



**ANNUAL REPORT 1947**  
**COOK COUNTY**  
**DEPARTMENT OF PUBLIC HEALTH**

HOWARD COX



# BOARD of HEALTH

COOK COUNTY  
ILLINOIS  
1947



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William N. Erickson (right), President, Board of Health, and Edward A. Piszczek (left), M.D., M.P.H., Director, Cook County Department of Public Health, present to the people of suburban Cook County a report of the activities of the health department for the year 1947. The Cook County Department of Public Health extends its services to more than 700,000 people in an area of 735 square miles. Promotion of health, prevention of disease and care of the sick are major responsibilities of the health department.

**PREVENTION**

OUR WATCHWORD

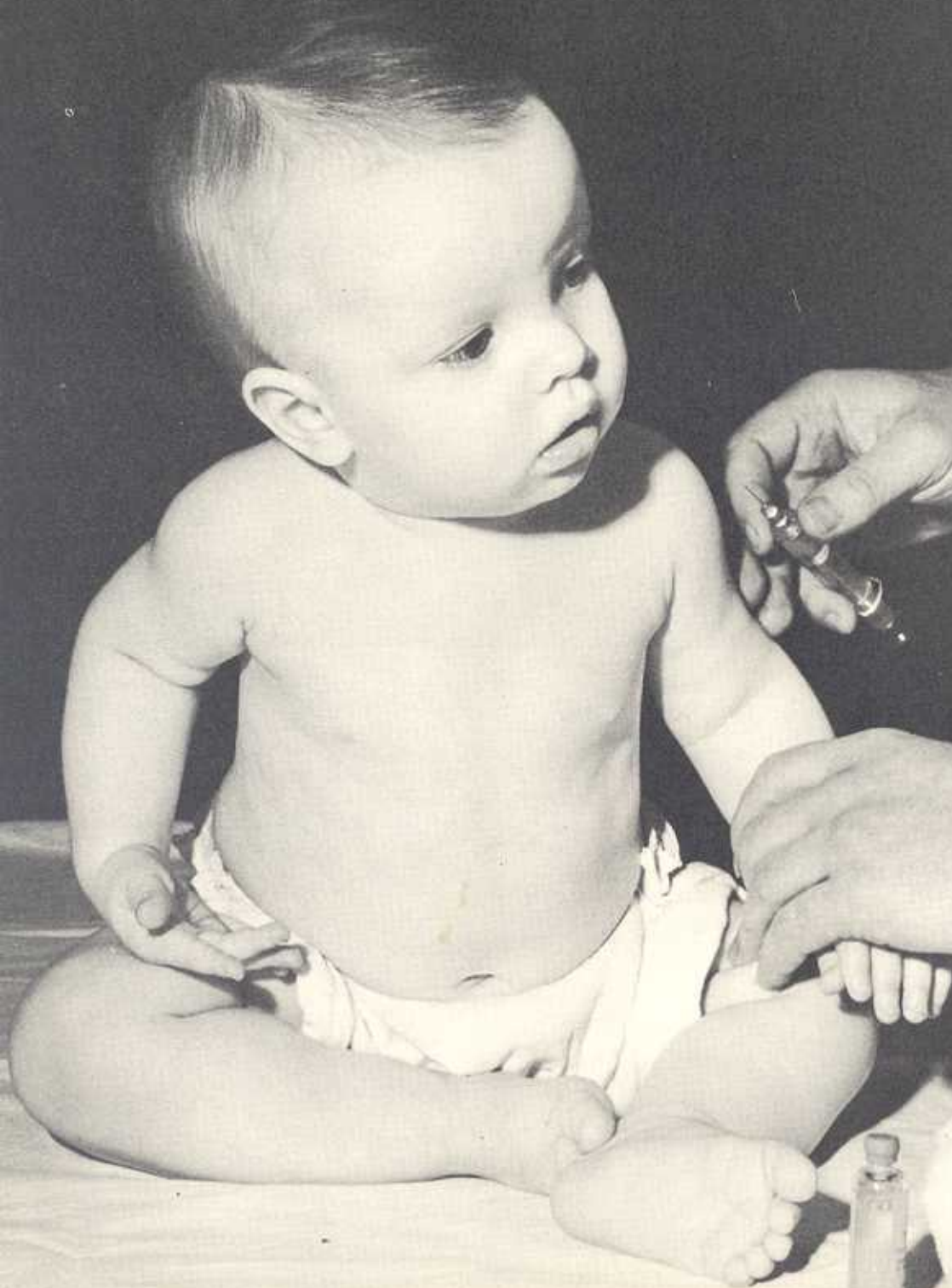
**COOPERATION**

OUR THEME

**HEALTHFUL LIVING**

OUR GOAL

# IMMUNIZATION



In 1947 in suburban Cook County there were no cases of smallpox and only one case of diphtheria. Whooping cough cases declined from 531 in 1946 to 461 in 1947; and typhoid fever cases from 7 in 1946 to 5 in 1947. No major epidemics occurred in Cook County during the past year. Isolation, quarantine and increasing emphasis on immunization of all infants are among the significant reasons for this reduction. Demonstration and instruction in the home by the public health nurse, conference with teachers regarding daily observation of the children for signs and symptoms of contagion have been valuable techniques used to control the spread of communicable diseases. School children were inspected to discover suspected cases of ringworm of the scalp. Although at one time the incidence of ringworm ran as high as 8 per cent, at the present time only 1 to 3 per cent of the children examined have this disease.

Any moderation of an immunization program will result in an increasing number of susceptible persons in the area and such exposure may precipitate an epidemic. Education for immunization is constantly being promoted in an effort to get an ever increasing number of persons protected, either through the private physician or the health department. Since several outbreaks of communicable disease occurring recently have a high incidence among adults, re-immunization throughout life is being encouraged as part of the health department services. After the heavy spring rains many areas were flooded necessitating typhoid fever immunization programs being held.

Epidemiological investigation and nursing and medical service was given to 2476 communicable disease cases.

Biological preparations for the prevention of communicable diseases were distributed to the family physician and were available in either of the four health department district offices or at the Central Administrative Office. More preventives were distributed during 1947 for the control of smallpox and diphtheria than any other diseases. Increased requests were received for whooping cough, typhoid fever and rabies vaccines.

Every case of an animal bite was investigated to determine the condition of the animal and whether the person bitten was under medical care. Of the 432 animal bites reported during 1947, 49 animals were found to be rabid.

In institutions and boarding schools for children concentrated programs of immunization and Dick-Schick testing were undertaken. Those found to be positive were immunized. In two institutions for dependent children BCG vaccination for tuberculosis has been carried on.

