and not an imitation of, or offered for sale under the distinctive name of another article, if the name be accompanied on the same label or brand with the statement of the place where said article had been manufactured or produced.

Second. In the case of articles labeled, branded, or tagged so as to plainly indicate that they are compounds, imitations, or blends, and the word "compound," "imitation," or "blend," as the case may be, is plainly stated on the package in which it is offered for sale: *Provided*, That the term "blend," as used herein, shall be construed to mean a mixture of like substances, not excluding harmless coloring or flavoring ingredients, used for the purpose of coloring and flavoring only: *And provided further*, That nothing in this act shall be construed as requiring or compelling proprietors or manufacturers of proprietary foods, which contain no unwholesome added ingredients, to disclose their trade formulas, except in so far as the provisions of this act may require to secure freedom from adulteration or misbranding.

**Foodstuffs, Drinks, Medicines, Drugs, and Liquors—Adulterated or Misbranded—
Condemnation and Confiscation. (Chap. 79, Act Feb. 25, 1915.)**

SECTION 1. That section 241 of the compiled statutes of Wyoming, 1910, be amended and reenacted to read as follows:

SEC. 241. Any article of food, drink, medicine, drug, or liquor that is adulterated or misbranded within the meaning of the act prohibiting the manufacture and sale of adulterated, misbranded, poisonous, or deleterious foods, drugs, medicines, and liquors, approved March 2, 1911, or any amendment thereof, or that is made, labeled, or branded contrary to the provisions of the said act, or that does not conform to the definition or analytical requirements provided in the said act, and is being sold or offered for sale or exposed for sale within the State of Wyoming, shall be liable to be proceeded against before any justice of the peace within whose jurisdiction the same may be found, and seized for condemnation and confiscation; and authority and jurisdiction are hereby vested in the several justices of the peace to issue the warrant and to hear and determine the proceedings herein provided for. Such proceedings shall be by complaint, verified by affidavit, and in the name of the State of Wyoming against the article or articles proceeded against, particularly describing the same, the place where they are located, the name of the person, firm, or corporation in whose possession they are found, and wherein they violate the provisions of this act. Thereupon said justice of the peace shall issue a warrant returnable not less than 3 nor more than 10 days after its date, directed to the sheriff or any constable of the county, commanding such officer to seize and take into his possession the article or articles described in the complaint and bring the same before the justice of the peace who issued the warrant, and to summon the person, firm, or corporation named in the warrant, and any other person who may be found in possession of the said articles, to appear at the time and place therein specified, which warrant shall be executed and served in the same manner as a writ of replevin in civil cases before such justice of the peace.

The hearing upon such complaint shall be at the time and place specified in the warrant, which time shall not be less than 5 days nor more than 15 days from the return day. Upon the hearing the complaint may be amended, and any person,

firm, or corporation that appears and claims the said article or articles shall be required to file its claim in writing, and either party may demand a trial by jury, and appeal may be taken as in other civil cases. If upon such hearing such article is condemned as being adulterated, or misbranded or of a poisonous or deleterious character within the meaning of the said act, or as made, labeled, or branded contrary to the provisions of the said act, or as not conforming to the definition or analytical requirements provided in the said act, the same shall, unless an appeal be taken, be confiscated and disposed of by destruction or sale, as the justice of the peace may direct, and the proceeds thereof, if sold, less the legal costs and charges, shall be paid into the treasury of the State of Wyoming; but such article shall in no instance be sold contrary to the provisions of the said act: *Provided, however,* That upon the payment of the costs of such proceedings and the execution and delivery of a good and sufficient bond to the State dairy, food, and oil commissioner for the use of the State of Wyoming, to the effect that such articles shall not be sold or otherwise disposed of contrary to the provisions of the said act, the justice of the peace may by order direct that such articles be delivered to the owner thereof.

Whenever the State dairy, food and oil commissioner, or his deputy, shall have ground for suspicion that any article of food, found in possession of any person, firm or corporation, is adulterated or misbranded within the meaning of the said act, he may without a warrant seize such article of food and make an inventory thereof, and shall leave a copy of such inventory with the party holding such suspected goods, and tag the same "suspected," and he shall notify in writing the person, firm or corporation in whose possession it may be found not to offer the same for sale or sell or otherwise dispose of the same until further notice in writing from the commissioner. Whereupon the State dairy, food and oil commissioner shall forthwith cause a sample of said article of food to be examined or analyzed by the State chemist, and if the same shall be found to be adulterated or misbranded within the meaning of the said act the commissioner shall proceed with a hearing and subsequent proceedings, as provided in this act. If, however, such examination or analysis shall show that such article of food complies with the provisions of the said act, the person, firm, or corporation in whose possession such article of food is found shall forthwith be notified in writing that said seizure is released, and authority given to dispose of such article of food. Any justice of the peace of the county, upon the filing of an affidavit by the State dairy, food and oil commissioner or his deputy that he has probable cause for believing any food or dairy product or substitutes therefor, or imitation thereof, kept for sale or for a purpose, or had in possession or under control, contrary to the provisions of the said act, or other laws which now exist or may be hereafter enacted, are concealed by any person or at any place shall issue a search warrant and cause a search to be made in any place therefor, and to that end may cause any building, inclosure, wagon or car to be entered, and any apartment, chest, box, locker, tub, jar, crate, basket, or package to be broken open and the contents thereof examined.

