

PUBLIC HEALTH REPORTS

VOL. 33

JANUARY 18, 1918

No. 3

VENEREAL DISEASE LEGISLATION.

A COMPILATION OF LAWS AND REGULATIONS SHOWING THE TREND OF MODERN LEGISLATION FOR THE CONTROL OF VENEREAL DISEASES.

The following laws, ordinances, and regulations have been assembled for the purpose of presenting, in convenient form for reference, the important features of recent legislation relating to the control of venereal diseases.

No attempt has been made to secure all of the legislation on this subject, the object being to present representative laws showing measures which have been adopted by States and cities in the United States.

CALIFORNIA.

Notification—Control—Examination of Suspects—Powers and Duties of Local Health Officers—Isolation. (Reg. Bd. of H., Oct. 6, 1917.)

RULE 1. Notification.—Any person in attendance on a case of syphilis or gonococcus infection, or a case suspected of being one of syphilis or gonococcus infection, shall report the case immediately, by office number only, to the local health officer, who shall in turn report at least weekly on the prescribed form to the secretary of the State board of health all cases so reported to him.

NOTE 1.—In reporting by office number, an identifying number or initial shall be used which refers definitely to the physician's record of the case.

NOTE 2.—All cases of ophthalmia neonatorum, whether the infecting agent is the gonococcus or not, must be reported to the local health officer within 24 hours after the knowledge of the same, as required by chapter 724, statutes of 1915. Copies of this statute may be obtained by application to the State Board of Health, Sacramento, or the Bureau of Venereal Diseases, 525 Market Street, San Francisco. All physicians, midwives, and other persons lawfully engaged in the practice of obstetrics may obtain, without cost, the prophylactic for ophthalmia neonatorum (silver nitrate solution in wax ampoules), together with directions for its use, by applying to the Bureau of Communicable Diseases, Berkeley.

NOTE 3.—Any person in attendance on a case of syphilis or gonococcus infection who fails to report the case promptly to the local health officer is guilty of a misdemeanor, punishable by a fine of not less than \$25 nor more than \$500, or by imprisonment for a term of not more than 90 days, or by both such fine and imprisonment. (See public health act, sections 13 (rule 2), 16, and 21.)

NOTE 4.—Physicians attending cases of syphilis and gonococcus infection are expected to furnish to the health officer at the times of reporting the case any available useful data regarding the sources of infection, in order to assist in the control of these diseases.

RULE 2. Diagnosis.—The local health officer may require the submission of specimens from cases of syphilis or gonococcus infection, or cases suspected of being cases of syphilis or gonococcus infection, for the purpose of examination at a State or municipal laboratory. It shall be the duty of every physician attending a case of syphilis or gonococcus infection, or a case suspected of being one of syphilis or gonococcus infection, to secure specimens for examination when required to do so by the local health officer.

NOTE 1.—Examinations of blood for syphilis by the Wassermann test, and microscopic examinations of smears of pus for gonococcus are made without charge by the bureau of communicable diseases at Berkeley if the specimens are properly taken and mailed in the containers furnished by the bureau of communicable diseases. It is expected that the larger cities will provide adequate laboratory facilities. (See directions for sending material to the laboratory.)

RULE 3. *Instructions to the patient.*—It shall be the duty of the physician in attendance on a person having syphilis or gonococcus infection, or suspected of having syphilis or gonococcus infection, to instruct him in precautionary measures for preventing the spread of the disease, the seriousness of the disease, and the necessity for prolonged treatment, and the physician shall, in addition, furnish approved literature on these subjects.

NOTE 1.—Approved literature for distribution to patients may be secured from the bureau of venereal diseases of the State Board of Health, 525 Market Street, San Francisco.

NOTE 2.—The following instructions are required as a minimum by rule 2:

(a) To patients having syphilis:

1. Syphilis or pox is a contagious disease. It can usually be cured, but it requires two or more years of treatment.
2. You must not marry until a reputable physician has pronounced you cured.
3. Avoid all sexual relations.
4. Always sleep alone.
5. Do not kiss anyone.
6. Never permit anyone to use anything which has been in your mouth, such as toothpicks, toothbrushes, pipes, cigars, pencils, spoons, forks, cups, etc., or anything else that you have contaminated.
7. If you have to see a dentist, tell him about your disease before he examines your teeth.
8. Avoid patent medicines, so-called "medical institutes," and advertising "specialists."
9. Consult a reputable physician, or, in case of financial inability, the city or county physician, or a reputable dispensary such as is found in connection with most large public hospitals, and follow directions absolutely.

(b) To patients having gonorrhea:

1. Gonorrhea, "clap," or gleet, is a serious contagious disease. If properly treated it can usually be cured.
2. You must not marry until a reputable physician has pronounced you cured.
3. Avoid all sexual relations.
4. Always sleep alone, and be sure that no one uses your toilet articles, particularly your towels and wash cloths.
5. Always wash your hands thoroughly after handling the diseased parts. The discharge, if carried to your eyes, may cause blindness.
6. Avoid patent medicines, so-called "medical institutes," and advertising "specialists."
7. Consult a reputable physician, or, if financially unable to do so, the city or county physician, or a reputable dispensary such as is found in connection with most large public hospitals, and follow directions absolutely.

NOTE 3.—If any person has knowledge that a person infected with syphilis or gonococcus infection is failing to observe adequate precautions to prevent spreading infection, he shall report the facts at once to the local health officer.

RULE 4. *Health officers designated inspectors.*—All city, county, and other local health officers are, for the purpose of the control and suppression of venereal diseases, hereby designated and appointed inspectors, without salary, of the State Board of Health of California, under the provisions of section 2979 of the Political Code.

NOTE 1.—The following paragraph is quoted from section 2979 of the Political Code:

"It (the State board of health) shall have general power of inspection, examination, quarantine, and disinfection of persons, places, and things, within the State, and for the purpose of conducting the same may appoint inspectors, who, under the direction of the board, shall be vested with like powers: *Provided*, That this act shall in nowise conflict with the national quarantine laws."

RULE 5. *Investigation and control of cases.*—All city, county, and other local health officers are hereby directed to use every available means to ascertain the existence of, and immediately to investigate, all reported or suspected cases of syphilis in the infectious stages and gonococcus infection within their several territorial jurisdictions, and to ascertain the sources of such infections.

In such investigations said health officers are hereby vested with full powers of inspection, examination, isolation, and disinfection of all persons, places, and things, and as such inspectors said local health officers are hereby directed:

(a) To make examinations of persons reasonably suspected of having syphilis in the infectious stages or gonococcus infection. (Owing to the prevalence of such diseases among prostitutes, all such persons may be considered within the above class.)

(b) To isolate such persons whenever, in the opinion of said local health officer, the State board of health or its secretary, isolation is necessary to protect the public health. In establishing isolation the health officer shall define the limits of the area, in which the person reasonably suspected or known to have syphilis or gonococcus infections and his immediate attendant, are to be isolated, and no persons, other than the attending physicians, shall enter or leave the area of isolation without the permission of the health officer.

(c) In making examinations and inspections of women for the purpose of ascertaining the existence of syphilis or gonococcus infection, to appoint women physicians for said purposes where the services of a woman physician are requested or demanded by the person examined.

(d) In cases of quarantine or isolation, not to terminate said quarantine or isolation until the cases have become noninfectious or until permission has been given by the State board of health or its secretary.

Cases of gonococcus infection are to be regarded as infectious until at least two successive smears taken not less than 48 hours apart fail to show gonococci.

Cases of syphilis shall be regarded as infectious until all lesions of the skin or mucous membranes are completely healed.

(e) Inasmuch as prostitution is the most prolific source of syphilis and gonococcus infection, all health officers are directed to use every proper means of repressing the same, and not to issue certificates of freedom from venereal diseases, as such certificates may be used for purposes of solicitation.

(f) To keep all records pertaining to said inspections and examinations in files not open to public inspection, and to make every reasonable effort to keep secret the identity of those affected by venereal-disease control measures as far as may be consistent with the protection of the public health.

RULE 6. Report of unusual prevalence.—When the local health officer, through investigation, becomes aware of unusual prevalence of syphilis or gonococcus infection, or of unusual local conditions favoring the spread of these diseases, he shall report the facts at once to the bureau of venereal diseases, 525 Market Street, San Francisco.

Dispensaries, Conduct and Operation. (Reg. Bd. of H., Oct. 6, 1917.)

DISPENSARIES TREATING SYPHILIS.

1. *Special department.*—Syphilis shall be treated in a special department or the department of dermatology.

2. *Number of sessions.*—The dispensaries shall be open at least three times a week, day or evening.

3. *Staff.*—The staff shall be adequate in number and training.

4. *Equipment.*—Enough well-arranged rooms, laboratory facilities, and equipment, with instruments and apparatus, shall be provided.

5. *Beds.*—Every dispensary shall have at its disposal beds for isolation or treatment.

6. *Records.*—Adequate records of all cases shall be kept.

7. *Social service required.*—A social-service department shall be maintained and adequate measures adopted to secure a regular attendance of patients.

8. *Information to patients.*—Clinicians shall devote the amount of time necessary for intelligently informing new patients of the seriousness of their disease, the necessity for prolonged treatment, and the precautions necessary to prevent the spread of infection to others, and the clinics shall, in addition, furnish approved literature on these subjects. (This literature can be secured from the bureau of venereal diseases.)

9. *Microscopic examinations.*—Microscopic examinations of suspected initial lesions shall be made.

10. *Wassermann tests.*—Wassermann tests shall be performed in the dispensary laboratory or other approved laboratory.

11. *Administration of salvarsan or equivalents.*—Salvarsan or accepted equivalents shall be administered to all cases where there are no contraindications. (Salvarsan or approved substitutes may be obtained without cost from the bureau of venereal diseases, 525 Market Street, San Francisco, for the treatment of infectious cases of syphilis in approved dispensaries.)

12. *Procedure covering the discharge of patients.*—Suitable tests and observations shall be made of all patients for a period of not less than two years after the conclusion of adequate treatment. (See pamphlet "Modern Treatment of Syphilis," obtainable from the bureau of venereal diseases.)

13. *Transfer of patients.*—If it becomes necessary for any reason to discharge a patient still uncured, the patient shall be referred to an approved dispensary or a reputable physician.

14. *Annual report.*—An annual report of work done in the dispensary shall be made. It is suggested that this include the number of new and old patients and number of visits made, the number of patients continued under observation and treatment from one year into the next, the number of doses of salvarsan or equivalent administered (with a separate list of free doses), and the number of patients discharged as cured.

DISPENSARIES TREATING GONORRHEA.

1. *Number of sessions.*—Dispensaries shall be open at least three times a week, day or evening.

2. *Staff.*—The staff shall be adequate in number and training.

3. *Equipment.*—Enough well-arranged rooms, laboratory facilities and equipment, with instruments and apparatus, shall be provided.

4. *Beds.*—Every dispensary shall have at its disposal beds for isolation or treatment.

5. *Records.*—Adequate records of all cases shall be kept.

6. *Social service required.*—A social service department shall be maintained and adequate measures adopted to secure a regular attendance of patients.

7. *Information to patients.*—Clinicians shall devote the amount of time necessary for intelligently informing new patients of the seriousness of their disease, the necessity of treatment until cured, and the precautions necessary to prevent the spread of infection to others, and the clinic shall, in addition, furnish approved literature on these subjects. (This literature can be secured from the bureau of venereal diseases.)

8. *Microscopic examination.*—Systematic microscopic examination of discharges shall be made in departments treating patients affected with gonorrhœa.

9. *Facilities for asepsis and antisepsis.*—All departments treating patients affected with gonorrhœa shall be equipped with adequate facilities for asepsis and antisepsis.

10. *Urethroscopic and cystoscopic examination.*—Facilities for urethroscopic and cystoscopic examination shall be provided and regularly employed by the attending clinicians.

11. *Procedure governing discharge of patients.*—Patients shall be discharged as cured only after repeated negative clinical and microscopic examinations.

12. *Transfer of patients.*—If it becomes necessary for any reason to discharge a patient still uncured, the patient shall be referred to an approved clinic or reputable physician.

13. *Annual report.*—An annual report of work done in the dispensary shall be made. It is suggested that this include the number of new and old patients, the number of visits made, the number of patients continued under observation and treatment from one year into the next, and the number of patients discharged as cured.

HOSPITALS TREATING SYPHILIS AND GONORRHEA.

1. *No discrimination against venereal diseases.*—Patients having venereal diseases must be accepted under the same conditions as other patients.

2. *General standard of hospital.*—The hospital shall be properly equipped and well conducted.

3. *Staff and equipment.*—There shall be adequate staff and equipment for the diagnosis, treatment, and keeping of records in cases of syphilis or gonococcus infection in general accord with the standards indicated for approved dispensaries.

4. *Follow-up.*—Social service and follow-up work shall be carried on as indicated for approved dispensaries, either by the hospital or by an approved dispensary to which patients are transferred.

School Attendance of Infected Persons. (Act Mar. 23, 1907, as Amended.)

SEC. 17. *Infected persons not to attend school.*—No instructor, teacher, pupil, or child affected with any contagious, infectious, or communicable disease which is or might be the subject of quarantine, or has been declared reportable, or who resides in any house, building, structure, tent, or other place where such disease exists or has recently existed, shall be permitted, by any superintendent, principal, or teacher of any college, seminary, public, or private school, to attend such college, seminary, or school, except by the written permission of the local health officer.

CONNECTICUT.

Fornication or Lascivious Carriage or Behavior—Penalty. (Ch. 6, Act Mar. 1, 1917.)

Section 1315 of the general statutes is amended to read as follows:

Every person who shall be guilty of fornication or lascivious carriage or behavior shall be fined not more than \$100, or imprisoned not more than six months, or both.

Venereal Diseases in Institutions—Investigation by a Commission. (Ch. 150, Act Apr. 17, 1917.)

SECTION 1. The governor is authorized to appoint a commission, consisting of not more than five persons, at least three of whom shall be physicians, to investigate the laws, conditions, and customs of this State pertaining to the method of diagnosis, treatment, and management of persons afflicted with venereal diseases who are confined, committed, or detained in State and county institutions, or institutions receiving State aid, and to make such other investigations as the governor shall direct.

SEC. 2. Said commission shall report its findings and recommendations to the next session of the general assembly, and shall serve without pay except that its necessary expenses, not to exceed \$500, shall be paid out of the State treasury upon the order of the comptroller.

FLORIDA.

Distribution of Literature. (Reg. Bd. of H., June 10, 1913.)

Rule 67 of the regulations of the State board of health, adopted February 27 and 28, 1912 (Public Health Reports, Dec. 6, 1912, p. 2041), was amended so as to include "venereal diseases" in the list of diseases the nature and danger of which are to be explained in literature to be distributed by local health officers and representatives of the State board of health.

ILLINOIS.

Notification—Placarding—Quarantine—Investigation—Control. (Reg. Bd. of H., Nov. 1, 1917.)

1. *Reports.*—Every physician, nurse, attendant, hospital superintendent, druggist or other person having knowledge of a known or suspected case of venereal disease (syphilis in the infectious stages, gonococcus infection, or chancroid) must immediately report the same to the local health authorities, the report to be in accordance with the following form and setting forth at least the information therein provided for:

(Form of report.)

REPORT OF VENEREAL DISEASE.

(To be treated as confidential so far as is consistent with public safety and the Rules for the Control of Venereal Diseases.)

- (1) 191..
(City.) (Date.)
- The undersigned hereby reports a
- (2) Case of; (3) Laboratory findings;
(Name of disease.) (Pos. Neg. None.)
- (4) Name of patient.....
(Case or key number may be given instead of correct name under certain circumstances. See rule 1, Rules for Control of Venereal Diseases in Illinois.)
- (5) Sex; (6) Color.....; (7) Age.....years;
- (8) Single. married. widowed. divorced.....;
- (9) Address of patient.....
Street and house number may be omitted under certain circumstances, but name of city, town, or village must be given in accordance with rule 1.)
- (10) Is living at home. in boarding house. hotel, hospital, or elsewhere?.....
(Specify which.)
- (11) Occupation
- (12) Employer.....; (13) Address.....
(Name and address of employer may be omitted under certain circumstances, in accordance with rule 1.)
- (14) Does patient handle milk, milk products, or foodstuffs?.....;
- (15) Has patient discontinued employment?.....;
- (16) Probable source of infection.....
(Where a prostitute is the probable source of infection, give name and address in full.)
- (17) Probable date of infection.....;
- (18) Other known cases contracted from same source.....
(State number of cases.)
- (19) Is patient regularly under treatment with you?.....
Signed.....M. D.
(Attendant.)
Address.....
(Of attendant.)

