

1955 - 1956

OAKLAND COUNTY DEPARTMENT OF HEALTH

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## PUBLIC HEALTH

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Public Health is the science and the art of preventing disease, prolonging life, and promoting physical and mental health and efficiency through organized community efforts.

> C. E. A. Winslow, Dr. P.H. Professor Emeritus of Public Health Yale University

> > Property of
> > OAKLAND COUNTY
> > PLANNING COMMISSION
> > 1 Lafayette Street
> > PONTIAC, MICHIGAN



Oakland Councy Flamming Commission

### FOREWORD

This report, showing the various activities of the Health Department during the years 1955-56, is respectfully submitted to the Oakland County Board of Supervisors with grateful appreciation for their combined cooperation in supporting our many expanding activities.

Such support has been manifested by increases in our staff to meet the needs of a rapidly growing community and also the expansion of the various services rendered; by salary adjustments to employees, both professional and clerical, which have helped to stabilize the personnel of the Department; and by appropriations in January, 1955, and later that year by increases in such appropriations, to provide us with a modern, beautiful workshop in the form of a new Health Center, located in the County Service Center on North Telegraph Road, which was formally opened to the public on September 23, 1956.

This new Health Center, one of the most modern buildings of its kind, provides all the facilities which medical science requires for the care of the public health. It is not only designed to meet current needs, but is planned to accommodate future expansions as required.

In these new, adaptable quarters your Health Department can more efficiently carry on its numerous functions in an ever increasing generalized program of public health for the entire population of Oakland County.

## ESTIMATED POPULATION - 1955-56

## OAKLAND COUNTY

AREA	1955	1956
Berkley	23,000	23,700
Birmingham	22,700	24,000
Clawson	12,000	12,400
Ferndale	33,000	34,000
Hazel Park	23,500	24,500
Holly	2,800	2,850
Huntington Woods	8,000	8,100
Northville (Part)	270	300
Oak Park	28,000	30,000
Pleasant Ridge	4,600	4,600
Pontiac City	79,500	82,500
Rochester	5,250	5,275
Royal Oak	65,000	69,000
Oakland County Rural	252,380	258,775
Total County	560,000	580,000

## SCHOOL ENROLLMENT

## OAKLAND COUNTY, MICHIGAN

## 1955 - 1956

	Number of Pupils					
GRADES	Pontiac City	Oakland County	Total			
Kindergarten	2,020	12,632	14,652			
First	2,007	13,281	15,288			
Second	1,945	12,803	14,748			
Third	2,019	12,720	14,739			
Fourth	1,566	10,488	12,054			
Fifth	1,358	9,003	10,361			
Sixth	1,212	8,938	10,150			
Seventh	1,625	9,840	11,465			
Eighth	1,617	9,092	10,709			
Ninth	1,363	7,427	8,790			
Tenth	1,200	5,953	7,153			
Eleventh	953	4,923	5,876			
Twelfth	769	4,228	4,997			
Special Students	4	311	315			
Total - Kindergarten thru 12th Grades	19,658	121,639	141,297			
Number of Teachers - 1955-1956			4.937**			

1955 - Pre-school census (Oakland County complete) 77,713	1955 - Pre-	school census	(Oakland C	County complet	e)	77,713
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1950	<u>6 - 1957</u>			
	. Nu	mber of Pupils		
GRADES	Pontiac City	Oakland County	Total	
Kindergarten	2,048	14,027	16,075	
First	2,076	14,020	16,096	
Second	1,982	13,272	15,254	
Third	1,897	13,054	14,951	
Fourth	1,955	13,022	14,977	
Fifth	1,500	10,737	12,237	
Sixth	1,323	9,194	10,517	
Seventh	1,210	9,242	10,452	
Eighth	1,591	9,860	11,451	
Ninth	1,559	8,831	10,390	
Tenth	1,264	6,788	8,052	
Eleventh	961	6,039	7,000	
Twelfth	859	4,707	5,566	
Special Students	130	460	590	
Total - Kindergarten thru 12th Grades	20,355	133,253	153,608	
Number of Teachers - 1956-1957			5,333*	

*Including 139 special teachers employed by the Oakland County Board of Education
**Including 90 special teachers employed by the Oakland County Board of Education

82,257

1956 Pre-school census (Oakland County complete)

#### PUBLIC HEALTH NURSING DIVISION

Are you interested in your health? Really? Or do you take it for granted, as most people do, until you "haven't been feeling well lately"?

Are you an expectant mother or father beset by apprehensions about the birth process, how to bathe and care for the baby, or do you have a four-year-old who has reverted to infant behavior in order to compete with his new baby sister?

Are you interested in the fact that public health nurses find cases of tuberculosis through making home visits for other purposes; that they visit to teach the value of repeat x-rays, of proper rest and diet, of tuberculin skin testing for the children? You should be, for these visits protect you in your community.

### The Public Health Nurse Serves Families in Their Homes

The health needs, recognized and unrecognized, of many of the citizens of Oakland County are multiple. Probably no one has a better opportunity to be aware of these than the field staff of the Health Department, the public health nurses and sanitarians. Because we are still far short of sufficient numbers of personnel to serve the present population and because new programs are added while others must be maintained, the nursing staff is well aware that there are many unmet needs in their communities. Caseloads are heavy. Most families present multiple needs. The nurse who makes a home call because Susan failed a vision test and is falling behind in her studies may find that Susan has six brothers and sisters, one of whom has symptoms of possible rheumatic fever; another obviously needs the help of Child Guidance; mother is pregnant and is too tired to really want this baby; grandma has come from down south to visit to help out and "she just got over tuberculosis"; daddy "drinks quite heavy"; none of the children have been immunized; and the whole family could greatly benefit from an improved diet. Unusual? Not at all. Such cases are commonplace. In each instance, the public health nurse works to improve the health of each member of the family. This may involve conferences with and referral to private physicians; referral to medical clinics; health department immunization clinics; well child conferences; child guidance; tuberculosis clinic; and perhaps a service club for funds for glasses and contact with teachers and special education personnel in the school district. The nurse may carry a case of this type as part of her caseload from one to five years or longer.

In 1955 there were 14,953 such visits made. In 1956 the number of visits made was 18,720.

In addition to her work with individuals and families, the public health nurse carries on an active and persistant program of health teaching through school and community groups. Her premise is simple. Health is vitally important to every man, woman and child and prevention is better than cure. How does she accomplish this health teaching?

#### The Public Health Nurse Assists in the Control of Communicable Disease

In one school district adjacent to Detroit there was considerable concern because of an outbreak of diphtheria in the city. Due to the low socio-economic group involved and the low level of immunity for diphtheria in the school population it was deemed advisable to hold an immunization clinic in the school. Was there real long range value, the nurse asked herself, in immunizing these children without also teaching the children, the teachers and the parents why they were being immunized? She didn't think so.

