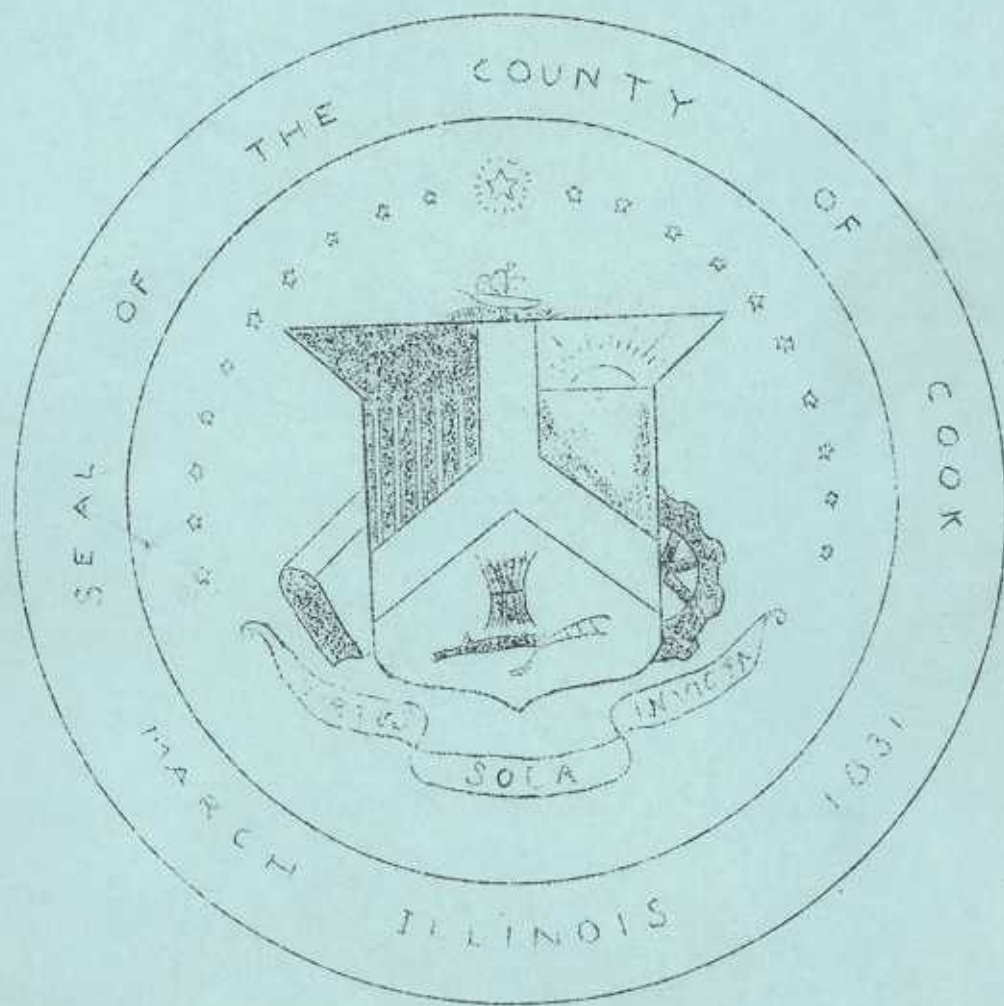


COOK COUNTY
PUBLIC HEALTH UNIT
ANNUAL REPORT



JULY 1, 1942 - JUNE 30, 1943

VOL XV NO. 2

COOK COUNTY PUBLIC HEALTH UNIT

ANNUAL REPORT JULY 1st, 1942 - JUNE 30th, 1943.

FOREWORD AND ACKNOWLEDGMENT:

The Cook County Public Health Unit was established on July 1st, 1940 as a cooperative public health agency sponsored by the Cook County Board of Commissioners, the Illinois Department of Public Health, and the United States Public Health Service. The jurisdiction of this Unit, as defined by the Director of the Illinois Department of Public Health, consists of Cook County exclusive of those cities which have a full-time health department (Chicago, Evanston, Winnetka, and Kenilworth). This area comprises 706 square miles with a population of 585,780 persons (1940 census).

In general, modern public health practice is that of decentralization of community health services. The local public health official assumes the responsibility for all detail work while the central or governing body, composed of experts in the different fields determines the various types of administrative procedure under which the local unit shall operate. Supplementary services which are of a highly technical nature, as geological surveys, are made available whenever such assistance is needed by the local units.

The practicability and effectiveness of this plan for local health units was first demonstrated when the Cook County Public Health Unit was established on July 1st, 1940. Time has since proved the experiment a worthy one and as a result, several similar health units have been instituted and are functioning within the State of Illinois.

President Clayton F. Smith and the members of the Board of Commissioners of Cook County should be commended for their active promotion of what is best in the field of local public health administration.

The carrying out of a county Public Health program, is dependent, to a large degree upon the participation of the community either as individuals or through representative organizations. We desire to acknowledge with thanks the cooperation of the:

Board of Commissioners of Cook County
Cook County Bureau of Public Welfare
Cook County Superintendent of Schools
Illinois Department of Public Health
United States Public Health Service
Advisory Board of the Cook County Public
Health Unit
Chicago Health Department
Cook County Chapter, National Foundation
for Infantile Paralysis, Inc.
Chicago Medical Society

Illinois State Medical Society
Chicago Dental Society
Illinois State Dental Society
Dental Hygiene Institute of Chicago
The Tuberculosis Institute of Chicago
and Cook County
The American Red Cross - Chicago Chapter
Council of Social Agencies of Chicago
Illinois and Cook County League of Women Voters
Cook County Friends of Public Health

and to all local Health Officers, Municipal and Township officials, local Parent-Teacher associations, members of the press, various lay and professional organizations and to many others of the public who have been of so much assistance to us during the past year.

War has again emphasized the importance of Public health. We believe that "the protection of the public health is the first line of National Defense." We are indebted to all cooperating agencies for the aid they have given us to achieve our aim.

There is still a great deal more to be done. With every hand cooperating we know we cannot fail.



E. A. Piszczek, M.D., M.P.H.
Director
Cook County Public Health Unit.

UNDER THE SUPERVISION OF THE
BOARD OF COMMISSIONERS
OF COOK COUNTY

CLAYTON F. SMITH, President
FRANK DORRYTZKE
WILLIAM BUSSE
ELIZABETH A. CONKEY
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**COOK COUNTY
BUREAU OF PUBLIC WELFARE**

JOSEPH L. MOSS
DIRECTOR

PUBLIC HEALTH UNIT

737 S. WOLCOTT AVENUE
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E. A. PISZCZEK, M. D., M. P. H.
HEALTH OFFICER

December 1, 1943

Honorable Clayton F. Smith, President
Board of Commissioners of Cook County
County Building
Chicago, Illinois

Gentlemen:

It is an honor and distinct privilege to present to you and the members of the Board of Commissioners of Cook County, the annual report of the achievements of the Cook County Public Health Unit for the fiscal year, ending June 30, 1943.

Respectfully submitted,

E. A. Piszczek

E. A. Piszczek, M.D. M.P.H.

Health Officer

Cook County Public Health Unit

EAP;lp

PERSONNEL OF THE COOK COUNTY PUBLIC HEALTH UNIT

(All personnel in the Cook County Health Unit meet the qualifications recommended by the conference of State and Territorial Health Officers for health officers and other public health personnel.)

ADMINISTRATION:

E. A. Piszczek, M.D., M.P.H., Director
Edward Kopriwa, Administrative Assistant

MEDICINE:

John B. Hall, M.D., M.S.P.H.
Robert Dessent, M.D., M.P.H.
Joseph Svec, Communicable Disease Investigator
Arthur Fox, Communicable Disease Investigator

ENGINEERING:

Robert R. de Jonge, B.S. (Entered U.S. Navy, April, 1943)
Benn J. Leland, M.S. (Entered U.S. Army, February, 1943)
Steven W. Nichiporuk, B.S.

DENTISTRY:

James F. Hawkins, D.D.S., M.P.H.
Mary A. Eagan, R.N., M.A.

NUTRITION:

Marie E. Dohm, M.A.