The requirements as to information asked for in the foregoing form may be modified only under the following circumstances and then only as hereinafter set forth:

Whenever, in the opinion of the local health authorities public welfare does not require that certain information hereinafter specified in this paragraph be given in the report and the health of others is not likely to be endangered by the suppression of such information, and when (a) the patient is not a prostitute but is of good repute in the community, (b) the patient is regularly under the care of a reputable physician, (c) the physician gives the patient full and proper instructions in the rules for the control of venereal diseases and in the precautions which must be taken to prevent the spread of the infection, placing in the hands of the patient copies of the Rules for the Control of Venereal Diseases in Illinois and of the booklet of advice and information on venereal diseases published by the State department of public health, (d) the patient gives undoubted assurance of the faithful observance of all such rules and necessary precautions, and (e) the physician assumes responsibility for the faithful observance of the rules and all necessary precautions by his patient, then the correct name, explicit address of the patient, and the name and address of employer may be omitted from the report: *Provided, however*, That in the event of the infected or supposedly infected person being attached to the military or naval service of the State or Federal Government, then the correct name of the patient may be omitted from the report to the local health authority only on condition that the attendant or person having knowledge of the case shall have previously advised the medical officer of the military or naval establishment to which the patient belongs, of the correct name of the patient and the nature or supposed nature of his disease.

Whenever the patient's correct name and explicit address are omitted from the report in accordance with the conditions stated in the foregoing paragraph, the physician's case number or a "key number" by which the person reporting the case can definitely identify the same, shall be given in the report in lieu of the correct name, and the health jurisdiction (city, village, or township, as the case may be) may be indicated by name of such community, without reference to street or house number.

Whenever the name and address of the employer is omitted from the report, and the patient is employed in a food handling establishment or in any capacity wherein there is danger of imparting the infection to others, the patient shall discontinue such employment during the period the disease is infectious; and the physician assuming responsibility for the case shall see that this requirement is observed. All other items asked for in the report shall be fully and correctly supplied.

All local health authorities upon being advised of a case of venereal disease, must immediately report the same to the State department of public health on the form prescribed for that purpose. Whenever a reported case involve a person attached to the military or naval services of the State or Federal Government, the local health authority receiving such report shall immediately advise the medical officer, of the military or naval organization to which the patient belongs, giving the name of patient, nature of disease and other data as said medical officer may desire.

Local health authorities upon being advised of a case of venereal disease in any person who is unable to pay for the necessary medicines and medical attention, shall report the case to the overseer of the poor in order that medicines and medical attention may be supplied at the expense of the county.

Reports of venereal diseases made in accordance with these rules shall be treated by local health authorities and by the State department of public health as confidential information, so far, at least, as this is consistent with public safety and the requirements of these rules.

2. *Placarding.*—Whenever a case or suspected case of venereal disease is found on premises used for immoral purposes, or upon premises where the case can not be properly isolated or controlled, and when the infected person will not consent to removal to a hospital or sanatorium where he or she can be properly isolated and controlled during the period of infectiousness, the premises on which he or she continues to reside shall be placarded in the following manner: A red card not less than 11 by 14 inches, bearing the inscription, "Venereal Disease Here, Keep Out," printed in black with bold face type not less than 3½ inches in height, shall be affixed in a conspicuous place at each outside entrance of the building, house or flat, as the case may be.

Defacement or concealment of such placards or their removal by any other than the local health authorities or the duly authorized representatives of the State department of public health is strictly prohibited.

3. *Isolation and control of patient.*—All cases of venereal diseases shall be subject to such control as will assure public safety. All persons having venereal disease are strictly prohibited from exposing others to the infection. Visitors are prohibited from entering premises placarded for venereal diseases and each infected or supposedly infected person residing on premises so placarded is prohibited from leaving such premises excepting with permission of the local health authority or the State department of health.

Responsibility for the proper control of a case in which the correct name and the explicit address is not reported to the local health authorities, under the provisions of rule 1, shall rest upon the attending physician, who shall exercise extraordinary diligence to see that the infected person shall not expose others to the infection. When the attendant has reason to believe that the infected person is not taking the precautions necessary to prevent the spread of the disease, the attendant shall immediately place the correct name and address of the infected person in the hands of the local health authorities in order that proper control may be enforced by the local health authorities.

The control of fully reported cases shall rest with the local health authorities in cooperation with the attending physician.

The period of control in all cases shall continue throughout the period of infectiousness of the disease. (Cases of gonococcus infection are to be regarded as infectious until at least two successive smears taken not less than 48 hours apart fail to show gonococci. Cases of syphilis shall be regarded as infectious until all lesions of the skin or mucous membranes are fully healed. Cases of chancroid shall be regarded as infectious until all lesions are fully healed.)

Whenever possible cases of venereal diseases should be removed to a hospital for treatment.

Any person having a venereal disease shall not be removed from, and is prohibited from moving out of, one health jurisdiction into another without first securing permission to do so from the local health authorities of the place from which removal is to be made, or from a duly authorized agent of the State department of public health, and such permission may be granted only under the following conditions: (1) The object of the proposed removal shall be deemed by the issuing health officer as urgent and legitimate, and not for the purpose of relieving one community of an undesirable burden at the expense of another; (2) removal can and will be made without endangering the health of others, either in transit or at destination; (3) patient agrees to place self under care of reputable physician (to be named in removal permit) on arrival at destination and attending physician assumes responsibility for fulfillment of this agreement; (4) removal shall not begin until 24 hours after notice of removal has been forwarded by first-class mail to the health officer at proposed destination of the venereally infected person, which notice shall be of the following form, made out and signed by the health authority granting permission for removal.

CASE OF VENEREAL DISEASE—REMOVAL PERMIT.

(To be forwarded by the issuing health officer by first-class mail at least 24 hours prior to hour set for beginning travel by patient.)

....., 191..
(City.) (Date.)

To the local health officer

At.....
(Destination of patient.)

Under authority of and in compliance with the Rules for the Control of Venereal Diseases in Illinois, permission has been granted for the removal of the following described case of venereal disease:

From..... To.....

Beginning travel..... Hour.....
(Date.) { A. M.
P. M.

Name of patient.....
("Key number" may be given in place of name, when patient agrees to place self under care of reputable physician on arrival at destination, provided that attending physician will assume responsibility for fulfillment of such an agreement. See rule 1 and rule 3 of titles for the Control of Venereal Diseases in Illinois.)

Sex.....; Color.....; Age..... yrs.

Occupation.....

Character of disease.....

Will be under care of.....
(Full name of physician at destination)

Address of physician.....
(At destination.)

Address of patient.....
(At destination.)

(Address of patient may be omitted only when "key number" is given in place of name, in accordance with rules 1 and 3 of the Rules for the Control of Venereal Diseases in Illinois.)

Purpose of visit:.....
(Signed)....., Health Officer.

Address.....

Health officer at destination of the patient so removed shall require the recipient physician to file a report of the case and the form prescribed in rule 1 of these rules.

4. *Prohibited occupations.*—The preparation, manufacture, or handling of milk, milk products, or other foodstuffs by any person afflicted with an infectious venereal disease is strictly prohibited, and persons so afflicted shall not be employed in any milk-products or food-manufacturing or food-handling establishments.

Persons afflicted with infectious venereal diseases shall not be engaged in the care or nursing of children or of the sick, nor shall they engage in any occupation the nature of which is such that their infection may be borne to others.

5. *Investigations.*—It shall be the duty of all local health authorities to use all reasonable means to ascertain the existence of infectious venereal diseases within their respective jurisdictions, to investigate all cases that are not under the care of reputable physicians, and those of which no reports have been filed with them, and to ascertain so far as possible the sources of infection and all exposures to the same. They shall use all lawful means to make or cause to be made examinations of all such persons who may be reasonably suspected of having syphilis in the infectious stages, chancroid, or gonococcus infection. (The prevalence of such diseases among prostitutes warrants the inclusion of these within the suspected class.) In making an examination of a woman for the purpose of determining the existence of venereal disease, a woman physician should be appointed for such purpose when so requested by the person examined.

6. *Definitions.*—The term "venereal diseases" as used in these rules shall be construed to mean (a) syphilis in the infectious stages, (b) chancroid, and (c) active gonococcus infection.

The term "prostitute" used in these rules shall be construed to mean a person known to be practicing sexual intercourse promiscuously.

Notification—Furnishing of Circular of Information and Copy of Ordinance—Control. (Ord. of Chicago, June 29, 1917.)

Venereal diseases dangerous to public health.—Syphilis, gonorrhea, and chancroid, hereinafter designated venereal diseases, are hereby recognized and declared to be contagious, infectious, communicable, and dangerous to the public health.

Venereal diseases to be reported.—It shall be the duty of every licensed physician, of every superintendent or manager of a hospital or dispensary, and of every person who gives treatment for a venereal disease to mail to the department of health of the city of Chicago a card supplied by this department stating the age, sex, color, marital condition and occupation of such diseased person, the nature and previous duration of such disease and the probable origin: such card to be mailed within three days after the first examination of such diseased person: *Provided*, That, except as hereinafter required, the name and address of such diseased person shall not be reported to the department of health.

Persons afflicted with venereal diseases to be given a circular of information.—It shall be the duty of every licensed physician and of every other person who treats a person afflicted with venereal disease to give to such person at the first examination a circular of information and advice concerning venereal diseases, furnished by the department of health, and in addition to give to such diseased person a copy of this ordinance and to report to the health department that such diseased person has received the two documents herein specified.

Change of physician to be reported to physician first consulted.—When a person applies to a physician or other person for treatment of a venereal disease, it shall be the duty of the physician or person consulted to inquire of and ascertain from the person seeking treatment whether such person has theretofore consulted with or been treated by any other physicians or persons, and if so to ascertain the name and address of the physician or person last theretofore consulted. It shall be the duty of the applicant

for treatment to furnish this information and a refusal to do so, or falsely stating the name and address of such physician or person consulted shall be deemed a violation of this ordinance. It shall be the duty of the physician or person consulted where the applicant has heretofore received treatment to immediately notify by mail the physician or person last theretofore treating such applicant of the change of adviser; such notification to be made upon a form furnished for that purpose by the department of health. Should the physician or person previously consulted fail to receive such notice within 10 days after the last appearance of such venereally diseased person, it shall be the duty of such physician to report to the health department the name and address of such venereally diseased person.

Protection of others from infection by venereally diseased persons.—Upon receipt of a report of a case of venereal disease it shall be the duty of the commissioner of health to institute such measures for the protection of other persons from infection by such venereally diseased person as said commissioner of health is already empowered to use to prevent the spread of other contagious, infectious, or communicable diseases.

Reports to be confidential.—All information and reports concerning persons infected with venereal diseases shall be confidential and shall be inaccessible to the public, except in so far as publicity may attend the performance of the duty imposed upon the commissioner of health in the preceding sections.

Parents responsible for the compliance of minors with the requirements of regulations.—The parents of minors acquiring venereal diseases and living with said parents shall be legally responsible for the compliance of such minors with the requirements of the ordinance relating to venereal diseases.

IOWA.

Notification—Transmission by Intercourse. (Act Mar. 29, 1913.)

SECTION 1. Contagious diseases defined.—That syphilis and gonorrhoea are hereby declared contagious and infectious and shall be reported as contagious diseases to the local board of health.

SEC. 2. Physicians' duty to report—Record—Name not disclosed.—From and after the 1st day of January, A. D. 1914, it shall be the duty of every physician and surgeon practicing within the State of Iowa to report to the local board of health, within 24 hours, every case of syphilis or gonorrhoea coming to his knowledge, and shall make and preserve a record of every such case so reported, numbering each case consecutively. He shall require the person to state whether or not he has been previously reported to a local board of health in this State, and if so, when, where, by whom, and under what number. The report shall state the sex of the person and the age as nearly as practicable, together with the character of the disease and the probable source of infection, and whether previously reported or not, and if so, when, where, by whom, and under what number, but shall not disclose the name of the infected person.

SEC. 3. Failure to report—Penalty.—Any physician or surgeon who shall be called upon to treat professionally anyone afflicted with syphilis or gonorrhoea who shall fail to report the same to the local board of health within 24 hours shall be guilty of a misdemeanor, and upon conviction thereof shall be punished by a fine not exceeding \$100 or imprisonment in the county jail not more than 30 days. And in addition thereto the State board of health may revoke his license or certificate to practice medicine, surgery, and obstetrics in the State of Iowa.

SEC. 4. Transmission—Penalty.—Any person afflicted with either of these diseases who shall knowingly transmit or assume the risk of transmitting the same by intercourse to another person shall be guilty of a misdemeanor, and upon conviction thereof be fined in the sum of not to exceed \$500 or imprisoned in the county jail not to exceed one year, or both such fine and imprisonment. And in addition thereto shall be liable to the party injured in damages to be recovered in any court of competent jurisdiction.

KANSAS.

Notification—Furnishing of Circular of Instructions. (Reg. Bd. of H., June 13, 1917.)

PART 1. RULE 2. (a) In addition to the diseases named in rule 1, the following are hereby declared to be infectious, contagious, or communicable in their nature and are declared to be notifiable diseases:

GROUP II. Gonorrhoea, syphilis. (b) Hereafter, each and every physician or other practitioner of the healing art practicing in the State of Kansas, or any other person who treats or examines any person suffering from or afflicted with gonorrhoea or syphilis in any of their stages or manifestations shall report by number, as hereinafter required, in writing to the State board of health the existence of such diseases.

(c) All such reports shall be made in writing within 48 hours after diagnosis on blank forms supplied by the State board of health, and shall give the number of the case, which number shall correspond with the serial number of the State board of health circular of instructions given to the patient; the type and stage of such disease; the color; the sex; the marital state; and the occupation of the person affected with the disease; and a statement as to whether or not the nature of the occupation or place of employment of the person afflicted with such disease makes him or her a menace to the health of any other person or persons: *Provided, however,* That nothing in this paragraph shall be construed to require the reporting of the name or address of persons afflicted with a venereal disease, as aforesaid.

(d) It shall be the duty of each and every physician or other practitioner of the healing art practicing in the State of Kansas, or any other person who visits, attends, advises professionally, prescribes for or renders medical or surgical assistance to, or is consulted for medical advice by any person having gonorrhoea or syphilis as aforesaid, to at once give to such person a serially numbered circular of instructions furnished by the State board of health, entitled "Instructions for Preventing the Transmission of Gonorrhoea or Syphilis," and to report such fact in writing to the State board of health in the report required to be made of such cases.

Serving Affected Persons in Public Bathrooms and Barber Shops. (Reg. Bd. of H., June 13, 1917.)

PART 2. RULE 34. Gonorrhoea or syphilis; public bath.—No person who is suffering from gonorrhoea or syphilis shall be served in a public bathroom in this State; and no person suffering from syphilis shall be served in any barber shop, such prohibition to continue until 12 months has elapsed from date of infection.

Quarantine—Examination of Suspects—Suppression of Prostitution. (Reg. Bd. of H., Nov. 2, 1917.)

RULE 1. The deputy State health officers designated for the extra-cantonment zones¹ are hereby authorized to use every available means to ascertain the existence of and immediately to investigate all suspected cases of syphilis in the infectious stages and gonococcus infections within their cantonment zone and to ascertain the source of such infection.

RULE 2. In such investigation said deputy health officers, or their duly authorized representatives, are hereby vested with full powers of inspection, examination, isolation, and disinfection of all persons, places, and things, and as such inspectors said deputy State health officers, or their duly authorized representatives, are hereby authorized:

¹ The zone surrounding Camp Funston (and Fort Riley) includes the counties of Riley and Geary, Kans. The zone around Fort Leavenworth consists of the county of Leavenworth, Kans.