She talked with the principal; with his permission she met with teacher groups to teach them; together they developed appropriate lesson plans for different grade levels; films were shown; teachers taught, combining drawing and immunization, arithmetic and immunization, spelling and reading and immunization; PTA meetings were held and parents were taught. On the day of the clinic over 1,700 of the 2,000 children in the school district were immunized for diphtheria and tetanus; smallpox vaccinations were done on those who needed them.

### The Public Health Nurse Provides Service to Schools

Early case-finding and follow-up for correction of defects is one of the major activities of public health nurses. She interprets to teachers, individually and in groups, the kinds of behavior that a child may exhibit during early stages of a chronic illness or condition when actual symptoms are not present. She follows vision and hearing cases to see that children receive proper medical attention and that the optimum correction is obtained. Patients whose chest x-rays indicate need for follow-up are referred to nursing, if phone calls and letters from the clinic are unsuccessful. These cases may be patients with tuberculosis, cancer or a cardiac condition. All orthopedic children are seen routinely until age twenty-one.

In an effort to further assist school personnel in effective health teaching, the health department has built up and maintains appropriate health literature and supplementary teaching aids. For example, prior to a hearing screening program, the public health nurse in the school district requests a meeting with those teachers whose pupils will be involved in the testing. The program is explained; the use of the plastic ear model in teaching is demonstrated; films, pamphlet material and drawings of the ear for use at different grade levels are presented and discussed. Teachers select the materials they desire; in upper grade levels they sometimes ask that the nurse or the hearing technician sit in as a resource person and the classroom preparation for the hearing screening program begins. Thus it becomes, not just a "testing program", but an educational process. Through this process, carried on in similar programs, children not only learn about ears and eyes; they also learn to understand and accept, without ridicule and teasing, the child who wears a hearing aid or one who wears glasses.

The "kits", as the nurses call them, are portable, lightweight file boxes into which are placed sample materials of available health education leaflets and pamphlets. Such materials are segregated into appropriate classifications, such as vision, hearing, elementary, junior high and high school, nutrition, infant and pre-school, etc. This makes it possible for nurses to provide teachers with samples of a wide variety of

appropriate, scientifically accurate health material from which the teachers select that which best suits their needs.

When a brief explanation of usage was published in the Michigan School Health Association Bulletin, letters of inquiry requesting detailed explanation of the kits came from school personnel and health departments all over the country.

### The Public Health Nurse in Community Activities

Health teaching is carried on throughout the day and often extends into evening meetings or classes. Public health nurses are frequently asked to talk to Service Clubs, and PTA's. In two school districts, a "Growing Up" program has developed. It has involved a sequence of evening meetings attended by parents, teachers and junior high school pupils. Teachers, visiting teachers, physicians, parents and the public health nurse in the district have comprised a panel to present material and lead discussion. Attendance has varied from 150 to 250, depending on the population of the particular school. In 1956, the nursing staff showed 178 health films, attendance 19,233; and gave 607 talks, attendance 21,952.

### The Public Health Nurse Teaches Expectant Parents

The demand for Expectant Parents Classes has increased almost beyond the capacity of the Nursing Division to fulfill. In 1955, ten series of classes were offered (there are eight classes in one series); attendance was 1,542. Classes were held in the evening so that fathers, as well as expectant mothers might benefit. It is recommended that registration be 20 or less. In some instances, class registration rose to 48. In 1956, eleven series of classes were offered, with an attendance of 1,383.

### The Health Center Belongs to its Citizens - Present and Future

Educational tours of the Health Department have become a routine part of the service promoted by the nursing staff. The two or three hour program is planned according to the information obtained by the nurse when the request is made. A class of school children engaged in a nutrition project learn how nutrition is related to dental care; from the clinic nurse they find that proper nutrition, as well as immunization, is vital to the maintenance of the body defenses against disease; the physician discusses the importance of nutrition in such diseases as tuberculosis; thus, each division representative explains his activities as they relate to the subject taught in the classroom.

Teacher groups find the information presented and the activities carried on helpful to them in their classrooms. An increasing number find that the library contains a wealth of material available to them for study purposes.

### Public Health Nursing Assists with Professional Education

As programs develop, qualified staff recruited, inservice education stimulated

and strengthened, universities and the State Health Department look with approval upon a local health department that can meet the standards for accreditation as a field teaching center.

The first group of four nursing students came to us from the University of Michigan School of Nursing in April, 1956. Their affiliation lasted 8 weeks. In September of that same year, we accepted a 16-week student from the University of Michigan School of Public Health.

The success of a teaching program such as this is dependent upon careful planning and execution. Field teachers assigned to students are chosen with care. Intensive supervision and guidance of field teachers is essential to provide maximum learning opportunities for the student.

Public health nursing is involved in almost every program carried on by a health department. It has been said that "America's two great contributions to public health were the Panama Canal and the public health nurse."

John J. Hanlon, <u>Principles of Public Health Administration</u>, C. V. Mosby Co., 1955, p. 467.

## SUMMARY OF IMMUNIZATIONS IN HEALTH DEPARTMENT CLINICS -- 1955-56

## (Excluding Pontiac City)

	1955	<u>1956</u>
Smallpox vaccinations	3,584	4,221
re-vaccinations	1,531	3,250
Diphtheria immunization under 1 year	610	1,017
from 1 to 4 years	771	1,155
from 5 years and over	2,912	1,828
booster doses	2,107	6,681
Whooping Cough immunization under 1 year	145	1,020
from 1 year and over	201	565
booster doses	382	830
Tetanus immunization	4,212	3,996
booster doses	1,103	6,800
Total services provided	17,558	31,363

#### HEARING CONSERVATION REPORT

Hearing is one of man's primary means of relating himself to his environment. The function that we call hearing involves much more than understanding sound; it is very much a part of the behavior that characterizes each child. Unlike most other disabilities, a handicapping amount of hearing loss does not show and thus may go unnoticed. Perhaps the most serious effect of this hearing loss is that it produces a communicative disorder, an interference with the back and forthness between minds that is the essence of being human.

A hearing conservation program that will satisfactorily deal with the problems of hearing loss cases must have as its aims:

- 1. Prevention of diseases and conditions that cause hearing defects in children.
- 2. Case finding that will discover existing defects as early as possible.
- 3. Medical examination and treatment.
- 4. Complete educational and medical follow-up to help those with permanent hearing losses.

To meet these aims and to keep pace with a growing population it was necessary to both expand and refine this program.

During 1956, cooperative planning by school administrators, the State Health Department and the local health department paved the way for screening 28,065 children. Among this group 991 hearing losses were found, and 256 of these losses required medical examinations. The quality of the program was enhanced by placing more emphasis on health education. The purpose was to make the program a meaningful experience for the child, family, school and community. Teaching aids such as films, health guides, and a model of the ear were used extensively by teachers and nurses in the schools. The hope is not only to find and treat existing defects, but also to prevent future hearing problems. Teamwork was stressed at otology clinics so that each child received a diagnosis, medical recommendations and consultation service. Nine of these clinics were held to examine 187 children, and nurses intensified their follow-up in an effort to see that each child with a medically significant hearing loss received medical attention.