Habit-Forming Drugs—Possession, Sale, and Dispensing—Dosage when Prescribed or Furnished by Physicians. (Chap. 106, Act Feb. 26, 1915.)

SECTION 1. *Regulations, penalty.*—That section 2907 Wyoming Compiled Statutes of 1910 as amended by section 1 of chapter 93 session laws [of 1913] be amended and reenacted to read as follows:

SEC. 2907. Except as hereinafter provided, it shall be unlawful for any person, whether acting for himself or as agent, to possess or sell or otherwise dispose of cocaine, eucaine, beta eucaine, alpha eucaine, morphine, heroin, chloral, chloral hydrate, Indian hemp, opium, or any salt, compound or derivative thereof, except upon the prescription of a licensed practicing physician registered in this State. No person

filling the prescription shall refill the same nor give any copy thereof to the party presenting said prescription. The said prescription shall be kept on file and open to inspection by the State board of pharmacy commission, city or county authorities, or of the State board of medical examiners, at any time: *Provided*, That the above provisions shall not apply to sales at wholesale, by jobbers, wholesalers and manufacturers to retail druggists, nor to sales at retail by druggists to regular licensed practicing physicians registered in this State, or to dentists or veterinary surgeons registered in this State, nor to sales to State, county or private hospitals: *And provided further*, That the above provisions shall not apply to such preparations as are recognized by the United States Pharmacopœia or National Formulary, or pharmaceutical preparations to be used in the filling of prescriptions written by a regular practicing physician in this State. Any person found guilty of any violation of the provisions of this section shall be deemed guilty of a felony and shall be fined not less than \$500 nor more than \$1,000, or imprisoned in the State penitentiary for a term of not less than one year nor more than three years, or be punished by both such fine and imprisonment in the discretion of the court.

SEC. 2. *Physicians, dosage, penalty.*—That section 2909, Wyoming Compiled Statutes, 1910, as amended by section 3 of chapter 93, session laws of 1913, be, and the same is hereby, amended and reenacted to read as follows:

SEC. 2909. No practitioner of medicine, druggist, or veterinary medicine shall furnish to or prescribe for the use of any habitual user of the same, any cocaine, eucaïne, beta eucaïne, alpha eucaïne, morphine, chloral, chloral hydrates, Indian hemp, opium, or any salt or compound of any of the foregoing substances or preparation containing any of the foregoing substances, to any person not under his treatment in the regular practice of his profession, and no practitioner of veterinary medicine shall administer any of the foregoing substances to any human being: *Provided, however*, That the provisions of this section shall not be so construed as to prevent any lawfully authorized practitioner of medicine from prescribing or administering in good faith cocaine not exceeding 2 grains to any one person within the period of 24 consecutive hours; morphine not to exceed 4 grains to any one person within the period of 24 consecutive hours; codeine, Indian hemp, eucaïne, alpha eucaïne, beta eucaïne, opium, or any of its derivatives, not to exceed 4 grains within any consecutive period of 24 hours; chloral not to exceed 240 grains within any consecutive period of 24 hours: *Provided*, That the provisions of this act shall not be so construed as to prevent the use of the foregoing substances in hospitals in any quantity deemed necessary by the attending physicians when such administration is not for the purpose of evading the provisions of this act. When any physician shall administer or prescribe in excess of the dosage of drugs mentioned in this section, within any 24 hours, he shall within five days make a report of such action to the secretary of the State board of health stating fully name of patient and conditions under which drugs were administered or prescribed. It shall be the duty of the State pharmacy commission to enforce these sections. Any person found guilty of any violation of the provisions of this section shall be deemed guilty of a felony and shall be fined not less than \$500 nor more than \$1,000, or imprisoned in the State penitentiary for a term of not less than one year nor more than three years, or be punished by both such fine and imprisonment in the discretion of the court.

SEC. 3. All acts and parts of acts in conflict with this act, in so far as they apply to the penalty herein designated, are hereby repealed.

