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CHANGES IN VISITING HOURS AT THE POSTON GENERAL HOSPITAL

ON GENERAL WARDS:

Daytime visiting - Tuesday, Thursday, Saturday, Sunday 3-4 p.m.
Evening visiting - Monday, Wednesday, Friday 7-8 p.m.

ON CHILDREN'S WARD:

Daytime visiting - Tuesday, Thursday, Saturday, Sunday 3-4 p.m.
Evening visiting - None

ON TUBERCULAR WARD (#1-#3-#4):

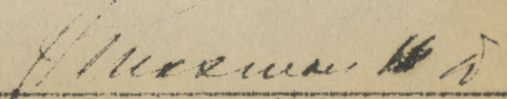
Daytime visiting - Thursday & Sunday 3-4 p.m.
Evening visiting - Wednesday & Saturday 7-8 p.m.

ON MATERNITY WARD (#6):

Daytime visiting - Tuesday, Thursday, Saturday, Sunday 3-4 p.m.
Evening visiting - Monday, Wednesday, Friday 7-8 p.m.

SPECIAL ATTENTION:

Operative and maternity cases are to have no other visitors than husband, wife, or parents the first three days.


A. Pressman, M.D.,
Director of Health & Sanitation

COLORADO RIVER WAR
RELOCATION PROJECT
Poston, Arizona
July 4, 1942

MEMORANDUM TO: ALL RESIDENTS OF POSTON

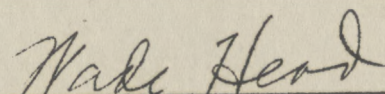
SUBJECT: CLOSING OF SECTION CLINICS IN CAMP I

FROM: W. WADE HEAD - PROJECT DIRECTOR

As a result of the continuing organization of our medical service, it will be necessary to close the four clinics that were established in Camp No. 1 for rendering medical and dental service. These clinics were set up as a temporary measure until the general hospital had been sufficiently advanced in its construction to make its use possible. At this time an out-patient medical and dental service will be set up at the hospital. It will be necessary for all persons in need of medical or dental care who are not actually ill and who are up and about to go to the out-patient clinics in the general hospital. All requests for a home visit by the physician should be sent to the hospital. The ambulance service will operate from the hospital, instead of from the four clinics as has been the case up to now.

This change is made necessary for a number of reasons. We must centralize the service in order to permit the doctors to give maximum service to all. With the opening of Camps 2 and 3, a number of our doctors, dentists and nurses must be made available to these centers. This will reduce the number in Camp 1. Increased efficiency is absolutely necessary if all are to be adequately cared for.

This change will cause certain inconvenience to those needing medical or dental care, but it is hoped that the residents of Poston will appreciate the need for this change and cooperate fully with our doctors and nurses so that they may render the greatest possible service to our community. This change will become effective July 6, 1942.


W. Wade Head
Project Director

Poston, Arizona
Public Health Dept.
Bulletin #100
December 1942

TO ALL BLOCK MANAGERS

SCARLET FEVER HAS APPEARED IN POSTON.

SCARLET FEVER IS A HIGHLY CONTAGIOUS DISEASE AND MAY SWEEP THROUGH CAMP LIKE WILD FIRE, UNLESS THE FOLLOWING DIRECTIONS ARE CARRIED OUT EXACTLY.

1. Wherever a scarlet fever quarantine sign has been posted, the entire family is forbidden to mingle with others than the family.
2. The food must be provided by neighbors and friends from the mess halls, in containers which are not to be carried into the apartment quarantined.
3. The person conveying the food is not to touch the container, dish, or any other article used in the apartment.
4. The latrine must not be used by the patient until the quarantine sign has been removed. Members of the family using the latrine will do so with as little contact as possible.

All suspicious cases are to be reported to the hospital immediately.

Scarlet fever may be very serious, causing death or complications of ears, eyes, heart, glands, kidney, etc.

BEFORE THE QUARANTINE SIGN IS REMOVED ALL ARTICLES HANDLED BY THE PATIENT ARE TO BE BOILED OR SCRUBBED: PAPERS DESTROYED AND BOOKS THOROUGHLY SUNNED.

George Kawaichi, M. D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman, M. D.
A. Pressman, M. D.
Director of Health and Sanitation

Poston, Arizona
Public Health Dept.
December 1942

TEACHERS BULLETIN

SCARLET FEVER

Scarlet fever is a highly contagious disease characterized by sore throat and a diffused scarlet eruption.

The method of infection is directly by contact with an infected person; indirectly by articles freshly soiled with discharges of an infected person, or through contaminated milk or milk products. Eighty per cent of cases occur in children under ten.

SYMPTOMS: Generally appear suddenly with vomiting, rash appears in twenty-four to forty-eight hours as scattered red points on reddened ground, first on neck and chest, usually spreading rapidly over entire body as a bright scarlet rash. Skin is swollen. Strawberry tongue. Throat intensely sore, and inflamed. Headache often very severe. Fever and rash gradually subside from fifth day. Scaling follows in large flakes of size proportional to severity of fever; lasts ten to fifteen days.

ALL ARTICLES HANDLED BY THE PATIENT ARE TO BE BOILED OR SCRUBBED; PAPERS DESTROYED AND BOOKS THOROUGHLY SUNNED.

CONTACTS: Seven days if patient is removed from premises, otherwise full period of quarantine--21 days.

Patient and contacts excluded from school until readmitted by Health Officer.

George Kawaichi M.D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman M.D.
A. Pressman, M. D.
Director of Health and Sanitation

P A R E N T S B U L L E T I N

S C A R L E T F E V E R

SCARLET FEVER IS A HIGHLY CONTAGIOUS DISEASE.

SYMPTOMS: Generally appear suddenly with vomiting, rash appears in twenty-four to forty-eight hours as scattered red points on reddened ground, first on neck and chest, usually spreading rapidly over entire body as a bright scarlet rash. Skin is swollen. Strawberry tongue. Throat intensely sore, and inflamed. Headache often very severe. Fever and rash gradually subside from fifth day. Scaling follows in large flakes of size proportional to severity of fever; lasts ten to fifteen days.

The method of infection is directly by contact or indirectly with an infected person by articles freshly soiled with discharges of an infected person.

QUARANTINE: Seven days for all contacts if patient is removed from premises, otherwise 21 days.

Patient and contacts excluded from school and all other places until readmitted by Health Officer.

The following regulations are to be observed until the quarantine sign is removed:

1. Wherever a scarlet fever quarantine sign has been posted, the entire family is forbidden to mingle with others than the family.
2. The food must be provided by neighbors and friends from the mess halls, in containers which are not to be carried into the apartment quarantined.
3. The person conveying the food is not to touch the container, dish, or any other article used in the apartment.
4. The latrine must not be used by the patient until the quarantine sign has been removed. Members of the family using the latrine will do so with as little contact as possible.

BEFORE THE QUARANTINE SIGN IS REMOVED ALL ARTICLES HANDLED BY THE PATIENT ARE TO BE BOILED OR SCRUBBED; PAPERS DESTROYED AND BOOKS THOROUGHLY SUNNED.

George Kawaichi, M.D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman, M.D.
A. Pressman, M. D.
Director of Health and Sanitation

Poston, Arizona
Public Health Dept.
December 1942

SCHOOL
EXCLUSION PROCEDURE FOR
CONTROL OF
COMMUNICABLE DISEASE

DISEASE	EXCLUSION PERIOD OF PATIENT	EXCLUSION PERIOD OF CONTACTS
Chickenpox	Until scabs have disappeared --two weeks.	All children in apartment until quarantine is removed or read- mission slip is secured.
Measles	15 days	Children in the apartment, who have not had the disease, 15 days or until quarantine sign is removed. Readmission slip required.
Mumps	Until recovery and the swell- ing has completely disappeared --two weeks.	All children in apartment until quarantine is removed or read- mission slip secured.
Scarlet Fever	21 days or until quarantine sign is removed.	When patient is in hospital, 7 days for all other persons in apartment. Readmission slip required.
Whooping Cough	Until recovery. Readmission slip required.	Children who have not had disease are excluded from school for 10 days. Read- mission slip required.
Impetigo	The one affected until re- covery. Readmission slip required.	None
Ringworm	The one affected until re- covery. Readmission slip required.	None
Scabies	The one affected until re- covery. Readmission slip required.	None

Readmission slip can be secured at the hospital Monday, Tuesday, Wednesday,
Thursday, and Friday, 8:30 to 9:00 a.m. Use front main entrance. (1381)

Poston, Arizona
Public Health Dept.
December 1942

TEACHERS BULLETIN

MUMPS

Mumps is transmitted by the air, hands, and occasionally by inanimate objects, such as, towels, eating utensils, etc.

Hand to mouth transference of the infected secretions is probably the most important factor in the transmission of mumps.

While mumps is not as infectious as some of the other respiratory diseases, such as influenza or measles, nevertheless we are all susceptible to the disease. As a rule, susceptibility is not influenced by either age, sex, race, or geographical location. Usually one attack of mumps will produce permanent immunity, but second and third attacks occasionally occur.

The period between exposure to the disease and the appearance of symptoms which is known as the incubation period, is from two to three weeks.

Mumps are more prevalent during the winter months than during the summer.

ALL ARTICLES HANDLED BY THE PATIENT ARE TO BE BOILED OR SCRUBBED; PAPERS DESTROYED AND BOOKS THOROUGHLY SUNNED.

Only the individual affected is to be excluded from school. Child to be readmitted only on certification of the health officer.

George Kawaichi, M. D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman, M. D.
A. Pressman, M. D.
Director of Health and Sanitation

Poston, Arizona
Public Health Dept.
December 1942

P A R E N T S B U L L E T I N

M U M P S

Mumps is transmitted by the air, hands, and occasionally by objects such as towels, eating utensils, etc.

Transference of the secretions by the hands from the mouth and nose is probably the most important factor in the transmission of mumps.

While mumps is not as infectious as some of the other diseases, such as influenza or measles, nevertheless we are all susceptible to the disease. Usually one attack of mumps will produce permanent immunity, but second and third attacks occasionally occur.

The period between exposure to the disease and the appearance of symptoms is from two to three weeks. These symptoms are swelling of face and glands.

Mumps are more prevalent during the winter months than during the summer.

ALL ARTICLES HANDLED BY THE PATIENT ARE TO BE BOILED OR SCRUBBED; PAPERS DESTROYED AND BOOKS THOROUGHLY SUNNED.

Only the individual affected is to be excluded from school. Child to be readmitted only on certification of the health officer.

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A. Pressman, M. D.
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Director of Health and Sanitation

Poston, Arizona
Public Health Dept.
December 1942

P A R E N T S B U L L E T I N

M E A S L E S

Measles is transferred from person to person in the discharges from the nose and mouth, and is also transmitted by air and may be carried through the handling of anyone of the numerous articles handled by an infected person, such as papers, door knobs, furniture, or mess equipment.

ARTICLES SHOULD BE BOILED OR SCRUBBED THOROUGHLY WITH SOAP AND WATER; PAPERS DESTROYED AND BOOKS THOROUGHLY SUNNED.

The quarantine period for contacts is definitely limited to fourteen days.

George Kawaichi, M.D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman, M.D.
A. Pressman, M. D.
Director of Health and Sanitation

Poston, Arizona
Public Health Dept.
December 1942

TEACHERS BULLETIN

MEASLES

Measles is transferred from person to person in the discharges from the nose and mouth, and is also transmitted by air and may be carried through the medium of contaminated articles and the hands.

Anyone of the numerous articles handled by an infected person, such as papers, door knobs, furniture, mess equipment, or food, may serve to transfer the infection directly to the mouth, or to the hands and hence to the mouth or nose, of another person.

ARTICLES SHOULD BE BOILED OR SCRUBBED THOROUGHLY WITH SOAP AND WATER; PAPERS DESTROYED AND BOOKS THOROUGHLY SUNNED.

The period of communicability begins definitely with the appearance of catarrhal symptoms which appear about four days before the eruption and usually do not cease until a minimum of five days thereafter.

The quarantine period for contacts is definitely limited to fourteen days.

George Kawaichi, M. D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman, M. D.
A. Pressman, M. D.
Director of Health and Sanitation

Poston, Arizona
Public Health Dept.
December 1942

TEACHERS BULLETIN

CHICKEN POX

This is contracted through contact of a well person with one having the disease and through use of towels, wash cloths, drinking cups and other table utensils.

The eruption is first seen on the trunk, especially the back, after which it extends to the face and the rest of the body.

The first symptoms are usually fever, headache, and pains in the back, arms, and legs. A rash appears in the mouth usually before those on the skin.

As long as the rash is present, and until all crusts have disappeared, the patient should be kept away from school and other children. The quarantine period continues until all scabs have disappeared.

George Kawaichi, M.D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman, M.D.
A. Pressman, M. D.
Director of Health and Sanitation

Poston, Arizona
Public Health Dept.
December 1912

P A R E N T S B U L L E T I N

C H I C K E N P O X

This is a contagious disease and is contracted through contact of a well person with one having the disease and through use of towels, wash cloths, drinking cups and other table utensils.

The eruption is first seen on the trunk, especially the back, after which it extends to the face and the rest of the body.

The first symptoms are usually fever, headache, and pains in the back, arms, and legs. A rash appears in the mouth usually before those on the skin.

As long as the rash is present, and until all crusts have disappeared, the patient should be kept away from school and other children. The quarantine period continues until all scabs have disappeared.

DUTIES OF THE PARENT: All eating utensils used by the patient should be boiled for twenty minutes before being returned to the kitchen. The Block Manager will, upon order of the physician, issue a hot plate permit.

George Kawaichi, M. D.
George Kawaichi, M. D.
Chief of Public Health Section

Approved:

A. Pressman, M. D.
A. Pressman, M. D.
Director of Health and Sanitation

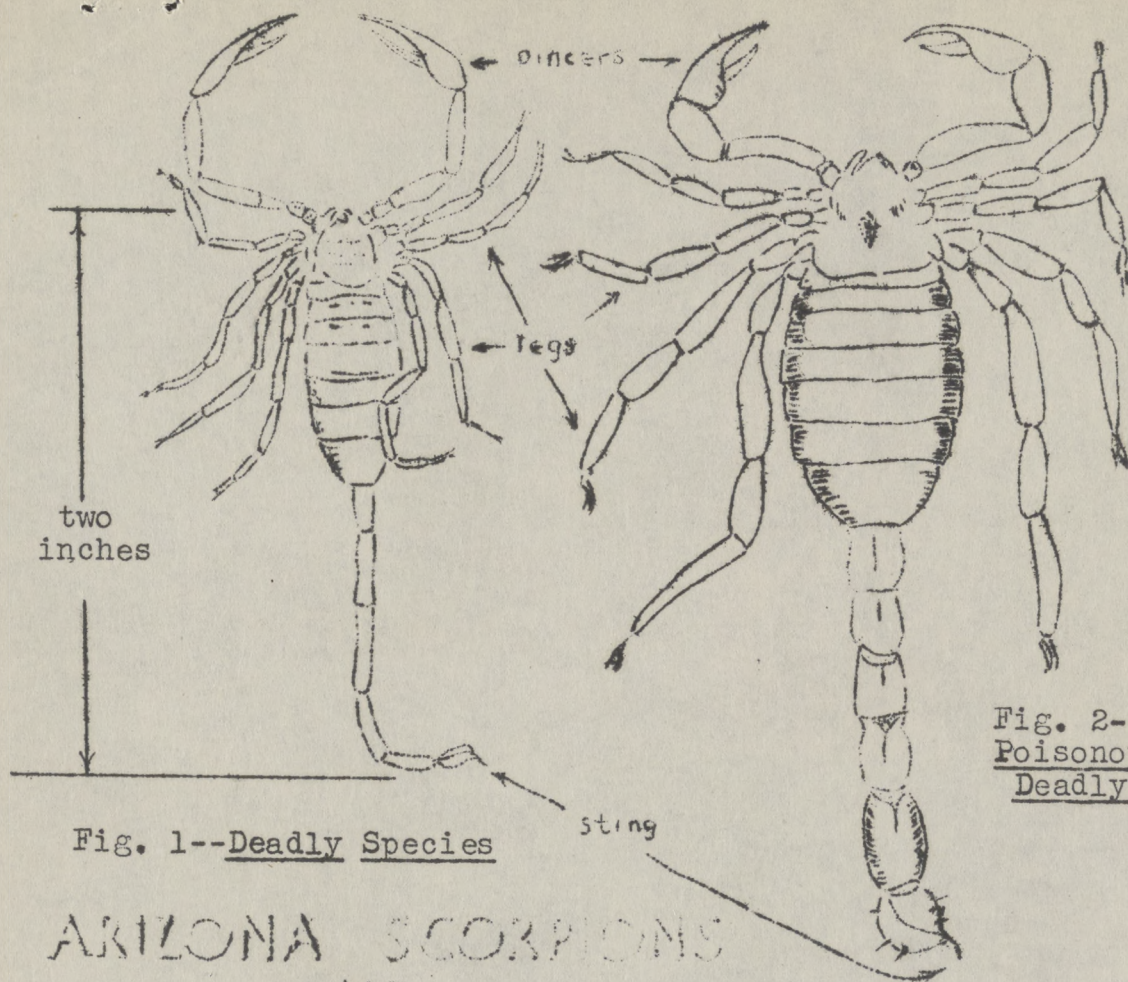


Fig. 1--Deadly Species

Fig. 2--
Poisonous but not
Deadly Type.