Admittedly, good beginnings have been made to satisfy the aims of hearing conservation; but more can be done, especially in the area of health education. The community must be made aware of the importance of conserving the hearing of their children. The accomplishment of this task will require the active support of community leaders. Thus, hearing conservation is seen as a community-wide program which depends on the cooperative efforts of many people striving towards a common goal - good listening.

### VISION CONSERVATION REPORT

It has been estimated that 85% of all learning comes through the eyes. Imagine how difficult it would be to live even one day without vision. Truly, good vision is essential to the future health and happiness of every child. It is with this understanding that the State and local health departments have developed the present vision program. The program is geared to the total problem of the child's vision. Its aims are community planning, adequate visual environment, good screening methods and complete follow-up. This consists of not only getting the child to the doctor, but also of returning, and often explaining the report to the teacher to enrich her understanding of the child's visual problem.

During 1956, eight trained technicians were utilized to screen 36,431 children with the Massachusetts Vision Test. Children who failed the test twice were referred to a doctor for eye examinations. Nurses increased their efforts to see that each child was seen by an eye specialist. In addition, those cases needing glasses were followed closely to see that the child made the proper emotional adjustment to wearing glasses.

A continuous expansion of the program has been necessary to meet the increasing demands for more vision conservation services. Each new program has been developed with a view to the future so that, health education now plays a prominent role. Teaching youngsters to be safety conscious and to have an appreciation of good eyesight is a vital part of these programs. Always remember - a child's eyes are one of his most priceless possessions. Keeping these thoughts in mind, the local health department is continuously striving to develop better programs in sight conservation.

# MATERNAL DEATHS, INFANT DEATHS, NEONATAL DEATHS MATERNAL DEATHS AND RATES: OAKLAND COUNTY - 1955 (BY PLACE OF RESIDENCE)

	Births	Rate	Deaths	Rate	Infant Deaths	Rate	Neonatal Deaths	Rate	Maternal Deaths	Rate
Berkley	606	26.3	106	4.6	7	11.6	4	6.6	-	-
Birmingham	1,054	46.4	190	8.4	15	14.2	10	9.5	3	2.8
Clawson	407	33.5	57	4.8	7	17.2	6	14.7	, <del>-</del>	-
Ferndale	964	29.2	254	7.7	21	21.8	16	16.6	-	-
Hazel Park	931	39.6	135	5.7	27	29.0	23	24.7	-	-
Holly	156	55.7	36	12.9	4	25.6	2	12.8	_	-
Huntington Woods	159	19.9	38	4.8	4	25.2	4	25.2	-	·-
Northville	6	22.2	-	_	·	-	-	-	<b>-</b>	-
Oak Park	1,174	41.9	90	3.2	24	20.4	17	14.5	-	-
Oakland Rural	5,758	22.8	1,467	5.8	181	31.4	133	23.1	4	0.7
Pleasant Ridge	50	10.9	27	5.9	-	-	-	-	-	-
Pontiac	2,514	31.6	622	7.8	· 71	28.2	52	20.7	2	0.8
Rochester	222	42.3	63	12.0	3	13.5	2	9.0	, v <del>-</del>	-
Royal Oak	2,849	43.8	392	6.0	41	14.4	31	10.9	_	_
TOTAL	16,850	30.1	3,477	6.2	405	24.0	300	17.8	9	0.5

# TOTAL BIRTHS, DEATHS, INFANT DEATHS, NEONATAL DEATHS MATERNAL DEATHS AND RATES: OAKLAND COUNTY - 1956 (BY PLACE OF RESIDENCE)

	Births	Rate	Deaths	Rate	Infant Deaths	Rate	Neonatal Deaths	Rate	Maternal Deaths	Rate
Berkley	629	26.5	120	5.1	15	23.8	13	20.7	-	_
Birmingham	1,125	46.9	208	8.7	20	17.8	15	13.3	-	-
Clawson	492	39.6	69	5.6	13	26.4	9	18.3	-	· -
Ferndale	1,069	31.4	285	8.4	28	26,2	26	24.3	2	1.9
Hazel Park	1,041	42.5	134	5.5	23	22.1	16	15.4	<b>-</b>	· —
Holly	108	37.9	39	13.7	. 2	18.5	2	18.5	<del>-</del> ,	. <del>-</del>
Huntington Woods	141	17.4	44	5.4	1	7.1	1	7.1	_	- -
Northville	4	14.8	2	6.7	-	-	· <b>_</b>	-	<u>-</u>	_
Oak Park	1,255	41.8	114	3.8	27	21.5	23	18 <b>.3</b>	_	<del>.</del>
Oakland Rural	6,695	25.8	1,537	5.9	171	25.5	123	18.4	3	0.4
Pleasant Ridge	43	9.3	33	7.2	3	69.8	3	69.8	-	
Pontiac	2,785	<b>33.</b> 8	676	8.2	89	32.0	67	24.1	2	0.7
Rochester	282	53.5	64	12.1	7	24.8	7	24.8	1	3.5
Royal Oak	2,757	40.0	400	5.8	49	17.8	37	13.4	1	0.4
TOTAL	18,426	31.8	3,725	6.4	448	24.3	342	18.6	9	0.5

13 -

### LEADING CAUSES OF DEATHS

### OAKLAND COUNTY - 1955-56

In 1955 and 1956, heart diseases continued to account for more Oakland County deaths than any other cause, followed by cancer, apoplexy, and accidents.

The top 10 causes of deaths in Oakland County during 1955 and 1956 were:

		1055	_
		1955	
	CAUSE	NO. DEATHS	PERCENT
1.	Heart diseases (all forms)	1,161	33.4
	Cancer (all forms)	633	18.2
3.	Apoplexy	355	10.2
4.	Accidents:	232	6.7
	(Motor vehicle - 128)		
	(Others -104)		•
5.	Diseases of the circulatory system	116	3.3
6.	Ill-defined diseases of early infancy	110	3.2
7.	Congenital malformations	87	2.5
8.	Pneumonia (all forms)	85	2.5
9.	Diabetes mellitus	77	2.2
10.	Suicide and self-inflicted injury	46	1.3
	TOTAL (top 10 causes)	2,902	83.5
	ALL other causes	<u>575</u>	<u> 16.5</u>
	TOTAL DEATHS - 1955	3,477	100.0
		- 4	
		•	
		1956	
	CAUSE	·	
	CAUSE	NO. DEATHS	PERCENT
1.	<u>CAUSE</u> Heart diseases (all forms)		PERCENT 36.2
2.	CAUSE  Heart diseases (all forms)  Cancer (all forms)	1956 NO. DEATHS 1,347 628	PERCENT  36.2 16.8
2. 3.	CAUSE  Heart diseases (all forms)  Cancer (all forms)  Apoplexy	1956 NO. DEATHS 1,347 628 361	PERCENT  36.2 16.8 9.7
2.	CAUSE  Heart diseases (all forms)  Cancer (all forms)  Apoplexy  Accidents:	1956 NO. DEATHS 1,347 628	PERCENT  36.2  16.8
2. 3.	CAUSE  Heart diseases (all forms)  Cancer (all forms)  Apoplexy  Accidents:  (Motor vehicle - 125)	1956 NO. DEATHS 1,347 628 361	PERCENT  36.2 16.8 9.7
2. 3. 4.	CAUSE  Heart diseases (all forms)  Cancer (all forms)  Apoplexy  Accidents:  (Motor vehicle - 125)  (Others - 131)	1956 NO. DEATHS  1,347 628 361 256	36.2 16.8 9.7 6.9
<ol> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:   (Motor vehicle - 125)   (Others - 131) Diseases of the circulatory system	1956 NO. DEATHS  1,347 628 361 256	36.2 16.8 9.7 6.9
2. 3. 4. 5. 6.	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:   (Motor vehicle - 125)   (Others - 131) Diseases of the circulatory system Congenital malformations	1956 NO. DEATHS  1,347 628 361 256	36.2 16.8 9.7 6.9
<ol> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:    (Motor vehicle - 125)    (Others - 131) Diseases of the circulatory system Congenital malformations Ill-defined diseases of early infancy	1956 NO. DEATHS  1,347 628 361 256  110 110 110 109	36.2 16.8 9.7 6.9 3.0 3.0 2.9
2. 3. 4. 5. 6.	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:   (Motor vehicle - 125)   (Others - 131) Diseases of the circulatory system Congenital malformations Ill-defined diseases of early infancy Pneumonia (all forms)	1956 NO. DEATHS  1,347 628 361 256	36.2 16.8 9.7 6.9
2. 3. 4. 5. 6. 7.	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:    (Motor vehicle - 125)    (Others - 131) Diseases of the circulatory system Congenital malformations Ill-defined diseases of early infancy	1956 NO. DEATHS  1,347 628 361 256  110 110 110 109	36.2 16.8 9.7 6.9 3.0 3.0 2.9
2. 3. 4. 5. 6. 7.	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:   (Motor vehicle - 125)   (Others - 131) Diseases of the circulatory system Congenital malformations Ill-defined diseases of early infancy Pneumonia (all forms)	1956 NO. DEATHS  1,347 628 361 256  110 110 110 109 108	36.2 16.8 9.7 6.9 3.0 3.0 2.9 2.9
2. 3. 4. 5. 6. 7. 8. 9.	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:     (Motor vehicle - 125)     (Others - 131) Diseases of the circulatory system Congenital malformations Ill-defined diseases of early infancy Pneumonia (all forms) Diabetes mellitus Suicide and self-inflicted injury	1956 NO. DEATHS  1,347 628 361 256  110 110 109 108 75 42	36.2 16.8 9.7 6.9 3.0 3.0 2.9 2.9 2.9 2.0 1.1
2. 3. 4. 5. 6. 7. 8. 9.	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:     (Motor vehicle - 125)     (Others - 131) Diseases of the circulatory system Congenital malformations Ill-defined diseases of early infancy Pneumonia (all forms) Diabetes mellitus Suicide and self-inflicted injury  TOTAL (top 10 causes)	1956 NO. DEATHS  1,347 628 361 256  110 110 109 108 75 42  3,146	36.2 16.8 9.7 6.9 3.0 2.9 2.9 2.0 1.1
2. 3. 4. 5. 6. 7. 8. 9.	CAUSE  Heart diseases (all forms) Cancer (all forms) Apoplexy Accidents:     (Motor vehicle - 125)     (Others - 131) Diseases of the circulatory system Congenital malformations Ill-defined diseases of early infancy Pneumonia (all forms) Diabetes mellitus Suicide and self-inflicted injury	1956 NO. DEATHS  1,347 628 361 256  110 110 109 108 75 42	36.2 16.8 9.7 6.9 3.0 3.0 2.9 2.9 2.9 2.0 1.1

## DEATHS BY INTERMEDIATE LIST OF CAUSES

## Oakland County - 1955-56

(Exclusive of stillbirths. Cause of death classified according to Sixth Revision of International List, 1948, Intermediate List of 150 Causes)

	Int.		
CAUSE OF DEATH	List	Total 1	Number
	No.	1955	1956_
ALL CAUSES:			
TUBERCULOSIS, ALL FORMS: (A1-A5)			
Tuberculosis of respiratory system  Tuberculosis of meninges and central	A1	19	23
nervous system	<b>A2</b>	1	1
Tuberculosis of intestines, peritoneum	4.0	4	
and mesenteric glands	A3	1	0
Tuberculosis of bones and joints	A4		2
Tuberculosis, all other forms	<b>A5</b>		1
SYPHILIS, ALL FORMS: (A9-A10)			
General paralysis of insane	A9	1	1
All other syphilis	A10	3	4
Continuomia and puemia	4.00		_
Septicemia and pyemia	A20	2	5
Whooping Cough	A22	_	1
Meningococcal infections Tetanus	A23	5	2
	A26	1	•
Acute poliomyelitis Acute infectious encephalitis	A28	2	4
Measles	A29	-	2
Infectious Hepatitis	A32	1	3
All other diseases classified as	A34		1
infective and parasitic	A43	6	4
	1110	Ū	•
MALIGNANT NEOPLASMS, ALL FORMS: (A44-A59)			
Malignant neoplasm of buccal cavity			
and pharynx	A44	18	10
Malignant neoplasm of esophagus	A45	4	8
Malignant neoplasm of stomach	A46	61	48
Malignant neoplasm of intestine, except rectum	A47	85	59
Malignant neoplasm of rectum	A48	40	32
Malignant neoplasm of larynx	A49	2	6
Malignant neoplasm of trachea, and of			
bronchus and lung not specified as secondary	A50	<b>56</b>	84
Malignant neoplasm of breast	A51	61	76
Malignant neoplasm of cervix uteri	A52	23	29
Malignant neoplasm of other and			
unspecified parts of uterus	A53	13	9

	Int.				
CAUSE OF DEATH	List	Total	Number		
	No.	1955	1956		
Malignant neoplasm of prostate	A54	21	37		
Malignant neoplasm of skin	A55	9	11		
Malignant neoplasm of bone and					
connective tissue	A56	6	8		
Malignant neoplasm of all other and					
unspecified sites	A57	170	156		
Leukemia and aleukemia	A58	25	35		
Lymphosarcoma and other neoplasms of					
Lymphatic and hematopoietic system	A59	39	20		
Benign neoplasms and neoplasms of	. 1				
unspecified nature	A60	13	10		
Nontoxic goiter	A61	1			
Thyrotoxicosis with or without goiter	A62	1	1		
Diabetes mellitus	A63	77	75		
Avitaminosis and other deficiency states	A64	1			
Anemias	A65	9	5		
Allergic disorders; all other endocrine,					
metabolic and blood diseases	A66	32	28		
Psychoses	A67	1	2		
Psychoneuroses and disorder of personality	A68	3	1		
Mental deficiency	A69		1		
Vascular lesions affecting central			_		
nervous system	A70	355	361		
Nonmeningococcal meningitis	A71	2	4		
Multiple sclerosis	A72	8	8		
Epilepsy	A73	7	2		
Otitis media and mastoiditis	A77	4	5		
All other diseases of the nervous system	210	-			
and sense organs	A78	21	32		
Rheumatic fever	A79	21	1		
Intermatic level	All	4	1		
HEART DISEASE, ALL FORMS: (A80-A83)					
Chronic rheumatic heart disease	A80	34	50		
Arteriosclerotic and degenerative					
heart disease	A81	972	1129		
Other diseases of heart	A82	53	55		
Hypertension with heart disease	A83	102	113		
Hypertension without mention of heart	A84	37	30		
Disease of arteries	A85	72	70		
Other diseases of circulatory system	A86	7	10		