NURSES:

Madeline Roessler, R.N., M.A., Supervisor	
Teresa Bernoudy, R.N.	Claudia Mangham, R.N.
Luella Callahan, R.N.	Frances Martin, R.N.
Bridget Campbell, R.N.	Mabel Murray, R.N.
Grace Cole, R.N.	Irene O'Connor, R.N.
Frances Erickson, R.N.	Margaret Phelan, R.N.
Mary Flynn, R.N.	Hilda Schulze, R.N.
Ferne Hobson, R.N.	Myrtle Sorenson, R.N.
Rose Hoy, R.N.	Margaret Stealey, R.N.
Juanita Huffman, R.N.	Alouise Steward, R.N.
Erna Keel, R.N.	Frances Svoboda, R.N.
Mary Maloney, R.N.	Florence Wendt, R.N.

SECRETARIES:

Ellen Bertinelli	Eleanor Norton
Lorraine Johnson	Mary Pearce
Marion Sullivan	

PART-TIME SOCIAL HYGIENE CLINICIANS:

E. G. Brust, M.D.,	Victor La Marre, M.D.,
F. B. Deardorff, M.D.,	Andrew Nady, M.D.,
E. A. Harris, M.D.,	W. M. Winston, M.D.,

PART-TIME PEDIATRICIANS:

E. J. Brophy, M.D.	M. A. Norval, M.D.
J. A. Forbrich, M.D.	S. S. Snider, M.D.
E. Eisenberg, M.D.	W. M. Winston, M.D.
M. R. Jackson, M.D.	M. Zeisler, M.D.

COMMUNICABLE DISEASE CONTROL PROGRAM

The control of the communicable diseases in the County is based on standards set up by the State Health Department, and set forth in its "Manual for the Control of Communicable Diseases." As part of this program there is constant effort made to promote recognized immunization procedures in the pre-school and school populations - - such as vaccination against smallpox and immunizations against whooping cough and diphtheria. In certain instances immunization against typhoid fever has been recommended. Most of the communities in Cook County have approved water and sewage supplies, however, during the early spring two cases and several suspect cases of typhoid fever developed in the area of Robbins in the southern part of the County. Many shallow wells are sources of drinking water, and an immunization program protected over two-thirds of the population living this area.

Certain diseases such as anterior poliomyelitis, tuberculosis, and the venereal diseases require special procedures for their control, and special programs have been set up.

An additional aid in the control of communicable diseases has been the reporting of these diseases by the local health officer to this Unit instead of to the State Health Department in Springfield. After recording the necessary information, the reports are then forwarded to the State Health Department. In this way the Unit becomes aware of problems in its jurisdiction from 24 to 96 hours earlier than previously, and is able to institute the proper measures for the control of communicable diseases much more quickly and efficiently.

TUBERCULOSIS

Every case of tuberculosis reported in the area is contacted and an effort is made to see that the patient is admitted to a sanatorium if such care is necessary. In addition, all close contacts of known cases are X-rayed to determine whether the infection has spread to other members of the family. The program is carried out with the assistance of all interested private agencies. An additional field in case finding has been opened through Selective Service examination of inductees. Those found positive are referred to the local branch of Medical Advisory Board No. 39 for follow-up. Contacts of these deferred selectees are visited and advised to have physical examinations and X-rays. These activities are recorded in the statistical analyses at the end of the report. At the present time hospital beds are available for care of tuberculosis patients. However, in time of war, because of the transfer of populations and increased strain of industrial activity, an increase in tuberculosis can be expected. This is liable to overload our limited hospital facilities.

VENEREAL DISEASE CONTROL

This program has steadily increased in size and importance. A perusal of the figures at the end of this report will show some of the activities. The six venereal disease clinics are showing a steady growth. With additional personnel the Unit is able to do a more intensive job. An additional case finding program has been the pre-induction examination of selectees. The Cook County Public Health Unit has

been appointed a Branch of the Medical Advisory Board No. 39 of the Selective Service System. In this capacity we follow up the selectees found to have positive blood tests in these examinations, and in cooperation with the twenty-six Draft Boards in our area are preparing these selectees for induction. Recently the Army has begun to induct a small number of those finally diagnosed as having syphilis, but all infected individuals are kept under regular treatment by Army Physicians as long as such medical care is necessary.

Another part of our program that has been enlarged, has been the cooperation between this organization and the Armed Forces in locating sources of infection and sex contacts of men found to have a venereal disease. The Communicable Disease Investigators attached to the Unit contact these persons individually so that there is no time wasted in getting them medical attention so that they do not infect others.

An additional aid in case finding has been the increased number of blood tests taken in pre-employment examinations. Many industrial plants have enlarged their facilities and others have been built recently in Cook County. All employees found positive are contacted to determine their venereal disease status.

Another potentially infected group is high school students. These are our future soldiers and mothers. In this time of war, when emotions are aroused, their welfare is of vital importance. Efforts are being made to arouse school boards to the necessity of protecting their health by routine blood examinations. This adolescent group needs sex education without which a blood test has no permanent meaning. Our problem of the control of venereal diseases is to spread this information to our po-

tentially infected groups in order to reduce the incidence of the venereal diseases. Widespread knowledge of the dangers of venereal diseases is the basis of any program for their reduction and elimination.

POLIOMYELITIS

During the calendar year 1942, there were 72 cases of poliomyelitis reported in suburban Cook County, exclusive of Chicago. Of these, only one proved fatal. This total number was slightly higher than 1941, when 54 cases and 6 deaths were recorded.

All of the reported cases of poliomyelitis were seen and diagnosis confirmed by the County Health Officer. The patients were then sent to the Cook County Contagious Hospital for treatment whenever such care was indicated. A small number of cases were treated at home during the entire course of the disease.

In addition to the medical consultation service provided for the family physician, the Unit also extended the services of nurses trained in the Kenny Method of treatment. These patients also benefited through the careful supervision of the physiotherapist, who was likewise trained in the Kenny system.

There were 623 poliomyelitis visits made to patients in the suburbs during the past fiscal year. Many of these calls were consultation calls, made by the health officer to determine with the family physician whether the patient had poliomyelitis or some other disease.

In all cases the Public Health Unit acted as the clearing house for further diagnostic and hospital care, if such was necessary.

PUBLIC HEALTH NURSING PROGRAM

Public health nursing services have been offered in Cook County for the past 27 years. Today nurses are serving 17 townships in Cook County, including towns and villages, and an organized community health program is being offered in each area.

The science of public health extends far beyond its former circumscribed area. It necessarily must be concerned with all the factors which make for healthful living. It is the specific responsibility of public health to provide through community effort, those services for the saving of life, the prevention of disease, and the restoration to health which the individual or family is unable to provide as well by individual effort. This concept of public health is of significance to public health nursing since it is responsive to expansion and development in the allied field of medical science and public health. In a field in which the demands on the worker are as diversified and complex as they are in public health nursing, supervision is indispensable to the best results. Supervision is accepted as a vital feature in the organization of public health services, consequently a new supervisor of nurses as appointed to the Cook County Public Health Unit in December, 1942 to assume the leadership of the nursing staff.

NURSING PERSONNEL

To date 24 nurses are serving on the staff of the Cook County Public Health Unit. Twelve of these nurses are provided through County funds. The other twelve nurses are provided through Federal and State funds. During the past six months one nurse has left for service and one nurse promoted to a supervisory position with the State Department of Public Health. Four of these

nurses have been appointed in the past four months and during the period of transition the older staff nurses have been most cooperative. The seasoned experience of the nurses who have given years of service in Cook County has been most valuable to the newcomers.

Since the National Organization for Public Health Nursing and the American Public Health Association have set up, as a minimum standard, one year of postgraduate work in public health nursing and the State of Illinois has also taken steps to improve the professional status of the public health nurse in Illinois and requires at least one semester of postgraduate study and one year of experience or one year of postgraduate study, the Cook County Public Health Unit has given the nursing staff every opportunity to pursue further education in the field of public health nursing. Consequently, the members of the nursing staff have availed themselves of the opportunities and during the year eleven nurses attended classes; three have achieved one year of postgraduate study in public health nursing; and three have received degrees in public health nursing. During the summer three nurses were on leaves-of-absence for educational work through scholarships.