ARIZONA SCORPIONS AND THEIR POISON

MORE THAN 20 species of scorpions occur in Arizona. Of these, two are known deadly. Unless prompt treatment is rendered, the sting of the two deadly species is very often fatal to children under three years of age, and may be fatal to older persons. Deadly species are found only in the southern or so-called desert half of the state. More deaths have occurred in Arizona from scorpion sting than from the bites and stings of all other poisonous creatures combined.

HOW TO RECOGNIZE THE DEADLY SPECIES

Both of the two deadly species of scorpions are about two inches long, are yellowish, honey, or straw colored, and have a slender, fragile, "stream-lined" appearance. In general, the other scorpions whose stings are painful but not deadly, are blocky or sturdy in appearance (compare "tails", legs, and pincers in above drawings), and range in color from dark brown to nearly white with dark grey or greenish-grey markings. A person stung by one of the deadly species shows no swelling at the point of sting. However, the part becomes numb, pain is felt in other portions of the body, followed by nervousness, convulsions, nausea, and shortness of breath. In small children, death frequently results. Effects of the non-deadly varieties are much the same as following the sting of a honeybee. Swelling takes place in the locality of the sting, and the immediate area becomes discolored and pain may travel a short distance from the site of the sting.

FIRST AID TREATMENT

Dr. H. L. Stahnke, Arizona's scorpion authority, recommends the following first-aid treatment if a person has been stung by one of the deadly species of scorpions: "As soon as possible, place an ice pack on the site of the sting. Make the pack of finely crushed ice wrapped in as thin a cloth as possible. Cover and surround the area for about 10 or 12 inches. If the person is stung on the hand, foot, or other region that can be completely submerged, place the portion, as soon as possible, in an ice and water mixture made of small lumps of ice (about half the size of ice cubes) in a proportion of half ice and half water. This is more satisfactory than the ice pack. Never put salt in the water. If the person is 15 years of age or under, keep the foot or hand constantly in the iced-water. After the first 15 minutes, the hand or foot may be removed for relief for one minute for every 10 minutes in the iced water."

OBTAIN MEDICAL ASSISTANCE

Dr. Stahnke continues: "If the patient is less than three years old, if the patient has been stung several times, or if the patient has been stung on the face, back of the neck, anywhere along the backbone, or on an area of deep flesh like the buttock, thigh, or trunk of the body, or especially on the genital organs, medical assistance should be obtained at once. When the doctor is summoned, he should be told that the patient has been stung by a scorpion so that he may come prepared. Many hospitals in southern Arizona keep a supply of scorpion antivenin, and if such a hospital is in the vicinity, the patient should be taken there as quickly as practicable. Of course, in any case, the first-aid ice treatment should be applied and should be maintained until the patient is in the care of a physician. With adults, in case a physician is not available, the iced water treatment usually proves sufficient. Generally, after three hours of iced water treatment, there is no longer any danger but should the symptoms reappear, the treatment should be resumed."

WHAT TO DO IF STUNG BY A SCORPION

1. Identify the scorpion, if possible, to determine if it is one of the deadly species. The drawings on the other side of this sheet are provided as an identification aid. If the scorpion can be captured without loss of time in applying first-aid, and without too badly mashing the scorpion, its body may be of aid to the physician who should be able to recognize a deadly species.
2. Render first-aid to the victim with the ice pack or iced water treatment, preferably the latter. While this is being done, a third person should summon a physician or notify a hospital that a scorpion-sting victim is being brought to the hospital. The hospital attendant should be told the age of the victim and whether it is known positively that the scorpion is one of the deadly species.
3. Put the victim under the care of a physician and/or hospital as soon as is possible without endangering the patient.
4. Continue the ice treatment until the patient is under the care of a capable physician, or until all of the effects of the poison have disappeared. As in all cases of injury, efforts should be made to keep the patient quiet and to prevent fear and worry.

All data from Dr. H. L. Stahnke,
State Teachers College,
Tempe, Arizona

August 1942

FATIGUE AND REST IN RELATION TO HEALTH
Poston, Arizona
October 1942

Rest, next to adequate diet, has the greatest influence on gain in weight.

Studies in Malden, Massachusetts, have shown that among children who have stopped growing for three months, sickness, physical defects and poor health behavior are from three to four times as frequent as among those whose growth is good.

During rest periods voluntary activity is suspended and body energy is conserved for growth. A child should be taught that "Sleep time is growing time".

Every child should know how many hours of sleep are best for his age, what time he must go to bed in order to get the right number, what conditions give him the best quality of sleep. Sleep requirements depend on age.

6-7 years	require	$11\frac{1}{2}$	hours	sleep
8-9	"	11	"	"
10-11	"	$10\frac{1}{2}$	"	"
12-13	"	10	"	"
14-15	"	$9\frac{1}{2}$	"	"

Experiments with white rats demonstrates that there is less resistance to disease following periods of work without rest. Fatigue is cumulative in its effect and may result in a lowered vitality with increased susceptibility to disease, particularly, tuberculosis.

THE TEACHER'S RESPONSIBILITY.

1. She should have enough rest and sleep each day to maintain her own efficiency.
2. She should observe children who do not seem to have sufficient rest.
3. Arrange rest periods if necessary for underweight, tired children.
4. Maintain a happy spirit in the school room. Every child should be sent home happy. Any difficulty arising during the day should be made right before the close of school.
5. Home lessons should never be assigned to elementary pupils.
6. Rest periods during school hours should be given frequently.
7. These may be for two to five minutes in length and utilized for complete relaxation with eyes shut; change of position such as stand, stretch, or sit; listen to reading of a short poem or brief story; a relief drill or game.
7. Arrange program of studies to allow alternation of types of activity, mental with physical, work requiring use of eyes with that requiring less, etc.
8. Teach children the value of sufficient rest and sleep in relation to appearance, strength, growth, good scholarship.
9. Try to arouse the active interest of every child to secure the proper number of hours sleep at night.

* Adjusted from statements developed by Sally Lucas Jean and Edna A. Gerken.

WAR RELOCATION AUTHORITY
COLORADO RIVER WAR RELOCATION PROJECT
Poston, Arizona

December 7, 1942

NINTH MONTH

Increase the amount of food as the child grows.

TENTH, ELEVENTH AND TWELFTH MONTH

Continue the same schedule and increase the amounts of cereals, vegetables and fruit pulp gradually as the child grows. Rice or macaroni may be substituted now and then for potato, if desired. One or 2 teaspoonfuls of ground or chopped liver may be substituted once or twice a week for egg yolk. Withhold potatoes or other starchy food from child if he does not eat the green vegetables offered him.

INSTRUCTIONS

Orange juice.- Squeeze the orange and strain the juice immediately before serving the juice to the baby. Upon standing, orange juice loses vitamin C. If it is absolutely necessary to save one-half of the orange for the next serving, cover the cut surface with a piece of oiled paper, turn over on a saucer, and place in the refrigerator. Thus protected, and if kept at a low temperature, it will not lose as much of vitamin C as it would, otherwise.

Tomato Juice.- Serve as soon as the can is opened. The juice that is left, may either be allowed to remain in the can, closely covered, or it may be poured into a jar, closely covered and placed in the refrigerator for the next serving. If fresh tomatoes are used, do not squeeze until ready to serve. Tomato juice loses vitamin C, also, upon standing open.

Bananas.- This fruit is a good source of vitamins A, B and C. It, also, contains sugar in a form which is easily digested by the infant. However, only thoroughly ripe bananas should be served to babies. A ripe banana is one that is yellow all over, with the skins flecked with brown, with no green on the tips, and with a soft pulp. It should be mashed and fed to the baby with a spoon.

Prunes or apricots (dried).- Wash and add enough cold water to cover. Let soak overnight and cook at a low temperature in the same water in which they were soaked. Cook soft enough to mash through a strainer.

WAR RELOCATION AUTHORITY
COLORADO RIVER WAR RELOCATION PROJECT
Poston, Arizona

December 7, 1942

INSTRUCTIONS (Cont.)

Baked Potato.- Scrub with a vegetable brush, grease and bake in a hot oven. The grease prevents the skin from becoming hard and dry. Instead of greasing the potato, a pan of water may be placed in the oven. The steam will prevent the skin of the potato from becoming dry and hard.

To dry out bread.- Place in a slow oven and turn frequently.

Milk.- During the first 6 months of a baby's life there is no perfect substitute for breast feeding. Therefore, unless there is a very good reason, no baby should be taken off of the breast during this time. After the baby is 6 months old artificial feeding can be begun more safely, but it is recommended that a baby should be at least partly breast fed until he is 7 or 8 months old. The milk used may be either fresh, canned or dried. If fresh milk is used it should be boiled for 3 minutes in a single boiler or cooked for 20 minutes in a double boiler. Boiling milk kills all the disease germs which the milk contains and it also makes the milk more digestible. Use according to the doctor's formula.

When canned milk is used pour boiling water over the top of the can and in the same way sterilize a sharp instrument (such as an ice-pick), punch two holes, one on each side of the top of the can, and pour out the milk needed. Place the can on ice and use within 24 hours. The milk should then be diluted according to the directions on the can used as if it were fresh milk. Use it according to the doctor's formula.

WAR RELOCATION AUTHORITY

Poston, Arizona

December 7, 1942

INSTRUCTIONS IN INFANT FEEDING

Fifth and Sixth Months

Orange juice, diluted with an equal amount of cool boiled water, 2 tablespoonfuls twice a day, or tomato juice, undiluted, 4 tablespoonfuls twice a day, or grapefruit juice, diluted with an equal amount or more of cool boiled water and sweetened slightly, 2 tablespoonfuls twice a day.

Cod-liver oil, $1\frac{1}{2}$ teaspoonfuls twice a day.

Cereals, 2 tablespoonfuls just before the 10 a.m. nursing.

Egg-yolk, 1, mashed.

Vegetables.-- Begin by giving 1 teaspoonful of a vegetable, forced through a strainer or a sieve, once a day at the 2 p.m. feeding and increase the amount rapidly to 1 tablespoonful when the baby is 6 months old.

Spinach, lettuce, beet greens and chard (dark leafy vegetables) are used as source of iron and vitamin A. Carrots, green peas, green lima beans, green string beans, beets and asparagus are used as a source of other minerals and vitamins A, B, and C. Give one of the leafy vegetables two or three times a week and on the other days, give one of the others or a vegetable mixture. Use vegetables from the garden and substitute Gerber's or other canned products only when vegetables are out of season.

When cooking vegetables, use only a small amount of water, and add not more than $\frac{1}{4}$ teaspoonful of salt to 1 cup of water. Do not use soda, pepper, fat or other seasoning. Never cook vegetables for infants and young children with fat. Cook the green-colored ones in uncovered vessels. Cook vegetables only until tender and, after forcing through a strainer or a sieve, add the water in which they are cooked, to them. Since this water contains valuable mineral salts and vitamins it should be served with the vegetables.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 12, 1942

WAYS IN WHICH THESE FOODS FULFILL OUR DAILY NEEDS

Milk.- Is the main source of calcium and vitamin C. It supplies also protein, phosphorus and vitamins A and B. Calcium and phosphorus are two of the bone and teeth builders.

Eggs, lean meat and fish are most important for protein, iron, vitamin B₁, vitamin C, and nicotinic acid (the pellagra-preventive vitamin). These foods supply phosphorus also. Eggs and liver are excellent sources of vitamin A and iron.

Vegetables.- Are important sources of various minerals and vitamins. Dark green leafy vegetables, as chard, kale, spinach, turnip greens, collards, Chinese Cabbage, cabbage leaves, beet greens, etc., when properly cooked, are important sources of iron, vitamin A, vitamin B, and vitamin C.

Some vegetables, as cabbage, green peppers, water-cress, lettuce, carrots, cauliflower, onions, spinach, rutabagas, celery and radishes, if eaten raw, in generous amounts, when prepared properly (cut, chopped, or shredded just before they are served) are good sources of vitamin C. Tomatoes, raw or canned, are an excellent source of vitamin C and a good source of vitamin A.

Broccoli, peas, string beans, sweet potatoes, rutabagas, carrots and other green or yellow vegetables are valuable chiefly for vitamin A. Sweetpotatoes are, also, economical energy foods.

White potatoes, baked or boiled in the skins, especially new potatoes, are a good source of vitamin C, and provide appreciable amounts of iron and vitamin B₁. They are also economical energy foods.

Dried beans, peas, and other legumes, such as split peas, lentils and peanuts are good sources of protein, iron, vitamin B₁ and vitamin C. They also supply calcium and phosphorus, and are economical energy foods.

Fruit.- Citrus fruits, as oranges, grapefruit, and lemons, are the best source for vitamin C. One average serving will supply a day's need for vitamin C. Strawberries and cantaloupes are, also, excellent sources of vitamin C.

Apples, bananas, peaches, pears, pineapple (fresh or canned) and most of the common fresh fruits eaten raw in generous quantities, are good sources of vitamin C.

Peaches, apricots and cantaloupes and other yellow-fleshed fruits are valuable sources for vitamin A.

Dried apricots, dates, figs, prunes and raisins are better than average sources of iron.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 12, 1942

WAYS IN WHICH THESE FOODS FULFILL OUR DAILY NEEDS (Cont.)

Cereals and Bread.-- In general these are economical energy foods that furnish significant amounts of protein.

The dark or whole-grain or enriched bread, flour, and breakfast cereals are important sources of iron, vitamin B₁, and vitamin G.

Macaroni, grits, white rice are refined grain products; they cannot take the place of potatoes or other vegetables.

Butter and margarine to which vitamin A has been added are important sources of vitamin A.

White sugar, corn syrup and honey are concentrated energy foods.

Dark molasses and sorghum sirup contribute also calcium and iron.

WAR RELOCATION AUTHORITY

POSTON, ARIZONA

December 12, 1942

A GUIDE FOR AN ADEQUATE AND A WELL-BALANCED DIET

Each day we need:

Milk:

Minimum amounts:

2 to 3 cups for each adult.

3 to 4 cups for each child and 1 quart for each prospective mother.

1½ quarts for each nursing mother.

These amounts include the milk used in cooking and for drinking.

Egg: 3 or 4 times a week.

Meat: 1 serving: Adult; 1 slice, 3 inches by 6 inches by ½ inch.
Child; 1/3 of this amount.

Vegetables: 1 or more servings of potatoes a day.
2 or more servings a day of vegetables other than potatoes, one of them green or yellow.

Fruit: 1 serving of citrus fruit, such as oranges or grapefruit in season, or a serving of tomatoes, raw or canned.
1 serving of other fruits, fresh or dried, cooked or raw.

Cereals and Breads: Either whole grain or enriched cereals and breads.

Cereal -- 1 serving daily.

Bread -- a serving at each meal.

More cereals and breads should be used if the energy needs are high and the income limited.

Butter, or oleomargarine with added vitamin A: 1-5 Tablespoons
(100-500 Cal.)

Sugar, fat, etc., to complete the calories.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 12, 1942

BABY'S DAILY SCHEDULE

Fifth and Sixth Months

6:00 A.M. Breast or bottle feeding. Leave alone in
 crib to sleep or play.

9:15 A.M. Plain cod-liver oil or other source of
 vitamin D (to be ordered by physician),
 then orange juice or tomato juice. Bath.
 Before bath let baby kick and play freely
 on bed a few minutes without clothes.

10:00 A.M. Cooked cereal or Pablum (requires no cook-
 ing), then breast or bottle feeding.

10:20 A.M. Out of doors till feeding time. Sun bath
 and long nap out of doors if weather
 permits. Drink of water after nap.

2:00 P.M. Egg yolk, veg. tables mashed through a
 strainer. Breast or bottle feeding.

2:20 P.M. Out of doors if weather permits, in sun
 except on very hot days. Short nap.
 Drink of water after nap. Play.

5:15 P.M. Undress for night; before putting on
 baby's night clothes let him kick and
 play quietly on bed a few minutes.
 Plain cod liver oil or other source of
 vitamin D and orange juice or tomato
 juice.

6:00 P.M. Cooked cereal or Pablum (requires no cook-
 ing), then breast or bottle feeding.

6:20 P.M. Bed, lights out, windows open, door shut.

