


PENNSYLVANIA HEALTH DEPARTMENT SURVEY

UNITED STATES

1940

<p>Occupational Diseases to be reported</p> <p>Anthracosis</p> <p>Arsenical Poisoning</p> <p>Brass Poisoning</p> <p>Carbon Monoxide</p> <p>Lead Poisoning</p> <p>Mercury Poisoning</p> <p>Natural Gas Poisoning</p> <p>Phosphorus Poisoning</p> <p>Wood Alcohol Poisoning</p> <p>Naphtha Poisoning</p> <p>Calsson Disease</p> <p>Bisulphide of Carbon Poisoning</p> <p>Dinitrobenzene Poisoning</p> <p>N. B.—Request need of additional Morbidity Cards.</p>	 <p style="border: 1px solid black; padding: 2px; display: inline-block;">THIS SIDE OF CARD IS FOR ADDRESS</p>	<p>..... H. O.</p> <p>..... P. O.</p> <p>..... County</p> <p style="text-align: center;">PENNSYLVANIA</p>
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<p>Diseases to be reported</p> <p>Actinomycosis Anthrax</p> <p>Anterior Poliomyelitis</p> <p>Bubonic Plague</p> <p>Cerebrospinal Meningitis</p> <p>Cholera (Asiatic)</p> <p>Chickenpox</p> <p>Diphtheria (Memb. Croup)</p> <p>Epidemic Dysentery</p> <p>Encephalitis Lethargica</p> <p>German Measles</p> <p>Glanders (Farcy)</p> <p>Leprosy</p> <p>Malarial Fever</p> <p>Measles Mumps</p> <p>Ophthalmia Neonatorum</p> <p>Paratyphoid Fever</p> <p>Pellagra</p> <p>Pneumonia (All Forms)</p> <p>Psittacosis</p> <p>Rabies Relapsing Fever</p> <p>Rocky Mt. Spotted Fever</p> <p>Smallpox</p> <p>Scarlet Fever (Scarlatina)</p> <p>Trachoma</p> <p>Tuberculosis (All Forms)</p> <p>Tularemia</p> <p>Typhoid Fever</p> <p>Typhus Fever</p> <p>Uncinariasis</p> <p>Undulant Fever</p> <p>Whooping Cough</p> <p>Yellow Fever</p>	<p style="text-align: center;">Form HCD-34-50M-12-39 District.....</p> <p style="text-align: center;">COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF HEALTH MORBIDITY REPORT</p> <p>Mailed or given to Health Officer. Hour A. M. Mo.....19 P. M.</p> <p>Patient,</p> <p>Address,</p> <p>Township, School,.....</p> <p>Disease, Date of Onset,.....</p> <p>Name of Householder,</p> <p style="text-align: right;">..... } M. D. } D. O. P. O.</p> <p>It will materially assist the health officer in locating these premises of some land mark in the neighborhood, such as a school, church or store, etc., be mentioned by you on this report.</p> <p>Telephone or telegraph report of smallpox cases to County Medical Director.</p>
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Description: #UX27 postal card with added printing: from the Pennsylvania Department of Health for the reporting of "Occupational Diseases," including malaria.

Price: E

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Leprosy
Malarial Fever
Measles Mumps

PC-2	<i>Checklist:</i> __

PENNSYLVANIA HEALTH DEPARTMENT SURVEY

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