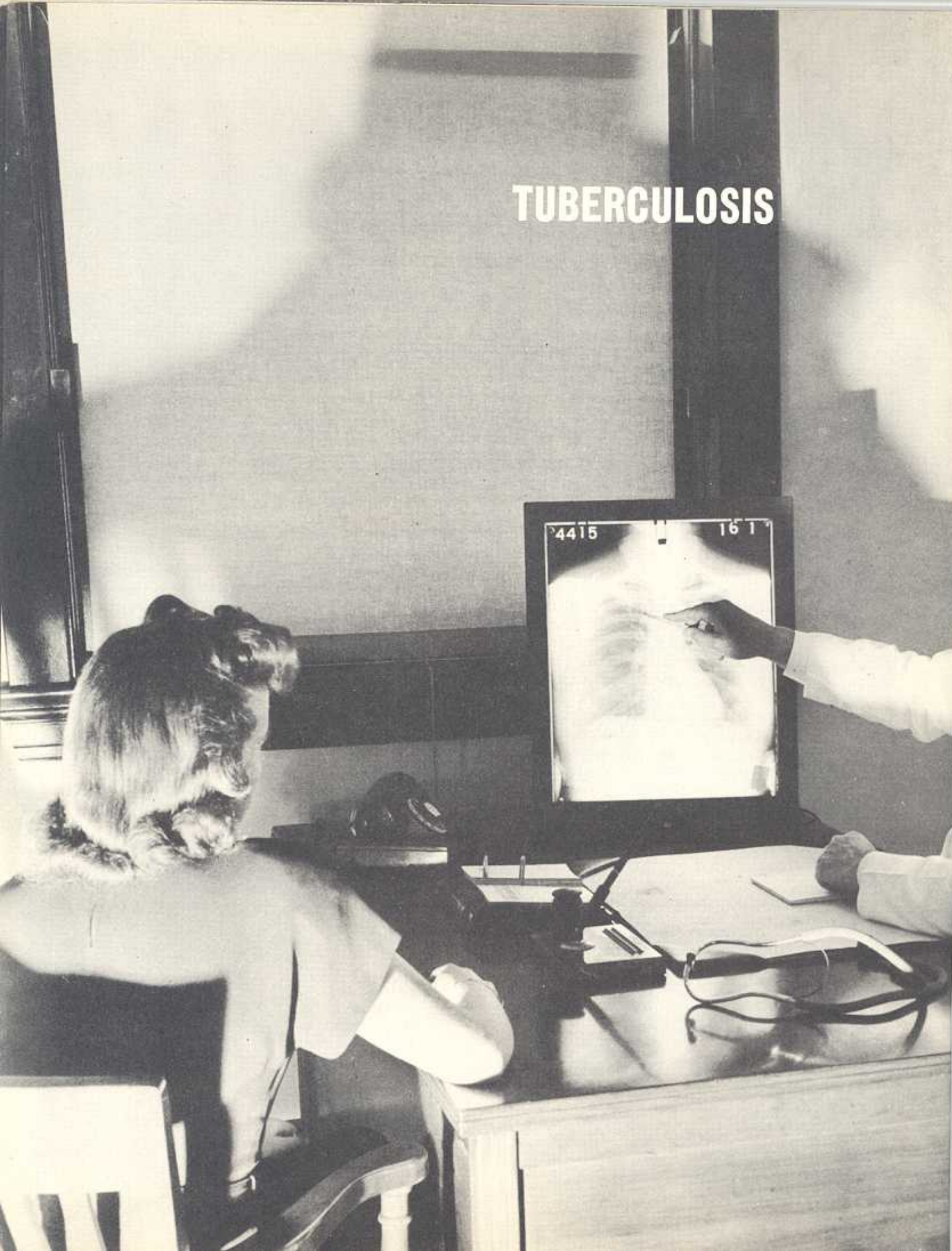
Physicians practicing in Suburban Cook County were given summarized information of modern recommended immunization techniques and tests. The following immunizations were completed during 1947.

Diphtheria . . . . .	4330
Smallpox . . . . .	7582
Typhoid Fever . . . . .	2364
Whooping Cough . . . . .	928

**MAJOR COMMUNICABLE DISEASES  
REPORTED IN 1947-1946**

	1947	1946
Animal bites . . . . .	432	436
Chickenpox . . . . .	2,403	1,694
Diphtheria . . . . .	1	8
Gonorrhea . . . . .	324	652
Measles . . . . .	199	5,339
Meningitis . . . . .	26	25
Mumps . . . . .	1,236	1,240
Pneumonia . . . . .	376	259
Poliomyelitis . . . . .	81	256
Scarlet fever . . . . .	355	538
Smallpox . . . . .	—	—
Syphilis . . . . .	583	882
Tuberculosis . . . . .	351	238
Typhoid fever . . . . .	5	7
Whooping cough . . . . .	461	531

# TUBERCULOSIS



**T**uberculosis, which strikes men and women during their most productive years and is the leading cause of death for people between the ages of 15 and 44, can be eradicated with the medical knowledge now available. The tuberculosis control program revolves around early recognition of cases and supervision of all cases and contacts. The Tuberculosis Registry (a visible index) contains the necessary information in easily available form. All cases are frequently checked to determine whether they are under medical supervision and all contacts are referred for periodic examination including x-ray. During 1947, 351 cases were reported to the Cook County Department of Public Health. An important part of the program is the discovery of new cases of tuberculosis in persons presumed to be healthy. If these persons can be diagnosed early, the treatment period often can be shortened and others will not become infected. However, if the person whose symptoms require medical care has been infected 6 months to 2 years, treatment may require a longer time and many persons may have been exposed.

The chest x-ray helps in discovering early tuberculosis. Recently the development of photo-fluoroscopic methods and the availability of mobile units has brought x-rays to large portions of the adult population. Industrial workers and community groups are being x-rayed in increasingly large numbers. In programs sponsored by the Tuberculosis Institute of Chicago and Cook Coun-

ty and the Cook County Department of Public Health, approximately 12,000 persons were x-rayed in 1947. About one and one-half per cent were found to have tuberculosis previously undiscovered.