10:00 P.M. Breast or bottle feeding. (If the baby
 does not waken, this feeding may be
 omitted.)

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 12, 1942

BABY'S DAILY SCHEDULE

Seventh, Eighth, and Ninth Months

- 6:00 A.M. Breast or bottle or cup feeding. Leave baby alone in crib to sleep or play.
- 9:15 A.M. Plain cod-liver oil or other source of vitamin D (to be ordered by physician), then orange juice or tomato juice. Bath. Before bath let baby kick and play freely on bed a few minutes without clothes.
- 10:00 A.M. Cooked cereal or Pablum (requires no cooking)
then breast or bottle feeding.
- 10:20 A.M. Out of doors till feeding time, if weather permits. Sun bath may be given before nap. Long nap, followed by drink of water. Play.
- 2:00 P.M. Vegetable and egg yolk, then breast or bottle or cup feeding. When baby is nine months old, give strained fruit pulp.
- 2:20 P.M. Out of doors if weather permits--in sun part of the time except on very hot days. Short nap. Drink of water after nap.
- 5:15 P.M. Undress for night. Before putting on baby's night clothes, let him play on bed a few minutes. Play must not be exciting or rough. Cod-liver oil, or other source of vitamin D and orange juice or tomato juice.
- 6:00 P.M. Cooked cereal or Pablum (requires no cooking); then breast feeding or milk in a bottle or a cup.
- 6:20 P.M. Bed: lights out, windows open, door shut.
- 10:00 P.M. Breast feeding or milk in a bottle or a cup.
(This feeding may be omitted during this period.)

BABY'S DAILY SCHEDULE

6:00 A.M. Boiled whole milk.
Leave baby alone in crib to sleep or play.

8:15 A.M. Plain cod-liver oil or other source of
vitamin D (to be ordered by physician),
then orange juice or tomato juice.
Bath.

9:00 A.M. Breakfast: Cooked cereal or Pablum (requires
no cooking) with boiled whole milk.

9:20 A.M. Out of doors till dinner, if weather permits.
Sun bath may be given before nap. Long
nap. Play.

1:00 P.M. Dinner: Egg yolk, green vegetable; baked
potato; boiled whole milk.

1:20 P.M. Out of doors if weather permits, in sun part
of the time except on very hot days. Short
nap. Drink of water after nap. Play in
crib.

5:00 P.M. Undress for night. Play and exercise on
bed or on blanket on the floor.
Cod-liver oil or other source of vitamin D
and orange juice or tomato juice.

5:30 P.M. Supper: Cooked cereal or Pablum (which needs
no cooking); zwieback or dry toast; fruit
pulp; boiled whole milk.

6:00 P.M. Bed; lights out, window open, door shut.

WAR RELOCATION AUTHORITY
Poston, Arizona
December, 14, 1942

THE FEEDING OF YOUNG CHILDREN

One to Two Years

The diet begun in infancy is gradually increased.

The foundation for the diet is 1 quart of clean, pasteurized cow's milk. It will furnish the diet with adequate protein, calcium, phosphorus, and other essential mineral elements, enough vitamin A for growth and appreciable amounts of vitamins B and C. Though poor in iron, the iron which milk does supply can be used efficiently. For vitamin C, however, 2 to 4 tablespoonfuls of orange juice (or twice as much tomato juice) must be given.

Egg yolk should still be included in the daily diet, because of its many growth promoting qualities. It supplies iron, phosphorus, some calcium, vitamins A, B, D and excellent proteins. One to 2 teaspoons of finely chopped liver may be substituted once or twice a week for egg yolk.

The vegetables may be put through a coarse sieve or finely chopped. Spinach, asparagus tips, peas and carrots, singly or in combination, are suitable because of their nutritive value as further sources of iron, other minerals, vitamins A, B and C, and for their laxative properties. A small amount of baked potato should be included in the diet, also. It reinforces the diet in vitamin C, iron, and other minerals.

The cereals need no longer be strained, provided they have been cooked very soft. Rolled oats, dark farina or a cereal with added wheat germ, because of their iron and vitamin B value, should be given. One fourth to one third of a cup of the cooked cereal may be served twice a day (breakfast and supper), if desired. Cooked vegetable or ready to eat cereal may be substituted now and then for the supper meal, or vegetable pulp may be combined with milk in a cream soup and served with toast.

In order to stimulate the circulation in the gums and to develop the chewing habit, some dry bread or toast should be given twice a day. A little butter may be spread on the bread. However, since there is one and a quarter ounces of butter fat in the quart of milk, much additional fat is undesirable.

Fruit pulp should still be sieved. Most dried fruits do not need extra sweetening. Corn sirup may be used to sweeten dried apricots. One quart of milk contains over an ounce of sugar which is plenty for a day.

Cod-liver oil should be continued.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 23, 1942

INSTRUCTIONS IN THE FEEDING OF CHILDREN

One to Two Years

The best foundation for the diet is a quart of clean cow's milk. This will supply from two thirds to three fourths of the total calories required per day. It will insure adequate protein, calcium, phosphorus, and other essential mineral elements, enough vitamin A for growth, and a very considerable amount of vitamins B and C, all in a form specially easy to digest. The milk to drink should be warm.

For vitamin C, continue to give orange juice (4 tablespoons or twice as much tomato juice).

Give 1½ teaspoons of cod-liver oil twice daily.

Give one egg yolk daily.

Give the darker cereals (mostly whole grains). These need not be strained.

Vegetables and fruits should be cut fine or mashed so that the baby can eat them easily. Be sure to include a green or a yellow vegetable and some potato in the diet each day. A small amount of butter may be used on the potato.

In order to stimulate circulation in the gums all the bread given should be dry and hard.

One to two tablespoons of cooked minced beef or lamb or liver may be given 3 or 4 times a week--every day toward the end of the second year.

Con

Concentrated sweets should be withheld. They tend to satisfy the appetite and are likely to disturb the digestion. There is plenty of sugar in the milk. Use only enough sugar that is necessary to make apple sauce, junket or very simple milk puddings palatable.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 23, 1942

CHILD'S DAILY TIME CARD

1 Year to 2 Years

6:00 A.M. Toilet. Wash hands and face. Brush teeth.
Cup of milk.
Sleep or play in crib.

7:30 A.M. Toilet. Bath. Dress.

8:00 A.M. Breakfast: Fruit juice; cooked cereal: Pabulum
(requires no cooking); soft-boiled or poached
egg; crisp bacon occasionally; toast; boiled
whole milk.
Cod liver oil (before or after breakfast).
Toilet for bowel movement. Wash hands.
Out of doors as soon after breakfast as
weather permits. Play in sun when possible.

10:30 A.M. Toilet. Wash hands
Nap--out of doors if weather permits. Sun
bath may be given before or after nap.

12:30 P.M. Toilet. Wash hands and face.
Dinner: Green vegetable; potatoes, rice, or
macaroni; meat or fish; stewed fruit or
simple pudding; boiled whole milk.

1:30 P.M. Toilet. Wash hands.
Out of doors as long as weather permits. In
sun when possible, playing or in go-cart.

3:00 P.M. Toilet. Wash hands.
Out of doors.

5:00 P.M. Toilet. Undress for night. Wash.

5:15 P.M. Supper: Cooked cereal: Pabulum (requires no
cooking); milk-vegetable soup or boiled
whole milk; milk toast or dry toast; green
vegetable or raw or cooked fruit.
Cod liver oil before or after supper.
Toilet. Wash hands. Brush teeth.

6:00 P.M. Bed; lights out, windows open, door shut.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 28, 1942

Diets for Nursery School and Kindergarten Children

2 to 5 Years of Age

7:00-8:00 A.M. BREAKFAST: Fruit: Stewed, such as apricots, prunes, peaches, applesauce and figs. Fresh, such as oranges, grapefruit or scraped or mashed fruit in season.
Cereal: Cooked cereal, as oatmeal, wheatena, dark farina with added wheat germ and other dark cereals--these need not be strained.

Do not give ready prepared cereal under 4 years.

Do not add sugar.

Toast: Whole-wheat or white toast made from enriched bread.

Butter

Milk

Cod-liver oil: 1 to 2 teaspoon

10:00 A.M. Juice of 1 orange.

12:00 M

DINNER: Soup: Use meat stock or milk and add vegetables.

Egg: May be soft-boiled or hard-cooked and mashed, coddled, poached, scrambled or creamed, or it may be mixed with the colored vegetable or the potato and served as a souffle or a puff. (Example: spinach or carrot souffle or potato puff), or it may be made into a simple dessert such as soft-cooked custard (very popular with children) or baked custard. The egg may be served for breakfast or supper instead of for dinner.

Meat: When an egg is not served at the noon meal, serve meat or fish or cottage or cream cheese. Young beef liver, or lamb's liver or pork liver, steamed and put through a food chopper, may then be creamed or made into a loaf and served with the vegetable, or creamed fish such as halibut, or a little chopped or scraped lean beef, minced chicken, chopped sweetbreads or brains or ground lamb chop may be served.

Cheese: Cottage or cream may sometimes be substituted for the egg or the meat or some of the milk.

Vegetable: Cooked spinach, lettuce, beet tops, celery leaves, asparagus, cabbage, turnip greens, broccoli, carrots, green peas, green beans, lima beans (tender green ones), beets, onions, white or sweet potatoes (mashed or baked), brown rice, yellow turnips, mashed, yellow squash and tomatoes.

Give one leafy vegetable, at least, once a day, and potatoes once a day. Do not give potatoes and rice at the same meal as both of them are high in starch. Cook without fat. Use canned vegetables only when fresh ones are out of season.

Raw carrots or yellow turnips, shredded or cut in strips, or raw chopped tomatoes or chopped lettuce leaf or escarole may be served.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 28, 1942

Diets for Nursery School and Kindergarten Children (cont.)

2 to 5 years

DINNER: (CONT.)

Bread: Whole-wheat toast or enriched white bread.

Milk: 1 cupful at room temperature. This may be either canned or fresh.

Dessert: May be selected from the following: soft-cooked or baked custard, rice, bread or tapioca pudding, floating island, prune or apricot whip, fruit gleatin, canned or fresh, well ripened and soft fruits (may give ripe apples, thinly sliced or very ripe bananas) ice cream or fruit herbets or ices, plain oatmeal or molasses cookies or sponge cake, not too sweet.

2:30 P.M.

$\frac{1}{2}$ to 1 cupful of milk and a plain whole-wheat cracker or fruit or tomato juice.-Especially if child is very active or under-weight.

5:30 P.M.

SUPPER: A main dish may be: A vegetable puree or a creamed vegetable soup with small squares or sticks of tasted bread or a creamed vegetable on toast with a strip of bacon or milk toast or cereal and milk (use a cereal not served for breakfast or sometimes a baked potato with another vegetable, cooked soft and well mashed.

Bread: Spread lightly with butter.

Milk: 1 cupful, warm.

Dessert: If the child sleeps well after it, there may be added a small serving of mild stewed fruit such as apple-sauce, stewed pears, or baked banana, or junket or a simple pudding, supplemented, perhaps, by a graham cracker or a hard cookie.

W.A.R. RELOCATION AUTHORITY
 PHOENIX, ARIZONA
 December 28, 1942

Foods to be Included in a Good Daily Diet for Children

2 to 5 Years Old

Food	Amount needed by each child daily	Average size of serving for each child--			When served
		2-3 yrs. old	3-4 yrs. old	4-5 yrs. old	
Milk.	4 measuring cups	1 cup as a drink at each meal.			One measuring cup served at each meal; 1 cup per child used in cooking or as a between meal drink
Milk Soup		1/3 cup	1/2 cup	2/3 cup	
Eggs	1 egg	1 whole egg			At noon meal as often as possible. Half may be served in afternoon lunch as custard or scrambled eggs, or as supplementary breakfast.
Egg dish		3 Tbsps.	1/2 cup	1/3 - 1/2 cup	
Meat or fish.	2 to 4 Tbsp.	2 T.	3 T.	4 T.	At noon meal when egg is not served.
Potatoes	1 serving	2 T.	3 T.	4 T.	At noon meal often
Other cooked veg. (at least one a green leafy or yellow vegetable)	1-2 servings	2 T.	3 T.	4 T.	
Raw vegetables (lettuce, or carrots or celery or other green or yellow Vegetables).	Diced: Strips:	Taste 2 strips	2 T. 4 strips	1/4 c. 6 strips	Each day some raw vegetable (or raw fruit)

Foods to be included in a Good Daily Diet for Children 2 to 5 Years Olds (cont.)

Food	Amount needed by each child daily	Average size of serving for each child---			When served
		2-3 yrs.	3-4 yrs.	4-5 yrs.	
Fruit for Vit. C	1 med. -size orange or $\frac{1}{2}$ 3/4 C. tomato juice	Whole day's amount in one serving.			At morning meal, noon, midmorning or midafternoon lunch.
Other Fruit	1-2 servings	$\frac{1}{4}$ C.	$1\frac{1}{3}$ C.	$\frac{1}{2}$ C.	One serving is a mid morning lunch or as supplementary breakfast, other serving may be dessert at noon meal.
Cereal, whole-grain or enriched	1-serving	$\frac{1}{4}$ C.	$1\frac{1}{3}$ C.	$\frac{1}{2}$ C.	Usually at breakfast. May be basis for a dish for noon or evening meal, such as brown rice with tomatoes.
Bread, whole grain or enriched	3-5 slices	$1-1\frac{1}{2}$ slices	$1-1\frac{1}{2}$ slices	$1-1\frac{1}{2}$ slices	at each meal.
Butter, or margarine with Vit. A added.	1-3 teaspoons	1-3 tsp.	1-3 tsp.	1-3 tsp.	1 Tsp. at breakfast, 1 tsp. at noon, 1 tsp., at evening meal. Some may be used at midmorning or midafternoon lunch.
Desserts: Whips Custards Blanc Mange		$1\frac{1}{3}$ C.	$\frac{1}{2}$ C.	$2\frac{2}{3}$ C.	
Fish-liver oil	Enough to provide 400 U.S.P. units of vitamin D.				May be given with fruit juice at midmorning lunch or immediately after supplementary breakfast. Never give fish-liver oil just before a meal.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 30, 1942

Suggestions for the Feeding of Young Children.- (Continued)

II. Important Factors to Consider.

1. The diet should be simple and wholesome.
2. Use foods that are high in vitamins, minerals and proteins. Foods that are high in calories, but not in building material, as candy rich desserts, or some starchy foods, satisfy the child's appetite, but do not give him what he needs for normal growth and development. One example of such a food is white rice with sugar. If the rice is cooked in milk and has fruit added, its nutritive value will be decidedly increased.
3. Use a well-liked food along with one that is less well-liked or less familiar.
4. Plan to acquaint the child with a variety of foods. It has been rightly said: "If children are to have a nutritious diet it is necessary that they eat--and like--different fruits, different vegetables, different meats." Children like best the foods with which they are familiar. Thus, it is wise to repeat a new food often until the child becomes familiar with it.
5. Never serve more than one new food at a meal.- Give the child only a bite or two of the new food with a double portion of a more familiar food.
6. Every child must take, in some form his daily quota of milk. Most children like milk to drink. Should a child refuse plain milk, as a beverage, give it to him in other forms, as in: cream soups, sauces, cereals, desserts, etc. Example: cream of spinach or tomato or pea, or celery soup, cream or custard sauces, cereals cooked in milk, milk sherbets (rich ice creams are not so good for they satisfy the appetite) soft or baked custards, junket, prune milk drink, tomato milk cocktail, orange milk drink, cocoa (very weak with cocoa and only slightly sweetened), etc.
7. Since lack of appetite is often caused by too much fat in the diet, use whole milk on the top of children's cereal instead of cream or top milk.
8. Meals must be regular. This is essential for a good appetite, good digestion, a good disposition, and right habit formation. Do not allow food between meals, except at regular intervals, as for the mid-morning or mid-afternoon lunch.

WAR RELOCATION AUTHORITY
POSTON, ARIZONA
December 29, 1942

Suggestions for the Feeding of Young Children

I. Undesirable Food:

1. Condiments, as pepper, spices, mustard, curry, catsup and sauces.
These have an over-stimulating effect upon the senses of taste and smell, and in addition, they tend to obscure the real flavor of food.
2. Tea or coffee or bottled drinks. - These contain stimulants.
3. Very sour foods, as pickles, sauerkraut, and oko-ko.
4. Foods high in fat.
5. Rich gravies. - Use only meat juices without any fat.
6. Fried meats, fried fish, fried vegetables or any food cooked in fat.
7. Very sweet foods, as very sweet desserts or candy. Children do not need candy, but if given it should be in small amounts (one or two small pieces) after a meal as dessert. Hard candies made from a flavored sugar solution or candies containing milk and fruit are less objectionable than the richer candies.
8. Fresh bread, muffins, biscuit and pancakes.
9. Nuts. - These are difficult to chew, slow to digest and likely to be sucked into the larynx.
10. Pork, pork sausage, ham, veal, and salmon.
11. Beans, except green string beans and tender green lima beans, hominy, fresh or canned corn and radishes.
12. Watery soups. - These satisfy the appetite but are low in food value.