	Int.			
CAUSE OF DEATH	List	Total N	lumber	
	No.	1955	1956	
Acute upper respiratory infections	A87	6	2	
Influenza			2	
inituenza	A88	2	2	
PNEUMONIA, ALL FORMS: (A89-A91)				
Lobar Pneumonia	A89	34	27	
Bronchopneumonia	A90	31	55	
Primary atypical, other and				
unspecified pneumonia	A91	20	26	
Acute bronchitis	A92	4	5	
Bronchitis, chronic and unqualified	A93	2	7	
Hypertrophy of tonsils and adenoids	A94	1	1	
Pleurisy	A96	_	1	
All other respiratory diseases	A97	29	25	
Ulcer of stomach	A99	14	5	
Ulcer of duodenum	A100	9	15	
Gastritis and duodenitis	A101	1	10	
Appendicitis	A102	2	4	
Intestinal obstruction and hernia	A102 A103	18	18	
Gastro-enteritis and colitis, except	AI09	10	10	
diarrhea of the newborn	A104	22	15	
Cirrhosis of liver	A104 A105		39	
Cholelithiasis and cholecystitis	A105 A106	45		
Other diseases of digestive system	A100 A107	6 27	11 20	
omer diseases of digestive system	Alu	_41	20	
NEPHRITIS & NEPHROSIS, ALL FORMS: (A108-A10	09)			
Acute Nephritis	A108	1	3	
Chronic, other and unspecified				
nephritis	A109	30	32	
Infections of kidney	A110	12	10	
Calculi of urinary system	A111	1	2	
Hyperplasia of prostate	A112	12	9	
Other diseases of genito-urinary system	A114	. 7	7	
MATERNAL DE ATUS ALL BODMS, (ALLE ALSO)				
MATERNAL DEATHS, ALL FORMS: (A115-A120)				
Sepsis of pregnancy, childbirth and the	A 4 4 P	4	-	
puerperium	A115	1	1	
Toxaemias of pregnancy and the puerperium	A116	1	2	
Hemorrhage of pregnancy and childbirth	A117	2	1	
Abortion with sepsis	A119	1		
Other complications of pregnancy,				
7 AV 74 A . 4 . 4	A120	4	5	
childbirth and puerperium	71120	-		
childbirth and puerperium  Arthritis and spondylitis	A122	5	2	

	Int.		
CAUSE OF DEATH	List	Total	Number
	No.	1955	1956
A11 - d 1:			
All other diseases of skin and	A 100	0	0
musculoskeletal system	A126	2	.3
CONGENITAL MALFORMATION, ALL FORMS: (A12	7-A129)		
Spina bifida and meningocele	A127	2	10
Congenital malformations of circulatory system	A128	39	42
All other congenital malformations	A129	46	58
Birth injuries	A130	40	48
Postnatal asphyxia and atelectasis	A131	67	79
Infections of the newborn	A132	13	18
Hemolytic disease of newborn	A133	14	10
All other defined diseases of early infancy	A134	6	4
Ill-defined diseases peculiar to early			
infancy, and immaturity unqualified	A135	110	109
Senility without mention of psychosis	A136	6	
Ill-defined and unknown causes of mortality	A137	7	9
ACCIDENTS: ALL FORMS: (AE138-AE147)			
Motor vehicle accidents	AE138	128	125
Other transport accidents	AE139	7	21
Accidental poisoning	AE140	5	4
Accidental falls	AE141	26	41
Accident caused by machinery	AE142	5	3
Accident caused by fire and explosion			
of combustible material	AE143	24	14
Accident caused by hot substance, corrosive			
liquid, steam and radiation	AE144	3	1
Accident caused by firearm	AE145	5	5
Accidental drowning and submersion	AE146	13	15
All other accidental causes	AE147	16	27
Suicide and self-inflicted injury	AE148	46	42
Homicide and injury purposely inflicted by			
other persons (not in war)	AE149	7	10
TOTAL		3,477	3,725

#### POLIOMYELITIS

### Prevention of Paralytic Poliomyelitis:

During the spring of 1954 an extensive controlled trial of the poliomyelitis vaccine developed by Dr. Jonas Salk was initiated by the National Foundation for Infantile Paralysis, the purpose being to test the effectiveness of this vaccine in protecting children against paralytic poliomyelitis under natural conditions of exposure. In Oakland County a total of 16,534 children, 5 to 9 years of age, participated in the controlled field trials. One-half of these received the Salk Poliomyelitis Vaccine, the other half receiving a harmless placebo; details of these field trials appeared in our 1954 Annual Report.

Early in 1955 the Evaluation Center in Ann Arbor reported to the world that the Salk Vaccine was a safe, effective and potent agent against the crippling effects of this dreaded disease. Such a favorable report from the Evaluation Center was the "go" sign for public health authorities to redouble their efforts to stamp out paralytic poliomyelitis, as the trials showed that the vaccine was 80 to 90 per cent effective in preventing such paralysis. Community studies have continued since the field trials, the findings indicating that vaccinated children run only about 1/5 the risk of getting the crippling paralytic disease as do their unvaccinated playmates.

In order to be assured of the best results, it is necessary for a person to receive a full course of 3 properly spaced inoculations. After the first dose is received, the second dose is usually given 4 or 5 weeks later, with the third dose following 7 to 12 months later. Records of children already vaccinated show that 2 doses of vaccine – even 1 dose – give a good level of protection; the third dose results in a sharp rise in immunity.

Since the early autumn of 1955, the Michigan Department of Health has distributed free poliomyelitis vaccine to private physicians and local health departments for the immunization of those persons believed most susceptible to poliomyelitis. Priority in distribution is given to children 1 through 14 years of age and pregnant women. At the same time persons from 15 to 50 years of age should not neglect this protection, as upwards of 40% of the cases now occurring are found in persons outside the priority age group.

In Oakland County during the fall of 1955 and through the year 1956, it is estimated that out of a potential of 215,984 eligibles (children 1 to 14 years of age and pregnant women), Salk Vaccine was administered to the following:

112,959 first injections, or approximately 52.3% of total eligibles 108,742 second injections, or approximately 50.3% of total eligibles 39,861 third injections, or approximately 18% of total eligibles.