(a) To make examination of all persons reasonably suspected of having syphilis in the infectious stages or gonococcus infection. Owing to the prevalence of such diseases among prostitutes all such persons may be considered within the above class.

(b) To isolate such persons whenever, in the opinion of said deputy State health officer, the State board of health, or its secretary, isolation is necessary to protect the public health.

In establishing isolation the health officer shall define the place and the limits of the area in which the person reasonably suspected or known to have syphilis or gonococcus infection and his (or her) attendant are to be isolated, and no persons, other than the attending physician, shall enter or leave the area of isolation without the permission of the health officer.

(c) In cases of quarantine or isolation not to terminate said quarantine or isolation until the cases have become noninfectious or until permission has been given by the deputy State health officer.

Cases of gonococcus infection are to be regarded as infectious until at least two successive smears taken not less than 48 hours apart fail to show gonococci.

Cases of syphilis are to be regarded as infectious until all lesions of skin or mucous membranes are completely healed.

(d) Inasmuch as prostitution is the most prolific source of syphilis and gonococcus infection said deputy State health officers, or their duly authorized representatives, are authorized to use every proper means to aid in suppressing the same and not to issue certificates of freedom from venereal diseases, as such certificates may be used for purposes of solicitation.

(e) Keep all records pertaining to said inspections and examinations in files not open to public inspection, and to make every reasonable effort to keep secret the identity of those affected by venereal disease control measures inasmuch as may be consistent with the protection of the public health.

KENTUCKY.

Prostitution—Disorderly Houses. (Ord. of Louisville, Oct. 6, 1917.)

1. Any person or persons who shall own, keep, or maintain, or who shall be an inmate of, or in any way connected with, a disorderly house, or house of ill fame; and any owner, proprietor, keeper, or manager of any hotel, ordinary, or house of private entertainment, boarding house, lodging house, or other like place, who shall knowingly allow prostitution or illicit sexual intercourse to be carried on therein, and any person who shall engage in prostitution in any such place, or in any other place, in the city of Louisville, Ky., shall be fined not less than \$10 nor more than \$50 for each offense. Every day that any person or persons shall maintain or be an inmate of, or in any way connected with, such disorderly house or houses of ill fame, shall be and constitute a separate offense.

Prostitution—Use of Vehicles. (Ord. of Louisville, Oct. 6, 1917.)

1. That any owner or chauffeur of any taxicab, jitney bus, or other vehicle who shall knowingly use the same or allow it to be used as a means of aiding or promoting prostitution or illicit sexual intercourse, or aid in any way in bringing persons together for the purpose of prostitution, or illicit sexual intercourse, shall be fined not less than \$10 nor more than \$50 for each offense.

LOUISIANA.

Swimming Pools—Use by Infected Persons. (Amendment to Sanitary Code, Bd. of H., Feb. 26, 1913.)

ART. 590 (f). No intoxicated person or one afflicted with scabies, favus, syphilis, gonorrhea, tuberculosis, eye trouble, or any other infectious or contagious disease, shall use or be permitted to use any swimming pool or tank.

MAINE.

Veneral Diseases in Institutions—Notification—Laboratory Tests—Treatment—Isolation—Distribution of Information. (Ch. 301, Act Apr. 7, 1917.)

SECTION 1. *R. S., c. 19, relating to public health and prevention of contagious diseases, amended.*—Chapter 19 of the revised statutes is hereby amended by adding at the end of said chapter the following sections, namely:

SEC. 125. *Veneral diseases; cases found in charitable or correctional institutions to be reported.*—It shall be the duty of every superintendent, manager, or physician in charge of any State, county, or municipal charitable or correctional institution immediately to report to the State board of health every case of venereal disease among the inmates of said institution of which he has knowledge. It shall be the duty of every superintendent, manager, or physician in charge of any State-aided, county-aided, or municipally-aided charitable institution to make a similar report to the State board of health in relation to inmates of such institution, the cost of whose care and treatment is being paid in whole or in part by the State, or by any county or municipality in the State. Said report shall be made in the form which may be required by the rules and regulations of the said State board: *Provided*, That such rules and regulations shall not require said reports to be made in a form which will disclose to the State board of health or to any other person, except the said superintendent, manager, or physician, the identity of the inmate. Said superintendents, managers, and physicians shall comply with such rules and regulations as are made by the said State board to prevent the spread of venereal disease.

SEC. 126. *Reports to be treated as confidential.*—The reports to the State board of health prescribed by the preceding section shall be confidential and shall not be accessible to the public nor shall such records and reports be deemed public records.

SEC. 127. *Examination and treatment of gonorrhoea and syphilis.*—The State board of health shall provide, at the State laboratory of hygiene or elsewhere, facilities for the free bacteriological examination of discharges for the diagnosis of gonorrhoeal infections, and shall also provide at cost vaccine or antitoxin for the treatment of such infections. And said board shall make at the expense of the State the Wassermann test for the diagnosis of syphilis; and shall furnish the treatment known as Salvarsan or other accredited specific treatment at cost.

SEC. 128. *State board of health to include information, concerning venereal diseases, in bulletins.*—The State board of health shall include in bulletins and circulars distributed by it information concerning the diseases covered by the preceding sections: *Provided*, That nothing shall be contained in such bulletins or circulars which will disclose the identity of the persons suffering from such venereal disease nor the identity of any State-aided, county-aided, or municipally-aided charitable institution in which such persons are treated or cared for.

SEC. 129. *Persons discovered afflicted, in institutions, to be treated; may be isolated; may be continued in custody; expenses after expiration of sentence.*—Any inmate of any State, county, or municipal charitable or correctional institution, or any dependent child supported or partially supported by public funds, afflicted or suspected of being afflicted with venereal disease, shall forthwith be placed under medical treatment, and if, in the opinion of the attending physician, it is necessary, shall be isolated until danger of contagion is passed. Such case shall be immediately reported to the State board of health in accordance with the latter's rules and regulations: *Provided*, That such rules and regulations shall not require information disclosing the identity of any dependent or delinquent child, and the rules and regulations of the State board of health for the examination, testing, and treatment of cases of venereal disease shall be faithfully observed. If the sentence or term of commitment of an inmate to any such State, county, or municipal charitable or correctional institution

expires before such disease is cured, or if, in the opinion of the attending physician of the institution, or of such physician as the authorities thereof may consult, his discharge would be dangerous to the public health, he shall be continued under such medical treatment, care, and custody until in the opinion of such physician his discharge will not endanger the public health. The expenses of his support and treatment shall be paid by the place in which he has a pauper settlement, or by the State if he has no pauper settlement, after notice of the expiration of his sentence and of his condition to the overseers of the poor of the city or town or plantation where he was residing at the time of his commitment to the institution.

SEC. 130. *Penalty for neglect of duty.*—Any official or person who shall wilfully fail, neglect, or refuse to perform any of the duties imposed upon him by the provisions of this act shall be fined not more than \$500 or be imprisoned for not more than six months.

SEC. 131. *Appropriation.*—For the purpose of enabling the State board of health to carry out the provisions of this act there is hereby appropriated for the year 1917 the sum of \$4,000, and for the year 1918 the sum of \$4,000.

MINNESOTA.

Making of Regulations by State Board of Health. (Ch. 345, Act Apr. 17, 1917.)

SECTION 1. Section 4640, General Statutes, 1913, is hereby amended so as to read as follows:

4640. The board [State board of health] may adopt, alter, and enforce reasonable regulations of permanent application throughout the whole or any portion of the State, or for specified periods in parts thereof, for the preservation of the public health. Upon the approval of the attorney general, and the due publication thereof, such regulations shall have the force of law, except in so far as they may conflict with a statute or with the charter or ordinances of a city of the first class upon the same subject. In and by the same the board may control, by requiring the taking out of licenses or permits, or by other appropriate means, any of the following matters:

* * * * *

7. The treatment, in hospitals and elsewhere, of persons suffering from communicable diseases, including all manner of venereal diseases and infection, the disinfection and quarantine of persons and places in case of such disease, and the reporting of sicknesses and deaths therefrom:

* * * * *

NEW JERSEY.

Notification—Seller of Drugs to Report Cases—Duties of State Department of Health—Laboratory Tests. (Ch. 232, Act Mar. 29, 1917.)

1. Every physician, superintendent, or other person having control or supervision over any State, county, or municipal hospital, sanatorium, or other public or private institution in which any person suffering from or infected with a venereal disease, such as chancroid, gonorrhoea, syphilis, or any of the varieties or stages of such diseases is received for care or treatment or in which any person who is received into any such State, county, or municipal hospital, sanatorium or other public or private institution suffering from any other disease, but is found to be also infected with any venereal disease such as chancroid, gonorrhoea, syphilis or any of the varieties or stages of such diseases, shall immediately after such case of sickness or disease has been received into said institution report such case of sickness or disease to the department of health of this State. Such report shall state the name, address, color, sex, and nationality of the person, and the age, as nearly as practicable, together with the character of the

disease and the probable source of infection and whether previously reported or not, and if so, when, where, and by whom; and every physician, superintendent, or other person having control or charge over any State, county, or municipal hospital, sanatorium, or other public or private institution in which any case of venereal disease set out in this section is received for cure or treatment, who shall fail to perform the above-mentioned duty at the time and in the manner named, shall be liable to a penalty of \$50 for each such failure.

2. Every physician, nurse, or other person treating or attempting to treat by prescription, formula, patented or proprietary medicine or compound, or otherwise, and every physician, nurse, or other person selling or giving away any prescription, formula, patented or proprietary medicine or compound, which either by itself or in connection or conjunction with any other treatment, medicine, or compound is claimed to be useful, or to cure, relieve or to arrest in any way or manner any venereal disease such as chancroid, gonorrhoea, syphilis, or any of the varieties or stages thereof, shall report immediately to the department of health of this State the name, sex, address, color, and nationality of the said person so infected with such disease, and the age as nearly as practicable, together with the character of the disease and the probable source of infection and whether previously reported or not, and if so, when, where and by whom; and every physician, nurse, or other person treating or attempting to treat in any manner any of the venereal diseases or varieties or stages thereof, and every physician, nurse, or other person selling or giving away any prescription, formula, patented or proprietary medicine or compound for the uses and purposes mentioned in this section who shall fail to perform the above-mentioned duty at the time and in the manner named, shall be liable to a penalty of \$50 for each such failure.

3. The department of health of this State shall make and enforce such rules and regulations for the quarantining and treatment of venereal diseases such as chancroid, gonorrhoea, syphilis, or any of the varieties or stages of such diseases reported to it as may be deemed necessary for the protection of the public. Said department of health shall not disclose the names or addresses of such persons reported or treated to any person other than a prosecuting officer or in court in prosecutions under this or any other State law.

4. The department of health of this State shall provide facilities for the free bacteriological examination of discharges for the diagnosis of gonorrhoeal infections, and also shall provide, at cost, vaccines or antitoxins for the treatment of such infections. And the said department shall make, at the expense of the State, the Wasserman or other approved tests or examine smears for the diagnosis of syphilis: and shall furnish the treatment known as "Salvarsan" or other accredited specific treatment at cost. But such diagnosis and treatment shall not be furnished until the data required for the registration of the case has been furnished by the physician, nurse, or institution treating the patient.

5. For the expenses of carrying into effect the purposes of this act, the sum of \$2,000 is hereby appropriated annually, when included in any annual or supplemental appropriation bill.

Marriage or Sexual Intercourse by Infected Persons. (Ch. 23, Act Mar. 14, 1917.)

1. Any person who, knowing himself or herself to be infected with a venereal disease, such as chancroid, gonorrhoea, syphilis, or any of the varieties or stages of such diseases, marries, shall be guilty of a misdemeanor.

2. Any person who, while infected with a venereal disease, such as chancroid, gonorrhoea, syphilis, or any of the varieties or stages of such diseases, has sexual intercourse, shall be guilty of a misdemeanor.

NEW YORK.

Commitment of Dangerous or Careless Patients. (Ch. 559, Act May 17, 1913.)

SEC. 15. Such chapter [chap. 45, Consolidated Laws] is hereby amended by inserting therein a new section, to be section 326a, to read as follows:

SEC. 326a. *Control of dangerous and careless patients.*—Whenever a complaint shall be made by a physician to a health officer that any person is afflicted with any infectious, contagious, or communicable disease or is a carrier of typhoid fever, tuberculosis, diphtheria, or other infectious disease and is unable or unwilling to conduct himself and to live in such a manner as not to expose members of his family or household or other persons with whom he may be associated to danger of infection, the health officer shall forthwith investigate the circumstances alleged. If he shall find that any such person is a menace to others, he shall lodge a complaint against such person with a magistrate, and on such complaint the said person shall be brought before such magistrate. The magistrate after due notice and a hearing, if satisfied that the complaint of the health officer is well founded and that the person is a source of danger to others, may commit him to a county hospital for tuberculosis or to any other hospital or institution established for the care of persons suffering from any such disease or maintaining a room, ward, or wards for such person. Such person shall be deemed to be committed until discharged in the manner authorized in this section. In making such commitment the magistrate shall make such order for payment for the care and maintenance of such person as he may deem proper.

The chief medical officer of the hospital or other institution to which any such person has been committed, upon signing and placing among the permanent records of such hospital or institution a statement to the effect that such person has obeyed the rules and regulations of such hospital or institution for a period of not less than 60 days, and that in his judgment such person may be discharged without danger to the health or life of others, or for any other reason stated in full which he may deem adequate and sufficient, may discharge the person so committed. He shall report each such discharge, together with a full statement of the reasons therefor, at once to the health officer of the city, village, or town from which the patient came and at the next meeting of the board of managers or other controlling authority of such hospital or institution. Every person committed under the provisions of this section shall observe all the rules and regulations of such hospital or institution. Any patient so committed who neglects or refuses to obey the rules or regulations of the institution may by direction of the chief medical officer of the institution be placed apart from the other patients and restrained from leaving the institution. Any such patient 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 not to exceed six months to any institution to which persons convicted of disorderly conduct or vagrancy or of being tramps may be committed, and such institution shall keep such person 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 on which commitment was made.

Advertisements Relating to Venereal Diseases and Other Sexual Ailments. (Ch. 487, Act May 15, 1917.)

SECTION 1. The penal law is hereby amended by adding thereto, after section 1142, a new section to be section 1142-a, to read as follows:

SEC. 1142-a. *Advertisements relating to certain diseases prohibited.*—Whoever publishes, delivers or distributes or causes to be published, delivered or distributed in

any manner whatsoever an advertisement concerning a venereal disease, lost manhood, lost vitality, impotency, sexual weakness, seminal emissions, varicocele, self-abuse, or excessive sexual indulgence and calling attention to a medicine, article, or preparation that may be used therefor or to a person or persons from whom or an office or place at which information, treatment, or advice relating to such disease, infirmity, habit, or condition may be obtained, is guilty of a misdemeanor, and upon conviction thereof shall be punished by imprisonment for not more than six months, or by a fine of not less than \$50 nor more than \$500, or by both such fine and imprisonment. This section, however, shall not apply to didactic or scientific treatises which do not advertise or call attention to any person or persons from whom or any office or place at which information, treatment, or advice may be obtained, nor shall it apply to advertisements or notices issued by an incorporated hospital, or a licensed dispensary, or by a municipal board or department of health, or by the department of health of the State of New York.

Marriage—Statements Regarding Freedom from Venereal Diseases. (Ch. 503, Act May 16, 1917.)

A New York law makes it the duty of the town or city clerk before issuing a marriage license to secure a statement from each of the parties to the marriage in the following words:

"I have not to my knowledge been infected with any venereal disease, or if I have been so infected within five years I have had a laboratory test within that period which shows that I am now free from infection from any such disease."

Furnishing of Circulars of Information to Affected Persons. (Reg. Public Health Council, Mar. 20, 1917.)