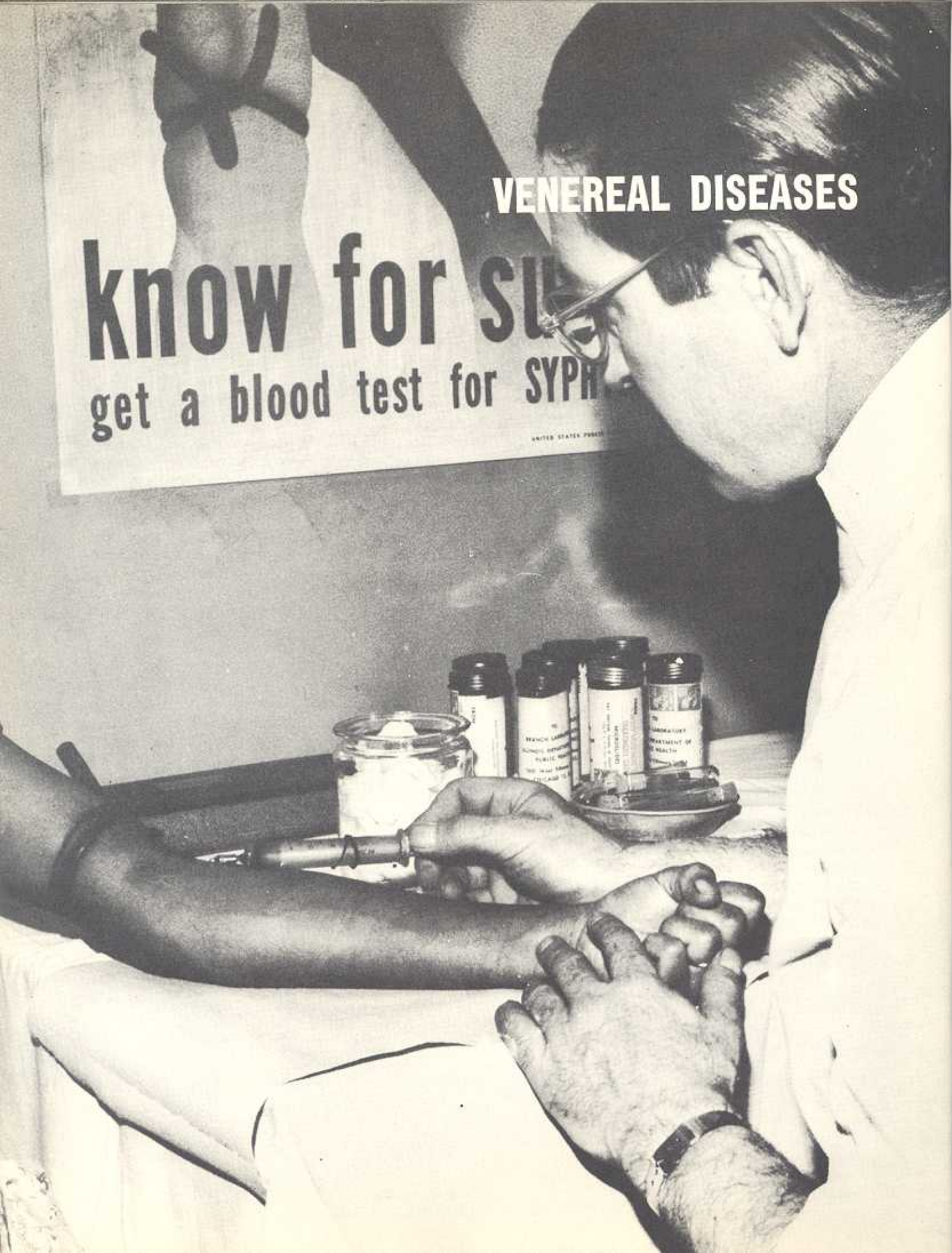
Community participation in planning the mass x-raying program was encouraged. Interested citizens recognized their responsibility in promoting whole-hearted community support to insure the success of the program. Pamphlets, posters and flyers were distributed. Community groups were organized and facts about tuberculosis were discussed. Motion pictures portrayed visually the cause, spread, and treatment of tuberculosis. Trailer films were shown in the neighborhood theatres; and exhibits placed in store windows, libraries, and public buildings carried the message to the people.

The infant and school health programs offer another method of discovering early tuberculosis. Young children who are infected develop a positive tuberculin test within a short period of time. When this happens, all adults in close contact with these children are referred for physical examination including x-ray. Infants under 1 year of age were routinely tested at the child health conferences. Tuberculin testing as part of the child's physical examination was done for children entering school for the first time and in the seventh, ninth, and twelfth grades. During 1947, 5962 children were tuberculin tested.

**VENEREAL DISEASES**

**know for sure**  
get a blood test for SYPH

UNITED STATES PUBLIC HEALTH SERVICE





In the venereal disease control program, the Cook County Department of Public Health has set up a 3 point plan: first, through community education to inform people about these diseases, the harm they do and how they can be prevented, treated and cured; second, find and treat every infectious case of venereal disease; third, prevent the spread of venereal diseases.

In 1947 in Suburban Cook County there were 704 reported cases of syphilis, the same as in 1946. There was a decrease in reported gonorrhea cases from 652 in 1946 to 526 in 1947. The majority of these persons were between the ages of 21 and 35 at the time in life when they should be at the very peak of good physical condition. Suburban Cook County presents a peculiar problem in that it is adjacent to a large urban area and governmental boundaries are no barrier to the spread of venereal diseases. Venereal diseases if untreated, may result in serious mental and physical damage; and in a tragic number of cases, results in an untimely death.

In the venereal disease control program during 1947, emphasis has been placed on case finding, treatment and follow-up of early infectious cases of syphilis. All contacts to cases are routinely investigated.

The hub of the venereal disease program is the Rapid Treatment Center to which as many of

these persons as possible are referred. In this area the facilities of the Chicago Intensive Therapy Center are used. The advantage of this program is that the patient is unable to infect others since all lesions have healed by the time of discharge from the hospital; whereas, under the old system requiring one to one and one-half years of treatment many patients became discouraged and discontinued treatment. In 1947, 100 cases were referred to the Chicago Treatment Center.

In the 5 venereal disease clinics operated by the health department in suburban areas, approximately 600 treatments were given monthly. All staff nurses assist in these centers and include the supervision of these patients as a part of their generalized family health service.

An effort has been made to treat all pregnant women who previously, or at the time, have been found to have syphilis. If they are unable to receive rapid treatment in the hospital, drugs and treatment schedules are furnished physicians and clinics. It is known that 98 per cent healthy babies are born if the expectant mothers are treated during early pregnancy. All babies born of these women are observed for at least a year to make certain that the treatment during pregnancy was effective.

Pencillin is made available to physicians for the rapid treatment of gonorrhea.

# INFANTILE PARALYSIS



During 1947, for the first time since the establishment of the Cook County Department of Public Health, no deaths occurred from infantile paralysis. There were 81 cases reported to the health department. The lowest incidence of poliomyelitis in the health department record was in 1940; 29 cases and 4 deaths. The highest incidence was in 1943; 264 cases and 21 deaths.