Poisons and Drugs—Sale and Dispensing. (Chap. 78, Act Feb. 25, 1915.)

SEC. 2. Sale of poisons.—That section 2906, Wyoming Compiled Statutes, 1910, be amended and reenacted to read as follows:

SEC. 2906. No persons except registered pharmacists shall sell at retail any poisons commonly recognized as such, and especially aconite, arsenic, belladonna, biniodide of mercury, carbolic acid, chloroform, conium, corrosive sublimate, or creosote, croton oil, cyanide of potassium, digitalis, hydrocyanic acid, nux vomica, oil of bitter almonds, oxalic acid, strychnine, sugar of lead, sulphate of zinc, white precipitate, red precipitate, or any drugs or chemicals of a like poisonous nature which would be destructive to human life when taken in doses of 60 grains or less; and no person shall sell any of the above-named poisons or drugs without affixing to the box, bottle, vessel, or package containing the same, and to the wrapper or cover thereof, a label bearing the name of the article and the word "poison" distinctly shown with the name and place of business of the seller. No person shall deliver any of said poisons to any person under age of 21 years, except on order of parent or guardian of said minor, nor shall he deliver any of said poisons to any persons without satisfying himself that such poison is to be used for a legitimate purpose: *Provided*, That nothing herein contained shall apply to the dispensing of physicians' prescriptions of any of the poisons or articles aforesaid. It shall be the duty of the person vending any of the poisons aforesaid before delivering the same to the purchaser, to cause an entry to be made in a book kept for that purpose, stating the date of sale, the name and address of the purchaser, the name [and] quantity of the poison and the purpose for which it is to be used, and the name of the dispenser; and such books shall always be open for inspection by the proper authorities and shall be preserved for reference for at least two years. Any person failing to comply with the requirements of this section shall be liable to a penalty of not less than \$10 nor more than \$100 for each and every offense. It shall be the duty of the commission of pharmacy to enforce all laws pertaining to drug stores or pharmacies.

MUNICIPAL ORDINANCES, RULES AND REGULATIONS PERTAINING TO PUBLIC HEALTH.

HUNTINGTON, IND.

Garbage, Refuse, and Ashes—Care and Disposal. (Ord. Aug. 12, 1915.)

SECTION 1. That the removal of garbage shall hereafter be done by said city under the direction and supervision of the street commissioner, or by contract, as the board of public works of said city may direct by resolution adopted at its first regular meeting in April of any year, and in either event such removal shall be governed by the terms hereinafter designated.

SEC. 2. If the removal of garbage is at any time ordered to be by contract, the city clerk shall give notice of the letting of such contract by publication in at least two daily papers published in the said city on the second and third Tuesdays in May that he will receive proposals for the removal of slops, ashes, garbage, and other refuse matter for the period of one year from the 1st day of July, and that said bids will be opened by the board of public works and said contract let on the first Tuesday of June. Every proposal shall be accompanied by a bond equal in amount to the bid with two freeholders as sureties, and said board of public works may reject any and all bids.

SEC. 3. All slops, animal and vegetable matter, garbage, and other offal of a decaying nature, and all dead animals, except of the horse, mule, cow, and sheep kind, shall be removed from every residence, retail business house, hotel, restaurant, and eating house, or other buildings once each week during the months of November, December, January, February, March, and April, and two times each week during the months of May, June, July, August, September, and October.

SEC. 4. Every head of a family, keeper of a hotel, eating house, or restaurant, merchant, or any other person or persons making slops, animal, or vegetable matter, and other garbage of a decaying nature shall drain the same free from water and wrap all such garbage in paper and place the same in a galvanized bucket with a properly fitting cover and bail, such bucket not to exceed 10 gallons capacity, and shall be placed adjacent to the alley or street most convenient to be reached by the garbage collectors of the city: *Provided, however,* That the keeper of any hotel, eating house, or restaurant may use larger containers than hereinabove specified if such person assist in loading said garbage on the wagons of the collectors.

SEC. 5. Every head of a family, keeper of a hotel, eating house, restaurant, merchant, or any other person or persons producing ashes shall provide a tin or galvanized-iron container not to exceed 1 bushel in capacity for the reception of ashes produced by such persons and place the same adjacent to the street or alley most convenient for the city collectors: *Provided, however,* That no ashes shall be placed with garbage in the garbage containers provided for in section 4 of this ordinance: *And provided also,* That such ashes shall be kept free from water, snow, and ice.

SEC. 6. It shall be unlawful for any person to dump slops or decaying matter or other noxious garbage into any street or alley or into or near any stream that flows through the city of Huntington.