### INCIDENCE OF POLIOMYELITIS - OAKLAND COUNTY - 1955-56:

Since the introduction of Salk Vaccine in 1954, poliomyelitis cases and deaths have dropped sharply in Oakland County as shown by the following figures:

	Number of Cases	Number of Deaths
1954	187	12
1955	107	2
1956	44	4

During the 5-year period, 1949-1953, the yearly average of cases of poliomyelitis was 229 and the average number of deaths therefrom was 13.

A break-down of the reported paralytic and non-paralytic cases of poliomyelitis, by age groups and deaths reveals the following record for 1955-1956:

### NON-PARALYTIC CASES OF POLIOMYELITIS

	<u>19</u>	955	19	<u>56</u>
Age Groups	Cases	Deaths	Cases	Deaths
1 to 14	45	-	14	
15 to 19	12	-	3	_
20 to 35	25	_	8	-
Over 35	2_		1	-
Total All Ages	84		26	-

### PARALYTIC CASES OF POLIOMYELITIS

	19	55	19	56
Age Groups	Cases	Deaths	Cases	Deaths
1 to 14	18	1	11	
15 to 19	1	-	1	1
20 to 35	3		6	3
Over 35	1	_1		
Total All Ages	23	2	18	4

## TOTAL NUMBER CASES - PARALYTIC AND NON-PARALYTIC POLIOMYELITIS

	<u>19</u>	<u>55</u>	<u>19</u>	<u>56</u>
Age Groups	Cases	Deaths	Cases	Deaths
1 to 14	63	1	25	-
15 to 19	13	<del>-</del> , :	4	1
20 to 35	28	-	14	3
Over 35	3	1	1	
Total All Ages	107	2	44	4

Of the 6 fatal cases occurring in 1955 and 1956, none had ever received any vaccine. Of the 33 cases of paralytic poliomyelitis reported in the same years, none had ever received a full course of 3 properly spaced inoculations. The same statement holds good for all the other cases of this disease reported in the last two years.

The poliomyelitis record for 1956 was the best in Oakland County since 1948, when 40 cases were reported. During the intervening years a record high of 336 cases was recorded in 1952. Evidence continues to reaffirm the safety of Salk Vaccine and to prove that it provides an effective means of materially reducing, if not entirely eliminating, the threat of paralytic poliomyelitis. It is the responsibility of all parents to see that their children receive the full course of 3 properly spaced inoculations, thereby protecting them against the crippling effects of poliomyelitis.

## VENEREAL DISEASE ACTIVITY REPORT - 1955-56

## (Excluding Pontiac City)

	1955	1956
Clinic Services:		
Admissions	647	837
Readmissions	158	125
Visits	1,216	1,099
Smears taken	143	<b>23</b> 8
Blood samples taken (Including adult medical clinics)	941	910
Lumbar punctures	3	7
Treatments given	231	246
Patients for whom treatment completed in clinics	202	146
Epidemiology:  Number of referrals on contacts and suspects:		
Contacts	110	40
Suspects	242	71
Number brought to treatment as result of these investigations:		
Syphilis	36	11
Gonorrhea	48	36

### TUBERCULOSIS CONTROL DIVISION

It is not easy to picture the real story of tuberculosis in a few words. It remains in many ways to the medical profession a baffling and treacherous disease. Many people, both lay and professional, become enthusiastic over the so-called "miracle drugs" and the rapid cures effected; yet experience has shown such drugs are ineffectual in many far advanced cases and many cases are not detected until they are far advanced. Also, patients treated and discharged from the sanatorium as arrested or inactive must be followed in the out-patient clinic of the Health Department for many months to guard against re-activation.

In 1955 there were 42 cases of re-activated tuberculosis re-admitted to the sanatorium, which represented 21% of all admissions from Oakland County of proven tuberculosis; in 1956 there were 44 admissions of re-activated cases or about 20% of all admissions. This does not include those returned to the sanatorium for further treatment because they left against medical advice; these latter amounted to 9 cases in 1955 and 8 cases in 1956.

Treatment of tuberculosis has changed in the past ten years with the advent of newer drugs and improved conceptions and technique in lung surgery. This has resulted in reducing the length of hospitalization in most cases, follow-up and further treatment being given on an out-patient basis by the Health Department. These services have grown so rapidly that at the end of 1956 there were 131 out-patients being treated in our clinic.

In 1955, a total of 13,365 x-rays were taken by the Health Department; with a total of 13,341 x-rays taken in 1956. In addition, in 1956, there were 35,027 films taken by mobile units of the Michigan State Health Department; the entire Pontiac State Hospital (staff and patients) were surveyed with 3,779 films; local hospitals on the initial admittance x-ray program took 26,554 films; and private physicians and industry provided 4,337 films, for a grand total of 83,038 x-rays taken in a screening program to protect the citizens of our county against tuberculosis. Altogether there were 176 cases of active tuberculosis hospitalized in the Oakland County Sanatorium during 1955 and 211 active cases hospitalized during 1956.

During 1955, there were 21 deaths from tuberculosis in Oakland County and 27 deaths from the disease in 1956. This gives us a death rate per 100,000 of 5 and 6.7 respectively for the past two years, as compared with an average death rate of 7 for the 5 years immediately prior to this period; in 1954, for the State as a whole, the rate was 8 fatalities per 100,000 citizens. The morbidity rate for 1956 was 43 per 100,000 (new cases), as against 82 for the State of Michigan as a whole in 1954.

In 1956, several counties in South Eastern Michigan (Wayne, including the city of Detroit, Macomb, Oakland, Monroe, Washtenaw and St. Clair) combined to form a Southeastern Michigan Detection Project. It is in this area that tuberculosis seems to have higher incidence rates. Because of the interchange in population in this section, arrangements are made so that if a tubercular case is discovered in a different county from the one in which the individual resides, mutual checks can be made and follow-up work carried on. The project is just now in the initial stage, but it is hoped that with concerted effort the eradication of this disease will be expedited.