Infantile paralysis is a communicable disease, but the method of spread is not definitely known. There is scientific evidence to indicate the disease may be transmitted by intimate contact between a susceptible person and someone harboring the virus. There is as yet no way of telling in advance who may be carriers of the germ. Actually in nearly every instance, there is nothing that could have been done to have prevented a person from contracting infantile paralysis. However, there are certain precautions to be observed; avoidance of new contacts, crowds, of overtiring, chilling, swimming in polluted waters; insistence upon cleanliness, covering of garbage, screening of houses against flies.

Eighty-five per cent of all polio cases occur in children under 18 years of age; adults are regarded as less susceptible. Of the many thousands who are diagnosed as having infantile paralysis more than half eventually recover without any disability whatever. Consultant service is available to physicians in the diagnosis of cases. Every case of infantile paralysis must be reported to the health department. A follow-up by the public health nurse is made of all acute cases. Patients were reported to the Cook County Chapter of the National Foundation for Infantile Paralysis. The health department in cooperation with Cook County Chapter planned the best pos-

sible care necessary for the complete and ultimate rehabilitation of the patient. An attempt was made to have all cases hospitalized to avert complications. Most of the patients were hospitalized at Cook County Contagious Hospital or the contagious ward of Evanston Hospital.

When the patient is released from the hospital a plan of after-care and follow-up is instituted. One of the most important factors in the treatment of the patient with infantile paralysis is physical therapy. The Division of Services for Crippled Children, the Cook County Chapter of the National Foundation, and the health department jointly plans for the rehabilitation of the patient. The Cook County Chapter of the National Foundation for Infantile Paralysis provides two physical therapists for the Cook County Department of Public Health. Working under doctor's orders treatment was given in the home or at one of the physical therapy treatment centers. The program instituted in Cook County many years ago is now being followed by other counties throughout the United States.

Five physical therapy treatment centers are operated throughout the County. Cases treated were primarily poliomyelitis, cerebral palsy, and posture.

The University of Illinois Division of Services for Crippled Children in cooperation with the Cook County Department of Public Health conducted diagnostic clinics for the handicapped. These handicapped children were frequently found at the child health conferences or as a part of their family health supervision. At twenty-five of the clinics 521 cases were seen by pediatricians, orthopedists, speech, social service and nutrition consultants.

**MATERNAL AND  
CHILD HEALTH**



One of the most significant health notes in the 1947 record has been increasing the opportunities for saving lives of babies in spite of the heavy load on the hospitals and the physicians. The highest mortality rate is among babies under 1 month of age. Premature birth is one of the most frequent causes of death in this group.

In Cook County about 5 per cent of the babies born alive are premature. It is estimated by medical authorities that 50 per cent of these premature babies will die unless given special care, whereas 86 per cent might be saved with specialized medical and nursing care.

A 24-hour service to save the lives of premature babies born in Suburban Cook County has been inaugurated through the cooperation of the County Sheriff's Police, Cook County Hospital, and Cook County Department of Public Health. Premature infants born in Suburban hospitals of Cook County where special staffs are not available for this care may request of the County Sheriff's Office transportation for the premature infants to Cook County Hospital. Classes were held for the Sheriff's Police staff to give instruction for their service in the program.

This 24-hour service is available to suburban hospitals and physicians by merely calling the County Sheriff's Police. A specially equipped incubator and oxygen unit provided by the Cook County Department of Public Health is dispatched to the hospital immediately, and the premature infant is transported in this unit with the assistance of a nurse from the hospital where the birth occurs.

A plan for care of the infant in the home is instituted as soon as possible. The public health nurse visits to evaluate the home situation in relation to the infant's special needs, for example: equipment, environment, and to give instruction to the mother in care of the infant. Just previous to the infant's discharge another visit is made to the home to insure proper care

for the baby. From then on the public health nurse visits to supervise the mother and infant as often as is necessary. As a part of a research study all premature infants residing in suburban Cook County will be followed up by the public health nurse over a 12 year period.

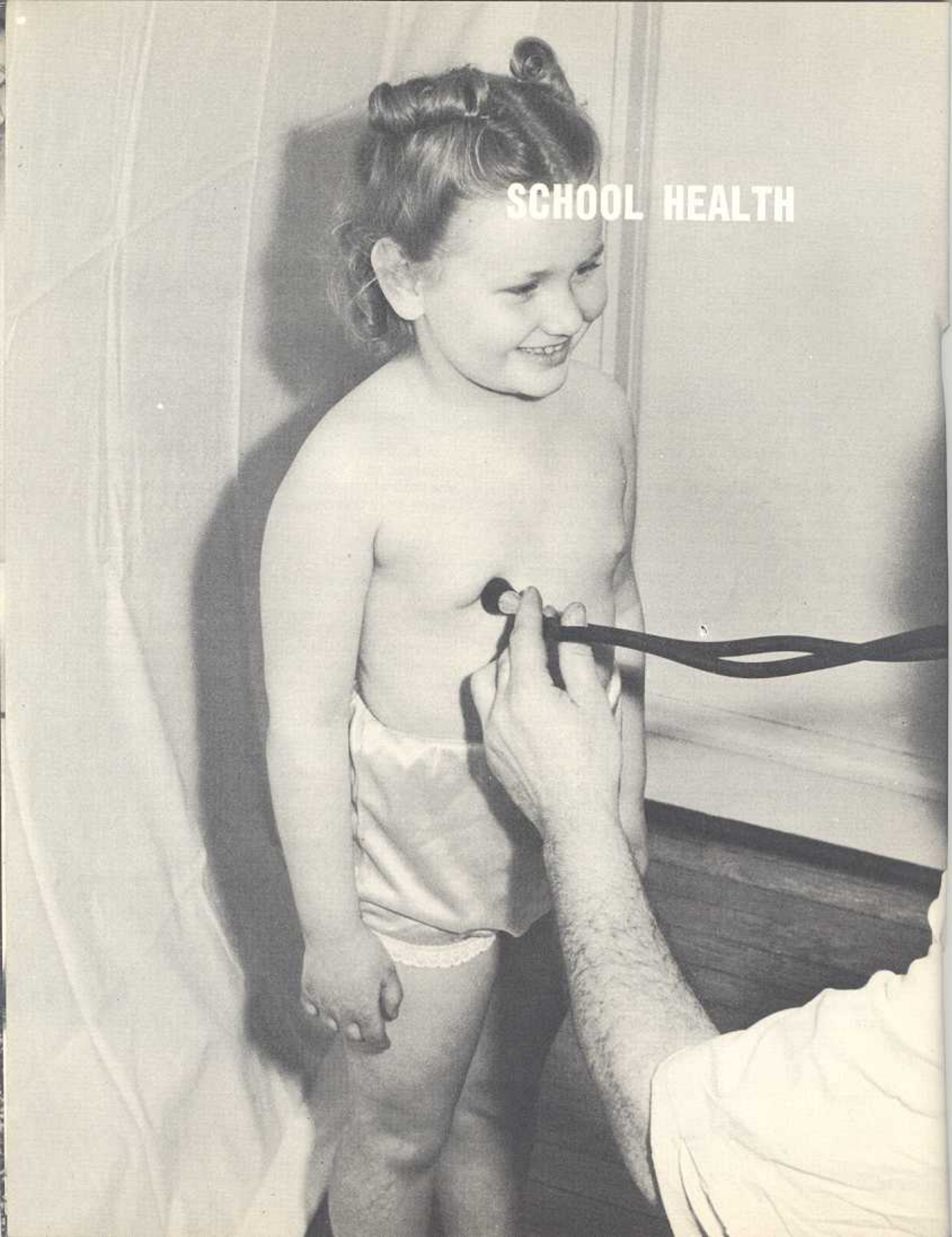
Maternity service included visits by the public health nurse for the care and guidance of the mother throughout pregnancy, assistance in planning for delivery, and providing for nursing care after delivery.

