

1. An incubation period (i.e., from exposure to earliest symptoms—not to eruption) of practically twelve days (in mild smallpox fourteen days). The incubation period can be determined accurately only in cases where known exposure occurs on a given date, with no exposure before or after, the date of earliest symptoms resulting from such exposure being also definitely fixed.

2. No definite history of previous attack of smallpox. When mild smallpox has prevailed for years, often confused with chickenpox, and *vice versa*, this history is of little account, especially when the previous diagnosis was made, as often happens, by the laity. Examination for healed pits should be made. Round pits indicate smallpox; oval pits, clean cut, indicate chicken-pox. Confluent smallpox may yield pits of irregular shape. In mild smallpox, and in chicken-pox, pits of any kind may be few and small. Second attacks of smallpox are very rare although they are not unknown.

3. No history of successful vaccination within five to seven years. Careful examination for vaccination scars should be made.

4. Prodromes, lasting two or, at most, three days, headache, backache, fever, epigastric pain, chills, sudden severe onset. Mild smallpox sometimes presents very indefinite and trivial prodromes. When definite, a history of three or four days or more of prodromes may be offered. (See 5.)

5. First signs of eruptions on third or fourth day of attack. In mild smallpox the earlier eruption, when sparse, is often unnoticed for a day or so, thus prolonging the *observed* interval between onset and eruption.

6. Eruption beginning on face and wrists. In mild smallpox, the lesions are sometimes so few that the earliest ones are overlooked until the full crop has appeared.

7. Eruption most profuse on skin not covered by clothing, i.e., face and wrists; also the legs, despite the covering of the latter. In mild smallpox, with very sparse lesions, there may be too few lesions to permit any real comparison of relative abundance at different points.

8. Palms and soles often attacked. In mild smallpox, one or two lesions in one palm or one sole may be all that can be found in these locations.

9. Eruption develops in one crop, the lesions appearing steadily for twenty-four to forty-eight hours; the face lesions usually further developed than the body lesions. In mild smallpox aborted lesions, i.e., not following out the regular stages, are sometimes found.

10. *Lesions round at all stages.* Margins not crenated. All those of the same stage of development are usually of the same size.