

PART II.—NOTIFICATION OF DISEASE BY MEDICAL PRACTITIONERS.

6. (1.) The notices required by section 79 (1) (a) of the said Act to be given to the local authority and the Medical Officer of Health shall be in the form numbered (1) in the First Schedule hereto.

(2.) The notice required by section 79 (1) (b) of the said Act to be given to the Medical Officer of Health shall be in the form numbered (2) in the First Schedule hereto.

(3.) The notice required by section 79 (2) of the said Act to be given to the Medical Officer of Health shall, in the case of a notifiable infectious disease, be in accordance with that portion of the form numbered (1) which is addressed to the Medical Officer of Health; and in the case of a notifiable disease other than a notifiable infectious disease shall be in accordance with the form numbered (2), save that in every such case the word "deceased" shall be substituted for the word "patient" wherever that word occurs.

7. For every notice received in accordance with the provisions of section 79 of the said Act the Health Department shall pay to the sender a fee of 3s. 6d.: Provided that (a) no fee shall be payable to any medical practitioner employed by the Government or any Hospital Board in respect of any notice relating to a case of disease of which he becomes aware in the course of his official duty; and (b) no fee shall be payable to any medical practitioner in respect of any notice relating to any subsequent case of disease from any house within four weeks from the date of his notifying the primary case therein.

PART III.—NOTIFICATION OF DEATHS BY UNDERTAKERS.

8. Where the cause of death is any infectious disease the notice required under section 92 of the said Act to be given by the undertaker or other person having charge of the funeral shall be given by post, and shall be in the form numbered (3) in the First Schedule hereto.

PART IV.—DUTIES OF INSPECTORS.

9. Every Inspector charged with the investigation and control of cases of infectious disease—

- (a.) Shall forthwith on becoming aware in any way of a case or suspected case of notifiable infectious disease, visit the infected premises and inquire into the causes and circumstances of the case, and take such steps as are necessary or desirable for preventing the spread of infection and for removing conditions favourable to infection.
- (b.) Shall forthwith report to the Medical Officer of Health, in such form as the Director-General of Health may require, the results of the investigation of every case or suspected case of notifiable infectious disease.
- (c.) Shall ensure that any person suffering from a notifiable infectious disease, who is being nursed or treated at home, is effectively isolated, and, if in his opinion removal to a hospital is desirable, shall notify the Medical Officer of Health accordingly.
- (d.) Shall attend to the removal to hospital of any person suffering from any notifiable infectious disease if and when such is required.
- (e.) Shall, if such person is not removed to hospital, from time to time visit the premises and see that the necessary precautions for the prevention of the spread of infection are carried out.
- (f.) Shall, in respect of every case of infectious disease which comes to his notice, ascertain whether any inmate of the house wherein the case occurs attends any school, and, if so, forthwith advise the parent or other person in charge of such inmate of his duty not to permit the child to return to school until the prescribed period of exclusion has been completed, and shall (on a form to be supplied by the Department for the purpose) inform the head teacher or person in charge of the school of the occurrence of the case.
- (g.) Shall, upon termination of the case by recovery, removal to hospital, or death, disinfect any premises in which any notifiable infectious disease has occurred; and also disinfect any bedding, clothing, or other things which have been exposed to infection from any notifiable infectious disease.
- (h.) Shall carry out all disinfecting-work in accordance with instructions to be from time to time issued by the Medical Officer of Health.
- (i.) Where cases or "contacts" from any house are attending school, shall forthwith upon completion of disinfection notify the head teacher of the school concerned, and shall forward a duplicate of the notice to the Medical Officer of Health.
- (j.) Shall duly notify the Medical Officer of Health when disinfection has been carried out.
- (k.) Shall enter from day to day, in a book provided by the Department, such particulars regarding cases of infectious disease as may be required.