A maternal clinic, organized in 1945 for negro mothers, was held twice a month. In 1947, 98 new patients were under supervision of the clinic. There were 396 mothers registered.

All suburban Cook County Hospitals, those in adjoining counties and state and the Chicago Health Department cooperated in reporting 15,516 births during 1947. An attempt was made to visit every mother to give her an opportunity to receive early instruction and demonstration in care of the new infant. The early case finding and medical care of congenital defects may prevent crippling; and more important, the medical and nursing supervision assures each child of a better chance for normal development, physically, mentally and emotionally.

The infant and pre-school program was directed toward keeping well babies well through adequate medical and nursing supervision. For those who are unable to secure private pediatric care there were 51 child health conferences held monthly. In 1947, 4779 infants, and 4649 pre-school children were examined by a pediatrician assisted by a public health nurse. Guidance in child care and development was given to the parents. The pre-school period is the best time for continuous medical and dental supervision. To prepare the child for school a medical and dental examination was arranged to find defects that could be corrected and protect the child against communicable diseases.

**SCHOOL HEALTH**



Since the enactment of the Illinois Health and Physical Education Law in 1944, there has been a gratifying expansion of services and activities in the conduct of the school health programs in suburban Cook County.

Parochial as well as public schools, school boards, teaching staffs, parent-teacher groups and the family physician have enthusiastically accepted the challenge of participating in the promotion and expansion of child health.

The school health program was primarily concerned with health education, school health services and environmental sanitation. The program required the close cooperation of home, school and community to insure the success that has been achieved.

Nursing services were provided to 204 schools, having an enrollment of 37,035. Physical examinations were completed on 9195 elementary and high school students by health department physicians, cooperating pediatricians and local physicians.

Under medical supervision the public health nurse instructs and demonstrates to teachers hearing and vision testing, giving special attention to symptoms to be observed; height and weight measurements; deviations which constitute a basis for referral for examination, and inspections of children for communicable disease.

In the majority of schools, the teachers appreciate the value and importance of screening tests such as vision, hearing, weighing and measuring and carried out these techniques in their respective classrooms.

All children are vision measured yearly. Hearing tests and Wood Lamp inspections were done in first, fourth and seventh grades. These tests were provided for all new children entering the school as well as those children selected through the teacher-nurse conference.

Follow-up home visits were made by the public health nurse on children reported to be ill and on all cases with physical defects, or behavior problems.

In 48 schools, dental education programs and dental surveys were completed in cooperation

with the Chicago Dental Society with the assistance of local dentists. The program included 5944 children. Of this number 76.35 per cent were found to be in need of dental care. There was an average of 3.95 carious teeth per child.

In one school in which the survey was repeated, it was found that on the first survey 54 per cent of the children needed dental care, while on the second survey it was found that this figure had dropped to 27 per cent in need of dental care. This is indicative of the cooperation of parent and dentist in following through and providing needed dental care.

In one community (8 schools) where fluorine is contained in the drinking water there was a notable decrease in the incidence of dental caries.

Eight schools in rural and suburban Cook County requested assistance in organizing school lunch programs. Many of these were Federal and State subsidized programs.

The Cook County Department of Public Health in cooperation with the Tuberculosis Institute of Chicago and Cook County and the Chicago Nutrition Association, sponsored a School Lunch Conference for school lunchroom personnel, teachers, school administrators, parent-teacher groups and others. The program consisted of information on dish washing, sanitation, menu planning and a demonstration of large quantity food preparation.

Seven schools asked for consultant service on nutrition education in the classroom. Two schools did nutrition surveys in cooperation with the Cook County Department of Public Health. It was found in one area that 70 per cent of the school population usually ate a fair or poor breakfast. Through the school superintendent, a "Good Breakfast" program, which brought in the parents and the community was initiated. Demonstration good breakfasts were served in the school and the parents were invited to take part in the program.

In another area, it was found that 70 per cent of the school population ate a good breakfast but the children showed a poorer score on their lunches. The school health council is planning a community-wide "Good Lunch Campaign", which will be carried on during the early part of 1948.

# SANITARY ENGINEERING





In order to truly maintain and enjoy good health, an individual must live, work and play in a sanitary environment. The water he drinks, the food and milk he consumes, the wastes he creates, the home or trailer camp wherein he resides, the hospitals, nursing homes, institutions, schools, swimming pools, which are used as the occasion may require — all are part of the environment and can affect the health of the individual and the community. The health department is constantly on the alert through routine inspections, consultations, and assistance in emergencies in order to secure and maintain a sanitary environment.

During the past year, protection of water supplies whether obtained from a public distribution system, privately owned well, or forest preserve well, has been secured by means of routine inspection by the sanitary engineers. In addition, the Sanitary Engineering Division has interpreted and reported the results of 3260 analyses of water samples collected in Cook County and submitted to the Chicago Branch Laboratory of the Illinois Department of Public Health. Assistance has been given to homeowners and consulting engineers and architects who are planning installations or improvement of water supplies or who operate water supply facilities.

During the past year there has also been expanded activity in reviewing plans for small sewage treatment works to serve trailer camps, schools, and institutions brought about by the spurt in construction of such facilities.