## OAKLAND COUNTY HEALTH DEPARTMENT

## TUBERCULOSIS CONTROL ACTIVITY REPORT - 1955-56

(Including Pontiac City)

(including Pontiae City)  NUMBER			
X-RAYS:	1955	1956	
Cases	1,700	1,621	
Contacts	965	968	
Observations	<b>34</b> 8	651	
Survey type	10,352	10,101	
TOTAL X-RAYS	13,365	13,341	
Positive Cases Tuberculosis Reported	133	171	
Positive Cases Found In Health Department Clinics	43	40	
CLINIC SERVICES			
Tuberculin tests	901	1,427	
Sputum examinations	232	526	
Chemotherapy Treatments:			
Patients	145	216	
Treatments	2,476	2,698	

	CHICKENPOX 1955	CHICKENPOX 1956
	The state of the s	<del></del>
Berkley	381	139
Birmingham	566	342
Farmington City	11	5
Ferndale	286	199
Hazel Park	352	138
Oak Park	178	154
Pleasant Ridge	43	10
Pontiac City	466	244
Rochester	6	4
Royal Oak	1,142	370
County Rural	_1,401_	1,011
TOTALS	4,832	2,616

	DYSENTERY (ALL FORMS)	DYSENTERY (ALL FORMS)
+	1955	1956
Berkley		-
Birmingham	-	-
Farmington City	-	-
Ferndale	2	1
Hazel Park	-	-
Oak Park	-	1
Pleasant Ridge	-	-
Pontiac City	-	-
Rochester	-	_
Royal Oak	1	1
County Rural	11	4
TOTALS	14	7

	DIPHTHERIA	DIPHTHERIA
	1955	1956
Berkley	<u>-</u>	_
Birmingham	<del>-</del>	
Farmington City	-	-
Ferndale	-	_
Hazel Park	-	-
Oak Park	<del>-</del>	-
Pleasant Ridge	· -	-
Pontiac City	_	-
Rochester	· —	-
Royal Oak	2	1
County Rural	1	
TOTALS	- <b>3</b>	1

0011110111		<del>- 1</del>
	ENCEPHALITIS	ENCEPHALITIS
	1955	1956
Berkley	<del></del>	<del>-</del>
Birmingham	1	-
Farmington City	·	· <del>_</del>
Ferndale	-	1
Hazel Park	· <b>1</b>	1
Oak Park	· <del>-</del>	-
Pleasant Ridge	-	· <b>-</b>
Pontiac City	-	<del>-</del> .
Rochester	-	<b>-</b>
Royal Oak	1	<del>-</del>
County Rural	5	<b>4</b>
TOTALS	8	<u>6</u>
	ERYSIPELAS	<b>ERYSIPELAS</b>
	<u>1955</u>	<u>1956</u>
Berkley	-	
Birmingham	-	-
Farmington City	-	-
Ferndale	1	-
Hazel Park	-	-
Oak Park	-	-
Pleasant Ridge	-	<del>-</del>
Pontiac City	-	_
Rochester	-	· -
Royal Oak	. <del>-</del>	-
County Rural	$\frac{3}{4}$	$\frac{2}{2}$
TOTAL	4	2
	HEPATITIS	HEPATITIS
	1955	1956
Berkley	<del>3</del>	<del></del>
Birmingham	1	. <b>-</b>
Farmington City	-	_
Ferndale	1	
Hazel Park	-	1
Oak Park	.1	_
Pleasant Ridge	<u>.</u>	-
Pontiac City	_	-
Rochester	-	4
Royal Oak	1	7
County Rural	61	38
TOTALS	68	50

	MEASLES	MEASLES
	<u>1955</u>	1956
Berkley	59	601
Birmingham	354	986
Farmington City	5	2
Ferndale	55	545
Hazel Park	70	345
Oak Park	40	324
Pleasant Ridge	8	67
Pontiac City	480	1,147
Rochester	4	<b>55</b>
Royal Oak	120	1,262
County Rural	936	2,756
TOTALS	2,131	8,090
	MENINGOCOCCIC	MENINGOCOCCIC
	MENINGITIS	MENINGITIS
	1955	1956
Berkley		1330
Birmingham	<u>_</u>	
Farmington City	<u>_</u>	
Ferndale	<u> </u>	_
Hazel Park	1	2
Oak Park	_	2
Pleasant Ridge	<u>-</u>	-
Pontiac City	2	5
Rochester	_	ე 
Royal Oak		<del>-</del>
County Rural	3	3
TOTALS	7	$\frac{3}{10}$
TOTALD		10
	MUMPS	MUMPS
	<u>1955</u>	1956
Berkley	516	22
Birmingham	1,019	53
Farmington City	5	2
Ferndale	318	122
Hazel Park	98	175
Oak Park	218	19
Pleasant Ridge	<b>54</b>	14
Pontiac City	125	61
Rochester	1	2
Royal Oak	615	139
County Rural	_1,093_	253
TOTATO	4 000	000

862

4,062

TOTALS

## REPORTED CASES OF

## COMMUNICABLE DISEASES BY AREAS - 1955-1956

	PNEUMONIA (ALL FORMS)	PNEUMONIA (ALL FORMS)
	1955	1956
Berkley	3	3
Birmingham	6	3
Farmington City	-	<u>.</u>
Ferndale	14	4
Hazel Park	2	1
Oak Park	<b>4</b>	1
Pleasant Ridge		1
Pontiac City	33	37
Rochester	2	31
Royal Oak	11	5
County Rural	62	
TOTALS	<del></del>	32
TOTALS	133	87
	POLIOMYELITIS	POLIOMYELITIS
	1955	1956
Berkley	$\frac{7}{7}$	2
Birmingham	7	4
Farmington City	5	1
Ferndale	5	- -
Hazel Park	4	
Oak Park	2	· <b>_</b>
Pleasant Ridge	$ar{f 2}$	-
Pontiac City	- 8	8
Rochester	=	-
Royal Oak	18	8
County Rural	49	21
TOTALS	107	44
		11
	RHEUMATIC FEVER	RHEUMATIC FEVER
	1955	<u>1956</u>
Berkley	1	-
Birmingham	-	1
Farmington City	-	· <del>-</del>
Ferndale	7	7
Hazel Park	_	
Oak Park	2	<del>-</del>
Pleasant Ridge	<b>-</b>	<del>-</del> .
Pontiac City	_	<del>-</del> .
Rochester	-	<del>-</del>
Royal Oak	<del>-</del>	, <b>1</b>
County Rural	13	14
TOTALS	23	23
		<del></del>

	RUBELLA	RUBELLA
	1955	1956
Berkley	10	64
Birmingham	115	288
Farmington City	-	F - 2.34
Ferndale	13	267
Hazel Park	18	82
Oak Park	8	20
Pleasant Ridge	3	<b>33</b>
Pontiac City	9	501
Rochester	-	1
Royal Oak	65	177
County Rural	<u>95</u>	267
TOTALS	336	1,700

	SALMONELLA	SALMONELLA
	1955	1956
Berkley	<del></del>	-
Birmingham	- -	1
Farmington City	-	_
Ferndale	2	-
Hazel Park	-	1
Oak Park	1	2
Pleasant Ridge	<b>-</b>	_
Pontiac City	-	
Rochester	-	4
Royal Oak	2	<del>-</del> ·
County Rural	8	17
TOTALS	13	25

	SCARLET FEVER	SCARLET FEVER
	1955	1956
Berkley	37	35
Birmingham	57	39
Farmington City	4	<b>_</b> :
Ferndale	28	64
Hazel Park	<b>44</b>	19
Oak Park	23	27
Pleasant Ridge	2	8
Pontiac City	278	59
Rochester	<u>-</u>	<b>1</b> * * * *
Royal Oak	91	45
County Rural	456	184
TOTAL	1,020	481