(l.) Shall, at all reasonable hours, when applied to by the Medical Officer of Health, produce to him his books, or any of them, and render to him such information as he may be able to furnish with regard to his duties under these regulations.

(m.) Generally shall, in all circumstances, be guided by and carry out the instructions of the Medical Officer of Health with respect to any measures which can be lawfully taken by an Inspector for preventing the outbreak or checking the spread of any infectious disease.

PART V.—ISOLATION OF PERSONS SUFFERING FROM INFECTIOUS DISEASES.

10. This Part of these regulations shall apply to the following diseases—namely, cerebro-spinal fever; diphtheria; enteric fever; scarlet fever; smallpox; chicken pox; encephalitis lethargica; influenza (fulminant, pneumonic, and septicæmic); measles; acute poliomyelitis.

11. No person suffering or having suffered from any of the said diseases shall, during the period of isolation set out in the Second Schedule hereto, wilfully go outside the limits of the premises in which he resides save with the authority of the Medical Officer of Health.

Provided that—(a.) Where on account of remoteness of a laboratory bacteriological examinations cannot be undertaken, the medical practitioner in attendance shall notify the facts to the Medical Officer of Health, who may then decide that the periods of isolation set out hereunder shall be deemed sufficient, namely—

Cerebro-spinal fever	..	6 weeks from onset of illness.
Diphtheria	..	4 "
Enteric fever	..	8 "

(b.) Where cases suffering from cerebro-spinal fever, diphtheria, and enteric fever have been isolated for six, six, and ten weeks respectively, and bacteriological examinations still do not yield a negative result, the medical practitioner in attendance shall notify the fact to the Medical Officer of Health, who may allow the release of the patient from isolation under such conditions as he deems necessary to safeguard the community from risk of infection.

12. Bacteriological examination, for the purpose of this Part of these regulations and of the Second Schedule hereto, means a bacteriological examination performed in a laboratory controlled by an officer of the Department of Health or approved by the Director-General of Health.

PART VI.—CONTROL OF "CONTACTS" AND "CARRIERS."

13. For the purposes of this Part of these regulations, every person shall be deemed to be a "contact" who has been exposed to the risk of infection from any of the infectious diseases mentioned in the Third Schedule hereto, within the several periods of incubation therein specified.

14. For the purposes of this Part of these regulations "bacteriological examination" means a bacteriological examination performed in a laboratory controlled by an officer of the Department of Health or approved by the Director-General of Health.

15. Every "contact" or "carrier" shall submit to medical examination at such times and places as the Medical Officer of Health directs.

16. Every "contact" or "carrier" shall submit to and carry out such treatment as the Medical Officer of Health specifies, and for such period as he directs.

17. (1.) Any "contact" may be isolated and detained in isolation in his own home, and shall be so detained if in the opinion of the Medical Officer of Health such action is necessary to prevent the spread of infection.

(2.) Any "carrier" may be isolated and detained in isolation in his own home, or in any hospital available for the reception of infectious cases, or in any other place, and shall be so detained if in the opinion of the Medical Officer of Health such action is necessary to prevent the spread of infection.

18. No "contact" or "carrier" of diphtheria, cerebro-spinal fever, or enteric fever shall be isolated or detained in isolation after two successive bacteriological examinations,—

- (a.) In the case of diphtheria, of pharyngeal and nasal swabs at intervals of not less than forty-eight hours;
- (b.) In the case of cerebro-spinal fever, of naso-pharyngeal swabs at intervals of not less than forty-eight hours;
- (c.) In the case of enteric fever, of specimens of urine and faeces at intervals of seven days;

have been attended with negative results.

19. Where any "carrier" remains positive after the expiration in isolation—

- (a.) In the case of diphtheria and cerebro-spinal fever, of four weeks; and
 - (b.) In the case of enteric fever, of eight weeks;
- the Medical Officer of Health shall release him subject to the condition that he undertakes faithfully to carry out the instructions of the Medical Officer of Health.