Housing shortages have caused many families to reside in trailers. The camps in the County range from very good to very bad. Inspections are made and recommendations made for improvements to bring about compliance with the Rules and Regulations for the Sanitary Control of Trailer Camps. Action to close non-conforming camps has been taken in only a few instances in view of the extreme shortage of suitable trailer sites. During December, a fire in a trailer resulted in the death of three children. A test sponsored by the County Health Department in cooperation with several other interested agencies determined that the automatic type of fire extinguishers mounted in the trailer could have been a factor in these deaths by creating a poisonous gas. All the trailer camps in the County were immediately visited and camp managers were advised of this situation and requested to collect these extinguishers from the trailers and to store them in a safe place.

The housing shortage and the desire of many persons to reside in the less crowded rural and

suburban areas has brought about need for installations of many private water supply and sewage disposal systems. Permits for such construction issued by the Zoning Bureau call for compliance with specifications issued in pamphlet form by the Health Department. Such specifications are based on the results of experiments and information gathered from the operational history of many existing installations. During the past year, the U.S. Public Health Service has been conducting a study in certain selected areas in the United States in order to obtain information toward improvement of the presently accepted recommended private sewage disposal system, consisting of a septic tank, distribution box and subsurface seepage system used for disposal of sewage from a single family residence. Cook County was one of the sites selected for this study in view of the variety of conditions existing in the County and because of the information and assistance which could be furnished by the Health Department and Zoning Bureau Engineers.

During 1947 the Illinois Department of Public Health has approved the use of bromine as a disinfectant agent for swimming pool water. This approval was based on the results of information obtained through questionnaires and research. The County sanitary engineers assisted in securing this information and are continuing to collect samples for analyses and information on operation conditions in connection with the use of bromine.

Man can be man's worst enemy. This is all too evident in the many requests for assistance in securing abatement of sanitary nuisances created by willful or thoughtless individuals in the disposal of waste materials, or in business operations. Discharge of septic tank effluent into roadside ditches, feeding of garbage to hogs, operation of refuse dumps with resultant odors and fly and rodent breeding - - - these and many other situations require inspections followed by advisory action and in many instances by referral to the prosecuting authorities.

Enjoyment of the environment implies that the individual can obtain safe water to drink when he visits the Forest Preserve, the Country Club or neighbor - - that he can swim with safety in the publicly operated swimming pool - - that an unsafe natural swimming area has been posted with warning signs - - that food served in a public eating establishment is clean and free from disease producing organisms - - that the label of "Pasteurized Grade A" on a milk bottle truly describes the quality of the milk inside that bottle.

# ADULT HEALTH



Wall chart

COMMUNICABLE DISEASE INFORMATION



**WORKBOOK on DENTAL HEALTH**

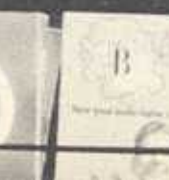
WE GROW UP

HEALTH EDUCATION

COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

SAFE MILK

**Typhoid Fever**



## FAMILY HEALTH SERVICE

Family health guidance is the core of the services offered in the community. Regardless of the special type of service such as tuberculosis, venereal disease or maternity that the staff may give, the total family needs; physical, mental and emotional are taken into consideration to assist the family in making health plans. The service may include guidance, instruction, or demonstration.

Nursing care of the sick is an essential part of a public health program. There has been an increased number of referrals for this type of care. Likewise, the nursing care of the sick cannot be separated from the needs of the family. This service again presents an opportunity for family health teaching.

The trend in public health today requires complete coverage in the prevention of diseases and in the follow-up of mental and physical disabilities. In this new approach, efforts must be concentrated not only on maternal and infant hygiene programs but also on the continuous program in pre-school and school health. This should be followed by programs for the prevention and control of chronic illnesses or the problems of geriatrics. One part of this program has been initiated in the inspection and supervision of nursing homes by the public health nurse and sanitary engineer.

## COMMUNITY ORGANIZATION

In each community area some type of community organization for health exists, representing a part or all of the citizens in that area. To strengthen the program of the health department special groups and institutions have pro-

vided facilities or cooperated on special projects. The hospitals in suburban Cook County have provided facilities for clinics such as; venereal disease, crippled children, physical therapy and rheumatic fever. One suburban hospital conducts classes for expectant mothers with their staff personnel assisting with the instruction. Birth list and the premature program are followed carefully by the hospital personnel. In those hospitals with schools of nursing, the health department staff have assisted in the instructing to integrate health in the curriculum. The hospital has been a real ally to the health department.

Many communities have desired more health services than is possible to receive from the limited personnel of the health department. These local communities have appropriated funds with which to pay their own health personnel. The Cook County Department of Public Health has assisted these communities in planning their programs giving additional assistance to special projects, and supervision of the local personnel. This cooperation assures continuity of service and prevents overlapping of services in the area.

## STUDENT TRAINING

While professional education cannot be considered a health service in a direct sense, it determines the caliber of personnel employed for the performance of health services. The health department has actively participated in the public health training of medical students, public health nurses, student dieticians and a health educator.

# ADMINISTRATION



# COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

## ADMINISTRATION

Director ..... Edward A. Piszczek, M.D., M.P.H.  
Administrative Secretary ..... Mary F. Pearce  
Administrative Clerk ..... Milton Breault  
Receptionist ..... Margaret Mary Fahey

## DIVISION OF HEALTH EDUCATION

Chief ..... Irene Fahey, Ph.B., M.P.H.  
Film Technician ..... Arthur J. Fox  
Secretary ..... Doris Baebi

## MEDICAL

### DIVISION OF COMMUNICABLE DISEASE

Chief ..... John B. Hall, M.D., M.P.H.

#### Secretaries

Lorraine Johnson ..... Mildred Coughlin

#### Cooperating Clinicians

Emile J. Bunata, M.D. ..... M. C. Higgins, M.D. ..... Hugo Long, M.D.  
W. M. Winston, M.D. ..... W. H. Young, M.D.

### DIVISION OF MATERNAL AND CHILD HYGIENE

Chief ..... Robert Dessent, M.D., M.P.H.

#### Cooperating Pediatricians

George S. Frauenberger, M.D. ..... Richard Marks, M.D. ..... Maya S. Unna, M.D.  
Mildred Jackson, M.D. ..... Bruce Neuman, M.D. ..... W. M. Winston, M.D.  
Anne C. Leonard, M.D. ..... J. W. Singleton, M.D.

### DIVISION OF NUTRITION

Chief ..... Lillian Nash, B.S., M.S.

### DIVISION OF PUBLIC HEALTH NURSING

Chief ..... Madeline Roessler, R.N., Ph.B., M.A.