The nursing staff on the job has continued to promote staff educational programs. Besides the regular monthly meeting, the staff is now working in small committees and their first project is the public health nursing manual.

PUBLIC HEALTH NURSING SERVICES

In promoting a community-wide public health program the family health service is the backbone of such a program and any of the following service may be

rendered - in the home visit, maternal, infant, preschool, school, communicable disease, tuberculosis, venereal disease, crippled children and morbidity.

In addition group work is vitally important in the promotion of the health program and may include adult classes, work with the community organization interested in health. Finally, the coordination of the specialized services of the Cook County Public Health Unit, such as sanitation, dentistry, nutrition, and preventive medicine, which enrich the community health program are dependent on the use and vision of the district nurse.

MATERNAL HYGIENE

The maternal program has almost tripled during the past year which may be an indication that more emphasis has been placed on this program. Another reason is the program offered through the Children's Bureau for maternal care to wives of servicemen. There was an increase of 216 cases admitted to antepartum nursing service. However, an average of only 2 visits per case were made which means the cases received care late in pregnancy. This problem is more than the job of the physician and public health nurse. It means the public still needs to be better informed as to the benefits of early and adequate prenatal care.

The postpartum program also presents a problem as some of the hospitals are pressed for bed capacity and several of the hospitals release patients between the 5th and 7th day, which increased the need for nursing care in the home. The cases admitted to postpartum care increased 121 this year but there were only approximately 1½ visits per case which indicates that inadequate supervision was given. It is probable that the sources of referral of cases are not aware of the services which the

public health nurse may render and cases are not reported to the nurse until the late postpartum period.

INFANT AND PRESCHOOL HYGIENE

The health supervision to infants and preschools has been a well established program in Cook County for many years. Thirty-three child health conferences are held regularly in those areas covered by the Cook County Public Health Unit. New conferences in the Merrionette Park and Mannheim districts were established. The Bellwood child health conferences increased this year from 1919 to 2329. The infants were seen at conference on an average of 3½ times during the year and the preschool an average of 1 visit. The total number of visits to child health conferences for the year was 7,121.

The public health nurses are in attendance at all child health conferences and follow-up home visits are made on those infants and preschool children where indicated. A total of 3827 visits were made in 1942-43. Infants in need of home supervision not registered at the conference are also visited. A very fine effort has been made by the nursing staff to provide health supervision to those infants registered at the child health conferences. However, an effort needs to be made to offer more health instruction to the mothers of infants in all homes in the community.

SCHOOL HYGIENE

School nursing services in the 156 schools have always been available. One of the major functions of the public health nurse in the school health program is the active assistance lent by her in the formulation of a health program which is basically educational. Through the many activities the student

has an opportunity to experience healthful living. The addition to the staff of another public health physician, to act as school health director has given the staff opportunity to enrich this program. Several communities continue to provide their own medical and dental services in the school. A total of 9,356 children were examined this year, of this number of children examined 943 parents were present, which is a small increase. There is an effort to make the examination an educational experience for both the child and the parent with the assumption that the parent will assume full responsibility and immediately follow the recommendations indicated.

An effort has been made in this newer emphasis in the school health program to assist both the parent and the teacher to take a more active role, not only in the planning but in the many services rendered. During the year 10,171 consultations were held with teachers and 5,245 with parents. Vision tests, hearing tests, and weighing and measuring are still being done in many of the schools. It is hoped that soon the nurse may be able to demonstrate and assist the teacher in this mass screening so that she may be released for further development and coordination of the school and community health program. There was a decrease of 148 classroom health talks which may indicate that the teacher is integrating more health in the general curriculum.

Orland Park, Flossmoor, Niles High School, and Mannheim are some of the schools that have enlisted the services of the Cook County Public Health Unit in developing school health activities.

During the next year it is planned to limit health examinations to the first, seventh grade and new students. All

those students presenting a physical, mental or emotional problem are to be selected cases and be checked as necessary. An effort is to be made to increase the number of parents present at the examinations.

COMMUNICABLE DISEASE CONTROL

The prevention and control of communicable disease is always considered a very important part of the nursing program. It is satisfying to see that there has been a drastic reduction in the need for preventive measures, indicating that for the previous two years the population was better protected. Smallpox vaccinations decreased from 19,018 to 5,233; diphtheria immunizations decreased from 9,306 to 3,753. Emphasis was placed on whooping cough immunization and there was an increase of 650 infants and preschool children immunized. Areas increasing preventive programs are Sunnycrest, Mt. Prospect, Lansing, Franklin Park and Mannheim. Orland, another rural community, has felt the need for protection against tetanus and the local physician immunized 250 children. Recently the community of Robbins was exposed to typhoid fever. Through the efforts of the health officer, sanitary engineer and nurse 2,260 of the population were protected against typhoid fever.

During the school year teachers and nurses work together in the control of communicable disease. The nurse also works closely with the health officer in visiting each case of communicable disease for the purpose of demonstrating the actual care of the sick, and teaching isolation procedures.

Home visits increased slightly over last year. There are no figures to show the average visits per case. However, this increase may be the result

of improved methods of reporting.

VENEREAL DISEASE CONTROL

The venereal disease control program has been steadily going forward during the past year. The nursing staff has been increased by the addition of one full time nurse and three nurses who are giving part time service. These part time nurses are secured from the generalized public health nursing staff and are receiving the regular in-service training. In time, we hope, that all the staff nurses will avail themselves of the opportunity for this type of training.

The clinic nurses are responsible for clinic procedures and the smooth running of their clinics. They assist the clinicians at clinic sessions, follow-up delinquent patients, suspected contacts and sources of infection. Each nurse is responsible for the Selective Service examining station in her district. Every selectee having a positive serology report is followed until a final disposition is made of the case; either he does not have syphilis or he does have the disease and is placed under treatment.

NON-COMMUNICABLE OR MORBIDITY SERVICE

Morbidity services include the demonstration and teaching of the care of medical and surgical cases. During the past year the cases admitted increased by 1,203 but the most encouraging angle is that the average visits per case this year were two, while in 1941-42 they were five, which indicates that more patients were given service and a greater opportunity for teaching resulted. During the stress of War, patients are released early from overcrowded hospitals and there is a greater need for increasing the number of

patients served. We know that national health agencies encourage well organized public health departments to offer morbidity services as a part of the whole program. When the working relationships with our medical institutions have been completed, greater opportunities for a better source of referral will develop in this area of public health nursing.

TUBERCULOSIS CONTROL

Tuberculosis cases are referred through many channels and the nurse continues to assume a major role of case finding in the program. The chest clinics of The Tuberculosis Institute of Chicago and Cook County and facilities of other health agencies are used for medical supervision. The individuals admitted to nursing supervision increased by 56. The tuberculosis problem has not shown any serious change to date, however, during these days when the war effort presses both the middle aged and the adolescent, the nurse must constantly be on the watch for new cases. Tuberculosis education is constantly being integrated in all school and community health programs.

CRIPPLED CHILDREN

The Crippled Children's program is being carried on in cooperation with the University of Illinois, Division of Services for Crippled Children. In 1938 a county-wide survey was made and many new cases were found, however, it was not until a few months ago that the program was revived and the new orthopedic consultant was available to Cook County. It is planned to have the community nurse offer these services along with other family health services. In order to better prepare the nursing staff to integrate this program with other services, quarterly meetings on

orthopedic problems, sponsored by the University of Illinois, Division of Services for Crippled Children, and the Cook County Public Health Unit, are being offered to all the public health nursing staffs in Cook County. The consultant is also available for individual consultations and home visiting. To date the individuals admitted to service has increased from 46 to 162 and home visits from 237 to 304. There is still a tremendous program to carry on as 1,300 crippled children are already registered in Cook County. Perhaps the most lasting result of the program will be the nurse becoming more orthopedic-conscious.

COMMUNITY EDUCATION

The nursing staff has always participated in community health activities. The past year, however, has given the nurse an opportunity for stressing more formal community education. American Red Cross classes in home nursing have been offered in the following communities: Morton Grove, Mt. Prospect, Wheeling, Bellwood, Franklin Park, River Grove, Lemont, Flossmoor, Hazelcrest, Lansing, Markham, Matteson, Midlothian, Oak Lawn, Orland Park, Palos Heights, Robbins, South Chicago Heights, Steger, Bartlett, Ontarioville, Palatine and Norwood Park. In Lemont, Franklin Park and Orland Park these classes were taught in the high schools. In a few of the communities local, retired nurses assisted the community in this program.