SEC. 7. It shall be unlawful for any person or persons to dump ashes, brush, tin cans, refuse material, débris, or waste matter of any kind or character in any street,

alley, vacant lot, public place or land, or into or near any stream that flows through the city of Huntington without permission first obtained from the street commissioner of the city of Huntington.

SEC. 8. It shall be unlawful for any person to obstruct any alley with carts, wagons, drays, or other vehicles, or to otherwise delay or hinder the collection and removal of garbage.

SEC. 9. The contractor shall remove all slops, garbage, and other offal of a decaying nature to a place outside the city of Huntington, Ind., which he shall provide at his own expense.

SEC. 10. Any person who accepts a contract and who shall violate any of its provisions, or who shall neglect or fail to perform any of the things required by the contract in the way and manner herein provided shall, upon conviction, be deprived of his contract, forfeit his bond and pay a fine of \$50 for the benefit of the city treasury of said city, and any other person violating any of the provisions of this ordinance shall, upon conviction, pay into the city treasury a fine not to exceed \$10 and cost of suit.

SEC. 11. It is hereby made the duty of the street commissioner to inquire into complaints of neglect of duty on the part of the citizens, contractor, or others, and the city attorney shall bring suit before the city judge for any violation of this ordinance whenever requested to do so by said commissioner.

SEC. 12. Any person failing to comply with any of the provisions of this ordinance or any person violating any of said provisions shall, upon conviction, be fined in any sum not exceeding \$10 and cost of suit.

SEC. 13. Ordinance No. 130, approved by the common council April 12, 1911, and all other ordinances conflicting with the provisions of this ordinance are hereby repealed.

ISHPEMING, MICH.

Spitting—Prohibited in Public Places. (Ord. June 10, 1915.)

SECTION 1. It shall be unlawful for any person to expectorate upon the sidewalks of the city of Ishpeming or upon the floors of public buildings or street cars, or floors of any building used for public gatherings and business houses in the said city of Ishpeming.

SEC. 2. Any person violating the provisions of this ordinance shall be punished by a fine of not less than \$5 and not more than \$25, or imprisonment in the county jail of the county of Marquette or the city jail of the said city of Ishpeming, not to exceed 30 days, or both such fine and imprisonment, in the discretion of the court.

[This ordinance was effective June 30, 1915.]

LOS ANGELES, CAL.

Tuberculosis—Visiting Nurses—Appointment, Duties, and Salary. (Ord. 32,439, June 1, 1915.)

SECTION 1. The health commissioner of the city of Los Angeles shall and is hereby empowered and directed to employ, in the name of and for the city of Los Angeles, municipal visiting tuberculosis nurses, in the proportion of 1 such nurse per 100 reported cases of tuberculosis in the city of Los Angeles.

SEC. 2. The municipal visiting tuberculosis nurses thus employed by the health commissioner of the city of Los Angeles shall be paid by the city of Los Angeles at the rate of compensation provided for municipal nurses in section 1 of ordinance No. 28,179 (new series).

SEC. 3. It shall be the duty of the municipal visiting tuberculosis nurses of the city of Los Angeles to visit professionally all reported cases of tuberculosis in the city of Los Angeles, excluding those under treatment in public or private hospitals or

sanatoria, unless requested in writing not to do so by the patient or physician in charge.

SEC. 4. The health commissioner of the city of Los Angeles is hereby empowered to establish such supply stations as he may deem necessary from time to time for the professional use of the tuberculosis nurses provided for in this ordinance.

SEC. 5. The purchasing agent of the city of Los Angeles is hereby directed to purchase on requisition from the health commissioner such supplies as the latter may from time to time deem necessary for the professional use of the tuberculosis nurses provided for in this ordinance.

SEC. 6. The health commissioner shall divide the city of Los Angeles into appropriate sections or districts, and shall assign one or more tuberculosis nurses to each and every section or district thus formed, according to the number of cases of tuberculosis therein, exclusive of those under treatment in public or private hospitals or sanatoria.

The tuberculosis nurses shall be held responsible for their respective sections, but may at the discretion of the health commissioner be given work outside of the sections to which they are assigned.

STONINGTON, CONN.

Deputy Health Officer—Appointment and Salary. (Chap. 315, Act Conn. Gen. Assembly, May 20, 1915.)

The county health officer for New London County may appoint a deputy health officer for the town of Stonington, who shall be a resident of the second voting district in said town, when the town health officer shall reside outside of said second voting district. Said deputy health officer shall have the same jurisdiction as the health officer for said town, only in said second voting district, and shall receive the same compensation for services as town health officers, to be paid in the manner provided for town health officers.

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