#### District Supervisors

Thelma Cline, R.N., Ph.B., B.S. ..... Mary Louise Gunning, R.N., B.S.\*  
Sibyl C. Davis, R.N., B.S., M.A. ..... Helen Keenan, R.N., B.S.  
Esther Doyle, R.N., B.S. ..... Myrtle Sorenson, R.N., B.S.\*

#### Consultants

Eileen Hewstone, R.P.T. ..... Esther Dahlstrom, R.N., R.P.T. ..... M. Helen Halladay, R.N., Ph.B.

#### District Staff Nurses

Lorraine Bertolini, R.N. ..... Irene Gregg, R.N., B.S. ..... Irene O'Connor, R.N.  
Frances Bulger, R.N., B.S. ..... Edith Heide, R.N. ..... Mary Olenicz, R.N., Ph.B.  
Bridget Campbell, R.N., B.S. ..... Margaret Hogan, R.N., B.S. ..... Margaret Phelan, R.N.  
Margaret Celestine, R.N. ..... Mary S. Keller, R.N. ..... Hilda Schulze, R.N., B.S.  
Eleanor Charles, R.N. ..... Evelyn Kuehnl, R.N. ..... Dorothy Seeman, R.N.  
Patricia Cook, R.N., B.S. ..... Olive MacDougall, R.N., B.S. ..... Elizabeth G. Sirlin, R.N.  
Virginia Davis, R.N. ..... Lorraine Means, R.N., B.S. ..... Ruth Truebger, R.N.  
Margaret Duffy, R.N. ..... Mabel Murray, R.N., B.S. ..... Myrtle Van Wert, R.N.  
Luella Fezor, R.N. ..... Harriette McNally, R.N. ..... Ilene Vuolle, R.N.  
Mary Flynn, R.N. ..... Devona Nichols, R.N. ..... Martha Willis, R.N., B.S.  
Edith Nyden, R.N., B.S.

#### Secretaries

Mossie Perry ..... Rose Keenan ..... Catherine Lucas  
Mary Louise Murphy ..... Evalyn A. Webb

## ENVIRONMENTAL SANITATION

### DIVISION OF SANITARY ENGINEERING

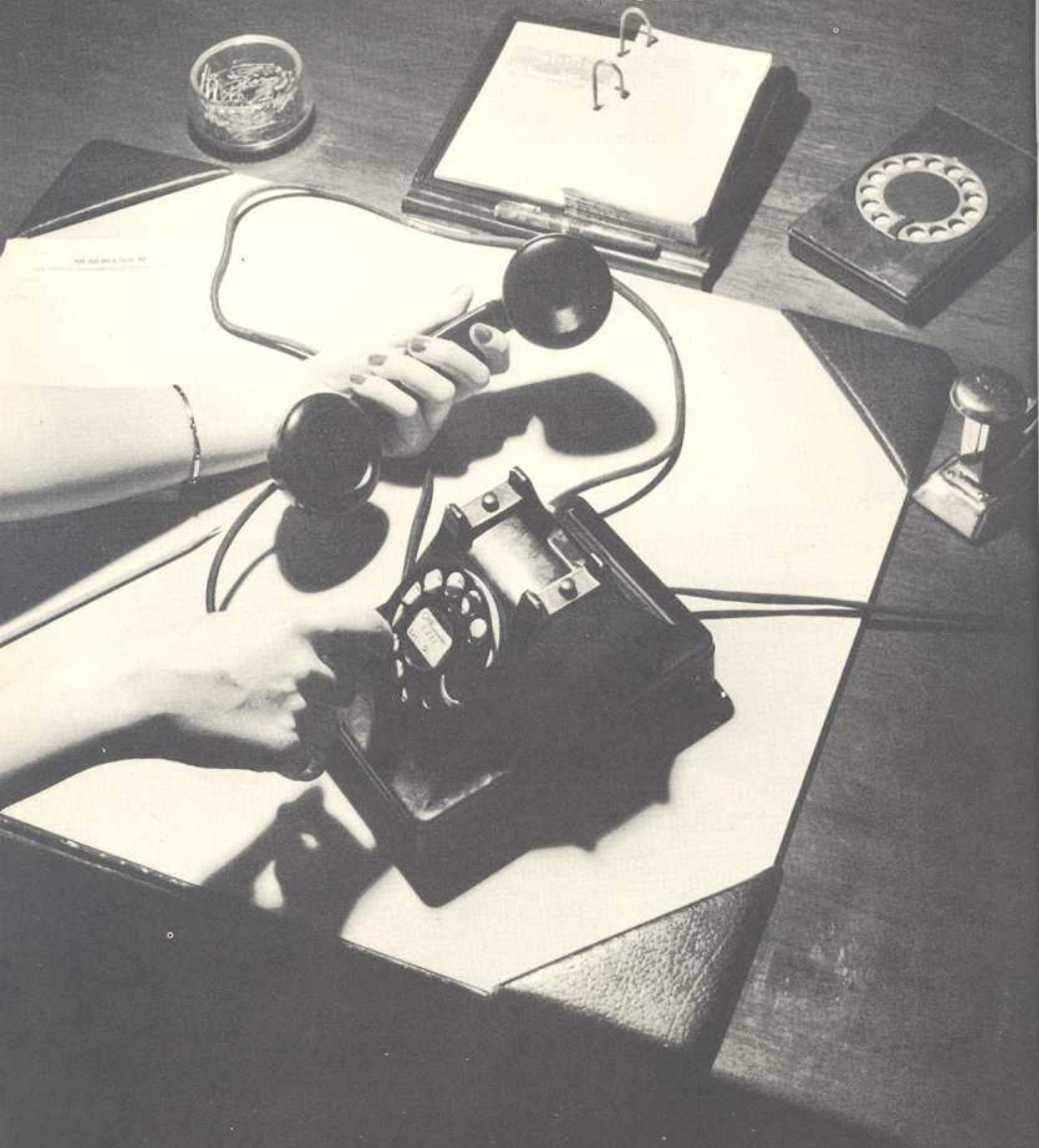
Chief ..... Benn J. Leland, B.S., M.S.