Another result of the long planned community health education program is the attitude of acceptance of the public regarding not only the nurse but the entire staff of the Cook County Public Health Unit. In turn the communities have become more health conscious and the public health staff is always welcomed to participate in community health activities. The failure of many of the local boys to meet the standards

of health required for military service has made the community aware of the weakness and also been an incentive for the community to request more health education.

LAY HEALTH COMMITTEE

The Friends of Rural Public Health is practically as old as the nursing service. Their service and loyalty has grown with the years. Many women throughout the County have given of their time unstintingly, not only in local community work but in our county-wide executive board. A word of praise should go to all of these splendid women who have contributed so much to the health program in the Cook County Public Health Unit. The potential usefulness of these friends is almost unlimited. In the local areas they have planned and worked on their own community programs. Those women serving on the executive board have a large responsibility in being leaders and interpreters of new public health movements. In a recent election Mrs. Harold E. Henke of Orland Park was elected President, and Mrs. Stewart Knarr of Flossmoor, Secretary.

The following members were appointed to the executive board: Mrs. C. Greaves; Mrs. C. Stulik; Mrs. W. Callan; Mrs. Plahn; Mrs. P. Rynberk; Mrs. D. Turner; Mrs. J. Collins; Mrs. Drumm; Mrs. G. Kristinick; Mrs. G. Salmon; Mrs. C. Frank; Mrs. R. Stoll; Mrs. R. Town; Mrs. H. Mortensen; Mrs. A. Schroeder; Mrs. O. Anderson; Mrs. J. Grenke; Mrs. J. Buelting; and Mrs. Ackley.

The following members were recently appointed to be District Chairmen of Public Health, Child Hygiene, and Nursing, by the Chairmen of Public Health of the Illinois Federation of Women's Clubs: Mrs. L. Reitman; Mrs. B. Allard; Mrs. L. VonPerbandt; Mrs. A. Fink; Mrs. F. Christenson; Mrs. R. Palmer; Mrs. C. Leiman; and Mrs. W. Skinner.

The growth and progress of the local community health councils has been encouraging. A well organized council has been now established in Orland Pk. Many other communities are now working toward better organized community health programs. Herrionette Park, Mannheim, Robbins, Hazelgreen and Atwood Heights have taken steps in this direction. The pioneers should also be mentioned, for it was community organizations like South Chicago Heights, Palatine, Hazelcrest and Franklin Park, which set the pattern for community participation many years ago. In the last analysis, it is these selected groups who really interpret public health to the larger public.

In addition, the Cook County Public Health Unit, is interested in the activities of the public health nurse in the County at large. In January, 1945, a survey was made of the public health nurses in Cook County, outside of Chicago, Evanston and Winnetka; the results showed there were 25 nursing agencies and 90 public health nurses. The type of agencies and the number of nurses in each agency are as follows: Cook County Public Health Unit - 24 nurses; Five health departments - 11 nurses; The Tuberculosis Institute of Chicago and Cook County - 26 nurses; Fifteen boards of education - 23 nurses; Visiting Nurse Associations - 5 nurses; and 1 infant welfare nurse.

This report indicates that these many small agencies cannot provide adequate supervision and they will look to the official agency for leadership. An additional problem is the larger community where as many as six different nursing agencies are offering specialized public health nursing services. The result is well known, a waste of nursing personnel and an overlapping of services. The answer, of course, is the coordination of these services. During the strain of War, conservation of personnel and program are essential. Soon these nursing agencies must meet together and plan a well-coordinated community health program. Efforts have been made by the Cook County Public Health Unit to act as a clearing house to both health and social agencies for the purpose of developing better working relationships which will ultimately mean better family health service.

The present War has created an acute shortage of nurses. In the United States alone, 40,000 more public health nurses are still needed, for the public health nurse is in a critical position to protect the home front. In order to meet this need the public health nurse must develop more effectively the community health program through the coordination of all health services; she must be influential in all community activities related to health; in fact she is one of the most important figures in the modern movement for the protection of the public health.

SCHOOL HEALTH PROGRAM

Through the addition of a full time director of school health to the staff of the Cook County Public Health Unit in February, 1943, the school program was expanded considerably and greater emphasis placed on the school health program. Immunizations against preventable diseases, such as diphtheria, typhoid fever, whooping cough, and vaccinations against smallpox were completed on a larger scale than heretofore. Intensive follow-up of children found to have remediable, physical defects was put into effect in order that the maximum number of corrections became a reality.

A schedule of services was set up which included four visits by the public health physician to all schools in which the Unit assists with the promotion of the health program. During these visits, the first and seventh grade children were examined; immunization procedures against diphtheria, smallpox and typhoid fever were carried out.

Approximately 5 to 15% of the children examined in various schools needed medical care and continuous follow-up. All pupils needing such service are designated as "selected children" and are re-examined upon each visit by the Director of School Health. As a result of teacher, nurse, and parent consultation, any child during his school life may become a member of the "selected" group and thereupon receive the necessary supervision.

The physical examination which includes a period of 5 to 15 minutes is of distinct educational value particularly when the parent is present. Teacher participation with this phase of the

program is also stressed. The number of immediate corrections increased in direct proportion to the number of parents present during the examination because the medical findings are carefully interpreted to both parent and child. Also the results of preliminary height and weight measurements, in addition to the results of vision and hearing tests are carefully considered.

High schools require special programs to meet health problems and consist of special requests for physical examinations for graduating classes or those students participating in various athletics. Tuberculin testing and blood testing is also a part of the medical service extended to this age group when so desired. As a large percentage of high school graduates are entering the Armed Forces or seeking employment in vital war industries, it is imperative that all should be physically fit.

During the year conferences were held with various school boards for the purpose of outlining a definite program of school health activities according to the recommendations of the American Public Health Association.

Medical services of the Unit are offered in an advisory capacity to local physicians, while a special effort is made on the part of the Unit to provide the necessary school service on a demonstration basis for the benefit of teachers and school boards. When the war emergency is over and the necessary medical services are available, this activity will be modified so consultation service will be provided at all times.

DENTAL PROGRAM

On December 1, 1942, the preschool and maternity mother's clinics again began to function through funds allocated to Cook County Public Health Unit from the Children's Bureau of the U.S. Department of Labor. The staff dentist is respon-

sible for the organization and administration of these clinics which are actually operated by practicing dentists of Cook County. The private dentists are selected, with the aid of the Chicago Dental Society, because of their

individual interest in dentistry for children. Evidence of community need for such services acts as a guide in determining the location of the clinics.

During the past year this program offered similar services to the children of the grade and high school age, clinics being conducted by eight participating private dentists.

In the month of February the school dental clinic at Wheeling Grade School was officially opened. During the following weeks the indigent children of the school received actual remedial service from the staff dentist.

The clinic at the Central School at Des Plaines was also operated by the staff dentist. The block system of functioning, initiated during the previous year, was followed. Consequently, full-time remedial dental service was extended until the eligibility list was exhausted.

While a definite period of time on the part of the staff dentist has been devoted to the functioning of a remedial service program at the Wheeling dental clinic and the Des Plaines dental clinic, nevertheless, the most emphasis and time is directed toward individual and community dental health education.

The Division has now in progress a survey of school and clinic dentists in rural Cook County. When complete this survey will include such information as, location of program, number of dentists, number of days spent in classroom or clinic, by whom dentist is employed, by whom paid, and other related information. This survey will be a helpful tool not only to the Division but to all interested in dental health.

As in the past, the Chicago Dental Society through its committee on Public Relations, cooperated with the Division. This committee's work and the organization of the membership within the Society have made it easy for the Division of Dental Health to cooperate.

NUTRITION PROGRAM

A year and four months has passed since our Nutrition program was first inaugurated to improve the County's knowledge of nutrition and stimulate development of better food practices. Some progress has been made, but there is still much more to be done, and there always will be along the lines of nutrition education. Habits are changed slowly. Eating habits and practices even more slowly than others. We know that each individual must learn for himself what foods are needed for good nutrition and must improve his own nutrition by eating the foods he needs. With shortages of certain food made inevitable by the war, knowledge of good values and improvement of food habits become doubly important.