Chapter 2 of the Sanitary Code is hereby further amended by adding thereto a new regulation to be known as regulation 29-a and to read as follows:

REG. 29-a. Chancroid, gonorrhoea, and syphilis.—Chancroid, gonorrhoea, and syphilis are hereby declared to be infectious and communicable diseases highly dangerous to the public health.

It shall be the duty of every physician when first attending a person affected with chancroid, gonorrhoea, or syphilis to furnish said person with a circular of information issued or approved by the State commissioner of health and to instruct such person as to the precautions to be taken in order to prevent the communication of the disease to others.

Notification—Distribution of Literature to Affected Persons. (Reg. Dept. of H. of New York City, June 28, 1917.)

Resolved, That section 88 of the Sanitary Code be, and is hereby, amended to read as follows:

Sec. 88. Duty of superintendents of hospitals and dispensaries and of physicians to report cases of venereal disease.—It shall be the duty of the manager, superintendent, or person in charge of any correctional institution and of every public or private hospital, dispensary, clinic, asylum, or charitable institution in the city of New York to report promptly to the department of health the name or initials, together with the sex, age, marital state, and address of every occupant or inmate thereof or person treated therein affected with syphilis or gonorrhoea; and it shall also be the duty of every physician in the said city to promptly make a similar report to the department of health relative to any person found by such physician to be affected with syphilis or gonorrhoea. All reports made in accordance with the provisions of this section, and all records of clinical or laboratory examinations indicating the presence

of syphilis or gonorrhoea, shall be regarded as confidential and shall not be open to inspection by the public or by any person other than the official custodian of such reports or records in the department of health, the commissioner of health, and such other persons as may be authorized by law to inspect such reports or records, nor shall the custodian of any such report or record, the said commissioner of health, or any such other persons divulge any part of any such report or record so as to disclose the identity of the person to whom it relates.

It shall be the duty of every physician to furnish and deliver to every person found by such physician to be affected with syphilis or gonorrhoea a circular of instruction and advice, issued or approved by the department of health of the city of New York, and to instruct such person as to the precautions to be taken in order to prevent the communication of the disease to others. No persons affected with syphilis or gonorrhoea shall, by a negligent act, cause, contribute to, or promote the spread of such diseases.

Dispensaries, Conduct and Maintenance. (Regs. Dept. of H. of New York City, June 28 and July 31, 1917.)

SEC. 223. *Dispensaries: communicable disease; regulations.*—No public dispensary where communicable diseases are treated or diagnosed shall be conducted or maintained otherwise than in accordance with the regulations of the board of health. (As adopted by the board of health, June 28, 1917.)

REGULATIONS GOVERNING THE CONDUCT AND MAINTENANCE OF DISPENSARIES WHEREIN HUMAN BEINGS AFFECTED WITH SYPHILIS OR GONORRHEA ARE TREATED OR CARED FOR, AND RELATING TO SECTION 223 OF THE SANITARY CODE.

A.

SYPHILIS.

REGULATION 1. *Treatment of syphilis; special department.*—The treatment of syphilis, whatever its manifestations, shall be conducted in a special department maintained for such purpose or in the department for dermatology connected with the dispensary or hospital. *Provided, however,* When the nature of the part affected, such as the eye, throat, viscera, etc., necessitates treatment in some other department of the dispensary, treatment may be given jointly by the two departments.

REG. 2. *Microscopical examination required.*—Every department for the treatment of syphilis shall make microscopical examinations of all suspected lesions.

REG. 3. *Wassermann tests.*—Laboratory facilities for making Wassermann tests should be provided in every dispensary. If such laboratory facilities are not so provided, provision shall be made for the prompt delivery of specimens to the department of health or other approved laboratories where such tests are made.

REG. 4. *Number of patients to be treated.*—The number of patients to be treated at a dispensary shall be regulated by the number of physicians in attendance and the equipment and facilities provided in the dispensary. The maximum number of patients treated by a physician shall not exceed 10 per hour.

REG. 5. *Salvarsan or its analogues to be administered.*—In view of the fact that the obligation to render a person affected with an infectious disease innocuous at the earliest possible moment rests on the institution to which the patient has applied for treatment, salvarsan or its analogues, in sufficient quantities and at proper intervals, shall be administered, with the addition of mercury or other accepted means of treatment, to all cases of syphilis.

REG. 6. *Records.*—A complete and adequate record shall be kept of every case of syphilis treated at a dispensary. Such records shall not be open to inspection by the public or to any person other than the representatives of the department of health of the city of New York, and such persons as may be authorized by law to inspect such records.

REG. 7. *Follow-up system.*—A follow-up system, approved by the department of health, to secure regular attendance by patients shall be established and maintained.

REG. 8. *Procedure governing the discharge of patients.*—A standard procedure governing the discharge of patients shall be followed. Such standard shall embrace suitable tests and subsequent persistent observations.

REG. 9. *Dispensaries to be open at least three days a week.*—Dispensaries shall be open at least three days a week.

B.

GONORRHEA.

REGULATION 1. *Microscopical examination required.*—Systematic microscopical examinations of all discharges shall be made in every department of a dispensary wherein persons affected with gonorrhoea are treated or cared for.

REG. 2. *Facilities to be provided.*—Every department of a dispensary wherein persons affected with gonorrhoea are treated or cared for shall be provided with and employ proper facilities for asepsis and antiseptis.

REG. 3. *Urethroscopic and cystoscopic work to be performed.*—Every dispensary shall be provided with facilities for urethroscopic and cystoscopic work, and such facilities shall be regularly employed by the physicians in attendance.

REG. 4. *Complement fixation test to be performed.*—Every such dispensary should be provided with facilities for making a complement fixation test for gonorrhoea. If such facilities be not provided at the dispensary, proper provision shall be made for the prompt delivery of specimens to the department of health or other approved laboratories where such tests are made.

REG. 5. *Number of patients to be treated.*—The number of patients to be treated at a dispensary shall be regulated by the number of physicians in attendance and the equipment and facilities provided in the dispensary. The maximum number of patients treated by a physician shall not exceed 10 per hour.

REG. 6. *Records.*—A complete and adequate record shall be kept of every case of gonorrhoea treated at the dispensary. Such records shall not be open to inspection by the public or any person other than the representatives of the department of health of the city of New York, and such persons as may be authorized by law to inspect such records.

REG. 7. *Procedure governing the discharge of patient.*—A standard procedure governing the discharge of patients shall be followed. Such standard shall embrace suitable tests and subsequent persistent observations.

REG. 8. *Dispensaries to be open at least three days a week.*—Dispensaries shall be open at least three days a week.

Foodstuffs—Employees—Physical Examination. (Reg. Dept. of H. of New York City, Apr. 25, 1916.)

SEC. 146. *Employment of persons affected with infectious or venereal disease prohibited.*—No person who is affected with any infectious disease, or with any venereal disease in a communicable form shall work or be permitted to work in any place where food or drink is prepared, cooked, mixed, baked, exposed, bottled, packed, handled, stored, manufactured, offered for sale, or sold. Whenever required by a medical inspector or other duly authorized physician of the department of health, or by an order of the sanitary superintendent, the director of the bureau of food and drugs, or the director of the bureau of preventable diseases of the said department, any person employed in any such place shall submit to a physical examination by a physician in the employ of the said department. Such persons, however, may, in their discretion, be examined by their own private physicians, provided such examinations are performed in accordance with the regulations of the board of health. No person who refuses to submit to such examination shall work or be permitted to work in any such place.

REGULATION 1. Result of physical examinations to be reported on official blanks.—The result of physical examinations performed by physicians in accordance with the provisions of section 146 of the Sanitary Code shall be reported to the department of health upon official blanks furnished for such purpose. Such blanks shall be signed by the physician making the examinations and shall contain the following information:

Name.....
 Age..... Male—Female. Single, Married, Widowed.
 Address..... Borough..... Nativity.....
 Where employed..... How long.....
 State special mark of identification.....
 Color of eyes..... Color of hair.....
 Skin..... Mouth.....
 Height..... ft..... in. Weight..... lbs.
 Has any laboratory test been submitted?

{	Wasserman?.....
	Widal?.....
	Sputum?.....
	Gonorrhea smear?.....

 Is lues present?..... Under treatment (if sick).....
 Lungs.....
 Has applicant ever had typhoid fever or been exposed to it?.....
 I hereby certify that the above-named person is not affected with any infectious disease or any venereal disease in communicable form.
 Dated..... Signed.....

REG. 2. Certificates to be issued by the department of health.—When such official blank, properly filled out and signed, shall have been filed with the department of health, and the approval thereof given by the bureau of preventable diseases, a certificate, properly numbered and specifying the date of issue thereof, shall be issued by the department of health to the person so examined. Such certificate shall specify the date of such physical examination and shall state that the person to whom it is issued was free from any infectious disease and any venereal disease in communicable form on the date of such examination. Such certificate shall not be transferred and shall not be used by any other person than the one to whom it has been issued.

REG. 3. Conditions under which certificates are issued.—Certificates issued under and by virtue of the provisions of regulation 2 hereof shall not be construed to authorize the employment of persons to whom they shall have been issued where such persons thereafter contract, or are infected with, or have been or are exposed to, any infectious disease requiring isolation or exclusion from their employment by any regulation, law, or ordinance; nor shall such certificates be construed as nullifying or limiting the power of the department of health to require a reexamination of such persons in its discretion.

NORTH CAROLINA.

Notification—Control. (Ord. of Charlotte, Oct. 22, 1917.)

1. That all physicians, osteopaths, or any other persons allowed by law to practice the art of healing the sick in the city of Charlotte, shall, within 24 hours after being called or making a diagnosis, report in writing, upon forms supplied by the health department, giving the name, except as hereinafter provided, color, age, sex, and address of all cases of * * * gonococcus infection, syphilis, and chancroid.
2. That in cases of gonococcus infection, syphilis, and chancroid the physician making the diagnosis or treating such patient shall keep in his office or place of business a separate record, giving the name, color, age, sex, and address and the character of disease, and such cases shall be numbered or such record kept in the numerical order of their diagnosis or treatment, and shall, within 24 hours after being diagnosed, be reported to the health department, giving the number of such case in lieu of the name of the patient.

The record kept by any physician of any of the diseases herein mentioned shall not be open to inspection by the public, but shall at all times be open to inspection by the health officer or assistant health officer of the city.

3. If any person should be afflicted with any of the above-named diseases and is not under the care of a physician, then the head of the household where such diseased person is, or the guardian of such diseased person, shall immediately report such case to the health department.

4. The proprietor or manager of any hotel, lodging house, or boarding house who shall have knowledge of or reason to believe that there is a case of any of the above-named diseases within such hotel, lodging house, or boarding house shall immediately report such fact to the health department.

5. When a physician, attendant, parent, or guardian suspects that a person under his care has any of the above-named diseases he shall immediately report the case as such and the health officer shall thereupon take such measures as are necessary to protect the public, but before declaring a quarantine he shall consult the family physician, if there be one, in charge of such case.

6. The recovery or death of all cases of the above-mentioned diseases shall be reported on forms supplied by the health department for that purpose.

7. A separate report card shall be used for reporting each case of the above-mentioned diseases.

8. Any person concealing or attempting to conceal the existence of a case of any one of the above-named diseases or violating any of the provisions of this ordinance shall upon conviction be fined not less than \$5 nor more than \$50.

OHIO.

Places of Prostitution Declared Nuisances—Abatement by Injunction. (Act Mar. 30, 1917.)

SECTION 1. For the purpose of this act the terms place, person, nuisance are defined as follows: Place shall include any building, erection, or place or any separate part or portion thereof or the ground itself; person shall include any individual, corporation, association, partnership, trustee, lessee, agent, or assignee; nuisance shall mean any place as above defined in or upon which lewdness, assignation, or prostitution is conducted, permitted, continued, or exists, and the personal property and contents used in conducting and maintaining any such place for any such purpose.

SEC. 2. Any person who shall use, occupy, establish, or conduct a nuisance as defined in section 1, or aid or abet therein, and the owner, agent, or lessee of any interest in any such nuisance together with the persons employed in or in control of any such nuisance by any such owner, agent, or lessee shall be guilty of maintaining a nuisance and shall be enjoined as hereinafter provided.

SEC. 3. Whenever a nuisance exists the attorney general of the State, the prosecuting attorney of the county, or any person who is a citizen of the county may bring an action in equity in the name of the State of Ohio, upon the relation of such attorney general, prosecuting attorney, or person, to abate such nuisance and to perpetually enjoin the person or persons maintaining the same from further maintenance thereof. If such action is instituted by a person other than the prosecuting attorney, or attorney general, the complainant shall execute a bond to the person against whom complaint is made, with good and sufficient surety to be approved by the court or clerk thereof, in the sum of not less than \$500, to secure to the party enjoined the damages he may sustain if such action is wrongfully brought, not prosecuted to final judgment, or is dismissed, or is not maintained, or if it be finally decided that the injunction ought not to have been granted. The party thereby aggrieved by the issuance of such injunction shall have recourse against said bond for all damages suffered, including damage to his property, person, or character and including reasonable attorney's fees incurred by him in making defense to said action.

Sec. 4. Such action shall be brought in the common pleas court of the county in which the property is located. At the commencement of the action a verified petition alleging the facts constituting the nuisance shall be filed in the office of the clerk of the court. After the filing of the petition, application for a temporary injunction may be made to the court or a judge thereof who shall grant a hearing thereon within 10 days thereafter. Where such application for a temporary injunction has been made, the court or judge thereof may, on application of the complainant, issue an *ex parte* restraining order restraining the defendant and all other persons from removing or in any manner interfering with the personal property and contents of the place where such nuisance is alleged to exist until the decision of the court or judge granting or refusing such temporary injunction and until the further order of the court thereon. The restraining order may be served by handing to and leaving a copy of said order with any person in charge of such place or residing therein, or by posting a copy thereof in a conspicuous place at or upon one or more of the principal doors or entrances to such place, or by both such delivery and posting. The officer serving such restraining order shall forthwith make and return into court an inventory of the personal property and contents situated in and used in conducting or maintaining such nuisance. Any violation of such restraining order shall be a contempt of court, and where such order is so posted mutilation or removal thereof, while the same remains in force, shall be a contempt of court, provided such posted order contains thereon or therein a notice to that effect. A copy of the complaint together with a notice of the time and place of the hearing of the application for a temporary injunction shall be served upon the defendant at least five days before such hearing. If the hearing be then continued at the instance of any defendant, the temporary writ as prayed shall be granted as a matter of course. If upon hearing the allegations of the petition be sustained to the satisfaction of the court or judge, the court or judge shall issue a temporary injunction without additional bond restraining the defendant and any other person or persons from continuing the nuisance.

If at the time of granting a temporary injunction, it shall further appear that the person owning, in control, or in charge of the nuisance so enjoined had received five days' notice of the hearing and unless such person shall show to the satisfaction of the court or judge that the nuisance complained of has been abated, or that such person proceeded forthwith to enforce his rights under the provisions of section 12 of this act, the court or judge shall forthwith issue an order closing the place against its use for any purpose of lewdness, assignation, or prostitution until final decision shall be rendered on the application for a permanent injunction. Such order shall also continue in effect for such further period the restraining order above provided if already issued, or, if not so issued, shall include such an order restraining for such period the removal or interference with the personal property and contents located thereat or therein as hereinbefore provided, and such restraining order shall be served and the inventory of such property shall be made and filed as hereinbefore provided: *Provided, however,* That the owner or owners of any real or personal property so closed or restrained or to be closed or restrained may appear at any time between the filing of the petition and the hearing on the application for a permanent injunction and upon payment of all costs incurred and upon the filing of a bond by the owner of the real property with sureties to be approved by the clerk in the full value of the property to be ascertained by the court, or, in vacation, by the judge, conditioned that such owner or owners will immediately abate the nuisance and prevent the same from being established or kept until the decision of the court or judge shall have been rendered on the application for a permanent injunction, then and in that case, the court, or judge in vacation, if satisfied of the good faith of the owner of the real property and of innocence on the part of any owner of the personal property of any knowledge of the use of such personal property as a nuisance and that, with reasonable care and diligence, such owner could not have known thereof, shall deliver such real or personal property or

both to the respective owners thereof, and discharge or refrain from issuing at the time of the hearing on the application for the temporary injunction, as the case may be, any order or orders closing such real property or restraining the removal or interference with such personal property. The release of any real or personal property under the provisions of this section shall not release it from any judgment, lien, penalty, or liability to which it may be subjected by law.

