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Report of infectious disease:

Name of Patient:

Age of patient:

Locality (specify street and number of house or lot) where patient is:

Name of disease:

Name of School attended by children from that house: Measures employed for isolation and disinfection.

REPORT OF DEATH OR RECOVERY FROM INFECTIOUS DISEASE.

Name (in full).

Locality (specify street, number of house or lot where patient is.

Name of disease.

How long sick.

Whether dead or recovered.

Means of disinfection employed and when employed.

Signature of Physician.

II. DUTIES AND POWERS OF LOCAL BOARDS OF HEALTH.

Rule 1.—Every Local Board of Health shall:

- a. Conform to the instructions of the Provincial Board of Health.
- b. Execute or cause to be executed with care and diligence the Regulations of the Provincial Board of Health.
- c. Each local Board shall meet and organize as soon as practicable after appointment.