A restatement of our aims or objectives is to plan, promote and carry out a nutrition program of activities that will

aid to bring about better health for all of the citizens of Cook County and to further stimulate a desire on the part of the individual to have better nutrition practices in his everyday living.

To answer a question that may be in your minds as to just what are the duties of a Public Health nutritionist? A summary may be in order. The nutritionist, with a public health agency, primary function is to strengthen the nutrition aspects of the service already being given by all public health workers. She tries to help other workers to appreciate not only the importance of the nutritional status of all individuals, whom they reach but the need of integrating sound information on nutrition with whatever treatment or educational service they offer.

Within her own agency the Public Health Nutritionist is usually responsible for nutrition phases of all programs for in-service education. Individual and group conferences are held with such professional workers as physicians, public health nurses, dentists and social workers.

The Nutritionist is responsible for preparation of teaching materials, such as charts, posters, pamphlets for both professional staff and those whom the Unit serves. The Nutritionist makes some home visits to become familiar with type of problems and observe teaching done by the nurses and to demonstrate to the nurse how to present nutrition information simply and efficiently.

RED CROSS

The cooperation of the Cook County Public Health Unit with the nutrition service of the Chicago Chapter of the American Red Cross has been outstanding. In the past 12 months the Cook County Nutritionist has taught fourteen Red Cross Nutrition classes of 20 hours each. Nearly 400 persons have been enrolled in these classes, and four-fifths of the students have completed the requirements for the certificate. Classes have been taught in Oak Lawn, Franklin Park, Schiller Park, Fairview Heights, in Norwood Park, the James Giles and Union Ridge communities, Mt. Prospect, Oak Park, Suburban Social Workers, Maywood, Oak Forest, Lemont, two Civilian Defense groups in Chicago, and in Robbins, a group of Negro women were enrolled in a course. The Cook County Public Health Nurses assisted in the organization of the classes.

The Nutritionist has cooperated in another Red Cross program. In the Home Nursing Classes taught by Cook County Public Health Nurses and other nurses, the Nutritionist has conducted the Unit on Nutrition. A total of 30 such classes with an attendance of over 1000 persons have been conducted.

A Canteen Course was started in Lemont, with an enrollment of 22 persons, and taught by the Cook County Nutritionist.

BUREAU OF PUBLIC WELFARE

The Nutritionist met regularly with each group of mothers and older girls attending Camp Reinberg (a recreation camp, maintained by the Department of Public Welfare) and discussed the need of an adequate diet and proper food practices. A Nutrition Class was conducted for the Social Workers in the suburban area.

COOPERATION WITH NURSES

The Nutritionist has assisted at the Child Health Conference with exhibits, demonstrations or interviews and conferences to stimulate the mother's interest in nutrition. Child Health Conferences attended were held in Glenview, East Hazelcrest, West Elm, Merrionette Park, Bellwood, Lansing, Wheeling, Mannheim, Lemont, Palos Park, Palos Heights, South Chicago Heights, Oak Lawn, North Palos, River Grove, Robbins, Calumet Park and Atwood Heights.

COOPERATION WITH P.T.A.

The Parent-Teachers Associations are effective agents in spreading the nutritional knowledge into the community. The Nutritionist has presented her message before P.T.A. groups, in Orland Park, Robbins, North Palos, Glenwood, E. Maine School, Child Study Club of Park Ridge, Lansing, Fennoyer, Golf, and Lemont. Recently she took part in the Training School of P.T.A. for officers and executives of the Southern Area of Cook County.

Summer Roundup sponsored by P.T.A. were attended by the Nutritionist in the following communities: Wheeling, Mount Prospect, Robbins, South Chicago Heights, Flossmoor, Calumet Park and Mannheim.

The Nutritionist was guest speaker on Nutrition Facts before the following

groups: Women's Auxiliary, Chicago Medical Society; Palos Park Woman's Club; St. Gertrude's Parish Women's Auxiliary Franklin Park; Lansing Mother's Club; St. Gerald's Mother's Club, Oak Lawn; Cook County League of Women's Voters; Calumet Park Women's Clubs; Lansing Health Council; St. Vincent De Paul University; River Grove Lutheran Ladies Aid Society; Evanston's nurses --Visiting Nursing Association, cooperating Metropolitan Life Insurance Nurses, and Broadview Academy.

One of our activities has been to stress nutrition in the school health program and to aid in correlating and integrating nutrition in the curriculum. The Nutritionist cooperated in the following School Health Programs: Loment High School, Loment Elementary, Alsip School, Atwood Heights, James Giles, Union Ridge, Bloom Township, Oak Park parochial schools, Elk Grove, Morton Grove, and Mannheim School. Several school groups have been encouraged to continue their school lunch program under their own efforts. With criticism we should give more attention than ever to the adequacy of the meals our children get at school.

CONTINUED COOPERATION

We continued our cooperation with Loyola University, School of Public Health Nursing in teaching the applied Public Health Nutrition Course to the Public Health Nurse students. A special lecture on Diet and Nutrition was given by the Nutritionist in the Industrial Hygiene series sponsored by the U.S. Public Health Service.

A Nutrition Refresher Course was also given at Loyola University for graduates in Home Economics.

Cooperation was extended to the Agricultural Marketing Administration in promotion of school lunches and milk; Farm and Home Bureau Agents in gardens and food preservation; the Public Service Company in arranging for cooking demonstration and dehydration of fruits and vegetables; Oak Park Health Department in arranging certain parochial school health programs; Girl Scouts in

Lansing and Oak Forest; Volunteer Service Committee in the assembling of the Nutrition Issue of the "Broadcaster."

For professional advancement the Nutritionist attended the American Dietetic Association in Detroit, Michigan, Illinois Dietetic Association in Peoria, Illinois; Illinois Public Health Association and Illinois Nurses Association in Chicago; Refresher Course in Food Preservation at the University of Illinois, Urbana, Illinois; and two lecture courses at the University of Chicago on Advances in Nutrition and Straight and Crooked Thinking.

Nutrition films used over the year were Modest Miracle, Hidden Hunger, Fun in Food, Proof of the Pudding, Meat and Romance.

Right now our American public wants help and guidance in Nutrition and the health department has played a part in the national effort to improve the nutrition of the County. We have engaged in the following Wartime activities: meat rationing, food preservation, greater use of evaporated milk, budget meals demonstrations, use of pressure canners of all non-acid vegetables, planning for school lunches, food rationing and wise use of points, storage of fruits and vegetables.

In conclusion your attention is called to a paragraph taken from a recent Public Health Report by W. H. Sebrell and Walter Wilkins, U.S.P.H.S. on the Role of the Health Department in the National Nutrition Program. "Today we are facing perhaps the greatest and most complex problem in preventive medicine that this Country has ever had. It is the problem of food and nutrition. It has already taken too long for public health officials to recognize the malnutrition in a problem in preventive medicine. Obviously no health department is expected to do everything. The need is great; the public wants help; the situation demands it. Now is the time for public health to fill the gap in the lines of these forces which are fighting one of our most dangerous and insidious enemies -- Malnutrition."

PUBLIC HEALTH ENGINEERING PROGRAM

1 The staff of the public health engineering division during the first half of the year consisted of a senior engineer and two assistant engineers. Leaves-of-absence granted to the senior engineer and one of the assistant engineers to join the Armed Forces left only one engineer in this department.

2 The responsibilities of the public health engineering division may be summarized as follows:

3 1. Inspections and investigations made at the request of the Illinois Department of Public Health in cases where authority is vested in that Department.

4 2. Inspections and investigations made upon the request of local health officials who desire assistance with the correction or elimination of some public health problem. Advisory services furnished to official agencies such as the Federal Housing Administration and the Cook County Zoning Bureau are included in this classification.

5 3. Inspections and advisory service given directly to individuals or organizations in connection with their specific environmental sanitation problems.

6 The past decade has witnessed a definite migration of people from the larger cities to the unincorporated rural areas, subdivision, and the smaller cities and villages. During the past several years, many industrial plants dealing directly with the war effort, have been built in the rural areas thus creating certain public health problems at the plant as well as housing problems of the employees. This influx of people has resulted in a vast and important environmental sanitation problem.