#### District Engineers

Louis Halla, B.S. ..... Robert de Jonge, B.S. ..... Steven Nichiporuk, B.S.  
Sanitarian ..... Joseph Svec  
Secretary ..... Helen Leszczynski

\*On educational leave of absence

# FIELD SERVICES BUDGET



# COOK COUNTY DEPARTMENT OF PUBLIC HEALTH

## CHICAGO

Central Administrative Office  
737 South Wolcott Avenue  
CHESAPEAKE 5833

## DESPLAINES

North District Office  
Physical Therapy Treatment Center  
1044 Lee Street  
Des Plaines 1131

## GLENVIEW

Crippled Children's Diagnostic Clinic  
1930 Prairie Avenue  
Glenview 1700

## MELROSE PARK

West District Office  
Venereal Disease Clinic  
Physical Therapy Treatment Center  
10 Broadway  
Melrose Park 3009

## EVERGREEN PARK

Southwest District Office  
3411 West 95th Street  
Crippled Children's Diagnostic Clinic  
2800 West 95th Street  
Evergreen Park 7424

## HARVEY

South District Office  
Venereal Disease Clinic  
Physical Therapy Treatment Center  
15430 Park Avenue  
Harvey 6

## CHICAGO HEIGHTS

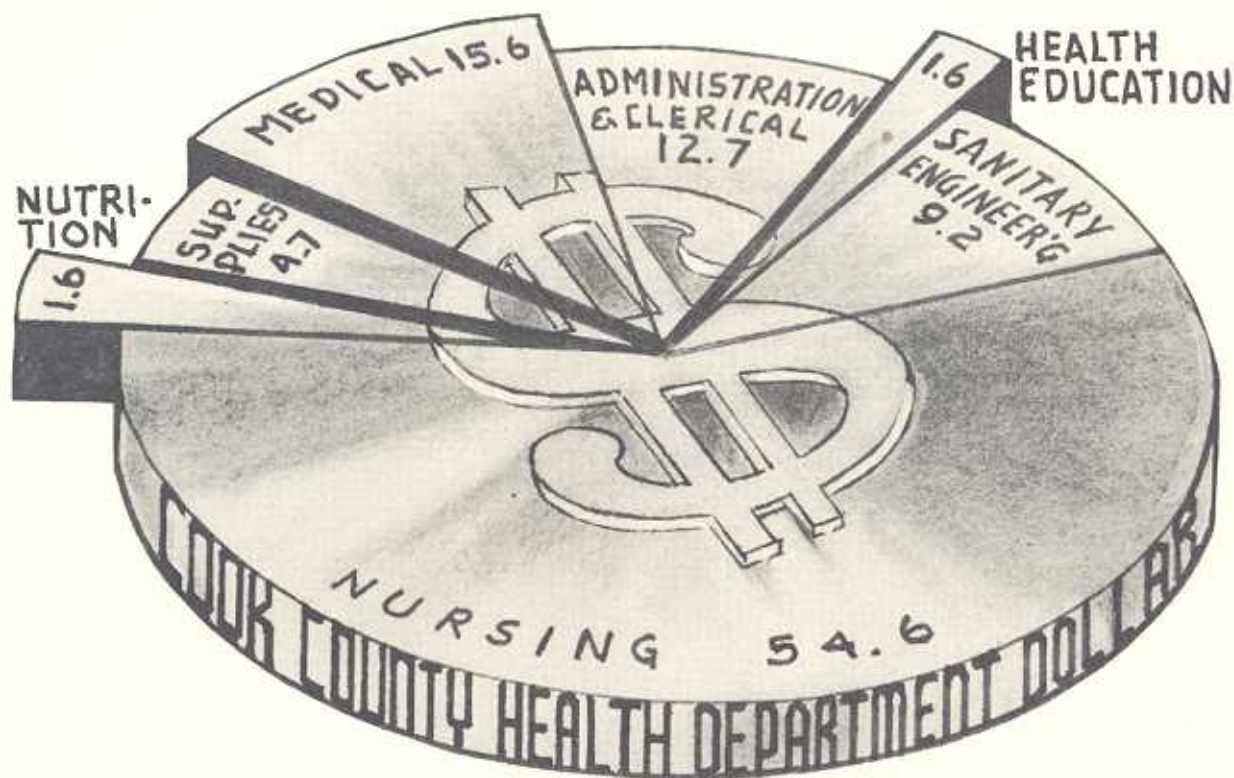
Venereal Disease Clinic  
Physical Therapy Treatment Center  
Crippled Children's Diagnostic Clinic  
1423 Chicago Road  
Chicago Heights 3200

## ROBBINS

Venereal Disease Clinic  
Maternal Clinic  
139th & St. Louis Avenue  
Blue Island 4251

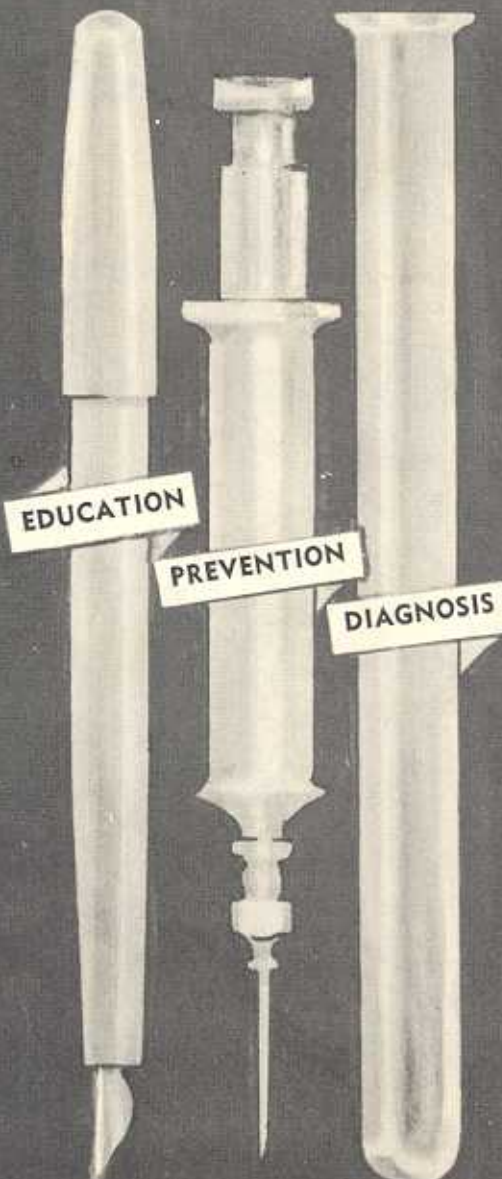
## BERWYN

Venereal Disease Clinic  
Physical Therapy Treatment Center  
6600 West 26th Street  
Stanley 6600



## BUDGET

COOK COUNTY .....	\$116,135.00
STATE-FEDERAL .....	114,635.00
OTHER .....	7,080.00
<b>TOTAL .....</b>	<b>\$237,850.00</b>



EDUCATION

PREVENTION

DIAGNOSIS