30
Jan 14 1943
1/29/43
January 1, 1943

GUIDANCE OF POSTON RESIDENTS
REQUIRING HOME CALLS OF DOCTORS

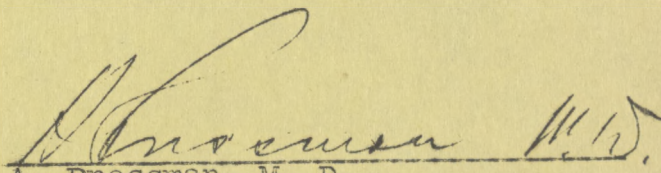
Doctors are prepared to visit all sick people who may request calls. However, the number of physicians in Poston is limited and to enable them to give proper care to hospital patients as well as to those requiring attention in the barracks, it is important that they be asked to call only upon those too sick to come to the Out Patient Department.

Many night calls are unnecessary.

All requests for doctor's calls should be made as early in the day as possible.

When requesting a doctor to call, be prepared to state where the pain or injury is located and how long the patient has been sick.

If these suggestions are followed, all Poston residents will have better care from the doctors.


A. Pressman, M. D.
Director of Health & Sanitation

WAR RELOCATION AUTHORITY
POSTON, AIRZONA
January 3, 1943

Infant and Children Feeding

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- Mother! Nurse Your Baby! Folder 19.
- Feeding Your Baby. Folder 20
- The Health, Well-Nourished Baby, Birth to One Year. Folder 16.
- The Healthy, Well-Nourished Child, 1 to 6 years. Folder 17.
- Your Children's Food and the Family Pocket Book. Folder 24.
- Substitutes for the Sun. Folder 25.
- Keeping the Well Baby Well. Folder 9.
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April 12, 1945

To: ALL BLOCK MANAGERS

From: Elma Rood, Supervisor
Public Health Nursing

SUBJECT: SURVEY OF PHYSICALLY HANDICAPPED PERSONS

In an official communication from the War Relocation Authority in Washington, D. C., a request is made that we turn in immediately the names of all persons blind, deaf or otherwise physically handicapped, with information as to age, sex, type of handicap, and any specialized training which the person may have had previous to evacuation.

The public health department will especially appreciate the assistance of block managers in gathering this very important information which may result in further education and training of these handicapped persons.

Will you kindly go over the file of every family in your block, and personally see that all names of such handicapped persons are included in your report? A comprehensive list will be compiled and submitted to Washington in the very near future.

The attached form should be used in reporting, for convenience in summarizing returns.

Thanking you most cordially for your help,
I am,

Yours very truly,

Elma Rood
Elma Rood, Supervisor
Public Health Nursing

Approved:

A. Pressman
A. Pressman, ID
Director of Health & Sanitation

MEMORANDUM
June 3, 1943

TO: All Block Managers
FROM: Director of Health & Sanitation
SUBJECT: Typhoid, Diphtheria and Whooping Cough Injections

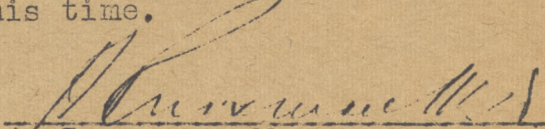
Hereafter no injections will be given without an appointment which must be made in the medical clinic. Following are the inoculation procedures:

Typhoid: Given after $1\frac{1}{2}$ years of age. Three injections, one week apart.

Diphtheria: Given after six months of age. Two injections, one week apart.

Whooping Cough: Given from six months to three years of age. Three injections, one week apart.

Due to the fact that vaccine is not available, no smallpox vaccination will be given at this time.


A. Pressman, M. D.
Director of Health & Sanitation
(3014)

MEMORANDUM
June 3, 1943

TO: All Block Managers
FROM: Director of Health & Sanitation
SUBJECT: Typhoid, Diphtheria and Whooping Cough Injections

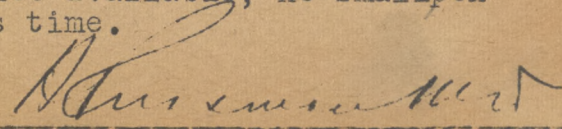
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A. Pressman, M. D.
Director of Health & Sanitation
(3014)

PUBLIC HEALTH DEPARTMENT
Poston, Arizona
Poston I
July 15, 1943

Important Notice!

To: Parents of Children

The public health department is very much pleased to see the large number of babies that are daily being vaccinated against smallpox and protected against diphtheria.

Babies between 6 months and 3 years of age should be receiving protective treatments against whooping cough. At the age of $1\frac{1}{2}$ years all children should have typhoid shots.

These treatments are available from the clinic by appointment.

Any child who has been protected from these four diseases will be given a "Certificate of Immunity," which should be preserved and shown whenever the child enters a new school. This is very important when a family leaves Poston for a new location.

A careful record is being kept of every child's protective treatments. Parents, please stop at Ward 7 and see if the date of your child's immunity is recorded, whether the treatment was received in Poston or elsewhere. Parents should call for the certificates for their children as soon as all treatments are completed.

PUBLIC HEALTH DEPARTMENT
POSTON, ARIZONA - WARD 7
Poston General Hospital

Dr. Heath, Rebor. - Staff Meeting, etc., Educ.

衛生局と御共調下され天然痘及びデブリアの発生を
防ぐため多くの子供さんが水等の予防注射を受けら
れて居ることを知り欣快にたまえせん
尚又六ヶ月より三才迄のお子様は百日咳の予防注射を
しておかねばなりません、子供さんが一才半になつた
ら腸チビスの予防注射は是非必要です水等の施療は
病院クリニック(外来診療所)で予め時間を定めることが
出来る様になつて居ます、之等四つの病気の予防注射
が全部すんだ子供さんには免疫証書を発給して居りま
す此の証書は大切なものです子供さんが学校へ入学す
るとか或は家族と共に此のセンターより出る場合にも
必要であるからです、
子供一人或は予防注射の記録を大切に保存しておかねば
なりません、そこで子供の両親は病院第七号室に出頭
して各自の子供の予防注射をすませ病気に對し免疫に
なつて居る記録があるかないかを知らせて下さい(予
防注射は何時何処でされたかを)又子供さんがスモ
ルポックス、デブリア、腸チビス、百日咳の予防注
射を全部完了せられたら免疫証書を差上げますからす
ぐ受取に御出下さい

一九四三年七月十五日

アリゾナ州—ポストン—ゼネラル病院

第七號 病室内

公衆衛生局

PUBLIC HEALTH DEPARTMENT
Poston, Arizona
September 17, 1943

INFANTILE PARALYSIS
(POLIO)

Polio or infantile paralysis is a very dangerous disease affecting the nervous system. This disease may cause paralysis of any part of the body, but the legs and arms are most liable to become paralyzed.

The germs of this disease are spread from one person to another in the secretions of the nose, mouth, and stools.

With the approach of cooler weather flies will increase in number. Flies are known to be the chief carriers of paralysis germs. Therefore:

Keep screen doors and windows in good condition.

Have a newspaper or fly-swatter handy and Kill every fly that gets into the house.

Keep garbage covered.

Keep latrines clean.

Do not let flies get on your food.

Everybody in Poston must help on these things to keep polio down..

A. Pressman, M. D., Director
Health and Sanitation

インファンタイルパラシス
小兒麻痺病の御注意

小兒麻痺病は非常に危険で身体の神経を冒し身体各部分特に手足の麻痺を來たします

此の病菌は他人の鼻口の分泌物及び大便かいべんより傳播します

此の病氣を傳播させる主役は蠅であります、時々時候が冷しくなつてくるにつけ蠅の發生が増すのであります、そこで皆さんは出來るだけ蠅を殺すことに務めて下さい

一、各家々のドア或は窓には完全なスクリーンをつけて蠅の侵入を防いで下さい

二、新聞紙か蠅叩を用意して蠅を見附け次第、叩き殺して下さい

三、蠅繁殖防止の爲めがベージは常に蓋カバーする様にして又便所も清潔にして下さい、尚又皆さんの食物に蠅がたかう様によく注意して下さい

皆さんは以上の注意により皆さんの家庭から此の恐るべき小兒麻痺病にかうめ様にして下さい

一九四三年九月十八日

アリゾナ州ポストン

衛生局長

エー プレスマン

Tule Lake Segregation
POSTON PUBLIC HEALTH DEPARTMENT
October 1, 1943

Mrs. _____

The following directions should be carefully followed in order to insure the health of your baby on the train to Tule Lake:

1. Give your baby his feeding at home just before leaving for the train.
2. Do not carry any food with you. Spoiled food will make the baby sick.
3. As soon as the train is ready, feedings will be prepared for the babies on the Pullmans.

Elma Rood
Elma Rood, Supervisor
Public Health Nursing

母親様方へ

ツリーレーキにベビーを連れて行かれる御方々は
汽車旅行中ベビーの健康を害せぬ様に以下の注
意事項を守ることに御留意下さい。

一、汽車に乗る前に家の中でベビーに
食事を與へておくこと

二、道中のベビーの食物として何れも用
意しないこと（いたんだ食物の爲
めベビーが病気になる恐れがあるから）

三、汽車に乗る用意が出来次第ベビー
の食物は寝台車の中で造つて上
げます。

衛生局育児部
主任、ミス エルマ ルード

December 24, 1943

MEMORANDUM TO: Hospital Department Heads

FROM: Dr. Pressman
Principal Medical Officer

Effective immediately all releases, notices of assignment and request for workers must clear through Mr. Lee Prather, Acting Hospital Administrator. Each department operates on a quota allotment and this must not be exceeded. Under no circumstances must an employee be put to work without first obtaining a notice of assignment and an approval from the Acting Administrator. Notices of assignment can not be made retroactive and no payroll adjustment will be made for any time worked which is not covered by a notice of assignment.

Designated department heads are requested to report daily the names of all persons absent and the reason for absence to the head timekeeper, who in turn will submit his report to the Principal Medical Officer. Workers, except those on a part-time basis, absent on account of illness will be on a pay status provided they present a certificate to the Hospital timekeeper indicating they are unable to work.

Illness for three days or less must be certified by the supervisor of their department. Illness in excess of three days must be certified by a physician. Sick leave is limited to fifteen working days for any one illness. If the worker is unable to return to his duties after a lapse of fifteen working days, he will be eligible for illness compensation, application for which must be made to the Project Personnel Management. Sick leave forms may be obtained from the Hospital timekeeper.

All complaints regarding irregularity in pay will be made to the Hospital timekeeper who will submit the claim to the Acting Hospital Administrator for adjustment.

Your cooperation will be greatly appreciated.

Dr. Pressman
Dr. Pressman
Principal Medical Officer

BULLETIN

CARE OF DISHES & CLOTHING IN COMMUNICABLE DISEASES

December 1, 1943

The following suggestions are for the purpose of helping residents of Poston to prevent the spread of any communicable disease within the block in which it occurs. These diseases include chickenpox, colds, diphtheria, measles, mumps, polio, scarlet fever, tuberculosis, whooping cough, and any other "catching" disease.

Isolation of Laundry Tubs

One tub should be reserved in each block laundry for the washing of dishes used by a patient with any communicable disease or by a family quarantined in the apartment because of an outbreak of contagious disease in the home.

Another tub should be reserved for soaking and washing clothing and bedding used by a patient with any communicable disease.

Each of these tubs should have a sign over it stating the purpose for which it is to be used.

Directions for Making a Disinfectant

Put 4 tablespoonfuls of chlorine disinfectant in a laundry tub of luke-warm water. Stir with a stick. (Each quad is furnished with a 5 gallon jug of chlorine. Each Block Manager should have a supply for his block.)

Directions for Care of Patient's Clothes

1. Keep patient's soiled clothes in a separate bag.
2. Soak clothes in the laundry tub for 1 hour in the disinfectant solution, made according to above directions.
3. Rinse clothes in clear water, then wash with soap and hot water.
4. Rinse and dry in sunshine. These clothes will then be safe.

Directions for Care of Patient's Dishes

I. Care of left-over food:

1. Pour left-over liquids into drain of tub. Flush with water.
2. Sprinkle solid food with strong disinfecting solution and put in a separate garbage can.
3. This contaminated food will be buried. It should not be fed to pigs or other animals.
4. After emptying, the garbage can should be washed with disinfecting solution.

II. Care of dishes:

1. Keep patient's dishes in the apartment.
2. After each meal wipe dishes off with toilet paper.
3. Wash each dish with hot water and soap under running water.
4. Scald each dish under running hot water.
5. Soak dish cloth and towel in disinfecting solution before washing.
6. When the patient has recovered and the dishes are returned to the mess hall, these dishes should be boiled for 20 minutes before being used again.

A. Pressman, M. D.

Director of Health & Sanitation
POSTON GENERAL HOSPITAL

J 2.7645

THE PROBLEM OF TUBERCULOSIS IN POSTON

December 2, 1943

Recently chest x-rays were made under the direction of Dr. Kasuga of all the residents of certain blocks in Poston I. X-rays were also made of workers in mess halls in Poston I, II & III.

Fourty-seven new active cases of tuberculosis were found in these blocks. Nine of these patients are already in the hospital, three of them have gone to Tule Lake. The other thirty-five will be cared for in their apartments until they can be hospitalized. Hospitalization will be necessary to help them to get well and to prevent others from contracting the disease. The doctor has given the following directions to these patients:

They are to stop work, remain at home, stay out of crowds, and get as much rest as possible.

They are to eat at home on their own dishes, which are to be washed at home and not returned to the mess hall.

Some person in the family is to carry the meals to the patient. A hot plate may be used to warm the food.

Special food will be provided for the patient. This will include each day, 2 eggs, 1 tall can of evaporated milk, and fresh green vegetables, in addition to other foods served in the mess hall.

They should report to the clinic for examination and x-rays as directed by the doctor.

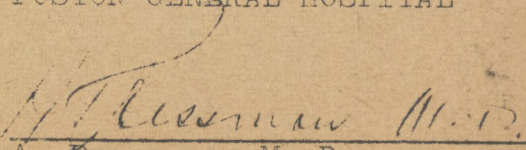
As soon as possible, these patients will be hospitalized:

Some will be sent to Phoenix.

Some will be sent to Ward 3 when the chronic patients now in Ward 3 are moved to the convalescent home in Poston II.

Every effort is being made to place all active cases of tuberculosis in the hospital as soon as possible. This will be done as soon as the old folks' home in Poston II is opened.

POSTON GENERAL HOSPITAL


A. Pressman, M. D.
Director of Health & Sanitation

結核について

最近ドクター春日指導の計に、一館府大部分の住民及びオ、オニ、オニ三館府の食道従業員諸氏の胸部X光線ととり結核病者の有無を診察されたのであります。其結果四十七人と云ふ進行性と活動性を持った肺結核患者をラック内に於て発見、内九名は既に当病院に入院、又他の三人はラック内に行き残り、十五名は病室の設備出来る迄自宅で養生する様になつて居ます。之等の病の治療即進のためには云ふ迄もなく他人に傳染を予防するため出来るだけ早く、我等の患者を入院させればなりません。そこでドクターは、此等の患者にむかつて左記の注意を願つて居ります。

第一、仕事をやめ、自宅に止まり、人混に行くことをさけて出来るだけ多く休養せうと願ひます。

第二、食事は自宅でして下さい。又食器は一途しておいて自宅で洗ひ決してそれを食堂に灰さぬ様に願ひます。

第三、病人に食べ物を運ぶ家族の人は病人の食べ物を温めるために電気ストーブを使つて下さい。

十二月二日

ポストン公衆衛生局

第四、病人のために普通食堂での食べ物以外に特別の食物が与へられる様になつて居ります。たとへば、毎日卵三ヶ、長い罐ミルク、新しい野菜等です。

第五、病人の御方は、主治医の言ふ通りして再診断はX光線の診断必要あるとき、間違ひなく病院に出頭せうと願ひます。

猶又之等の患者は出来るだけ早く入院させる様になつて居り、或る者はフィニックス、或者は当病院内の三号病室に居る慢性患者（現在の）がオニキヤンフに出來つゝある養老院内に移す小次男、そこへ入院させる様になつて居ります。

ラック内の自宅で養生して居る患者を成るなり早く病院内で養生出来る様にする事が目下の急務であります。実はオニキヤンフの養老院開設を急いで居る理由も茲にあるのであります。

局長 エー プレッサマン

EXCLUSION PROCEDURES IN COMMUNICABLE DISEASES
POSTON, ARIZONA
April, 1944

(4357)

Disease	Exclusion Time of Patient	EXCLUSION OF OTHER CHILDREN & ADULT	
		If Pt. is Hospitalized	If pt. Remains at Home
<u>Chicken Pox</u>	Until all scabs have disappeared.	All other children may go to school. <u>No quarantine sign.</u>	All children to stay home from school until quarantine is over. <u>Quarantine sign.</u>
<u>Measles</u>	15 days.	Children who have not had the disease may go to school for 1 week if they have no fever, then stay home for 10 days. <u>Quarantine sign</u> while children are at home.	All children stay at home until quarantine is over. <u>Quarantine sign.</u>
<u>Mumps</u>	Until all swelling is gone.	All other children may go to school. <u>No quarantine sign.</u>	All other children may go to school. <u>Quarantine sign.</u>
<u>Scarlet Fever</u>	Until patient is well and there is no discharge from ears or nose, and a negative culture from the throat.	Everyone in the home stay in for 7 days. The breadwinner may move out at end of 7 days but must not handle food in any way. <u>Quarantine sign.</u>	All in apartment remain in until patient is well. <u>Quarantine sign.</u>
<u>Whooping Cough</u>	Until recovery, (6 weeks).	Children who have not had the disease may go to school for 2 weeks if no fever or cold or cough. Then stay home for 10 days. <u>Quarantine sign.</u>	Children who have not had the disease may go to school for 2 weeks if no fever or cold or cough. Then stay home for 10 days. <u>Quarantine sign.</u>
<u>Acute Conjunctivitis</u>	Until eyes are well.	All other children may go to school. <u>No quarantine sign.</u>	All other children may go to school. <u>No quarantine sign.</u>

PUBLIC HEALTH DEPARTMENT, WARD 2

Approved by:

Agnes V. Bartlett, M. D.
Medical Officer

POSTON GENERAL HOSPITAL

PUBLIC HEALTH DEPARTMENT
Poston, Arizona
May 17, 1944

DIARRHEA IN BABIES

During the hot summer months babies and young children are apt to suffer from diarrhea. This is a very dangerous disease in young children and prompt action should be taken to check it.