SEC. 5. The action when brought shall be noticed for trial at the first term of the court and shall have precedence over all other cases except crimes, election contests, or injunctions. In such action evidence of the general reputation of the place or an admission or finding of guilt of any person under the criminal laws against prostitution, lewdness, or assignation at any such place shall be admissible for the purpose of proving the existence of said nuisance and shall be prima facie evidence of such nuisance and of knowledge of and acquiescence and participation therein on the part of the person or persons charged with maintaining said nuisance as herein defined. If the complaint is filed by a person who is a citizen of the county it shall not be dismissed except upon a sworn statement by the complainant and his or its attorney, setting forth the reasons why the action should be dismissed and the dismissal approved by the prosecuting attorney in writing or in open court. If the court or judge is of the opinion that the action ought not to be dismissed, he may direct the prosecuting attorney to prosecute said action to judgment at the expense of the county, and if the action is continued more than one term of court, any person who is a citizen of the county, or has an office therein, or the attorney general or the prosecuting attorney, may be substituted for the complainant and prosecute said action to judgment. If the action is brought by a person who is a citizen of the county and the court finds that there were no reasonable grounds or cause for said action, the costs may be taxed to such person. If the existence of the nuisance be established upon the trial, a judgment shall be entered which shall perpetually enjoin the defendants and any other person or persons from further maintaining the nuisance at the place complained of and the defendants from maintaining such nuisance elsewhere.

SEC. 6. If the existence of the nuisance be admitted or established in an action as provided in this act, or in a criminal proceeding, an order of abatement shall be entered as a part of the judgment in the case, which order shall direct the removal from the place of all personal property and contents used in conducting the nuisance, and not already released under authority of the court as provided in section 4, and shall direct the sale of such thereof as belong to the defendants notified or appearing, in the manner provided for the sale of chattels under execution. Such order shall also require the renewal for one year of any bond furnished by the owner of the real property as provided in section 4, or, if not so furnished, shall continue for one year any closing order issued at the time of granting the temporary injunction, or, if no such closing order was then issued, shall include an order directing the effectual closing of the place against its use for any purpose, and so keeping it closed for a period of one year unless sooner released: *Provided, however,* That the owner of any place so closed and not released under bond as hereinbefore provided may now appear and obtain such release in the manner and upon fulfilling the requirements as hereinbefore provided. The release of the property under the provisions of this section shall not release it from any judgment, lien, penalty, or liability to which it may be subject by law. Owners of unsold personal property and contents so seized must appear and claim same within 10 days after such order of abatement is made and prove innocence, to the satisfaction of the court, of any knowledge of said use thereof and that with reasonable care and diligence they could not have known thereof. Every defendant in the action shall be presumed to have had knowledge of the general reputation of the place. If such innocence be so established, such unsold personal property and contents shall be delivered to the owner, otherwise it shall be sold as hereinbefore provided. For removing and selling the personal property

and contents, the officer shall be entitled to charge and receive the same fees as he would for levying upon and selling like property on execution; and for closing the place and keeping it closed, a reasonable sum shall be allowed by the court.

SEC. 7. In case the existence of such nuisance is established in a criminal proceeding it shall be the duty of the prosecuting attorney to proceed promptly under this act to enforce the provisions and penalties thereof, and the finding of the defendant guilty in such criminal proceedings, unless reversed or set aside, shall be conclusive as against such defendant as to the existence of the nuisance. All moneys collected under this act shall be paid to the county treasurer. The proceeds of the sale of the personal property, as provided in the preceding section, shall be applied in payment of the costs of the action and abatement, including the complainant's costs or so much of such proceeds as may be necessary, except as hereinafter provided.

SEC. 8. In case of the violation of any injunction or closing order granted under provisions of this act, or of a restraining order or the commission of any contempt of court in proceedings under this act, the court, or in vacation, a judge thereof, may summarily try and punish the offender. The trial may be had upon affidavits or either party may demand the production and oral examination of the witnesses. A party found guilty of contempt under the provisions of this act shall be punished by a fine of not more than \$1,000 or by imprisonment in the county jail not more than six months, or by both such fine and imprisonment.

SEC. 9. Whenever a permanent injunction issues against any person or persons for maintaining a nuisance as herein defined, there shall be imposed upon said nuisance and against the person or persons maintaining the same a tax of \$300: *Provided, however,* That such tax may not be imposed upon the personal property or against the owner or owners thereof who have proven innocence as hereinbefore provided, or upon the real property or against the owner or owners thereof who shall show to the satisfaction of the court or judge thereof, at the time of the granting of the permanent injunction, that he or they have in good faith permanently abated the nuisance complained of. The imposition of said tax shall be made by the court as a part of the proceeding and the clerk of said court shall make and certify a return of the imposition of said tax thereon to the county auditor, who shall enter the same as a tax upon the property and against the persons upon which or whom the lien was imposed as and when other taxes are entered, and the same shall be and remain a perpetual lien upon all property, both personal and real, used for the purpose of maintaining said nuisance except as herein excepted until fully paid: *Provided,* That any such lien imposed while the tax books are in the hands of the auditor shall be immediately entered therein. The payment of said tax shall not relieve the persons or property from any other taxes provided by law. The provisions of the laws relating to the collection of taxes in this State, the delinquency thereof, and sale of property for taxes shall govern in the collection of the tax herein prescribed in so far as the same are applicable, and the said tax collected shall be applied in payment of any deficiency in the costs of the action and abatement on behalf of the State to the extent of such deficiency after the application thereto of the proceeds of the sale of personal property as hereinbefore provided, and the remainder of said tax, together with the unexpended portion of the proceeds of the sale of personal property, shall be distributed in the same manner as fines collected for the keeping of houses of ill fame.

SEC. 10. When such nuisance has been found to exist under any proceeding as in this act provided, and the owner or agent of such place whereon the same has been found to exist was not a party to such proceeding, nor appeared therein, the said tax of \$300 shall, nevertheless, be imposed against the persons served or appearing and against the property as in this act set forth. But before such tax shall be enforced against such property, the owner or agent thereof shall have appeared therein or shall be served with summons therein, and the provisions of existing laws regarding the service of process shall apply to service in proceedings under this act. The person

in whose name the real estate affected by the action stands on the books of the county auditor for purposes of taxation shall be presumed to be the owner thereof, and in case of unknown persons having or claiming any ownership, right, title, or interest in property affected by the action, such may be made parties to the action by designating them in the petition as "all other persons unknown claiming any ownership, right, title, or interest in the property affected by the action" and service thereon may be had by publication in the manner prescribed by law. Any person having or claiming such ownership, right, title, or interest, and any owner or agent in behalf of himself and such owner may make defense thereto and have trial of his rights in the premises by the court: and if said cause has already proceeded to trial or to findings and judgment, the court shall by order fix the time and place of such further trial and shall modify, add to, or confirm such findings and judgment as the case may require. Other parties to said action shall not be affected thereby.

SEC. 11. Should any provision or item of this act be held unconstitutional, such fact shall not be held to invalidate the other provisions and items thereof.

SEC. 12. If a tenant or occupant of a building or tenement under a lawful title uses such place for the purposes of lewdness, assignation, or prostitution, such use shall annul and make void the lease or other title under which he holds at the option of the owner and, without any act of the owner, shall cause the right of possession to revert and vest in him, and he may without process of law make immediate entry upon the premises.

Marriage—Venereal Diseases—Physicians Allowed to Disclose Facts to Interested Persons—Advertising by Physicians—Revocation of License. (Act Apr. 26, 1915.)

SECTION 1. That section 1275 * * * of the General Code be amended * * * [to read] as follows:

"SEC. 1275. The State medical board may refuse to grant a certificate to a person guilty of * * * grossly unprofessional or dishonest conduct * * *. The words 'grossly unprofessional or dishonest conduct' as used in this section are hereby declared to mean:

* * * * *

"Second. The willful betrayal of a professional secret. But a physician, knowing that one of the parties to a contemplated marriage has a venereal disease, and so informing the other party to such contemplated marriage, or the parent, brother, or guardian of such other party, shall not be held to answer for betrayal of a professional secret, nor shall such physician be liable in damages for truthfully giving such information to such other party, or the parent, brother, or guardian of such other party.

"Third. All advertising of medical practice in which extravagantly worded statements intended, or having a tendency, to deceive and defraud the public are made, or where specific mention is made in such advertisements of tuberculosis, consumption, cancer, Bright's disease, kidney disease, diabetes, or of venerea diseases or diseases of the genito-urinary organs.

* * * * *

"Upon notice and hearing, the board, by a vote of not less than five members, may revoke or suspend a certificate for like cause or causes."

OREGON.

Marriage—Certificate of Health Required. (Chap. 187, Act Feb. 26, 1913.)

SECTION 1. That before any county clerk in this State shall issue a marriage license the applicant therefor shall file with the clerk from whom such license is sought a certificate from a physician duly authorized to practice medicine within the State, made under oath, within 10 days from the date of filing the same, showing that the

male person thus seeking to enter the marriage relation is free from contagious or infectious venereal disease.

SEC. 2. Any physician who shall knowingly and willfully make any false statement in any certificate issued, as herein provided, shall be punished by the revocation of his license to practice his profession within the State.

SEC. 3. All fees and charges for any physician making the necessary examination of and issuing the necessary certificate to any one party, as herein provided, shall not exceed the sum of \$2.50.

SEC. 4. The county physicians of the several counties shall, upon request, make the necessary examination and issue such certificate, if the same can properly be issued, without charge to the applicant, if indigent.

PENNSYLVANIA.

Notification—Quarantine. (Res. Bd. of H. of Philadelphia, Effective Jan. 1, 1918.)

SECTION 1. *Resolved*, That on and after January 1, 1918, every physician in the city of Philadelphia shall forthwith report, in writing, to the bureau of health, on forms furnished by said bureau, the sex, color, age, marital state, and occupation of every person under his care for gonorrhoea, chancroid or syphilis. All reports made in accordance with section 1 of this resolution, and all clinical and laboratory records showing the presence of gonorrhoea, chancroid, or syphilis shall be confidential and not open to public inspection or be inspected by any person other than the official custodian of such reports in the bureau of health, the director of the department of public health and charities, and such other persons as may be authorized by law to inspect such reports or records; nor shall the custodian of any such report or record, the said director, or any other person, divulge any part of any such report or record, so as to disclose the identity of the person to whom it relates.

SEC. 2. *And it is further resolved*, That when a physician in Philadelphia shall report, in writing, to the bureau of health that a person afflicted with gonorrhoea, chancroid, or syphilis whom he has treated or examined after January 1, 1918, can not be properly and sufficiently attended at home, then the bureau of health shall take charge of such reported person and shall quarantine or remove to a hospital the afflicted person, who shall be quarantined until duly discharged by a permit, in writing from the bureau of health. All reports and records made under section 2 of this resolution may be disclosed by the director of the department of public health and charities at his discretion.

SOUTH CAROLINA.

Wassermann Blood Test, Free. (Act 551, Apr. 6, 1916.)

SECTION 1. *Test to be free*.—That the State board of health is required to make all Wassermann blood tests without charge as in case of other blood tests now provided for by law.

VERMONT.

Notification—Laboratory Tests and Treatment. (Act 218, Feb. 3, 1913.)

SECTION 1. Commencing on the date of the passage of this act the superintendent or other officer in charge of public institutions such as hospitals, dispensaries, clinics, homes, asylums, charitable and correctional institutions, shall report promptly to the State board of health the name, sex, age, nationality, race, marital state, and address of every charitable patient under observation suffering from venereal diseases in any form, stating the name, character, stage, and duration of the infection, and, if obtainable, the date and source of contracting the same.

SEC. 2. Physicians shall furnish similar information concerning private patients under their care, except that the name and address of the patient shall not be reported.

SEC. 3. All information and reports in connection with persons suffering from such diseases shall be regarded as absolutely confidential, and shall not be accessible by the public nor shall such records be deemed public records.

SEC. 4. The State board of health shall provide, at the expense of the State, facilities for the free bacteriological examination of discharges for the diagnosis of gonorrhoeal infections, and shall also provide, at cost, vaccines or antitoxins for the treatment of such infections. And said board shall make, at the expense of the State, the Wassermann test or examine smears for the diagnosis of syphilis; and shall furnish the treatment known as "Salvarsan" or other accredited specific treatment at cost. But such diagnosis and treatment shall not be furnished until the data required for the registration of the case has been furnished by the physician or institution treating the patient.

SEC. 5. The State board of health shall include in bulletins or circulars distributed by it information concerning the diseases covered by this act.

Notification—Seller of Drugs to Report—Marriage or Sexual Intercourse by Infected Persons—Making of Regulations—Educational Campaign. (Act No. 198, Mar. 23, 1915, as Amended by Act No. 238, Mar. 14, 1917.)

SECTION 1. A person who, having been told by a physician that he or she was infected with gonorrhoea or syphilis, marries, without assurance and certification from a legally qualified practitioner of medicine and surgery that he or she is free from gonorrhoea or syphilis shall be fined not more than \$500 or imprisoned not more than two years.

SEC. 2. A person who, while infected with gonorrhoea or syphilis, has sexual intercourse shall be fined not more than \$500 or imprisoned in the house of correction for not more than one year.

SEC. 3. A physician, or any other person who knows or has reason to believe that a person whom he treats or prescribes for or to whom he sells medicine other than on a physician's prescription, has gonorrhoea or syphilis, shall immediately report the name, nationality, race, marital state, address, age, and sex of such person to the secretary of the State board of health, for which report he shall receive the sum of 25 cents to be paid by the State board of health. A person who fails to make such report shall be fined not more than \$200.

SEC. 4. The State board of health shall make and enforce such rules and regulations for the quarantining and treatment of cases of gonorrhoea and syphilis reported to it as may be deemed necessary for the protection of the public. Said board shall not disclose the names or addresses of persons reported or treated to any person other than a prosecuting officer or in court on prosecutions under this act.

SEC. 5. Said board shall semiannually in the months of January and July pay such persons all sums due on account of such reports; and such expenditures shall be allowed in said board's accounts.

SEC. 6. The sum of \$1,000 is annually appropriated for carrying out the provisions of this act.

SEC. 7. Section 2 of No. 218 of the acts of 1912 is hereby repealed.

SEC. 8. Authority is given said board under this act to conduct an educational campaign of methods of prevention and treatment and care of persons suffering from gonorrhoea and syphilis, and sums so expended shall be paid from the appropriation herein named.

WASHINGTON.

Laundries—Infected Persons. (Ord. C 1848 of Spokane, Jan. 4, 1915.)

SEC 41. It shall be unlawful for any person, firm or corporation conducting, operating, managing, or carrying on a public washhouse or laundry, to permit any person suffering from any communicable disease or venereal disease to work, lodge, sleep, or remain within or upon the premises used for the purpose of such public washhouse or laundry.

WISCONSIN.

Notification—Literature—Care of Indigent Persons—Laboratory Tests. (Ch. 235, Act May 17, 1917.)

SECTION 1. There is added to the statutes a new section to read:

SEC. 1417*m*. 1. Any person afflicted with gonorrhea or syphilis in its infective or communicable stage is hereby declared to be a menace to the public health. Any physician licensed to practice medicine in this State who is called upon to attend or treat any person infected with gonorrhea or syphilis in its communicable state, shall report to the State board of health in writing, at such time and in such manner as the State board of health may direct, the age and sex of such person and the name of the disease with which such person is afflicted. Such report shall be made on blanks furnished by the said board.

2. Every physician treating venereally infected individuals shall fully inform such persons of the danger of transmitting the disease to others and he shall advise against marriage while the person has such disease in a communicable form.