7 This problem is accentuated by the tendency of the residents of the congested Chicago metropolitan area to seek recreation in the golf and country clubs, forest preserves, and eating establishments located in the rural districts.

PUBLIC WATER SUPPLIES

8 An inspection and advisory program of public water supplies has been formulated in cooperation with the Illinois

Department of Public Health. Under this program routine inspections are to be made, either by our public health engineers or jointly with the engineers of the State Health Department. There are 76 incorporated communities and five subdivisions having public water supplies. Of these, 49 communities are supplied by Chicago or some other city in Cook County. Consequently, the only problems encountered in these localities are those of distribution.

SCHOOLS

A follow-up of the sanitary survey made in the past year of both urban and rural schools is being carried on, through the cooperation of the County Superintendent of Schools. However, because of the reduction of the engineering staff, these inspections are made only upon request by the school, other public agencies, or interested individuals. During the past year, inspections have been made at 19 public and parochial schools.

TOURIST AND TRAILER CAMPS

Inspections of the tourist and trailer camps in the County have been made when requests for such services were received by the public health engineering staff. The engineers also worked in cooperation with the Cook County Zoning Bureau in setting up standards for new camps opened in the unincorporated areas of Cook County.

PRIVATE HOME SANITATION

9 There are three methods through which the private home sanitation program is being conducted, namely:

a. In cooperation with the Federal Housing Administration. In order for a prospective home owner to receive a loan insured by the F.H.A., to finance the construction or purchase of a home to be served by private water supply and/or sewage disposal facilities, it is necessary for him to secure approval of the same by the county public health engineers. (During the past year 141 applications have been approved.)

b. By cooperation with the Cook County Zoning Bureau. The Cook County Zoning

Ordinance specifies that all present and future homes or those materially altered which are located in the unincorporated portion of the county, must have water supply and sewage disposal facilities which comply with the recommendations of the health department. Standards for these facilities have been formulated and supplied to the Zoning Bureau to serve as a guide in the making of inspections for such installations, and the issuance of permits. Larger installations and those where some special problem is encountered are referred directly by the Zoning Bureau to our engineers for review and approval.

13 c. Through furnishing an advisory inspection service to the individual home owners, and to the various local health officials who request such assistance.

RECREATIONAL AREAS

14 During the past year, water samples for bacteriological analysis were collected from 200 wells in the Cook County Forest Preserves. Results of these analyses were reported to our office, whereupon the same were interpreted in the light of previously accumulated information regarding the location and construction of the wells.

SWIMMING POOLS

15 The responsibility for the proper construction and operation of swimming pools in the State of Illinois is, by law, a function of the Illinois Department of Public Health; consequently, the county public health engineers have assisted with the inspection and sampling procedures at indoor, and outdoor pools located in Cook County.

INSTITUTIONS

16 Inspections are made at any private or public institution where a request for such service is received. Routine inspections are also made for the State Division of Child Welfare at three institutions.

PUBLIC SEWAGE TREATMENT

17 There are 43 incorporated cities and villages in the County which discharge

their sewage to the treatment works maintained by the Chicago Sanitary District. This District serving 412 square miles (212 of which are in Chicago) does not come under the jurisdiction of the State Sanitary Water Board. There are 12 cities and villages which maintain their own sewage treatment works but the County engineers assist in the inspection and advisory program for these plants whenever requested by the Sanitary Water Board. Sewage treatment works to accommodate schools and other public and private buildings which serve more than 15 persons require a permit from the Sanitary Water Board. These plans are reviewed by our engineers in order to insure an acceptable design before their submission to the Sanitary Water Board.

NUISANCES AND GENERAL COMPLAINTS

18 While seldom of public health importance, numerous nuisance complaints and requests for abatement of same are received by the health unit. Responsibility for the abatement of such conditions is vested in the local city, village or township officials or in the office of the State Attorney. However every effort is made to assist the complainant and the officials in securing the elimination of the offending condition. Our engineers have on many occasions made inspections and later testified at conferences in the office of the State Attorney.

MILK

19 The engineers serve in an inspection and advisory capacity whenever requests are received from local health officials or other individuals. At the present time, the engineer is not conducting a routine milk inspection program. All milk producers electing to label their product "Pasteurized" or "Grade A" come under the jurisdiction of the State Department of Public Health which enforces the State Laws governing these practices.

20 Our public health engineer endeavors to promote the passage of the Model Grade A Milk Ordinance in the various cities and villages in the County at every opportunity.

REPORTED CASES OF CERTAIN COMMUNICABLE DISEASES
 FOR COOK COUNTY EXCLUSIVE OF CHICAGO,
 BY DISEASE, YEARLY TOTAL AND MONTHS.
 JULY 1, 1942 - JUNE 30, 1943.

D I S E A S E	YEARLY TOTAL	MONTHS - 1 9 4 2						MONTHS - 1 9 4 3					
		JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	JAN.	FEB.	MAR.	APR.	MAY	JUNE
ANIMAL BITES	756	51	62	76	50	55	33	25	33	37	96	115	123
CHICKEN POX	3094	54	21	7	76	232	385	443	394	508	420	313	241
DIPHTHERIA	16	2	2	-	2	1	3	2	1	1	1	1	-
DYSENTERIES	32	-	-	3	4	-	17	1	3	3	-	-	1
ENCEPHALITIS	12	-	2	-	1	-	-	1	-	-	-	4	4
ERYSIPELAS	34	4	2	1	1	1	1	5	2	4	5	3	5
GERMAN MEASLES	4604	29	17	2	6	15	68	182	547	1350	1257	776	355
GONORRHEA	281	35	37	28	28	26	26	12	15	12	22	18	22
INFLUENZA	37	1	1	4	3	2	1	9	5	5	3	1	2
MALARIA	4	-	-	1	-	-	-	-	-	1	1	-	1
MEASLES	5265	18	6	1	8	7	13	29	215	767	1110	1701	1390
EPIDEMIC MENINGITIS	16	2	-	-	-	-	-	1	5	2	1	-	5
OTHER MENINGITIS	17	-	-	-	3	-	-	-	5	3	3	2	1
MUMPS	1513	81	54	25	23	12	32	108	121	242	291	278	246
OPHTHALMIA NEONATORUM	1	1	-	-	-	-	-	-	-	-	-	-	-
PNEUMONIA	1413	70	62	65	141	135	156	248	146	132	104	81	73
POLIOMYELITIS	71	8	21	29	9	3	1	-	-	-	-	-	-
SCARLET FEVER	515	13	11	6	40	35	37	76	86	65	50	60	36
SEPTIC SORE THROAT	37	-	2	1	5	3	2	3	5	2	3	8	3
SMALLPOX	2	1	-	-	-	-	-	-	-	1	-	-	-
SYPHILIS	1612	132	114	133	135	178	140	144	102	111	135	142	146
TUBERCULOSIS, PULMONARY	287	44	24	22	25	11	25	20	23	25	4	53	11
TUBERCULOSIS, OTHER	20	1	2	2	1	1	4	2	3	2	0	2	0
TYPHOID	21	1	1	1	2	12	-	-	1	-	1	2	-
UNDULANT FEVER	12	-	-	-	-	1	-	1	2	3	1	-	4
WHOOPING COUGH	1109	177	163	102	81	89	92	73	78	92	71	39	52