CAUSES OF DIARRHEA:

Foods that are irritating or hard to digest.
Foods that are spoiled because not kept cold.
Foods that are infected by dirty hands, utensils, and flies.
Extreme heat that lowers the baby's resistance.

WAYS TO PREVENT DIARRHEA:

Strain all foods until the child is 2 years of age.
Introduce any new food very gradually.
Give no raw food except as the doctor advises.
Do not change a baby's feeding in hot weather.

Keep all foods clean, cold, and covered.
Wash hands before handling baby's food.
Clean the refrigerator in which baby food is kept, everyday.
Boil bottles, nipples, and other feeding utensils daily.
Give the baby freshly prepared foods.
Boil all water used in baby feeding.
Protect the baby and his food against flies and other harmful insects.
Keep the baby as cool as possible in hot weather.
Regulate the clothing according to outdoor temperature.

WHAT TO DO IF THE BABY HAS DIARRHEA:

Stop all food at once.

Give only boiled water.

Take the baby to the doctor at once.

Do not give any medicine unless ordered by the doctor.

If these directions are followed Poston should not have any serious results from diarrhea this summer.

Approved: A.V. Bartlett, R.D.

B U L L E T I N
May 1944

"ATHLETE'S FOOT"

This is a catching skin disease caused by a tiny plant or mold, like mold on bread. This mold gets into the layers of the skin, especially between the toes. It causes redness, itching and peeling of the skin, and can make a person so uncomfortable that they cannot do their work well.

People often "catch" this disease by walking in bare feet on the cement floor of a shower room where someone who has the disease has walked. The mold lives a long time in damp places such as on damp floors, on duckboards, in shoes, on stockings and between the toes of the feet.

A very important way to prevent and stamp out this disease is to keep shower rooms clean. The floor of the shower should be scrubbed everyday with soap powder and chlorine solution, using a broom to produce a good lather. The floor should be rinsed off with the hot spray. Duckboards should be scrubbed and dried in the sun. This daily care will destroy all mold in the shower room.

The second way to prevent and stamp out this disease is to take good care to have the feet, shoes and stockings very clean. The following steps should be taken:

1. Soak the feet in warm water using laundry soap or soap powder. Rub off all old skin on the soles and between the toes. Rinse and dry thoroughly.
2. Wash stockings every night and put on a clean dry pair every morning.
3. Never walk with bare feet in shower rooms. Wearing "getas" is a good protection.
4. Put shoes out to air and dry every night and sun them as often as possible.
5. If after you do these things, you notice any itching or peeling, come in to the clinic at once. The earlier the disease is treated the quicker it will be cured.

PUBLIC HEALTH DEPARTMENT

Edna Wood
Assistant Medical Social Worker
Poston General Hospital

(4377)

PUBLIC HEALTH DEPARTMENT BULLETIN
Poston, Arizona
May 18, 1944

THE VALUE OF SALT IN HOT WEATHER

People who work in the hot sun and perspire a great deal are apt to suffer from sun-stroke or heat-exhaustion. Doctors know that there is a relationship between the decrease in the amount of salt in the body and the tendency to be overcome by heat.

Under ordinary conditions everybody has a certain amount of salt in the blood at all times. Part of this salt is lost from the body in perspiration. When a person perspires a great deal and over a long period of time, much of the natural salt in the body is lost, and in this condition a person seems to be much more likely to suffer from heat-exhaustion or sun-stroke. By adding salt to the diet, sun-stroke and heat-exhaustion can be prevented.

The salt may be taken in different ways. An extra amount may be sprinkled on food, salt may be taken from a teaspoon with water, or it may be taken in tablet form. The amount of salt to be taken differs with the individual, the kind of work he does and how much he perspires. For an office worker probably one tablet would be enough for the day. For an outdoor laborer three tablets might be needed. The salt should be taken at meal time, and the person should take a generous amount of water.

As the days become hotter, it would be advisable for the residents of Poston to take extra salt regularly. Supplies of salt tablets are sent to all mess-halls and are available to everyone.

J. F. West, M.D. Acting
Approved by: Principal Medical Officer

PUBLIC HEALTH DEPARTMENT
Poston, Arizona
June 12, 1944

(4477)

WARNING TO POSTON RESIDENTS!

Recently a large number of people have reported to the medical clinics for severe infections of eyes, ears, nose or throat. Many of these people have been swimming in the irrigation canal or in the river and some have been drinking water from the Colorado River.

The water both in the river and the canal is often heavily contaminated. Decomposed bodies of cats, dogs, and other animals are often found in it, and waste of various kinds, both human and animal, are known by laboratory tests to be in the water.

Besides the infections mentioned, such serious diseases as typhoid, dysentery, and infantile paralysis may easily be contracted from polluted water. Children especially are very susceptible to these infections and should be safeguarded in every way.

People of Poston who swim in the river

or canal or who drink the water do so

at their own risk!

John F. West, M. D.
/s/ John F. West, M. D.
Acting Principal Medical Officer

IMPORTANT NOTICE TO ALL RESIDENTS OF POSTON

In order to render more effective service Where and When it is most needed the Medical Staff of Poston requests your active cooperation. Because the hospital is seriously understaffed and transportation facilities are inadequate we ask that home calls be limited to Absolute Emergencies. In case of such an emergency please write the following information on a slip of paper and transmit it to the hospital.

I. Obtain as accurate information as possible on the following:

- A. Name, address, sex, and age of patient.
- B. If the case is an INJURY, state:
 - 1. Where on the body?
 - 2. Type of injury (sprains, suspected fracture, snake bites, wounds, or other conditions).
 - 3. How long since injury occurred?
 - 4. Present condition of the patient (conscious or unconscious, in pain, or any other item of information).
- C. If the case is an ILLNESS, state:
 - 1. How long has the patient been ill?
 - 2. Nature of illness (pain--where?, bleeding--where?, skin eruptions--appearance?, severe sore throat, cough, fever, headache, or other conditions).
 - 3. Has the patient been seen by a doctor recently or has he been to the Out Patient Department?
 - 4. Present condition of the patient (whether able to move about or prostrated).

II. Give the information obtained to the Home Call office.

III. Ask the doctor what he wants you to do until he arrives or what he wants you to have ready on his arrival.

Your cooperation in securing this necessary information is earnestly requested as it will greatly facilitate your medical service.

HELP US TO HELP YOU!

Poston General Hospital

Y. Wakatake

Y. Wakatake, M. D.
Chairman of Medical Staff

COLORADO RIVER RELOCATION CENTER
Poston, Arizona

May 12, 1945

MEMO TO: All Residents

SUBJECT: Vaccination of Dogs

Dr. J. W. Caldwell, Veterinarian, will visit the Center on May 23 and 24 for the purpose of vaccinating all dogs against rabies. The schedule arranged for is as follows:

<u>Unit</u>	<u>Date</u>	<u>Place</u>	<u>Time</u>
II	May 23	Police Station in Block 219	1 p.m.
III	May 23	Police Station in Block 310	3 p.m.
I	May 24	Elementary School Auditorium	1 p.m.

All center residents, evacuees and appointed personnel, are instructed to bring their dogs for vaccination at the appointed time. Dogs which are found later not to have been vaccinated will be impounded and disposed of in order to safeguard the community. There will be no expense to the owner for vaccination.

Rabies is an acute infectious disease of animals most common in dogs and is widespread in the State of Arizona. It is communicable to human beings through the infected saliva transmitted as a result of a bite. If treatment is not begun at once, it is almost always fatal to human beings. The greatest source of danger is from dogs running at large, and in order to protect center residents from the possibility of contracting rabies from an infected dog and to protect the health of the dog itself, it is imperative that all dogs in the center be vaccinated.

Regulations provide that all dogs shall be registered with Internal Security and tagged. There is no fee for this. Dogs that are not registered and tagged will, when found, be impounded and disposed of.

Duncan Mills
Duncan Mills
Project Director

Date _____

Memo To: _____

From: George Wada, M.D.
Public Health Officer
Medical Clinic, Poston 3

Subject: Sterilization of Eating Utensils

You are hereby informed that _____
of your family is ill with _____.
All dishes used by this patient should be washed in a
separate container with BOILING HOT WATER AND SOAP for
sterilization.

We recommend the use of one set of dishes for the
patient until his recovery from his illness. This set
of dishes should be washed by you and kept at home.
Bring them to the mess hall only when you are going to
get meals for the patient.

If you have Clorox or Purex or some disinfectant
of similar nature, the use of the same in washing the
dishes is highly recommended.

Your cooperation in this matter is most desirable
for the welfare of the community.

Dr. A. Pressman, M.D.
Director of Health
and Sanitation

George Wada M.D.
George Wada, M.D.
Public Health Officer
Poston 3 Medical Clinic

問題

食器消毒の件

あなたの家族の内病人のある場合は病名
と病人の氏名を衛生局に御報告ありたい

一、病気の種類
二、患者の氏名

病人の使用する皿茶碗は全快する迄一揃一定
して其水を家の内に洗ひおき、病人の食物を取り
に行く時其食器を持参せられたい

病人の使用する食器は別に入れ物にて消毒す
るための熱湯と石鹼を用ゐてよく洗ふこと、ビュレツ
クスかそれと同質なる消毒用の物あればそれ
を使用されることは結構です

協力一致は皆様の為めです。どうか此の問題の
為め御協力を願ひます

公衆衛生局

ホストンキャンブ第三
主任ドクトルジョーデ和田

I. HOME CALLS

1. All cases requesting home calls will be brought to the clinic by an ambulance if before 4 p.m, and after that hour, patient will be brought to the hospital for examination and treatment.
2. Home calls will be made on a few cases such as patient with heart attacks (shortness of breath and pain in the chest) and accident cases.
3. Night home call is discouraged.

Make all necessary home call during the day. This will give the physicians chance to get as much rest as possible for the next day's work.

4. Telephone calls from the fire department and police department is also discouraged because too often minor calls are requested and also there is little or no information regarding the patient's condition.
5. When requesting for a home call, full information regarding the patient's condition should be given to the hospital receptionist.
6. Some of the residents are very rude and discourteous to the receptionist when asked too many questions.

II. CLINIC CALLS

1. Refrain from visiting the clinic on minor ailments.
2. Visiting with friends in clinic waiting room is discouraged.
3. Don't complain when not take care immediately because some cases require more time for examination and treatment.

ATTENTION KITCHEN WORKERS

Do not wear aprons &
uniform into latrine.
Our food must be germ-
free for community health.

* * * * *Dept. of Public Health*

注意

* キッチン従業員諸君へ *

便所にエツプロンやユエフオーム
を着て行かぬ事。保健衛生上、
吾等の食へ物が無病菌であつて
欲しいのです。

* * * * 公衆衛生局

NOTICE

For sanitary purposes we request the following on the use of faucets found outside of the "D" apartments.

1. Morning and evening toilet such as brushing teeth and washing is prohibited. Do this in your Latrine.
2. Dishwashing, washing of food stuff and clothes are prohibited.
3. Water accumulations under faucets must be oiled to control mosquito breeding.
4. All unnecessary use of "D" faucets is prohibited.

Division of Sanitation

注意

衛生上よくないからアパートメントDの外にあるフォセツトを左記の目的の爲めに使はぬ様御願ひ申します

一、朝夕の洗面又は歯磨き等に使はぬ様願ひます
(必ず便所を使つて下さい)

二、皿茶碗又は食物或は着物などを洗はぬ様願ひます

三、蚊の発生を防ぐためフォセツトの下の水溜に油を入水して下さい

四、一切必要以外にフォセツトを使はぬ様にして下さい

公衆衛生局

TO: OCCUPANTS HAVING FAUCETS WITHIN BARRACKS

FROM: Department of Public Health
Division of Sanitation

Due to indiscriminate use of faucets within the barracks, the Division of Sanitation hereby formulates regulations regarding the use of the above faucets.

1. All forms of laundrying and dish washing is prohibited.
2. Morning and evening toilet within the barrack, such as brushing teeth, washing face, etc., is prohibited. This is permitted in the latrine only.
3. There must be a suitable receptacle such as a bucket to collect the water underneath the faucet and the waste water must be disposed of in the latrine.
4. When bathing is necessitated by the aged or by infants, the used water must be disposed of in the latrine.

Approved: A. Pressman, M.D.
Director of Health and Sanitation

(668)

TO: OCCUPANTS HAVING FAUCETS WITHIN BARRACKS

FROM: Department of Public Health
Division of Sanitation

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Approved: A. Pressman, M.D.
Director of Health and Sanitation

(668)

HOW TO AVOID MOSQUITOES

- 1.-Get rid of all unnecessary standing pools of water by drainage.
- 2.-Stock your fish ponds with minnows.
- 3.-Kill mosquito larvae in water that cannot be removed by covering it with a thin film of fuel oil.
- 4.-Run your cooler with a minium of water to prevent pools. (Your cooler will cool more if allowed to run with just a driblet from the outlet pipe.)
- 5.-Mosquitoes are sleeping under your barracks now. Don't give them a chance to lay their eggs by allowing a pool of water to form there.

The Mosquito Squads from the Hospital are working every day in controlling the outside source of mosquito. Help them by ridding the blocks of mosquito breeding places. Mosquitoes are dangerous and a nuisance.

如何したら
蚊に咬まれるのを防ぐか？

- 一、不必要な水溜の水を流し出してしまふ事です。
 - 二、各自の魚池には沢山の仔魚ササガを入れる事です。
 - 三、水の中に燃油を入れて蚊の幼虫を殺す事。
(油の薄膜は水に浮んで蚊をなつて飛はないうちに幼虫を包んで殺すのです)
 - 四、各自の冷室器の水を出来るだけ小さくして溜水が出来ない様にする事。(クーラーは多量の水を使ふより少しづつ出して居る方が有効であります)
 - 五、蚊は今あなたの方の軒下に寝て居ます。水溜を作つて彼等に發生の機会を與へてはなりません
- 衛生局の蚊退治隊は毎日外に出て蚊の發生を防ぐため一生懸命です、皆様も何卒此の心に御協力下さい、各自の家の周囲に蚊の發生する場所をつくらぬ様願ひます、蚊は病菌を媒介する危険の昆虫です、又誠にうるさい、困つた生物です。

衛生局

NOTICE

0: Owners of Faucets and Sinks Within Barracks

You are cautioned to do the following:

1. All faucets or sinks must be provided with a slop jar or bucket to catch all resultant water.
2. No person is allowed to run any inside sink or faucet water underneath or alongside the barracks.
3. Latrines are provided for the purpose of personal hygiene. We suggest that you use the facilities provided both for your protection as well as for the Block's.
4. Any nuisances occurring from the use of inside faucets and sinks are reportable to our Office, and any person creating any such nuisances will be ordered to desist from future uses of these facilities.