3. Whenever any person afflicted with gonorrhea or syphilis ceases taking treatment before he or she has reached the stage of the disease where it is no longer communicable or whenever any individual has been informed by a licensed physician that such individual is afflicted with gonorrhea or syphilis in the communicable stages and the person so afflicted refuses to take treatment, the physician shall forthwith notify the State board of health, giving the age, sex, and conjugal condition of the person afflicted and the nature of the disease. The State board of health shall, without delay, take such steps as shall be necessary to have said person committed to a county or State institution for treatment until such individual has reached the stage of the disease where it is no longer communicable and the person so committed shall not be released from treatment until this stage of the disease is reached unless other provisions satisfactory to the State board of health are made for suitable treatment.

4. Each county shall make such provisions as may be required by the State board of health to furnish the necessary care and treatment to all indigent individuals residing in the county who are afflicted with gonorrhea or syphilis, or to any such person who may be committed to any county institution for failure to comply with this law, until such afflicted persons have passed the infectious or communicable stage of the disease.

5. The State board of health shall prepare for free distribution upon request among the citizens of the State printed information and instructions concerning the dangers from venereal diseases, their prevention and the necessity for treatment.

6. The State laboratory of hygiene located at Madison, and all branch and co-operative laboratories located in any part of the State shall make microscopical examinations for the diagnosis of gonorrhea for any licensed physician in the State, without charge. The Psychiatric Institute at Mendota shall make the necessary examinations of blood or secretions for the diagnosis of syphilis for any licensed physician in the State, without charge.

7. Any person who shall violate any of the provisions of this section shall upon conviction be punished by a fine of not more than \$100 or by imprisonment in the county jail for not more than three months, or by both such fine and imprisonment.

Marriage—Certificates of Health from Male Applicants—Laboratory Tests. (Ch. 525, Act Aug. 10, 1915, as Amended by Ch. 212, Act May 11, 1917.)

SEC. 2339*m*. 1. All male persons making application for license to marry shall at any time within 15 days prior to such application, be examined as to the existence or nonexistence in such person of any venereal disease, and it shall be unlawful for the county clerk of any county to issue a license to marry to any person who fails to present and file with such county clerk a certificate setting forth that such person is free from venereal diseases so nearly as can be determined by a thorough examination

and by the application of the recognized clinical and laboratory tests of scientific search when in the discretion of the examining physician such clinical and laboratory tests are necessary. When a microscopical examination for gonococci is required, such examination shall upon the request of any physician in the State be made by the State laboratory of hygiene free of charge. The Wassermann test for syphilis when required shall upon application be made by the Psychiatric Institute at Mendota free of charge. Such certificate shall be made by a physician, licensed to practice in this State or in the State in which such male person resides, shall be filed with the application for license to marry, and shall read as follows, to wit:

I, (name of physician), being a physician legally licensed to practice in the State of, my credentials being filed in the office of, in the city of, county of, State of, do certify that I have this ... day of, 19...., made a thorough examination of (name of person), and believe him to be free from all venereal diseases.

..... (Signature of physician.)

2. Such examiners shall be physicians duly licensed to practice in this State, or in the State in which such male person resides. The fee for such examination, to be paid by the applicant for examination before the certificate shall be granted, shall not exceed \$2. The county or asylum physician of any county shall upon request make the necessary examination and issue such certificate, if the same can be properly issued, without charge to the applicant if said applicant be indigent.

3. Any county clerk who shall unlawfully issue a license to marry to any person who fails to present and file the certificate provided by subsection 1 of this section, or any party or parties having knowledge of any matter relating or pertaining to the examination of any applicant for license to marry, who shall disclose the same, or any portion thereof, except as may be required by law, shall upon proof thereof be punished by a fine of not more than \$100 or by imprisonment not more than six months.

4. Any physician who shall knowingly and willfully make any false statement in the certificate provided for in subsection 1 of this section shall be punished by a fine of not more than \$100 or by imprisonment not more than six months.

Marriage—Certificates of Health. (Ch. 483, Act June 23, 1917.)

SECTION 1. There is added to the statutes a new section to read:

Sec. 2339n. 1. No person who has ever been afflicted with gonorrhoea or syphilis shall be granted a marriage license in this State until such person shall furnish to the county clerk issuing the license a certificate from the director of the State laboratory of hygiene, or from the State board of health branch laboratory, or from one of the State cooperative laboratories controlled by the State board of health, setting forth the fact that the necessary microscopical examination has been made and that the individual named in the certificate is not in the infective or communicable state of gonorrhoea, or a certificate from the director of the Psychiatric Institute at Mendota setting forth the fact that the necessary blood test for the Wasserman reaction has been made and that the person named in the certificate is not in the infective or communicable stage of syphilis. In all cases where the individual has been afflicted with both gonorrhoea and syphilis both such certificates shall be furnished before such license is granted.

2. Such a certificate or certificates shall be furnished to any citizen of this State by the director of any of the laboratories mentioned, without charge.

3. The necessary smears for gonorrhoea examinations and the blood for determining the presence of syphilis shall be collected and forwarded to the laboratory by physicians designated by the State board of health or the State health officer, for which a fee not to exceed \$2 may be charged.

4. Any person who shall obtain any such license contrary to the provisions of this section, shall, upon conviction thereof, be punished by a fine of not less than \$100 or by imprisonment in the county jail for not less than three months, or by both such fine and imprisonment.

Wassermann Test, Free. (Ch. 307, Act June 23, 1915.)

SECTION 1. There is added to the statutes a new section to read:

SEC. 561jn. The board of control is hereby authorized to make necessary arrangements with the laboratory of the Psychiatric Institute of Mendota for the giving of the Wasserman test to any person confined in any State or county institution, and of making such test for any practicing physician of this State who makes application therefor in behalf of any resident of this State, free of charge. * * *

UNITED STATES.

Prostitution Near Military Camps—Powers and Duties of Secretary of War. (Act of Congress, May 18, 1917.)

SEC. 13. That the Secretary of War is hereby authorized, empowered, and directed during the present war to do everything by him deemed necessary to suppress and prevent the keeping or setting up of houses of ill fame, brothels, or bawdy houses within such distance as he may deem needful of any military camp, station, fort, post, cantonment, training, or mobilization place, and any person, corporation, partnership, or association receiving or permitting to be received for immoral purposes any person into any place, structure, or building used for the purpose of lewdness, assignation, or prostitution within such distance of said places as may be designated, or shall permit any such person to remain for immoral purposes in any such place, structure, or building as aforesaid, or who shall violate any order, rule, or regulation issued to carry out the object and purpose of this section shall, unless otherwise punishable under the Articles of War, be deemed guilty of a misdemeanor and be punished by a fine of not more than \$1,000, or imprisonment for not more than 12 months, or both.

Houses of Prostitution Near Military Camps. (Order of the President, 1917.)

2. Under authority of section 13 of the same act [act of Congress, approved May 18, 1917] the keeping or setting up of houses of ill fame, brothels, or bawdy houses within 5 miles of any military camp, station, fort, post, cantonment, training, or mobilization place being used for military purposes by the United States is prohibited.

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.

UNITED STATES.

EXTRA-CANTONMENT ZONES—CASES REPORTED WEEK ENDED JAN. 15.

Camp Beuregard, La.—For city of Alexandria: Meningitis 15, typhoid 1, measles 25, German measles 9, chickenpox 2, pneumonia 2. For city of Pineville: Measles 5, mumps 1. For city of Boyce: Measles 8. Village of Holwells: Measles 2. Boyce and Holwells not in 5-mile zone, but make morbidity report. Total cases meningitis, Alexandria, to date 23; of these, 8 have occurred in one family whose census was 9. Four deaths have occurred in this family. Municipal hospital opened yesterday. Situation well in hand.

Camp Bowie, Tex.—Fort Worth: Mumps 1, measles 2, whooping cough 1, pneumonia 3, meningitis 3. Polytechnic: Measles 2.

Camp Dodge, Iowa.—Des Moines: Scarlet fever 9, diphtheria 2, smallpox 38, tuberculosis 2, measles 3, German measles 1. Grimes: Whooping cough 1, measles 1, chickenpox 1. Polk City: Scarlet fever 1, tuberculosis 1. Grant: Chickenpox 1, measles 72, smallpox 2, German measles 1, scarlet fever 3, diphtheria 3. Fort Des Moines: Scarlet fever 1. Bloom field township: Smallpox 10.

Camp Gordon, Ga.—In Atlanta: Chickenpox 3, diphtheria 9, German measles 7, gonococcus infection 1, malaria 1, measles 6, epidemic cerebrospinal meningitis 4, mumps 4, lobar pneumonia 2, scarlet fever 1, smallpox 3, syphilis 2, tuberculosis 5, typhoid fever 3, whooping cough 2. In Stone Mountain: Measles 5, chickenpox 5. In Riverside: Epidemic cerebrospinal meningitis 1.

Camp Greene, N. C.—Whooping cough 8, chickenpox 6, smallpox 1, measles 52, German measles 2, gonorrhoea 4, scarlet fever 1, gonorrhoea and chancroid 1, gonorrhoea and syphilis 1, diphtheria 1, cerebrospinal meningitis 3, syphilis 4, trachoma 1.

Camp Hancock, Ga.—Measles: Augusta 29, Davidson Crossing 1, Deans Bridge Road 1, Blythe 8, Gracewood 1, Hephzibah 2, and German measles: Augusta 8, and pulmonary tuberculosis: Augusta 3, and whooping cough: Augusta 1, and hookworm: Augusta 1, and chickenpox: Augusta 1.

Fort Leavenworth, Kans.—Measles; city 2, German measles; city 8, county 2, chickenpox; city 2, typhoid fever; city 2, paratyphoid; city 1, scarlet fever; city 1, county 1, diphtheria; city 1, tuberculosis; city 1, lobar pneumonia; county 1.

Camp Lee, Va.—Chickenpox, Petersburg 4; German measles, Petersburg 26; mumps, Petersburg 3; pneumonia, Petersburg 5; tuberculosis, Petersburg 3; whooping cough, Petersburg 3; chancroid, Petersburg 1; typhoid fever, Petersburg 1; measles, Petersburg 3; scarlet fever, Petersburg 4; malaria, Petersburg 1; German measles, Ettricks 1; scarlet fever, Hopewell 1; mumps, Chesterfield County 1; epidemic meningitis, Petersburg 1.

Camp Lewis, Wash.—German measles: Lake View 3 cases, DuPont 5, near Roy 1, Park Lodge 1, Spanway 1.

Camp Logan, Tex.—Anthrax, Houston 1. Chickenpox: Houston 6, Westfield 1. Diphtheria: Houston 2. German measles: Houston 7, Westfield 1. Gonorrhoea: Houston Heights 1. Measles: Houston 16. Malaria: Goose Creek 1. Pneumonia: Houston 8. Typhoid fever: Houston 1. Tuberculosis: Houston 1. Cerebrospinal meningitis: Goose Creek 3.

Camp MacArthur, Tex.—Waco: Chickenpox 2, German measles 2, gonococcus 5, malaria 1, measles 3, tubercular meningitis 1, lobar pneumonia 5, scarlet fever 3, tuberculosis 1.

Camp McClellan, Ala.—Anniston: Smallpox 4, chickenpox 23, measles 16, cerebrospinal meningitis 3. Jacksonville: Smallpox 1. Oxford: Smallpox 4. District Four: Smallpox 7. District Fifteen: Smallpox 1.

Fort Oglethorpe, Ga.—Chatanooga: Mumps 5, measles 3, German measles 9, pneumonia 3, syphilis 3, whooping cough 4, tuberculosis 1, diphtheria 1, scarlet fever 1. North Chattanooga: Measles 1, diphtheria 2. St. Elmo: German measles 1, meningitis 1. Missionridge: Meningitis 1. Redbank: Meningitis 1, measles 2. Rossville, Ga.: Meningitis 1, measles 2.

Camp Pike, Ark.—Little Rock: Measles 31, chickenpox 2, smallpox 17, scarlet fever 1, tuberculosis 1, pneumonia 3, German measles 3, mumps 3, malaria 3, syphilis 13, gonorrhoea 33, chancroid 7, meningitis 3. North Little Rock: Chickenpox 1, smallpox 6, pneumonia 1, gonorrhoea 1, meningitis 2, whooping cough 2. Scotts: Measles 2, tuberculosis 1, meningitis 1, pneumonia 1. Sweethome: Measles 1, pneumonia 1. Alexander: Smallpox 1.

Camp Sevier, S. C.—Suburban Greenville: Epidemic cerebrospinal meningitis 1. Chick Springs, rural: Measles 2. Poe Mill: Measles 1. Judson Mill: Measles 2.

Camp Shelby, Miss.—Forest County, Hattiesburg: Measles 16, German measles 5, mumps 3, pneumonia 1, tuberculosis, pulmonary, 1. Carnes: Measles 8. Macedonia: Measles 1. Covington County, Mount Olive: Tuberculosis, pulmonary, 1. Sanford: Tuberculosis, pulmonary, 1. Hancock County, Bay St. Louis: Diphtheria 1.

Camp Sheridan, Ala.—Montgomery: Chickenpox 1, measles 22, mumps 2, pneumonia 1, German measles 12, scarlet fever 3, diphtheria 1, smallpox 8, tuberculosis 1. Cloverdale: Measles 1. Chisholm: Measles 3. Rural district and 5-mile zone: Measles 1, smallpox 3.

Camp Sherman, Ohio.—Cerebrospinal meningitis: Chillicothe 1. Erysipelas: Chillicothe 1. German measles: Chillicothe 13. Measles: Chillicothe 13. Frankfort 1. Mumps: Chillicothe 1. Lobar pneumonia: Chillicothe 3. Scarlet fever: Chillicothe 1, East Scioto township 1, Uniontown township 1. Typhoid fever: Chillicothe 2.

Camp Zachary Taylor, Ky.—Jefferson County: Diphtheria 1, measles 1, scarlet fever 2. Louisville: Chickenpox 3, diphtheria 13, German measles 5, measles 29, mumps 2, scarlet fever 17, smallpox 1, trachoma 1, tuberculosis, pulmonary, 12, typhoid fever 2, whooping cough 1.

Tidewater Health District, Va.—Newport News: Measles 18, mumps 1, cerebrospinal meningitis 2, typhoid 1. Hampton: Measles 2, chickenpox 2, whooping cough 4.

Camp Wadsworth, S. C.—Spartanburg city: Chickenpox 9, measles 1, German measles 11, whooping cough 4, pneumonia 2, cerebrospinal meningitis 3. White Stone: Typhoid fever 1. Glenn Springs: German measles 1. Spartanburg County: German measles 3, pneumonia 1, chickenpox 2, diphtheria 1.

Camp Wheeler, Ga.—In Macon: Measles 22, diphtheria 1, mumps 12, scarlet fever 2, chickenpox 3, meningitis 1, pneumonia 1. In Bibb County: Meningitis 2. In East Macon: Measles 5, meningitis 2.

CURRENT STATE SUMMARIES.**California.**

From the California State Board of Health, telegram dated January 15, 1918:

Prevalence of all communicable diseases except scarlet fever and whooping cough decreased last week. Whooping cough especially prevalent in coast towns, while scarlet fever is widely distributed. Three cases cerebrospinal meningitis; 2 San Jose, 1 Los Angeles city. Three cases smallpox; 1 Maricopa, 2 Los Angeles city. Marked reduction in typhoid, 8 cases reported last week.

Indiana.

From the Indiana State Board of Health, telegram dated January 15, 1918:

Scarlet fever: Epidemic Warsaw, Huntington, West Hartsville, Bartholomew County, Churubusco, Allen County. Diphtheria: Death Fairmount. Measles: Epidemic Reelhorn, Wabash County, Columbus. Smallpox: Epidemic Decatur, Martinsville, Anderson, Clark Township, Johnson County. Whooping cough: One death Portland, Decatur, Aurora. Rabies: Epidemic dogs Grand View, Spencer County.

Kansas.

From Collaborating Epidemiologist Crumbine, telegram dated January 14, 1918:

Meningitis: Arkansas City 1, Kansas City 1, Ellsworth 1, Manhattan 1, McLouth 3, Winchester 1. Meningococcus carriers: Manhattan 3. Smallpox: Kansas City 101, Girard 26, Neosho Falls 15, Osage County 22.