COOK COUNTY PUBLIC HEALTH UNIT
737 So. Wolcott Avenue
Chicago, Illinois

TABULATION OF HEALTH UNIT SERVICE FOR THE YEAR
July 1st, 1942 - June 30th, 1943 A/

	Total Last Year	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total This Year
A. COMMUNICABLE DISEASE CONTROL						
1. Admissions to service	197	82	332	357	575	1346
2. Consultations with physicians	486	134	94	86	60	374
Field Visits						
3. Diphtheria	40	5	1	2	5	13
4. Typhoid fever and paratyphoid	78	58	25	39	35	157
5. Scarlet Fever	325	12	46	44	29	131
6. Smallpox	852	2	-	7	-	9
7. Measles	286	4	42	82	402	530
8. Whooping Cough	80	61	47	36	19	183
9. Other						
Mumps	62	3	12	44	28	87
Chickenpox	169	14	157	155	151	477
Adult Chickenpox	40	1	9	-	-	10
Pneumonia	13	11	36	-	-	47
Meningitis	9	1	-	18	9	28
Poliomyelitis	591	359	242	16	6	623
Bacillary Dysentery	25	166	13	2	10	191
Amebiasis	9	2	3	4	8	17
Undulant Fever	10	1	-	1	-	2
Strep Throat	11	-	-	-	-	-
Rocky Mt. Spotted Fever	2	2	-	-	-	2
Ophthalmia Neonatorum	2	-	-	-	-	-
Leprosy	1	-	-	-	2	2
Encephalitis	-	7	-	5	8	20
Keratoconjunctivitis	-	-	-	6	-	6
Immunizations (persons immunized)						
15. Smallpox	19018	228	720	3449	836	5233
16. Diphtheria, under 1 year	510	74	56	57	59	246
17. Diphtheria, 1 through 4 years	1314	182	257	179	190	808
18. Diphtheria, 5 years and over	7382	170	748	1324	457	2699
19. Typhoid Fever	-	3	-	700	1557	2260
20. Other						
Whooping Cough	186	105	42	86	603	836
Shick Tested	6948	425	2266	873	209	3773
Tuberculin Tested	1841	26	18	365	1761	2170
Tetanus	-	-	-	-	250	250

A/ Conforming to United States Public Health Service Tabulation of Health Department Services, reprint No. 1768. Omitted items are those activities in which this Unit did not participate during the reporting period.

	Total Last Year	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total This Year
21. Public lectures and talks	109	8	47	42	19	116
22. Attendance	14287	1653	4489	4441	2576	13159
Film Showings	186	2	37	66	30	135
Attendance	16479	38	2033	12287	3036	17394
Radio Talks	15	-	-	-	-	-
B. VENEREAL DISEASE CONTROL						
1. Admissions to medical service	656	622	164	276	108	1170
3. Clinic Visits	16604	5430	5216	4869	5463	20978
4. Field Visits	7065	2046	1971	2351	2001	8369
5. Other Service						
Sel. Service Bloods Drawn	3720	4663	5252	3774	3414	17103
Marriage Permits Issued	69	4	12	11	9	36
6. Public Lectures and Talks	18	1	1	7	1	10
7. Attendance	1336	7	45	500	48	600
Film Showings	21	1	7	7	2	17
Attendance	1697	18	274	500	90	882
Radio Talks	1	-	-	-	-	-
C. TUBERCULOSIS CONTROL						
1. Individuals admitted to medical service	152	28	15	26	14	83
2. Individuals admitted to nursing service	369	41	112	67	185	405
3. Physical examinations in clinics	311	49	54	37	56	196
4. X-ray examinations	183	7	49	6	136	198
5. Clinic Visits	380	71	84	46	73	274
6. Visits to private physicians	42	7	14	8	3	32
7. Field nursing visits	1117	294	206	119	327	946
8. Office nursing visits	73	14	12	16	15	57
9. Admissions to sanatoria	11	6	2	2	2	12
10. Other service						
Epidemiologic investigation visits	355	297	193	114	110	714
11. Public lectures and talks	2	1	-	-	-	1
12. Attendance	614	20	-	-	-	20
Film Showings	9	2	10	-	-	12
Attendance	5700	58	4755	-	-	4813
D. MATERNITY SERVICE						
2. Cases admitted to antepartum nursing service	137	22	116	82	133	353
3. Visits by antepartum cases to medical conferences	88	22	7	1	1	31

	Total Last Year	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total This Year
4. Visits by antepartum cases to private physicians	73	19	14	10	2	45
5. Field nursing visits to antepartum cases	505	171	159	115	199	644
6. Office nursing visits by antepartum cases	18	6	12	10	32	60
7. Cases given nursing service at delivery	2	-	-	-	1	1
8. Cases given post-partum medical examination	12	7	1	-	-	8
10. Cases admitted to postpartum nursing service	91	18	70	66	58	212
11. Nursing visits to postpartum cases	307	92	90	74	70	326
E. INFANT AND PRESCHOOL HYGIENE						
Infants						
1. Individuals admitted to medical service	1185	257	239	267	212	975
2. Individuals admitted to nursing service	906	168	239	267	212	886
Newborn infants included in E2	203	28	94	110	70	302
3. Visits to medical conferences	5038	1163	858	763	854	3638
4. Visits to private physicians	20	15	15	2	6	38
5. Field visits to and in behalf of infants	2493	870	515	397	395	2177
a. Field visits to newborn infants included in E5	438	106	110	119	86	421
6. Office nursing visits	326	111	61	8	38	218
Preschool						
8. Individuals admitted to medical service	734	181	212	352	599	1344
9. Individuals admitted to nursing service	582	181	212	352	599	1344
10. Visits to medical conferences	1923	183	1044	829	1427	3483
11. Visits to private physicians	114	20	7	-	33	60
12. Field nursing visits	1882	429	436	350	455	1670
13. Office nursing visits	151	19	28	24	126	197
14. Inspections by dentists or dental hygienists	433	13	18	6	229	266
17. Public lectures and talks	2	-	-	-	-	-
18. Attendance	96	-	-	-	-	-

	Total Last Year	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total This Year
19. Enrollment in infant and preschool classes	77	-	-	-	-	-
20. Attendance	204	-	-	-	-	-
F. SCHOOL HYGIENE						
1. Inspections by physicians or nurses	10396	1432	4560	1848	2562	10402
2. Examinations by physicians	5295	983	4405	2402	1566	9356
3. Examinations by physicians with parents present	419	64	116	167	596	943
5. Field nursing visits	5638	1285	1250	1116	1253	4904
6. Office nursing visits	4232	89	1417	1653	1963	5122
7. Inspections by dentists	6644	See	Dental	Reports		-
9. Other Service						
Parent consultations	5979	743	1725	1281	1496	5245
Teacher consultations	10081	1098	3276	3226	2571	10171
Vision tests	5377	1263	3060	3991	2007	10321
Hearing tests	2996	739	1540	1847	1207	5333
Weighing and measuring	8301	1190	5693	4301	1832	13016
10. Public lectures and talks	67	2	3	5	9	19
11. Attendance	2000	35	595	148	815	1593
12. Classroom health talks	1359	196	451	224	140	1011
13. Attendance	38681	5830	12243	9449	4878	32400
H. MORBIDITY SERVICE						
2. Admissions to nursing service	778	64	856	663	498	2081
5. Field nursing visits	5106	1602	1020	850	817	4289
6. Office nursing visits	375	99	159	28	21	307
I. CRIPPLED CHILDREN SERVICE						
4. Individuals admitted to nursing service	46	6	39	40	77	162
6. Field nursing visits	237	50	68	60	126	304
7. Other service						
Office nursing visits	-	1	4	5	2	12

	Total Last Year	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total This Year
J. GENERAL SANITATION						
1. Approved individual water - supplies installed	293	24	5	-	35	64
3. New septic tanks installed	656	95	2	-	35	132
Field visits or inspections						
4. Private premises	202	43	22	10	32	107
5. Camp sites	86	63	9	2	4	78
6. Swimming pools	42	1	-	-	-	1
8. Schools	144	5	5	7	2	19
9. Public Water Supplies	38	11	11	7	-	29
10. Sewage Plants	1	-	-	-	2	2
11. Other						
Institutions	51	23	5	-	6	34
Institutions - Hospitals	-	1	10	-	-	11
F.H.A. subdivisions	5	1	-	-	-	1
Other Subdivisions	17	7	1	-	5	13
Recreational areas	13	6	1	-	1	8
Food Handling Establishments	12	2	1	1	1	5
Industrial Plants	15	1	4	-	-	5
Defense Industrial Plants	3	6	4	2	4	16
National Defense Areas	2	2	-	-	-	2
Country Clubs - Golf Courses	59	1	-	-	-	1
Incorporated Communities	-	-	-	-	6	6
16. Other Service						
Local nuisance investigations	58	14	9	6	18	47
Stream pollution	8	1	-	-	-	1
Conferences or meetings re- garding any of the above	888	180	145	97	115	537
F.H.A. forms reviewed	784	96	7	3	35	141
Samples Collected	242	63	21	15	7	106
17. Public lectures and talks	12	4	12	18	4	38
18. Attendance	767	125	733	906	352	2116
Radio Talks	5	-	-	-	-	-
Film Showing	1	-	3	7	2	12
Attendance	30	-	170	500	48	718