Division of Sanitation

注 意

フオーセツト或は「なごし」を室内に使用して居る人は
左記の注意を守つて下さい

一 洗ひ流しの水は「なごし」の下にバケツ或は他の類似の物に
受け入れる様にして下さい一杯になつたら便所に持つて行つ
て捨てる様に願ひます

二 洗ひ流しの汚れた水は決して床下或は家の廻りに流し捨
てぬ様願ひます

三 個人の身の廻りを清潔にする衛生をはかるには便所が
あります公衆衛生の爲め皆さんの便所を最も有効
に利用して下さい

四 右の注意を念ひ乱暴に使用する人があつたらすぐ
衛生局に通知して下さい止むを得ません、そういふ人は
今後室内に於ての「なごし」の使用を厳禁せねばなり
ませんから

衛 生 局

Prepared for teachers use, day previous to showing of films and for discussion the day following the showing.

A NEW DAY

Dr. Mason is aroused from sleep in the middle of a snowy winter night by Tom Wilson, whose wife, Jessie, is critically ill. Dr. Mason rushes to the Wilson home, where, following a thorough examination, he diagnoses Mrs. Wilson's case as pneumonia. A specimen of Mrs. Wilson's sputum is obtained immediately, and Mr. Wilson takes it to the laboratory for "typing." While waiting he goes to the drug store to have a prescription filled. Meantime a nurse has arrived in the Wilson home and is instructed by Dr. Mason to order an oxygen tank.

Jimmy, the 5-year old son, is sitting on the stairs with his dog, crying over his mother's illness. Dr. Mason attempts to comfort the little boy by discussing a suitable name for the dog.

The laboratory scene which follows shows the "typing" of Mrs. Wilson's sputum. This scene brings out the following facts:

1. That physicians now have powerful agents with which to combat pneumonia, notably serum for several different types of pneumonia, and also certain new drugs, especially sulfapyridine.
2. That early typing, the early administration of the appropriate serum or drug, or both (depending on the case), and proper nursing care are of the utmost importance.
3. That a great many of those who would otherwise die of pneumonia may be saved by the full utilization of present-day knowledge.

Upon finding that Mrs. Wilson has Type I pneumonia Dr. Mason is sent the appropriate serum. The patient's temperature falls, and the outlook for her recovery is bright as the morning sun rises on a new day of hope for the Wilson family.

ONCE UPON A TIME

From the moment that the gates of the land of "Once Upon a Time" swing open, this film on the subject of street safety is full of action. Well-known fairy tale and Mother Goose characters become involved in the present-day types of street and highway accidents through the machinations of two bad goblins--"Carelessness" and "Discourtesy." The film ends with emphasis upon safe driving methods, following the banishment of these goblins by the good fairies "Carefulness" and "Courtesy."

MAN AGAINST MICROBE

This film covers 300 years of progress in public health and medicine. It shows Van Leeuwenhoek, the 17th-century Dutchman who so improved the compound microscope that he achieved the distinction of being the first human being in history actually to see germs. Pasteur appears, introducing methods he has developed for killing some germs by heat and fighting other germs with vaccines. Lister demonstrates his carbolic spray to illustrate the first scientific use of antiseptics in destroying germs. We then see Robert Koch, the discoverer of the tubercle bacillus and the cholera germ. Finally Emile Von Behring is shown using diphtheria antitoxin for the first time in the treatment of a human being sick with diphtheria.

The film returns to a scene which pictures a modern baby being immunized against diphtheria and ends on a note of optimism regarding our progress in the battle against communicable disease.

DIRECTIONS FOR TREATMENT OF IMPETIGO

1. Wash the sore with warm soapy water until the crust comes off and the skin is clean.
2. Apply the impetigo ointment, cover with clean gauze. Strap with adhesive.
3. Wash and apply fresh ointment every day until the skin is healed.
4. Any pupil under treatment and with the sore covered with clean gauze should continue going to school.

傳染性膿痂疹(とびひ)の手當

一 病状 特は小児に多くして顔面頭等の外部に露けれる所に発
す皮膚面に固着した痂皮(カサフク)を剝離せしめ其下に赤き濕潤を
ありけし膿漿液を分泌し忽を凝固して光の痂皮となる其分泌
液は傳染性を有し他の部分又は他人に傳染す

二 温い石鹼水にて患部を痂皮(カサフク)が除去されて皮膚が清潔に
なるまで洗滌すべし

三 患部にとびひの軟膏を塗布して其の上に消毒ガーゼを当てそ
れが他の位置に動かない様に細長い絆創膏を以て貼附けて止
めるべし

四 以上の洗滌と新しく薬の取替へを毎日一回怠らず病気が全治
する迄繰返すべし

此の病気の手段中の学童は必ず新しく清潔なガーゼにて患
部を破つて其のガーゼが脱離しない様に絆創膏にて貼りつけ
上登校なすべし

衛生局

INSTRUCTIONS FOR HOME CARE AFTER EXTRACTIONS

MOUTH RINSE: Do not rinse the mouth unless absolutely necessary, and not until at least 3 to 4 hours after the extraction. If rinsing is unavoidable, use solution consisting of one-half teaspoonful of table salt dissolved in a glass of lukewarm water and rinse gently.

BLEEDING: A certain amount of bleeding is to be expected following tooth extraction. If the bleeding fails to stop within a reasonable time, place a roll of sterilized cotton or gauze over the wound and bite down firmly for TEN minutes. Repeat if necessary. Avoid hot liquids and mouth rinse.

TO RELIEVE SWELLING: Some swelling may take place. In this event apply cold towels (ice pack is better) against cheek for FIFTEEN minutes. Repeat half hour later. Swelling after extraction is not uncommon and need not cause alarm.

DIET: Light foods are advisable during the first 24 hours. Drinking water and fruit juices are recommended.

ELIMINATION: Patients who have tendency toward being constipated are advised to take a mild saline laxative at bedtime.

PAIN: If pain or severe headache should arise several hours later, take some mild sedative (e.g., Aspirin 5 grains) and rest. If extreme pain persists after 24 hours have passed see your dentist at the clinic.

Name: Age: No.

Address:

PC:

Case:

Dr.

Date:

INSTRUCTIONS FOR DIABETIC PATIENTS

The diabetic clinic for Camp I will be held on the 1st and 3rd Wednesdays of each month. Patients will be seen only by appointments.

Orders of Doctor Boardman.

On Monday, before coming to the clinic, save a urine specimen at 7 a.m., 10 a.m. and 2 p.m. Bring these 3 bottles to the block manager's office at 2:30 p.m. for collection.

Important! Every bottle sent in must be labelled with name, address, date and hour.

On Tuesday, save urine specimens again as on Monday.

On Wednesday, save urine specimens at 7 a.m. and 10 a.m. and bring these to the laboratory yourself at 1 p.m. when you come to the clinic.

Your successful treatment depends upon your carrying out these directions exactly as ordered by the doctor.

POSTON I MEDICAL CLINIC

Poston General Hospital - 2/10/44

糖尿病患者之心得

第一館内府内の糖尿病患者の診察は毎月第一水曜と第三水曜の二日間とす、但し前以て申込み時日を定めたる患者のみ此の診察に應ず

主任ドクトル ボードマン氏の要求箇條

病院へ診察に来られる前に先づ尿の
標本を取つておくこと

月曜午前七時と全十時と午後二時と三回自分の尿を
各々別の瓶にとつて之等三個の瓶を午後二時半迄に
フラックマネジヤのオヒスへ届け下さい

△又最も大切なことは

各瓶の上に尿をとつた日と時間と患者の姓名及び住
所を明記すること

火曜日も月曜と同じく尿をとつておき水曜日には午
前七時の分と全十時の分をとり之等五瓶の標本を水
曜日診察をふため来院の折午後一時迄に病院試験
室に自分で持参して下さい。以上ドクトルの注文を
と怠りなく御協力下さることに由つて皆様の御病氣を
癒す上に満足の結果が得られます

一九四四年二月十日

ポストン

セネラル
ホスピタル

クリニック
診察所

COMMUNICABLE DISEASE

Definition of Terms

1. Communicable
Capable of being transmitted or spread from one person to another.
2. Carrier
A person who, without symptoms of a communicable disease, harbors and spreads the specific germs.
3. Contact
A person or animal known to have been sufficiently near an infected person or animal to have been exposed to transfer of infectious material.
4. Disinfection
The destroying of the life of a disease producing germ by chemical or physical means.
5. Fumigation
A process by which the destruction of insects, mosquitoes, body lice and animals--as rats--is accomplished by gaseous agents.
6. Isolation
The separating of persons suffering from a communicable disease from other persons.
7. Immune
An immune person is one who is safe from attack from a communicable disease by natural or acquired means.
8. Non-immune
A person who is susceptible to the infection of a communicable disease.
9. Incubation period
The period of a disease between the implanting of the germ and the development of symptoms.
10. Quarantine
The limitation of freedom of movement of persons who have been exposed to a communicable disease for a period of time equal to the longest incubation period of the disease.
11. Epidemic
Attacking many people in the same region at the same time.
12. Sporadic
Not widely spread; an epidemic occurring here and there.
13. Endemic
A disease which is local--or which is neither epidemic or sporadic.

14. Report of a disease

The notification to the health authorities that a case of communicable disease exists in a specified person at a given address.

15. List of reportable diseases for the State of Arizona

Anthrax	Influenza	Scarlet Fever
Bubonic Plague	Leprosy	Smallpox
Chickenpox	Malarial Fever	Trachoma
Cholera	Malta Fever	Tuberculosis
Cerebrospinal	Measles	Typhoid Fever
meningitis (epidemic)	Mumps	Typhus Fever
Dengue	Opthalmia Neonatorum	Venereal Diseases
Diphtheria	Pellagra	Syphilis
Dysentery	Pneumonia	Gonorrhea
Encephalitis	Polioomyelitis	Chancroid
German Measles	Relapsing Fever	Whooping Cough
Hydrophobia	Rocky Mountain Fever	Yellow Fever

COMMUNITY
QUARANTINE PROCEDURE FOR CONTROL OF
COMMUNICABLE DISEASE

DISEASE	QUARANTINE PERIOD OF APARTMENT	QUARANTINE PERIOD OF CONTACTS
Chickenpox	2 weeks--until scabs have disappeared	None
Measles	2 weeks	None
Mumps	2 weeks	None
Scarlet Fever	3 weeks	1 week if patient in hospital; 3 weeks if patient at home.
Whooping Cough	Until Recovery	None
Diphtheria	Until 2 negative throat cultures	Until negative throat culture

INSTRUCTIONS FOR PARENTS OF CHILDREN
WHO HAVE HAD TONSIL OPERATIONS

Important - Read Carefully.

1. On coming home from the hospital the child should remain in bed for another two days.
2. The child should be given only liquids for the first day at home, soft foods the next two days, and then the regular diet as he is able to swallow.
3. The child is to be kept in the house for at least one week after leaving the hospital, and during this time he should not run or play hard.
4. Any sign of bleeding, unusual discomfort or signs of a fever should be reported to the doctor. In case of severe bleeding, the child should be brought to the hospital immediately.
5. The child should be brought to the clinic in the camp in which he lives two weeks after the date of operation for an examination by the doctor.

A. Pressman, M.D.

Director of Health & Sanitation
Poston, Arizona

扁桃腺を切開した

子供の両親へ御注意

之は大切です是非御一讀下さい

(3430)

一扁桃腺切開後家に帰つてから二日間
はベッドの中で安静を守つて下さい

二家に歸つて最初の日の食物は流動食を
其へ次ぎの二日間はやい食物にして其後は障
りなかりれば普通食にして下さい

三退院後少なく共一週間は家の中で安静に
守り無理な運動は控へて下さい

四出血の徴候及発熱或は気持が悪つたらドク
ターに通知して下さい又出血が甚だしい時は即
刻病院へ連れて来て下さい

五退院後二週間したら再診を受けられ様貴
の館府の外來診療所(クリニック)へ行つて下さい

一九四三年七月廿六日

アリゾナ州ポストンゼネラル病院

院長 エー、プレススマン

kyuko

HOME PROBLEMS
(For consideration by P. H. Visitors)

3. How can a mother prevent the spread of tuberculosis from an active case in her family?

A. General facts a mother should know

- I. The most dangerous thing in tuberculosis is the sputum. Sputum is what the patient coughs up. Sputum contains millions of tuberculosis germs. Unless the mother is careful, sputum can infect anything in the house.

B. Problems concerned with sputum

I. Care of air in sick room

- a. A patient may spray germs into the air to a distance of 15 feet or more:
1. When coughing or sneezing
2. When talking or laughing
b. Patient should cover his mouth with a piece of paper or cloth whenever coughing, sneezing, talking or laughing for the protection of persons coming into the sick room.
c. Fresh air should be admitted to the sick room at all times, but drafts should be avoided.

II. Care of mouth discharges

- a. Give patient soft cloths or paper to spit in
b. Pin a bag on the side of the bed in which the patient puts the papers and cloths
c. Burn these discharges several times a day
1. Never throw into waste basket or into garbage where animals or pets may become infected
d. Wash hands thoroughly after handling

III. Care of patient's dishes and left-over food

- a. Wipe off dishes with a piece of paper
b. Boil left-over liquids
c. Burn left-over foods. Do not feed left-overs to chickens, pigs, or dogs
d. Boiling the dishes 15 minutes daily kills all germs
e. If it is not possible to boil dishes, follow these directions:
1. Wipe off dishes with paper to remove grease
2. Wash dishes in hot soapy water
3. Rinse under scalding water
4. Leave dishes for 10 minutes in scalding water
5. Dry and return dishes to patient's room
6. Keep dishes used by a tuberculosis patient apart from the family supply

IV. Care of linens soiled with sputum

- a. Soak for 10 minutes in a Chlorox or other lime solution (2-3 tablespoonsful to a 3 gallon bucket of water)

V. Care of patient's bedside and toilet articles

- a. Wash toothbrush with soap and water and sun daily
b. Wash with soap and water all articles handled or touched by the patient such as head of bed, bedside table, brush, comb, etc.
c. Wash door knob on both sides of the patient's room door, using soap and water

- VI. Care of patient's room
 - a. Dust daily with damp cloth
 - b. Mop the floor daily, keeping all dust wiped up
 - c. Screen against flies and kill any that get in
- VII. Care of patient's hands
 - a. If patient coughs and spits frequently, his hands are constantly infected, therefore,
 - 1. He should be encouraged to wash hands several times daily
 - 2. He should always wash before handling food
 - 3. He should avoid shaking hands with friends who may come to see him.
- VIII. Care of mother's hands
 - a. Wash thoroughly after each handling of patient
 - 1. Use hot water if possible
 - 2. Use enough soap to produce a thick lather
 - 3. Rub vigorously
 - 4. Use a small stick for cleaning nails
- IX. Care of articles handled by patient
 - a. Any article made by patient should be thoroughly disinfected before being put into use.
 - b. Books, newspapers, magazines handled by patient should be kept in patient's room or burned when no longer used by him. These articles should never be passed on to neighbors

Conclusion: A mother who succeeds in protecting her family against tuberculosis does so by constantly watching to see that the sputum does not spread.

POINTS TO REMEMBER ABOUT TUBERCULOSIS

Primary tuberculosis, also called first infection type

- 1. Describes the disease that follows the first entry of the germ into the body.
- 2. Occurs most often in childhood, but may also occur in adult life if the individual has previously escaped infection.
- 3. The sore in this type tends to be walled off or calcified.
- 4. The tendency is for the patient to recover.

Secondary tuberculosis, also called re-infection type

- 1. Describes the disease that follows a primary attack.
- 2. Occurs most often in adults, but may occur in children who have passed through a primary attack.
- 3. The sore in this type tends to become a cavity and increase in size.
- 4. The tendency is for the patient to become progressively worse unless a doctor succeeds in checking the disease.

DIRECTIONS FOR TEACHERS AND PARENTS ON MEASURES

AIMING TO KEEP CONTAGION OUT OF THE SCHOOL

With the present shortage of medical help in Poston, it is of the greatest importance that teachers, parents, and children cooperate fully with the health department in discovering early any child who is not well and in breaking his contact with other children who are well.

(1) Teachers should watch children each morning for any abnormal sign connected with skin, eyes, nose, and throat or any general sign of discomfort or fever.

This child should be sent home with a note, stating that the child does not seem well and advising the mother to keep him at home and in bed for at least one day.

The teacher should note his condition carefully when he returns to school.

(2) A child who has been absent for 3 days should be brought by the parent to the Public Health Department at 8 a.m. on the 4th day to be checked. If the child seems well, he will be given an O.K. to return to school.

Where a child has a noticeable fever, skin eruption, pain in stomach, or lameness, or where there is doubt as to his condition, he should be brought at once by the parent to the clinic for examination by a doctor.