Massachusetts.

From Collaborating Epidemiologist Kelley, telegram dated January 14, 1918:

Unusual prevalence. Measles: Braintree 38, additional, Medfield, total January 40, Needham, total January 43. Typhoid fever: North Brookfield 3, additional. Smallpox: Boston 1.

Minnesota.

From Collaborating Epidemiologist Bracken, telegram dated January 14, 1918:

Smallpox: Clay County, Viding Township; Filmore County, Bluefield Township; Freeborn County, Moscow Township; Sherburne County, Elk River Township; Sibley County, Kelso Township; Todd County, Gordon Township; each 1 case; Ramsey County, White Bear village, 2; Traverse County, Dumont village, 1; Croke Township, 8. Poliomyelitis, cerebrospinal meningitis, 1 case each reported since January 7.

Nebraska.

From the State Department of Health of Nebraska, telegram dated January 15, 1918:

Smallpox at Superior, Scotts Bluff, Avoca, Manley, Weeping Water, and Genoa. Scarlet fever at Walthill and Weeping Water. Diphtheria at Cedar Bluffs and Weeping Water.

South Carolina.

From Collaborating Epidemiologist Hayne, telegram dated January 14, 1918:

Seven new cases meningitis reported in civil population during past week; measles less prevalent; pneumonia on increase.

Virginia.

From Collaborating Epidemiologist Traynham, telegram dated January 14, 1918:

Four cases cerebrospinal meningitis Chesterfield County, 3 Bedford, 1 Portsmouth. One case smallpox King William County.

Washington.

From Collaborating Epidemiologist Tuttle, telegram dated January 14, 1918:

One case poliomyelitis San Juan County. No outbreaks of disease.

CEREBROSPINAL MENINGITIS.

City Reports for Week Ended Dec. 29, 1917.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Atlanta, Ga.....	3	.....	Jersey City, N. J.....	2	.....
Baltimore, Md.....	2	.....	Los Angeles, Cal.....	1	1
Birmingham, Ala.....	.....	1	Louisville, Ky.....	1	.....
Boston, Mass.....	2	2	New Britain, Conn.....	1	1
Buffalo, N. Y.....	3	.....	Newport News, Va.....	1	.....
Cambridge, Mass.....	1	.....	New York, N. Y.....	2	4
Chicago, Ill.....	6	3	Omaha, Nebr.....	1	.....
Cleveland, Ohio.....	1	1	Philadelphia, Pa.....	4	3
Columbus, Ohio.....	1	.....	Providence, R. I.....	1	1
Dubuque, Iowa.....	.....	1	Quincy, Ill.....	1	.....
Duluth, Minn.....	1	.....	Rockford, Ill.....	.....	1
East Orange, N. J.....	1	.....	St. Louis, Mo.....	.....	2
Fort Worth, Tex.....	1	1	South Bend, Ind.....	1	.....
Houston, Tex.....	.....	1	Troy, N. Y.....	2	.....
Hattiesburg, Miss.....	1	.....	Washington, D. C.....	2	2
Indianapolis, Ind.....	1	.....	Wichita, Kans.....	1	1

DIPHTHERIA.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 91.

ERYSIPELAS.

City Reports for Week Ended Dec. 29, 1917.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Baltimore, Md.....	1	1	Los Angeles, Cal.....	4	.....
Berkeley, Cal.....	1	.....	McKeesport, Pa.....	1	.....
Buffalo, N. Y.....	1	.....	Malden, Mass.....	1	.....
Camden, N. J.....	1	.....	Milwaukee, Wis.....	2	.....
Chicago, Ill.....	22	2	New York, N. Y.....	.....	11
Cleveland, Ohio.....	2	.....	Philadelphia, Pa.....	1	2
Denver, Colo.....	3	.....	Pittsburgh, Pa.....	7	1
Detroit, Mich.....	.....	2	Plainfield, N. J.....	1	.....
Duluth, Minn.....	6	.....	Pontiac, Mich.....	2	.....
Evansville, Ind.....	.....	1	Portsmouth, N. H.....	2	.....
Grand Rapids, Mich.....	2	.....	Reading, Pa.....	1	.....
Harrisburg, Pa.....	1	.....	Rochester, N. Y.....	1	.....
Jackson, Mich.....	1	.....	Rutland, Vt.....	1	1
Johnstown, Pa.....	2	.....	St. Louis, Mo.....	9	.....
Kansas City, Kans.....	1	.....	Salt Lake City, Utah.....	.....	2
Lorain, Ohio.....	1	.....	Springfield, Ill.....	1	.....

MALARIA.**City Reports for Week Ended Dec. 29, 1917.**

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Birmingham, Ala.....		1	Louisville, Ky.....	1	
Charleston, S. C.....		2	Memphis, Tenn.....		1
Hattiesburg, Miss.....	3		North Little Rock, Ark.....	1	
Little Rock, Ark.....	2		Stockton, Cal.....	1	

MEASLES.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 91.

PELLAGRA.**City Reports for Week Ended Dec. 29, 1917.**

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Birmingham, Ala.....		4	Little Rock, Ark.....		1
Charleston, S. C.....	1		Nashville, Tenn.....		3
Chicago, Ill.....	1		New Orleans, La.....	1	1
Fort Worth, Tex.....	1	1	New York, N. Y.....		1

PNEUMONIA.**City Reports for Week Ended Dec. 29, 1917.**

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Baltimore, Md.....	21	26	Manchester, N. H.....	1	1
Berkeley, Cal.....	1		Medford, Mass.....	3	1
Boston, Mass.....	27	29	Melrose, Mass.....	2	
Braddock, Pa.....	1		Montgomery, Ala.....	2	3
Brookline, Mass.....	1	1	Nashville, Tenn.....	6	7
Cambridge, Mass.....	4		New Bedford, Mass.....	6	2
Chattanooga, Tenn.....	3	2	New Castle, Pa.....	1	
Chelsea, Mass.....	9	1	Newport, Ky.....	2	
Chicago, Ill.....	344	73	Newton, Mass.....	3	2
Cincinnati, Ohio.....	1	8	North Little Rock, Ark.....	1	1
Cleveland, Ohio.....	34	36	Pascagoula, Miss.....	1	
Columbia, S. C.....	2		Philadelphia, Pa.....	106	71
Detroit, Mich.....	10	25	Pittsburgh, Pa.....	59	56
Duluth, Minn.....	2	2	Pittsfield, Mass.....	1	3
Everett, Mass.....	3	2	Pontiac, Mich.....	2	
Fall River, Mass.....	9	2	Reading, Pa.....	3	5
Grand Haven, Mich.....	2	1	Rochester, N. Y.....	6	
Grand Rapids, Mich.....	4	1	Sacramento, Cal.....	8	2
Hattiesburg, Miss.....	1		St. Joseph, Mo.....	7	2
Haverhill, Mass.....	6	1	San Diego, Cal.....	1	2
Jackson, Mich.....	3	3	Sandusky, Ohio.....	2	1
Kalamazoo, Mich.....	3	2	Somerville, Mass.....	3	2
Kansas City, Kans.....	9	9	South Bethlehem, Pa.....	2	
Lancaster, Pa.....	2		Springfield, Mass.....	1	1
Lawrence, Mass.....	1	1	Stockton, Cal.....	4	2
Leavenworth, Kans.....	1		Waltham, Mass.....	2	
Little Rock, Ark.....	2	2	Wichita, Kans.....	11	3
Lorain, Ohio.....	2		Worcester, Mass.....	5	5
Los Angeles, Cal.....	12	10	York, Pa.....	1	

POLIOMYELITIS (INFANTILE PARALYSIS).**City Reports for Week Ended Dec. 29, 1917.**

During the week ended December 29 one case of poliomyelitis was reported at each of the following-named places: Boston, Mass.; Canton, Ohio; Chicago, Ill.; Danville, Ill.; and Schenectady, N. Y. Two deaths were reported at Canton, Ohio, and one death at Chicago, Ill.

SCARLET FEVER.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 91.

SMALLPOX.

City Reports for Week Ended Dec. 29, 1917.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Akron, Ohio.....	18		Little Rock, Ark.....	25	
Alton, Ill.....	5		Lorain, Ohio.....	1	
Ann Arbor, Mich.....	1		Los Angeles, Cal.....	1	
Anniston, Ala.....	4		Memphis, Tenn.....	8	
Braddock, Pa.....	1		Milwaukee, Wis.....	5	
Buffalo, N. Y.....	2		Minneapolis, Minn.....	13	
Butte, Mont.....	27		Montgomery, Ala.....	2	
Charlotte, N. C.....	1		New Orleans, La.....	1	
Chicago, Ill.....	7		North Little Rock, Ark.....	2	
Chillicothe, Ohio.....	1		Oklahoma City, Okla.....	5	
Cincinnati, Ohio.....	5		Omaha, Nebr.....	22	
Cleveland, Ohio.....	33		Pittsburgh, Pa.....	4	
Coffeyville, Kans.....	1		Portland, Oreg.....	1	
Columbus, Ohio.....	4		Rock Island, Ill.....	2	
Davenport, Iowa.....	1		St. Joseph, Mo.....	3	
Denver, Colo.....	9		St. Louis, Mo.....	11	
Des Moines, Iowa.....	14		Salt Lake City, Utah.....	7	
Detroit, Mich.....	61		Savannah, Ga.....	1	
Dubuque, Iowa.....	1		Sioux City, Iowa.....	13	
Fort Worth, Tex.....	6		Springfield, Ohio.....	1	
Grand Rapids, Mich.....	13		Superior, Wis.....	1	
Indianapolis, Ind.....	54		Tacoma, Wash.....	1	
Jackson, Mich.....	1		Toledo, Ohio.....	6	
Kansas City, Kans.....	36		Washington, D. C.....	1	
La Crosse, Wis.....	8		Wheeling, W. Va.....	1	
Lincoln, Nebr.....	1		Worcester, Mass.....	1	

TETANUS.

City Reports for the Week Ended Dec. 29, 1917.

During the week ended December 29, 1917, one case of tetanus was reported at Birmingham, Ala., one in New York, N. Y., and two cases in St. Louis, Mo. One death each was reported at Chicago, Ill., and Mobile, Ala.

TUBERCULOSIS.

See Diphtheria, measles, scarlet fever, and tuberculosis, page 91.

TYPHOID FEVER.

City Reports for Week Ended Dec. 29, 1917.

Place.	Cases.	Deaths.	Place.	Cases.	Deaths.
Alameda, Cal.....	1		Nashville, Tenn.....		1
Alton, Ill.....	1	1	New Bedford, Mass.....	2	
Anniston, Ala.....	3		New London, Conn.....	1	
Atlanta, Ga.....		1	New Orleans, La.....	4	
Augusta, Ga.....	1		New York, N. Y.....	13	1
Baltimore, Md.....	3		Oakland, Cal.....	1	
Birmingham, Ala.....	4	1	Orange, N. J.....	1	
Boston, Mass.....	1		Philadelphia, Pa.....	3	
Buffalo, N. Y.....	2	1	Portland, Oreg.....	1	
Chattanooga, Tenn.....	1		Portsmouth, N. H.....	1	
Chicago, Ill.....	5		Providence, R. I.....	1	
Cleveland, Ohio.....	1	2	Richmond, Va.....	1	
Denver, Colo.....	2		Sacramento, Cal.....	1	
Detroit, Mich.....	9	1	Salt Lake City, Utah.....	2	1
Everett, Mass.....	1		St. Louis, Mo.....	5	1
Hartford, Conn.....	2		Savannah, Ga.....	1	
Kalamazoo, Mich.....	1		Springfield, Ohio.....		1
Kansas City, Kans.....	2		Syracuse, N. Y.....	1	1
Lawrence, Mass.....	2		Toledo, Ohio.....	1	
Lorain, Ohio.....	1		Troy, N. Y.....	2	
Los Angeles, Cal.....	6		Washington, D. C.....	1	
Lynn, Mass.....	1		Wheeling, W. Va.....	3	1
Memphis, Tenn.....	2	1	Wilmington, Del.....		1
Minneapolis, Minn.....	5		Worcester, Mass.....	2	

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

City Reports for Week Ended Dec. 29, 1917—Continued.

City.	Population as of July 1, 1916 (estimated by U. S. Census Bureau).	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
From 50,000 to 100,000 inhabitants—Continued.										
Charleston, S. C.	60,734	33	3							1
Chattanooga, Tenn.	60,075	5	1		8		3			2
Covington, Ky.	57,144	15					2		2	3
Duluth, Minn.	94,475	15	2		5		7			3
Erie, Pa.	75,195		6				1		4	45
Evansville, Ind.	76,078	29	4				2		2	3
Fort Wayne, Ind.	76,183	20	5	1			1			
Harrisburg, Pa.	72,015	34	6		2		8			8
Hoboken, N. J.	77,214	16	1		16				1	2
Johnstown, Pa.	68,529	22	8		2		7			2
Laneaster, Pa.	56,863		2		2		1			
Little Rock, Ark.	57,343	11	2		45		3			
Malden, Mass.	51,155	18	3	1	2		3		1	2
Manchester, N. H.	78,283	24	3	1	10		1		1	1
Mobile, Ala.	58,221	16			5					3
New Britain, Conn.	53,794	3					3		2	1
Norfolk, Va.	89,612			1	1		1			2
Oklahoma City, Okla.	92,943	11	2	1	3		1			1
Passaic, N. J.	71,744	16	2		5		1		2	3
Pawtucket, R. I.	59,411	24	5				3			3
Portland, Me.	63,867	22	5		57		3			2
Roc-ford, Ill.	55,155	9			3			1		1
Sacramento, Cal.	66,805	23			2		5		2	3
Saginaw, Mich.	55,612	9	3				5		1	1
St. Joseph, Mo.	85,236	27	15	2	3		3		3	
San Diego, Cal.	53,330	29	3	1	56				15	4
Savannah, Ga.	68,805				5					3
Schenectady, N. Y.	99,519	26			2		2		8	5
Sioux City, Iowa.	57,078						12			
Somerville, Mass.	87,039	18	5		20		9		5	1
South Bend, Ind.	68,946	21	1							
Springfield, Ill.	61,120	18	3				1			
Springfield, Ohio.	51,550	26					1		2	1
Terre Haute, Ind.	66,083	23	5	1	2		3			2
Troy, N. Y.	77,916	2	2				5		4	
Wichita, Kans.	70,722		1				5			1
Wilkes-Barre, Pa.	78,776	24	7	1	12		1		3	1
Wilmington, Del.	94,265	28	2	1						4
York, Pa.	51,656	2					1			
From 25,000 to 50,000 inhabitants:										
Alameda, Cal.	27,732	9	5	1	2		2			
Auburn, N. Y.	37,385	14	1		1				1	
Brookline, Mass.	32,730	14	1		16		3			
Butler, Pa.	27,632	13	1		20		1			
Butte, Mont.	43,425	1	2		2		13			1
Charlotte, N. C.	39,823				29				1	
Chelsea, Mass.	46,192	8	4		13		1		5	2
Chicopee, Mass.	29,319	6			10		2		1	1
Columbia, S. C.	34,611	12	5		15				1	1
Cumberland, Md.	26,074	8	2	1						1
Danville, Ill.	32,261	8								
Davenport, Iowa.	45,311		1				3			
Dubuque, Iowa.	39,573		2		3		2			2
East Chicago, Ind.	28,743	18	2	1	2					
East Orange, N. J.	42,458	13	3		35					
Elgin, Ill.	28,203	9			1		2			
Everett, Mass.	39,233	11	5		14		3		3	
Everett, Wash.	35,486	6			1					1
Galveston, Tex.	41,863	10	1		8					1
Green Bay, Wis.	29,353	5	2		9					
Haverhill, Mass.	48,477	8	2		7				3	1
Jackson, Mich.	35,363	20	1		2		5		1	3
Kalamazoo, Mich.	48,886	15	3		21		1		1	1
Kenosha, Wis.	31,576	4	5				5			
Knoxville, Tenn.	38,676				1		12			
La Crosse, Wis.	31,677	4								
Lexington, Ky.	41,097	20	2		15		1			3
Lima, Ohio	35,394	15	3	1			2			2

**DIPHTHERIA, MEASLES, SCARLET FEVER, AND TUBERCULOSIS—
Continued.**

City Reports for Week Ended Dec. 29, 1917—Continued.