NUTRITION SERVICES

CONTACTS:

	Total Last Year <u>B/</u>	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total This Year
Health Staff: Superintendent	-	-	12	10	7	29
" " Nurses	89	63	39	48	48	198
" " Others	2	32	14	14	11	71
Welfare Staff: Superintendent	-	-	-	10	1	11
" " Social Workers	-	-	-	9	-	9
Educational System: Superintendents and Principals	17	9	6	12	4	31
" " Home Economics Teachers	35	11	4	4	-	19
" " Other Teachers: Urban	14	6	3	21	7	37
" " " " Rural	6	4	2	11	87	104
" " Home Advisors	-	-	-	-	1	1
Industry: Nutritionists and Lunchroom Managers	5	-	-	2	3	5
" " Others	-	-	3	8	8	19
Nutritionists, lunchroom managers (non-industrial)	9	6	3	9	10	28
Officers of nutrition committees	-	-	2	7	5	14
Officers of Parent-Teacher Associations	18	20	8	6	7	41
" " other groups	-	-	12	11	3	26
Other Individuals	119	122	11	24	14	171
Talks, Classes, and Group Conferences						
Health workers (physicians and nurses)	7	-	262	176	194	632
Social workers	2	-	-	208	67	275
Educators	5	-	29	65	17	111
College or high school students	16	15	338	1338	832	2573
Parent-Teacher Associations	6	4	272	174	181	631
Other groups	43	63	1121	1011	714	2909
Demonstrations to nurses: Home visits	-	-	-	20	1	21
" " " " Other	-	-	16	78	140	234
Exhibits	-	-	272	409	298	979
State and National Planning						
Other Divisions of Health Department	-	-	2	-	-	2
Other Departments of State Government	-	-	3	1	3	7
Parent-Teacher Associations	-	-	-	-	1	1
Nutrition Associations and Committees	-	-	2	4	1	7
Other groups	-	-	2	10	-	12

B/ Program started February, 1942

DENTAL PUBLIC HEALTH SERVICES A/

	Second Quarter <u>B/</u>	Third Quarter	Fourth Quarter	Total This Year
DENTAL PUBLIC HEALTH ADMINISTRATION				
Professional Contacts				
Dentists	164	218	349	731
Physicians	3	13	69	85
Nurses	93	117	165	375
Lay or Civic Officials	19	21	58	98
School Officials				
City	-	-	10	10
County	-	-	5	5
Board of Education	2	10	20	32
City Officials	-	3	-	3
Township Officials	-	3	-	3
County Health Personnel	-	42	11	53
COMMUNITY EDUCATION				
Lectures	3	3	3	9
SCHOOL DENTAL HEALTH PROGRAM				
Consultations	67	93	301	461
Talks at school	-	7	3	10
Dental examinations by staff dentist without parents present	96	406	193	695
Dental examinations by local dentist	5535	-	8	5543
Supervisory visits to school dental remedial programs	8	12	-	20
Follow-up visits	1	-	2	3
P.T.A. Summer Roundup Children examined parents present	-	-	88	88
School Remedial Program				
Visits to school remedial program	-	-	48	48
PROFESSIONAL SCHOOLS				
Lectures to student nurses	2	1	2	5
Lectures to dental students	-	-	1	1
PRESCHOOL AND MATERNITY MOTHERS PROGRAM				
Visits to preschool and maternity remedial programs	-	-	6	6
Dental or lay conferences	26	2	-	28

A/ Conforming to Illinois Department of Public Health, Division of Dental Health Education, tabulations of Dental Public Health Service.

B/ No data previous to second quarter due to attendance of Dental Health Officer at school.

	Second Quarter	Third Quarter	Fourth Quarter	Total This Year
VENEREAL DISEASE PROGRAM				
Conferences Dentists	24	2	-	26
MISCELLANEOUS				
Supervisory visits to local dental care program	-	-	1	1
Health Department conferences	40	7	8	55
Division conferences	3	4	13	20
Health Official conferences	-	-	1	1
Meetings (professional)	9	12	15	36
Civilian Defense Professional Contacts (dentists)	3	-	-	3
Selective Service System Dental Conferences	24	-	-	24
Dental Industrial Hygiene Dental Conferences	5	-	-	5

SCHOOL REMEDIAL SERVICE PROGRAM
STAFF AND LOCAL DENTISTS PARTICIPATING A/

	December	Third Quarter	Fourth Quarter	Total This Year
Clinics Conducted	2	31	87	120
Clinic Hours	6	87	250	343
Admissions to Service	9	62	200	271
Sittings	9	166	377	552
Completed	3	51	152	206
Examinations	9	52	172	233
Prophylaxis	2	40	178	220
Fillings, total	16	236	527	779
Silver fillings:				
One-surface	15	147	306	468
Two-surface	-	35	118	153
Three-surface	-	-	2	2
Cement	-	-	5	5
Synthetic Porcelain	1	47	75	123
Other	-	3	21	24
Cement bases	-	-	12	12
Extractions, total	6	135	196	337
Deciduous	4	85	124	213
Permanent	2	50	72	124
Root Canal operations, total	-	3	1	4
Deciduous	-	3	-	3
Permanent	-	-	1	1
Local Anesthetics	3	73	172	248
Silver Nitrate treatments	-	-	13	13
Radiographs - Patients	3	39	44	86
Films	8	80	81	169
Miscellaneous treatments	-	5	28	33

A/ Program started December, 1942

PRESCHOOL AND MATERNITY MOTHERS REMEDIAL SERVICE PROGRAM
LOCAL DENTISTS PARTICIPATING

REMEDIAL SERVICE	Total Last Year A/		December B/		Third Quarter		Fourth Quarter		Total This Year	
	Child- ren	Adults	Child- ren	Adults	Child- ren	Adults	Child- ren	Adults	Child- ren	Adults
Clinics Conducted	42	-	4	-	14	-	20	-	38	-
Clinic Hours	117	-	12	-	42	-	65	-	119	-
Admissions to Service	132	89	10	-	17	2	32	7	59	9
Sittings	-	-	25	-	73	9	99	28	197	37
Completed	52	15	5	-	13	2	22	-	40	2
Examinations	-	-	10	-	6	1	30	7	46	8
Prophylaxis	36	5	6	-	9	2	30	9	45	11
Treatments of periodontal diseases	-	12	-	-	-	-	-	10	-	10
Fillings, total	132	75	18	-	72	8	110	22	200	30
Silver fillings:										
One-surface	77	55	18	-	44	2	46	7	108	9
Two-surface	-	-	-	-	20	1	41	5	61	6
Three-surface	-	-	-	-	1	-	5	2	6	2
Cement	50	1	-	-	-	-	4	-	4	-
Synthetic porcelain	5	19	-	-	6	5	12	8	18	13
Other	-	-	-	-	1	-	1	-	2	-
Cement bases	1	1	-	-	-	-	-	5	-	5
Extractions, total	41	84	4	-	11	-	14	8	29	8
Deciduous	-	-	4	-	11	-	14	-	29	-
Permanent	-	-	-	-	-	-	-	8	-	8
Postoperative treatment	-	-	-	-	-	-	-	4	-	4
Root Canal Operations, total	4	5	-	-	-	-	5	-	5	-
Deciduous	-	-	-	-	-	-	2	-	2	-
Permanent	-	-	-	-	-	-	3	-	3	-
Treatment for Vincent's infection	-	-	-	-	-	-	4	-	4	-
Local Anesthetics, total	23	47	4	-	-	-	12	8	16	8
Silver Nitrate treatments	-	-	-	-	-	-	8	-	8	-
Radiographs	-	-	-	-	1	-	-	-	1	-
Miscellaneous treatments	29	7	3	-	4	-	6	4	13	4

A/ April, May, and June

B/ Program interrupted by Public Health Dental Officer's attendance at school