傳染病の豫防に對して

學童の父兄及教師の心得べき事項

現在ポストンに於て医療の乏しき中であるが、注意すべき
 施療が不充分に直而して
 居ます此際學校の教師兒
 童の父兄は之に及ぼす全
 學童はよりよく公衆衛生
 局と協調して氣を附け成る
 べく早期に病気の兆候ある
 兒童を發見する様にして
 健康な兒童に接觸せしめず
 傳染の機会を造らぬ様
 こそが最も大切で
 一教師は毎朝學校生徒
 の態度に注視すべきである
 兒童の皮膚の色目鼻
 咽喉の異状或は發熱症
 等の兆候……
 以上の兆候のある兒童は
 其両親に宛てて之を一日
 日はベッドに静かに寝させ
 る様注意書きを持たせて
 ホームに歸らしめし又其
 子供が再び學校に來
 たらう子供の様子が一平

二、若し其子供が病気の爲
 め三日間休校した場合
 は子供の親は四日目朝
 八時に衛生局に診断のため
 同伴されて其結果小兒に
 異状がなければ衛生局は
 學校に行つてもよいと許
 可するのであります
 目に見へる様々熱、皮
 膚の異状、胃痛、嘔吐、
 或は様子が普通でない
 疑がある場合にはクリニ
 ックに同伴して早くドクタ
 ーの診断をして貰ふべきで
 ある

衛生局

HOME PROBLEMS - PINK EYE
(For consideration by P. H. Visitors)

Problem 4 What should a mother know about "pink eye"?

- A. Early signs
 - I Pus discharge--lids stuck together in morning
 - II A scratchy feeling in the eye
- B. Characteristics
 - I Caused by germ. Very "catching". Spreads rapidly
 - II One attack does not give immunity
 - III Discharges from eye may carry the infection to others
 - IV Hands should be scrubbed after caring for patient
- C. Care in the home
 - I Cleanse eyes with boiled water and clean cotton, or
 - II Cleanse eyes with boric acid solution and cotton
 - Boil a pint bottle 10 minutes
 - Fill bottle with same water
 - Add 1 tablespoon boric acid crystals
 - III Method (1)
 - a. Wash hands thoroughly
 - b. Have patient sit in a chair--head back
 - c. Raise upper lid--ask patient to look down
 - d. Drop boiled water or boric solution from medicine dropper over eye ball
 - e. Hold lid up for a few seconds
 - IV Method (2)
 - a. Wash hands thoroughly
 - b. Have patient sit with head back
 - c. Pour solution over cotton until quite wet
 - d. Wipe eye gently from nose outward
 - V Prevention of spread
 - a. Wash hands after handling patient
 - b. Burn all cloths used for wiping eyes
 - c. Keep a child home from school if he has pink eye

Problem 5 Gonorrhea of eyes of new born baby

- A. Early signs develop in first 24 hours after birth
 - I Redness, inflammation swelling
 - II Sticky, thick discharge rolls out of eyes in great amounts
 - III If neglected, eye sight is destroyed
- B. Prevention
 - I Silver nitrate put into baby's eyes immediately after birth prevents this infection
- C. Cure
 - I Hospital care necessary
 - II Sulpha drug now used very successfully
 - III Cure depends on early treatment
- D. Prevention of spread
 - I This disease is very contagious
 - II Burn all discharges
 - III Wash hands after every handling of patient
 - IV Wear gown and mask when caring for patient
 - V Sterilize every thing that has touched the patient by boiling if possible.

6. Trachoma (Granulated lids)

A. Cause

- I. Not definitely known -- thought to be a tiny germ
- II. Malnutrition seems to make people more susceptible

B. Early signs

- I. Sensitiveness to light
- II. Secretion in corner of eye
- III. Watery eyes -- feeling of sand in eye

C. Stages of disease

- I. First stage -- 3 to 4 weeks - like pinkeye. Most "catching" at this stage
- II. Second stage -- swelling, bumps on inside of eye lids
- III. Third stage -- quieting down of swelling
- IV. Fourth stage -- healing

Trachoma occurs in repeated attacks, each succeeding attack becoming more severe.
Neglected trachoma results in blindness.

D. Methods of spread

- I. By infected hands
- II. Common towel or handkerchief
- III. Common wash basin

E. Treatment

- I. Sulpha drug now used with very good results

F. Prevention of spread

- I. Patient uses his own towel, handkerchief and wash basin
- II. Hands should be washed thoroughly after handling patient
- III. All discharges should be burned.

7. Stye on Eyelid

A stye is an infection of the gland connected with a hair follicle.

A. Causes

- I. Malnutrition--lowered resistance. Vitamin A deficiency
- II. Uncleanliness--rubbing eye with dirty hands
- III. Eyestrain--difficulty in vision
- IV. Lack of sleep
- V. Chronic infection of eye lid

B. Treatment

Apply hot compresses using boiled water 10 minutes 3 times daily.

8. Foreign body in eye

A. Home treatment (for sand or dust)

- I. Use an eye cup with plain water or,
- II. Wash hand, cup the hand to hold water. Lean over, put hand over eye and quickly straighten up with head bent backward. Wink eye several times. Or
- III. Put water in a clean basin. Lean forward, immerse face with eyes under water. Wink eyes several times.

9. Cross Eyes

A. Causes

- not well known; possibly,
- (1) childhood diseases (measles, whooping cough or severe illness)
 - (2) injury to eye
 - (3) Fright or shock

B. Treatment -- prescribed by doctor only

The younger the child, the more can be done to correct.
(1880)

10. Safe Eye washes for home use

A. Boiled water

boil water 10 minutes -- fill with same water -- cork tightly and label

B. Boric solution

boil one pint bottle 10 minutes -- fill with same water -- add 1 level teaspoonful boric crystals -- shake, cork and label

C. Normal salt solution

boil 1 pint bottle 10 minutes -- fill with same water -- add 1 level teaspoonful table salt -- shake, cork and label

11. TEETH

A. High points in tooth development

Approx. 5-6 months before birth, teeth begin to form

at birth-all baby teeth are formed below the gum

6 months-first baby tooth erupts

2 years-all baby teeth (20) have erupted -- 10 in each jaw

6 years-first permanent tooth erupts -- called 6th year molar. Is 6th tooth from center front. There are 4 six-year molars in all

12 years-second molar erupts -- called 12 year molar

Is the 7th tooth from center front. There are 4 twelve-year molars

18-25 years-third molar erupts -- called wisdom tooth

Is the 8th tooth from center front. There are 4 wisdom teeth

B. Total number

Baby teeth 20 (milk teeth, deciduous teeth, temporary teeth)

Permanent teeth 32 (adult set)

C. Arrangement

Beginning center front of each jaw

2 incisors

1 cuspid

(2 1 2 3)

2 bicuspid

3 molars

D. Methods of cleaning in home

I. First teeth - Use normal salt solution

Mother put soft clean cloth over her finger

Gently cleanse baby teeth

II. One year of age - Soft, small tooth brush

Normal salt solution

Mother brush child's teeth daily

III. Two years of age - Salt, soda, or salt and soda mixed

Soft small brush

Child begins to assist mother in washing teeth daily

Encourage child to watch cleaning in a mirror

IV. Six to seven years of age - Same materials as above

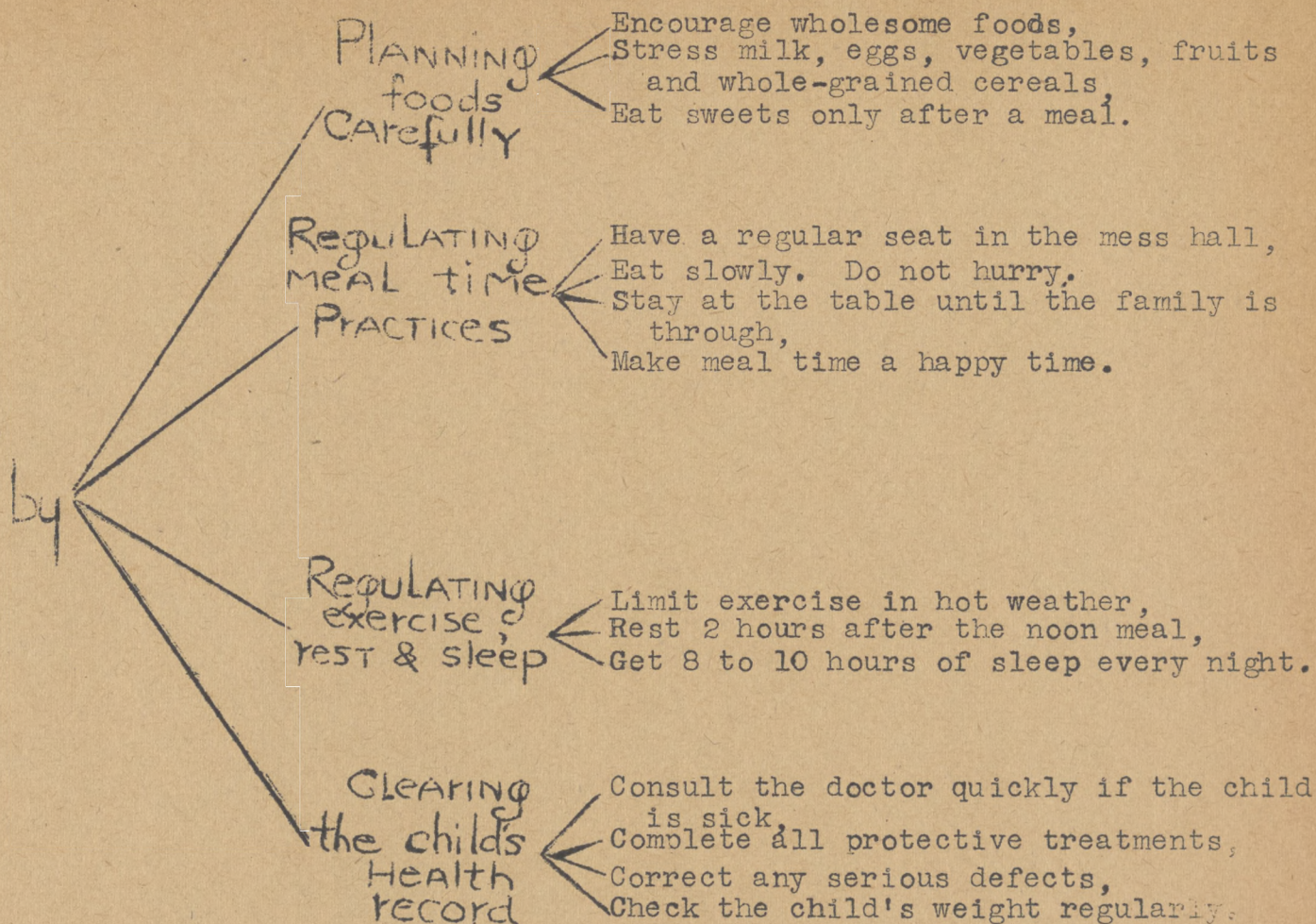
Child begins to be responsible for tooth cleaning

Mother inspects for thoroughness

Code for Recording P. H. V. Activities

1. Non communicable service
2. Crippled children's service (under 21 years)
3. Communicable disease
4. Trachoma
5. Tuberculosis
6. Venereal Disease--Syphilis
7. Venereal Disease--Gonorrhea
8. Antepartum (care during pregnancy)
9. Postpartum (care 6-8 weeks after delivery)
10. Infant care (birth to 1 year)
11. Pre-school care (1 year to 6 years)
12. School service (6 years to 18 for girls, to 21 for boys)
13. Adult service (women over 18, men over 21)
14. Special projects (some particular activity, limited duration)
15. Informative visit (Household record--get acquainted--discover needs)
16. Unresultant visit (Patient not at home)
17. Sanitation visit (Healthful environment)
18. Well Baby (clinic)
19. Pre-Sschool (clinic)
20. Others (Any other type of clinic, record name)
21. Home Nursing (Lessons given)
22. Other (Lessons on other subject, record subject)
23. Group talks (number of single talks
24. 25.
- & Immunizations (number is number of groups done. Total is number
26. 27. of individuals immunized)
28. to
33. Tests
34. Health examinations
35. Demonstrations (health procedures demonstrated to teachers)
36. Teacher conferences on physical defects
37. Inspections (Done to detect rash or other communicable condition)
38. P. T. A. meetings (attended)
39. Others (Any other type of school work)
40. General meetings (all kinds)
41. Conferences with Supervisor (individual discussion of plans, policies, and program)
42. Staff Conferences (Total hours spent in group meetings, office work, records)
43. Conferences with P. H. N. or assistant (on individual problems)
44. Office hours
45. Studying (Hours attending classes and class preparation)
46. Illness (Hours off duty when ill)

HELP
your
CHILD
to
GAIN
IN
WEIGHT-



(3157)

POSTON P.H. Dept.

Direction for Mothers

Orange juice.

Begin before the baby is 1 month to 6 weeks of age.
Give one teaspoonful daily.
Increase the amount rapidly so that in a few weeks
the baby is getting 4 tablespoonfuls each day.
Orange juice may be given diluted with water.

Cod Liver Oil.

Begin before the baby is 1 month old.
Start with 2 drops 3 times a day.
Increase so that by 1 month of age the baby is
getting $\frac{1}{2}$ teaspoonful a day.
Continue this dose for the first two years as a
preventive of rickets.

Dept. of PUBLIC HEALTH
Poston, Arizona

赤ちやんを育てる母親の注意

(ORANGE JUICE)
オレンジの汁。赤ちやんが誕生後一月より六週間
にかけてオレンジジュースを一日にティスプーン一杯
興へ始めて下さい。その水から興へ始めてから二三
週間後には一日四ティスプーン、赤ちや
んが毎日攝る様になるまでとし、其量
を増して下さい

肝油 (COD LIVER OIL)

生後一ヶ月にならぬ前より肝油を一日に
二、三滴与へ始めて下さい
その水から一ヶ月に其量を毎日増して赤ち
やんが満一ヶ月になつた時は半ティ
スプーンの量を攝取する様にして下さい
育兒が佝僂病(セムシ)にならぬ様此量を必
くとり二ヶ年は続けて興へて下さい

衛生局

INSTRUCTIONS FOR INFANT FEEDING

First Four Months

In addition to breast milk, the baby needs the following foods:

1. Orange juice or tomato juice, or certain other fruit juices, as grapefruit juice, lemon juice and pineapple juice. These are given chiefly to supply vitamin C, the factor that prevents scurvy. If none of the juices are available on any one day, the baby should have an ascorbic acid tablet. The juices may be fresh or canned. Start giving the baby a fruit juice when he is 2 weeks old.

Strained orange juice.-- Begin with 1 teaspoonful a day. Gradually increase the amount until by the third month and thereafter 2 tablespoonfuls are given twice a day. The orange juice may be diluted with an equal amount of cool boiled water.

Tomato juice.-- This may be obtained by straining the pulp of fresh or canned tomatoes. When tomato juice is used, give twice as much as you would of orange juice. Begin with 1 teaspoonful twice a day and increase until by the third month and thereafter 4 tablespoonfuls are given twice a day. Tomato juice need not be diluted with water.

Grapefruit juice or lemon juice may be given instead of orange juice. These are used in the same amounts as orange juice. They may be diluted with an equal amount, or more, of boiled water, and may be sweetened.

Pineapple juice.-- If fresh pineapple juice is used, give twice as much as you would of orange juice, or, in other words, begin with 1 teaspoonful twice a day and gradually increase the amount until by the third month and thereafter 4 tablespoonfuls are given twice a day. If canned pineapple juice is used, give three times as much as you would of orange juice. Thus, start with 1 teaspoonful three times a day and gradually increase the amount until by the end of the third month and thereafter 6 tablespoonfuls is given twice a day. It is not necessary to dilute pineapple juice.

If there should be a digestive disturbance, and it is certain that the disturbance is due to a particular fruit juice, another juice may be given, or, if the baby is breast fed, juice may be omitted for a few weeks.

2. Cod-liver oil, given chiefly because it supplies vitamin D, the factor that prevents rickets. It also contains vitamin A, the factor which aids in the prevention of colds and of eye infections and in the promotion of growth. Begin giving cod-liver oil when the baby is 2 weeks old. Start with $\frac{1}{2}$ teaspoonful once a day and increase to $\frac{1}{2}$ teaspoonful twice a day at

Cod-liver oil, continued

3 weeks. At 1 month the amount may be increased to 1 teaspoonful twice a day. This amount may be given until the baby is 3 months old, when it may be increased to $1\frac{1}{2}$ teaspoonfuls twice a day. Continue this amount throughout the first 2 years. Use pure plain cod-liver oil which the label shows to contain at least 85 United States Pharmacopoeia units of vitamin D per gram.