City.	Population as of July 1, 1916 (estimated by U. S. Census Bureau).	Total deaths from all causes.	Diphtheria.		Measles.		Scarlet fever.		Tuberculosis.	
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
From 25,000 to 50,000 inhabitants—Continued.										
Lincoln, Nebr.	46,515	14	4		8		2			
Lorain, Ohio	36,964	11		1			1			
Lynchburg, Va.	32,940	11					1			2
McAeesport, Pa.	47,521		3		9					2
Medford, Mass.	26,234	6	2		7		1			
Montclair, N. J.	26,318	7			3					
Montgomery, Ala.	43,285	10			16				1	
Newburg, N. Y.	29,603	7	4		75		1		2	1
New Castle, Pa.	41,133		1		1					
Newport, Ky.	31,927	7							1	1
Newton, Mass.	43,715	8	5		3					
Niagara Falls, N. Y.	37,363	9	4		1	1	1		1	
Norristown, Pa.	31,401	13	1		1		1			
Orange, N. J.	33,080	9					1	1		
Pasadena, Cal.	46,450	12							3	1
Perth Amboy, N. J.	41,185		2		17		2		6	
Petersburg, Va.	25,582	12	1				1		1	
Pittsfield, Mass.	38,629	5			2		6		3	2
Portsmouth, Va.	39,651	18	2		4					3
Quincy, Ill.	36,798	7	1	1	2					
Quincy, Mass.	3,136	13	3		1				6	
Racine, Wis.	46,486	11					6			1
Roanoke, Va.	43,284	12			1					
Rock Island, Ill.	28,926	10								
San Jose, Cal.	38,902				1					
Steubenville, Ohio.	27,445	9								
Stockton, Cal.	35,353				2				3	2
Superior, Wis.	46,226	2			1					
Taunton, Mass.	36,283	12	1				3		1	
Waltham, Mass.	30,570	4					1			
Watertown, N. Y.	29,894	1			2					1
West Hoboken, N. J.	43,139	7	2	1	1					
Wheeling, W. Va.	43,377	21			1		1			1
Williamsport, Pa.	33,809		3							
Winston-Salem, N. C.	31,155	16	2		18		2		2	
Zanesville, Ohio.	30,863	0								1
From 10,000 to 25,000 inhabitants:										
Alton, Ill.	22,574	7	1		3		1			
Ann Arbor, Mich.	15,010	9	4							
Anniston, Ala.	14,112								1	
Braddock, Pa.	21,685		2		1					
Cairo, Ill.	15,794	7								1
Hattiesburg, Miss.	16,482	3	1		20					
Kokomo, Ind.	20,430	2	1				1		1	1
Leavenworth, Kans.	19,363	8	6				1			1
Long Branch, N. J.	15,395	4								
Malden, Mass.	17,445	6	2		1					
Morrisstown, N. J.	13,284	6			2					
Muscataine, Iowa.	17,500								1	
New Albany, Ind.	23,629									
New London, Conn.	20,985	4					2			2
Newport News, Va.	20,562		4							
Plainfield, N. J.	22,325	9			11				1	
Pontiac, Mich.	17,624	5		1	3			6		
Saratoga Springs, N. Y.	13,821	6	2				1		1	1
South Bethlehem, Pa.	24,204		1		1		2			
Woburn, Mass.	15,969	7								

1 Population April 15, 1910; no estimate made.

FOREIGN.

CHINA.

Examination of Rats—Hongkong.

During the five weeks ended December 1, 1917, 10,793 rats were examined at Hongkong. No plague infection was found. The last plague-infected rat at Hongkong was reported found during the week ended September 22, 1917.

CUBA.

Communicable Diseases—Habana.

Communicable diseases have been notified at Habana as follows:

Disease.	Dec. 11-20, 1917.		Remain- ing under treatment Dec. 20, 1917.	Disease.	Dec. 11-20, 1917.		Remain- ing under treatment Dec. 20, 1917.
	New cases.	Deaths.			New cases.	Deaths.	
Diphtheria.....	7	1	9	Scarlet fever.....			4
Leprosy.....	1		11	Smallpox.....			2
Malaria.....	28	1	148	Typhoid fever.....	22	4	84
Measles.....	8		10	Varicella.....	4		3
Paratyphoid fever.....			2				

¹ From the interior, 34; foreign, 1.

² From the interior, 36

JAMAICA.

Quarantine Regulations.

Under date of November 27, 1917, the quarantine board of Jamaica directed quarantine measures to be enforced at Jamaican ports as follows:

Metallic rat guards, properly adjusted and maintained, to be placed on the mooring lines leading from all vessels to wharves or other vessels; all gangways, cargo chutes, or other means of rat access, to be raised or removed between sunset and sunrise and all vessels or lighters lying alongside to be removed during the same period; night loading to be done under supervision.

Vessels which have had communication with Venezuela, Ecuador, Chile, or Peru not to be admitted to pratique until after fumigation.

Vessels arriving from the Argentine Republic, Brazil, Uruguay, Paraguay, Cape Verde Islands, Malta, Canary Islands, Hongkong, and the Azores except San Miguel, or any other country infected with plague may take first-class passengers and be admitted to pra-

tique at Jamaican ports provided they are six days out, have all well on board, and produce a certificate of having been anchored not less than a quarter of a mile from shore at any port of the countries named and that cargo was not taken on board. Disinfection of clothing and effects may be required. Vessels will then be allowed to receive mail and passengers at Port Royal, Jamaica, during daylight hours and to land first-class passengers and baggage at the quarantine station.

Regulations against yellow fever.—Vessels arriving from Mexico must be 18 days out from that country to obtain pratique at a port in Jamaica.

Regulations against smallpox.—Passengers in transit through Panama who have not been on the Isthmus for 14 days, and passengers from Mexico and Guatemala, desiring to land in Jamaica, must be 14 days out, show marks of recent vaccination or submit to vaccination on board, or else complete remainder of 14-day period at the quarantine station.

VIRGIN ISLANDS.

Dengue—St. Thomas.

An outbreak of dengue occurred at St. Thomas, Virgin Islands, in November, 1917, with an estimated number of 125 cases reported to December 27, 1917. The disease occurred mainly among newly arrived residents, and was generally mild in type.

CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER.

Reports Received During Week Ended Jan. 18, 1918.¹

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
China:				
Antung	Nov. 26-Dec. 2....	3	1	
Java:				
West Java				Nov. 2-8, 1917: Cases, 5; deaths, 2.
Batavia	Nov. 2-8.....	5	2	
Philippine Islands:				
Provinces				Nov. 18-24, 1917: Cases, 262; deaths, 167.
Antique	Nov. 18-24.....	32	23	
Bohol	do.....	10	9	
Iloilo	do.....	57	38	
Leyte	do.....	4	3	
Mindanao	do.....	77	47	
Occidental Negros	do.....	47	30	
Oriental Negros	do.....	35	17	
Provinces				Nov. 25-Dec. 1, 1917: Cases, 231; deaths, 166.
Antique	Nov. 25-Dec. 1....	16	9	
Bohol	do.....	36	19	
Capiz	do.....	1	1	
Iloilo	do.....	67	40	
Leyte	do.....	3	2	
Mindanao	do.....	38	30	
Occidental Negros	do.....	71	47	
Oriental Negros	do.....	18	17	
Romblon	do.....	1	1	

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

CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued.**Reports Received During Week Ended Jan. 18, 1918—Continued.****PLAGUE.**

Place.	Date.	Cases.	Deaths.	Remarks.
Indo-China: Saigon.....	Oct. 31–Nov. 18....	8	4	

SMALLPOX.

Australia: New South Wales..... Cessnock.....	Sept. 28–Oct. 11....	3		Sept. 28–Oct. 11, 1917: Cases, 3. Newcastle district.
Brazil: Sao Paulo.....	Oct. 23–Nov. 4....		2	
Canada: New Brunswick— Kent County.....	Dec. 4.....			Outbreak. On main line Canadian Ry., 25 miles north of Moncton.
Ontario— Sarnia..... Windsor.....	Dec. 23–Jan. 5.... Dec. 30–Jan. 5....	3 1		
Quebec— Montreal.....	Dec. 24–Jan. 5....	4		
China: Antung..... Chungking..... Shanghai.....	Dec. 3–9..... Nov. 11–17..... Nov. 23–Dec. 2....	1 7	1 6	Present.
Cuba: Habana.....	Jan. 8.....	2		Nov. 8, 1917–Jan. 8, 1918: Cases, 4.
Egypt: Cairo.....	July 30–Aug. 5....	3		
Indo-China: Saigon.....	Oct. 21–Nov. 18....	41	12	
Java: Mid-Java..... West Java..... Batavia.....	Oct. 21–30..... Nov. 2–8.....	10 1		Nov. 2–8, 1917: Cases, 10.
Mexico: Piedras Negras.....	Jan. 11.....	200		
Newfoundland: St. Johns.....	Dec. 22–25.....	2		
Spain: Coruna.....	Dec. 2–15.....		4	
Venezuela: Maracaibo.....	Dec. 2–8.....		1	

TYPHUS FEVER.

China: Antung.....	Dec. 3–9.....	5	1	
Egypt: Cairo..... Port Said.....	July 30–Sept. 23... do.....	77 3	37 3	
Japan: Nagasaki.....	Dec. 3–9.....	3		
Java: East Java..... Mid-Java..... Samarang..... West Java..... Batavia.....	Oct. 15–21..... Oct. 24–30..... Nov. 2–8.....	5 1 9	2 1 1	Oct. 24–30, 1917: Cases, 10; deaths, 2. Nov. 2–8, 1917: Cases, 12; deaths, 1.

CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued.**Reports Received from Dec. 29, 1917, to Jan. 11, 1918. ¹****CHOLERA.**

Place.	Date.	Cases.	Deaths.	Remarks.
India:				
Bombay.....	Oct. 28-Nov. 3.....	2	1	
Calcutta.....	Sept. 16-Oct. 6.....		42	
Java:				
West Java.....				
Batavia.....	Oct. 19-Nov. 1.....	8	2	Oct. 19-Nov. 1, 1917: Cases, 14; deaths, 5.
Persia:				
Mazanderan Province—				
Astrabad.....	July 31.....			Present.
Barfrush.....	July 1-27.....	34	23	
Chahmirzad.....				25 cases reported July 31, 1917.
Chahrastagh.....	June 15-July 25.....	10	8	
Kharek.....	May 28-June 11.....	21	13	
Sari.....	July 3-29.....	273	144	
Yekchambe-Bazar.....	June 3.....	6		
Siam:				
Bangkok.....	Sept. 10-22.....	1	1	

PLAGUE.

British Gold Coast:				
Axim.....	Jan. 8.....			Present.
Ceylon:				
Colombo.....	Oct. 14-27.....	4	3	
Egypt:				
Port Said.....	July 23-29.....	1	2	Jan. 1-Nov. 15, 1917: Cases, 728; deaths, 398.
India:				
Bombay.....	Oct. 28-Nov. 3.....	18	17	Sept. 16-29, 1917: Cases, 18,653; deaths, 13,810. Oct. 1-7, 1917: Cases, 13,571; deaths, 9,390.
Calcutta.....	Sept. 16-'9.....		2	
Karachi.....	Oct. 1-Nov. 10.....	6	5	
Madras Presidency.....	Oct. 31-Nov. 6.....	1,555	1,207	
Rangoon.....	Oct. 21-27.....	9	10	
Siam:				
Bangkok.....	Sept. 16-22.....	1	1	
Straits Settlements:				
Singapore.....	Oct. 28-Nov. 3.....	1	3	

SMALLPOX.

Algeria:				
Algiers.....	Nov. 1-30.....	1		
Australia:				
New South Wales.....				Oct. 12-Nov. 20, 1917: Cases, 6.
Abermain.....	Oct. 25-Nov. 20.....	3		
Warren.....	Oct. 12-13.....	3		
Brazil:				
Pernambuco.....	Nov. 1-15.....	1		
Rio de Janeiro.....	Sept. 30-Oct. 27.....	313	88	
Canada:				
Ontario—				
Hamilton.....	Dec. 16-22.....	1		
Sarnia.....	Dec. 9-15.....	1		
Quebec—				
Montreal.....	Dec. 16-22.....	1		
China:				
Amoy.....	Oct. 22-Nov. 4.....			Present.
Dairen.....	Nov. 18-24.....	1		
Mukden.....	Nov. 11-24.....			Do.
Shanghai.....	Nov. 18-25.....	2	12	Cases, foreign; deaths among natives.
Tientsin.....	Nov. 11-17.....	2		
Egypt:				
Alexandria.....	Nov. 12-18.....	1		
Cairo.....	July 23-29.....	2	1	
France:				
Lyon.....	Nov. 18-Dec. 9.....	4	1	In hospital. From Givors.
Great Britain:				
Birmingham.....	Nov. 11-17.....	19		
India:				
Madras.....	Oct. 31-Nov. 6.....	4	1	

¹ From medical officers of the Public Health Service, American consuls, and other sources. For reports received from June 30, 1917, to Dec. 28, 1917, see Public Health Reports for Dec. 28, 1917. The tables of epidemic diseases are terminated semiannually and new tables begun.

CHOLERA, PLAGUE, SMALLPOX, AND TYPHUS FEVER—Continued.**Reports Received from Dec. 29, 1917, to Jan. 11, 1918—Continued.****SMALLPOX—Continued.**

Place.	Date.	Cases.	Death.	Remarks.
Italy:				
Turin.....	Oct. 29-Nov. 25...	77	16	
Java:				
Mid-Java.....	Oct. 10-23.....	15		
West Java.....	.....			Oct. 19-Nov. 1, 1917: Cases, 49; deaths, 8.
Mexico:				
Mazatlan.....	Dec. 5-11.....		1	
Mexico City.....	Nov. 11-17.....	9		
Newfoundland:				
St. Johns.....	Dec. 8-21.....	12		
Philippine Islands:				
Manila.....	Oct. 28-Nov. 10...	3		
Portugal:				
Lisbon.....	Nov. 4-10.....	1		
Portuguese East Africa:				
Lourenço Marques.....	Aug. 1-Sept. 30.....		4	
Russia:				
Moscow.....	Aug. 26-Oct. 6...	22	2	
Petrograd.....	Aug. 31-Oct. 27...	59	3	
Spain:				
Seville.....	Oct. 1-30.....		9	

TYPHUS FEVER.

Algeria:				
Algiers.....	Nov. 1-30.....	2		
Australia:				
South Australia.....	.....			Nov. 11-17, 1917: Cases, 1.
Canada:				
Ontario—				
Kingston.....	Dec. 2-8.....	3		
Quebec—				
Montreal.....	Dec. 16-22.....	2	1	
Egypt:				
Alexandria.....	Nov. 8-25.....	33	7	
Cairo.....	July 23-29.....	23	8	
Greece:				
Saloniki.....	Nov. 11-24.....		19	
Japan:				
Nagasaki.....	Nov. 26-Dec. 2...	1		
Java:				
Mid-Java.....	.....			Oct. 10-16, 1917: Cases, 12.
Samarang.....	Oct. 17-23.....	3		
West Java.....	.....			Oct. 19-Nov. 1, 1917: Cases, 21; deaths, 4.
Batavia.....	Oct. 18-Nov. 1.....	13	3	
Mexico:				
Aguascalientes.....	Dec. 15.....		2	
Mexico City.....	Nov. 11-Dec. 15.....	337		
Russia:				
Archangel.....	Sept. 1-14.....	7	2	
Moscow.....	Aug. 26-Oct. 6...	49	2	
Petrograd.....	Aug. 31-Oct. 27...	22		
Sweden:				
Goteborg.....	Nov. 18-24.....	1		
Tunisia:				
Tunis.....	Nov. 30-Dec. 6.....		1	

X