3. Cereals, given chiefly because they supply starch and minerals. Dark wheat cereals are especially valuable for minerals and vitamin B. Cooked cereals may be started when the baby is 4 months old. Pablum, poi, okai, farina, cream of wheat and oatmeal are satisfactory cereals for the baby. Cook thin enough to run off the end of a spoon at first. If it is too thick, then with boiling water, or if the baby is artificially fed part of the milk may be poured over the cereal. As the child grows older the cereal should be made thicker. Begin with 1 or 2 tablespoonfuls just before the 10 p.m. nursing and increase until the baby takes 4 or 5 tablespoonfuls twice a day when he is 7 months old.

4. Egg yolk, given chiefly because it supplies iron. It is usually added to the baby's diet when he is 4 months old. However, some physicians add it in the third month or even earlier. The egg may be soft cooked or hard cooked and mashed. Start with $\frac{1}{2}$ teaspoonful or less at the 2 p. m. feeding. If it does not make the baby sick, increase it gradually.

Drinking water.— A breast-fed baby should be offered boiled water (unsweetened) regularly between feedings - in winter two or three times a day, in hot weather four or five times, since he perspires freely then and needs more. Water should be offered regularly even if it is refused.

Recipes:

CEREAL

Water, 1 cup
Farina, 2 level tablespoonfuls
(or oatmeal, $\frac{1}{4}$ cup)
Salt, $\frac{1}{4}$ teaspoonful

Bring the salted water to a boil and sprinkle in the cereal. Stir until the mixture comes to a boil and boil five to ten minutes, stirring constantly. Add more water (boiling) to the mixture, if necessary. Transfer to a double boiler and cook 45 minutes with the water bubbling in the lower section of the boiler.

EGGS

To soft cook an egg: Put egg in cold water and let water come slowly to the boiling point. Remove to a warm place, where water will not boil, and let stand from 5 to 10 minutes.— The time depends upon the amount of water used, the temperature of the egg, etc.

To hard cook an egg: Follow directions for a soft cooked egg, except let the egg remain in the hot water for 20 minutes.

KEEP YOUR BABY WELL
IN
HOT WEATHER

Here Are Some Things You Can Do.

Dress the baby lightly in hot weather and avoid heat rash.

Feed the baby as the doctor advises, and do not change the feeding in hot weather without a doctor's advice.

Give cool boiled water between feedings. Boil the water 10 minutes.

Have the baby in a bed of its own.

Protect the baby against flies at all times, by using a cotton netting. Flies carry disease.

If the baby's bowel movements are loose and watery, stop all food, and take the baby to a doctor at once.

Watch your baby's weight. If the baby loses in weight consult the doctor.

暑い時の

赤ちゃんの
育てかた



御注意成さるべき要矣

暑い日は成るべく薄着させて汗疹が出来ない様に致しませう

食物は御医者さんの云ふ通りの物を與へ御医者さんのゆるしなく食事を變へ様致しませう

食事と食事の間には必ず一度沸かした湯を冷くしたのを飲ませませう(十分間沸かして)

赤ちゃんのベッドは一定しておきませう

何時でも赤ちゃんに蠅が止まらぬ様に致しませう(蠅は病菌を媒介します)蠅よけには、白い布でもよい

赤ちゃんの便通が悪く下痢する様でしたら、すぐ御医者さんに見て、もらひませう

赤ちゃんの体重を常に注意しませう(体重が軽減したと御医者さんに診断を伺ひませう).....

BE SURE YOUR BABY GETS SOME FOODS FROM EACH OF THESE 7 GROUPS OF FOOD-EACH DAY

	From 3-5 Months These Foods May be Used in the Baby's Diet	From 5-8 Months These Foods May be Added to Those Above	After 8 Months These Foods May be Added (All foods on this chart may now be used)
GROUP 1 Green and Yellow Vegetables	GREEN VEGETABLES Spinach Peas Beans--string or snap YELLOW VEGETABLES Carrots	GREEN VEGETABLES Beet tops Turnip tops YELLOW VEGETABLES Squash	GREEN VEGETABLES Swiss chard Broccoli
GROUP 2 Oranges, Grapefruits, Tomatoes, Salad Greens	Orange juice Tomato juice	Tomatoes (stewed, canned)	Lettuce Grapefruit juice Orange (sliced)
GROUP 3 Potatoes and Other Vegetables and Fruits	VEGETABLES Beets Vegetable soup FRUITS Applesauce - Prunes Apricots - Pears Peaches	Potato (baked) Mixed vegetables Baked apple	VEGETABLES Sweet potatoes Lima beans - Cauliflower Stewed celery Turnips (white) Potato (boiled, mashed) FRUITS Ripe apple (scraped) Prune whip
GROUP 4 Milk and Milk Products	Milk formula or S.M.A. or Breast Milk	MILK Soup made with milk vegetable-flavored Custard - Pudding Plain or flavored gelatin - Cornstarch pudding - Milk toast - Cottage cheese	Milk Buttermilk Ice cream Rice pudding (brown rice made with milk) Cream cheese
GROUP 5 Meat, Poultry, Fish, Eggs	Egg yolk--soft-boiled or hard-boiled, grated	Beef--juice, soup, scraped or ground Liver--(chicken, calf's or beef liver) scraped, ground, or soup	Egg--(whole) boiled or coddled Chicken--soup or minced Bacon - Fish (cod, haddock, halibut) --minced
GROUP 6 Bread, Flour and Cereals	CEREALS Cereals cooked at home Oatmeal - Wheat Farina - Corn; Hominy Brown rice INSTANT CEREALS Oatmeal - Wheat, corn	Dry toast--pref- erably whole grain Milk toast Graham cracker	Whole-Wheat bread Graham bread
GROUP 7 Butter, Margarine	Cod liver oil	Butter--in small amounts in soups and on vegetables	Butter Margarine (fortified with Vitamin A)

Approved by Dr. Bartlett, 3/44.

(4222)

INSTRUCTIONS FOR PARENTS OF CHILDREN
AND OTHERS WHO HAVE HAD HERNIA OPERATIONS

In order to be sure that an operation for hernia (rupture) will be successful, it is very important that these rules be followed:

For three months following the operation the child should not take part in any strenuous exercises, such as swimming, basketball or baseball.

In connection with work or play, a patient should not do anything requiring lifting, pulling, reaching, running or jumping.

The child's teacher should see that exercises are restricted and that the child does not take part in vigorous play for three months following the operation.

If these rules are followed the hernia should be completely healed and there should be no return.

A. Pressman, M. D.
Director of Health & Sanitation
Poston, Arizona

脱腸を切開した

子供の二回親へ御注意

左記の注意を守られたら脱腸切開の結果を良好にすることが出来ます

脱腸切開後少なくとも三ヶ月間は水泳、バスケットボール或はベースボールの様な過激の運動は差控へて下さい

仕了する時止遊ぶ時止を理に重荷を持揚げる、引張る、走り遊び廻ること、又を理に手を延ばして取る様のことはいけません

学校の先生は脱腸した生徒に対しては切開後三ヶ月間は過激の運動を差控へる様に注意を願います

是等の注意を怠らなかつたら切開後の傷痕が完全になほり再発の恐れがあります

一九四三年八月廿日

アリゾナ州ポストンゼネラル病院

院長 エー プレスマン

A GUIDE TO A BABY'S FEEDING THE FIRST YEAR

From Birth to End of 4th Month

Breast feeding every 4 hours--(5 feedings in the day).

Boiled water between feedings.

Begin Cod Liver Oil at 2 weeks. (See directions)

Begin orange juice at 4 weeks. (See directions)

For the 5th and 6th Months

Give Cod Liver Oil as before $\frac{1}{2}$ teaspoonful daily.

Continue all good as before.

At 5 Months:

Begin strained cooked cereals twice daily.

At 6 Months:

Begin strained cooked vegetables once daily.

Gradually add egg yolk.

For the 7th and 8th Months

Give Cod Liver Oil as before $\frac{1}{2}$ teaspoonful daily.

Continue all food as before, but:

Stop the 10 p.m. breast feeding.

Increase the kind and amounts of vegetables and cereals.

Add strained ~~st~~ewed fruits, apples, prunes, and apricots.

For the 9th and 10th-11th and 12th Months

Give Cod Liver Oil as before $\frac{1}{2}$ teaspoonful daily.

Continue all food as before, but:

By 9 Months:

Begin weaning the baby, by dropping one breast feeding at a time and giving boiled cows milk instead. (Or evaporated milk diluted with boiled water.) Increase amounts and kinds of strained cooked cereals, vegetables, and fruits.

By 11 Months:

Finish weaning the baby from the breast.

Add strained cooked vegetables, fruits, and cereals.

Give no raw foods.

By the end of 12 Months:

Baby should have 3 meals a day with a cup of boiled milk or evaporated milk on waking in the morning. The baby should sit up in his high chair and begin to feed himself.

生後一々年間の赤ちゃんの食物の彙

生後四ヶ月の終りまでには

母乳を四時間毎に一日五回与へること

母乳と母乳の間に必ず沸かした水を与へること

生後二週間して肝油を与へ始めること(指定書参照)

生後四週間してオレジンエウスを与へ始めること

(指定書に従ひて)

生後五ヶ月より六ヶ月まで

肝油を従前通り毎日オースリン半杯与へること

勿論総ての食物は従前通り続けること、五ヶ月

になつたら毎二回穀物をクックして水をうぐし

にして与へること

六ヶ月になつたらクックした野菜をうぐしと与へ

ること(一日一回)又其中に卵の黄味をそろく混ぜ

て食べさせること

生後七、八ヶ月の食物

オースリンに半杯の肝油は毎日従前通り与へ

し其他の食物は従前通り続けること

△生後十時の母乳授与を休むべし

ベテラブルや穀物の種類と其量を増加すべし

煮た果物(アップル、プラム、エナガリカド等)をうぐし

してベビーの食物に加入すべし

九ヶ月十ヶ月

又十ヶ月、十二ヶ月

肝油は従前の如く毎日オースリン半杯、食物

は従前の如く物を続けること

九ヶ月より「乳離れ」を始めるべし、其方法は一日

一回だけ母乳を離し母乳の代りに牛乳を

沸かして与へること

(粉ミルクをボイルした水に割つて與へてもよし)

同時に果物穀物野菜を、コックして、うぐしした

物の種類と量を増加すること

十一ヶ月には全部の乳離れを完了すべし

クックした穀物野菜果物の量を増加する

(ただし決して生の物を与へてはならぬ)

十二ヶ月の終りには一日に三回の食事

なる様にすべし但し朝夕寝る前と起きた時

ボイルしたミルクを一カップ宛与へるべし

赤ちゃんは高い椅子にすわって獨りで食べる

様にならなければならぬ

FORMULA A

Pet Milk	5 ounces
Boiled Water (20 minutes)	15 ounces
Karo (blue label)	2 tablespoons

Use clean utensils. Keep separate from other utensils.

Making of Formula:

Mix ingredients together. When cool, pour 3 ounces into 6 bottles and put in cool place. Offer bottle to baby after each nursing.

10:00 A.M., 2:00 P.M., 6:00 P.M., 10:00 P.M., 2:00 A.M., and 6:00 A.M.

Offer baby 2 ounces of water (boiled 20 minutes) between feedings at:

8:00 A.M., 12:00 noon, 4:00 P.M., and 8:00 P.M.

Oil baby each day for 3 days. Use baby oil. Sponge bath with warm water after the third day for one week, then give baby tub baths. Oil baby after bathing.

Return for check-up after 6 weeks to your Out-Patient Clinic.

POSTON GENERAL HOSPITAL

THE BABY'S TRAY

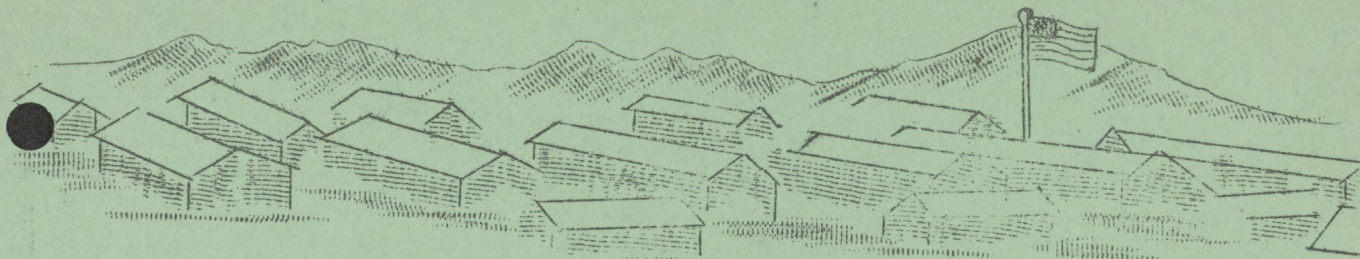
All the small things you use for the baby can be kept together on a tray. It may be of glass, enamel ware, wood, papier mâché, or a cake tin. It should be easy to keep clean and strong enough to carry in one hand.

Most of the things for the tray can be bought in department stores, Five and Ten cent stores or drug stores. To equip the tray you will need:

1. Five jars with covers. The jars, which may be empty jelly, cheese, peanut butter or salad dressing jars from the kitchen cupboard, are used for:
 - a. Boiled water for baby's drinking water. Jar should be pint size.
 - b. Cotton balls to use in cleansing mother's breast before and after the baby nurses; also for applying oil to baby after bath and each time diaper is changed.
 - c. Nipples...They are boiled each time they are used and then put in this dry jar so that they are ready whenever you want to give the baby water.
 - d. Boric solution for washing the mother's nipples before and after each nursing.
 - e. Olive or mineral oil for cleansing the baby's ears, genitals and buttocks.
2. A four ounce nursing bottle for giving water to baby.
3. A small cake of ivory soap for a pincushion. It is easy to keep clean, and this is better than a pin tray because you cannot stick your fingers when you reach for a pin. Soap on the points makes pins go through material easier.
4. A cake of Castile or Baby soap for bathing the baby. Keep soap in a small dish.
5. A teaspoon placed inside a clean muslin cloth to be used in lifting the nipples from the jar.

You will need one small flat saucepan and cover, and one large flat-bottom saucepan and cover. The large saucepan is to be used for boiling jars and the small one for boiling the nipples and for warming the nursing bottle of water before giving it to the baby.

Each day the tray and all the jars and covers should be washed with warm water and soap and rinsed with hot water. The jars and covers and the teaspoon must be boiled. Put them in the large pan with cool water - hot water might break them - enough to fill and cover the jars and bottles. Cover the pan and let them boil gently for ten minutes after the water begins to boil. Pour off as much water as you can without upsetting the jars and bottles. Let them get cool enough to handle. (If you can't wait for that, boil a fork with a long handle with them and use it to lift out the jars.) Wash your hands well. Lift out the jars and bottles so as to leave water in the jar for the baby's drinking water. Turn the others upside down on a clean towel. Do not touch the inside of the jars or get your fingers in the water. Pour off the rest of the water and put the covers on the jars and lay the teaspoon between the folds of a freshly ironed clean towel so the handle sticks out. Use a small saucepan to boil the nipples and bottle caps. They will last longer if you are sure the water is boiling before you drop them in. Boil for five minutes - no longer - and pour off the water carefully. Lift the nipples from the kettle to the jar with the boiled teaspoon. Put the teaspoon back in the clean cloth and remember not to lay it down except in the cloth and with the handle out. Rinse and dry the soap pincushion and put everything on the tray. Put only enough supplies in the jars to last for one day.



SIX Ways to CARE for POSTON BABIES THIS SUMMER

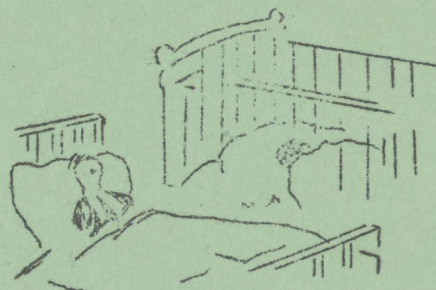
夏の
ポストンで
赤ちゃんの
育て方
六箇條

- 1 Weigh your baby regularly
Don't let him lose!



赤ちゃんの自分の
減らない様に

- 4 Have a separate bed
for the baby



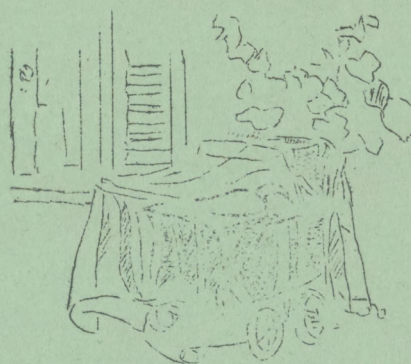
赤ちゃんの寝台
は別にしておく

- 2 Give the infant cool water
between feedings



冷い水を
食べ物の間に

- 5 Take the baby outdoors in
the cool shade



なたけ外の
日蔭に
出す様

- 3 Dress your baby very
lightly



なるべく
うす着を
させる様に

- 6 Don't let a fly come
near your child



蝇のたからめ様
よく気をつける