	TUBERCULOSIS	TUBERCULOSIS
	1955	1956
Berkley	13	18
Birmingham	6	10
Farmington City	<del>-</del>	2
Ferndale	15	30
Hazel Park	14	23
Oak Park	7	14
Pleasant Ridge	2	3
Pontiac City	<b>53</b>	92
Rochester	7	7
Royal Oak	23	34
County Rural	_138_	191
TOTALS Active a	and inactive cases 278	424
TOTALS Active of	cases only 133	171

	TYPHOID FEVER	TYPHOID FEVER
	1955	1956
Berkley	-	_
Birmingham	- -	-
Farmington	- ·	
Ferndale	-	_
Hazel Park	-	_
Oak Park	-	_
Pleasant Ridge	-	-
Pontiac City	-	_
Rochester	-	<b>-</b> *
Royal Oak	2	-
County Rural	2_	2_
TOTALS	4	2

	WHOOPING COUGH	WHOOPING COUGH
	1955	1956
Berkley	-	3
Birmingham	4	-
Farmington City		-
Ferndale	14	1
Hazel Park	12	8
Oak Park		-
Pleasant Ridge	-	
Pontiac City	32	<b>59</b>
Rochester	4	_
Royal Oak	2	1
County Rural	39_	84
TOTALS	107	156

### RABIES CONTROL REPORT -- 1955-1956

	No. Reported* Bites or Contacts		No. Patients**  Treated		No Treatments Given	
	1955	<u>1956</u>	1955	1956	<u> 1955</u>	1956
North Oakland Area	712	689	63	90	155	196
South Oakland Area	482	548	203	124	727	392
City of Pontiac	301	317	<u>18</u>	1	41	2
TOTAL	1,495	1,554	284	215	923	590

<sup>\*</sup> Includes the number of persons reporting to the Health Department for advice or treatment because of bites or contacts with known or unknown animals suspected of having Rabies. In 1955, investigation determined that of the 1,495 individuals reporting bites or contacts, 1,211 did not require any Pasteur prophylactic treatment; and in 1956, of the 1,554 bites or contacts reported, 1,339 persons required no Pasteur prophylactic treatment.

<sup>\*\*</sup> Includes the number of patients requiring various amounts of treatment depending upon the location of the bite or open wound.

	A11 A	reas	County	Contro	lled	Uncontr	olled
	1955	1956	1955	19	<u>56</u>	1955	1956
Number of Reported Rabid							
Dogs:	1	-	-		-	1	_
Number of Rabid Animals							
(other than dogs):							
Total number of Reported					•		
Rabid Animals	1	0	0		0	1	0
Number of Patients Reported	Bitten						
by Positive Animals:		Do	gs	Ot	her	To	tal
		<u></u>		Anir	nals		
4		1955	1956	1955	1956	1955	1956
North Oakland Area		_	_	_	-	_	_
South Oakland Area		1		_	-	1	_
City of Pontiac		_					-
TOTAL		1	0	0	0	.1	0
Number of Patients Reported 1	Bitten by	Stray Do	og•	1	955	1	956
Transport of Tables Hoper to a	Ditton D,	Stray Do	50.	<b>.</b>			.550
North Oakland Area					33		77
South Oakland Area			30			12	
City of Pontiac				_	23	· ·	37_
TOTAL					86	1	26

## ENVIRONMENTAL SANITATION DIVISION

## SUMMARY OF ACTIVITIES - 1955-56

INSPECTIONS AND FIELD VISITS:	1955	1956
Restaurants, taverns, etc.	1,293	581
Grocery stores, markets	1,201	564
Slaughter houses and meat processing plants	1,343	375
School buildings	93	103
Institutions (hospitals, homes for aged, etc.)	64	131
Resorts (children camps, motels, etc.)	73	32
Industrial establishments	40	21
Milk processing plants	35	38
Dairy farms	27	68
Trailer parks	193	116
Public water supplies	315	116
Private water systems	1,206	601
Swimming places	185	44
Private sewage disposal facilities	2,486	1,820
Public sewerage systems	42	140
Septic tank cleaners trucks	32	28
Stream and lake pollution	49	12
Housing	10	62
Plumbing inspections	17	6
Lots and subdivisions for FHA and VA	1,170	1,213

	<u>1955</u>	1956
Visits relating to communicable diseases	138	34
Field consultations	2,718	2,140
Garbage and refuse disposal places	97	106
SAMPLES COLLECTED:		
Drinking water	1,990	1,173
Milk samples	820	228
Food samples	22	29
Water samples from lakes, streams and swimming pools	180	113
OTHER:		
Homes visited	3,171	4,567
Meetings attended	253	191
Talks given	19	41
News articles prepared	8	6
Miles traveled	97,797	101,093
Hours on duty	22,265	23,245
Office consultations	8,294	7,135
Construction plans approved	208	209
Complaints investigated	1,220	611
Meat (carcasses inspected)	15,985	17,428
Hours spent on rodent and insect control	44	99
Septic tank installations approved	320	1,467
Water supplies approved	180	331

### REPORT OF DENTAL SECTION - 1955-56

Dental services for eligible children were terminated when R. M. Christl, D. D. S., reported for active military duty in August, 1953. In January 1955, a full time dentist was employed and the services of a part time dentist were available for the first six months. In September 1955, Doctor Christl returned from service in the Army Dental Corps and assumed responsibility for reorganizing the dental program. Carl Leftwich, D. D. S., was employed in October 1955, giving us a staff of two dentists and one dental assistant at the conclusion of that year.

Dental treatment in the Health Center was limited to children up to 16 years of age and not beyond the 8th grade. Most of the services were rendered to children in the southern Oakland area, although many children from all parts of the county received treatment.

With the completion of the new Health Center in Pontiac and its inclusion of a two-chair dental clinic, dental services were expanded for eligible children throughout the county. One full time dentist, Dr. C. D. Christie, and one part time dentist, Dr. George Duncan, were employed to augment the dental staff.

Besides the services listed below, the educational phase of dentistry was stressed by the showing of films in classrooms, distribution of educational pamphlets and talks to children, parents and school personnel.

Following is a report of accomplishments in our clinics during the years of 1955-56:

SERVICES	<u>1955</u>	<u>1956</u>
Clinic Visits		•
New patients	2,322	2,206
Old patients	96	154
•	$\frac{1}{2,418}$	$\frac{1}{2,360}$
Recurrent visits	423	2,854
Total	2,841	5,214
Teeth Extracted		
Deciduous	1,996	2,529
Permanent	339	751
Total	$\overline{2,335}$	3,280
Local Anesthetic used	2,607	4,976
Fillings		
Pulp Cappings	159	477
Cement bases	2,170	5,622
Silver amalgam	2,126	5,671
Cement	27	48
Synthetic Porcelain	175	467
Acrylic Restorations	11	40
Total	4,668	12,325
Gingivitis	6	25
Vincents Infection	_	3
Prophylactic treatments	53	229
Miscellaneous operations	48	83
Total	107	340

## Bureau Of Laboratories - Oakland County Dep't Of Health

				NOSE	AND TH	ROAT CU	LTURES			Ü						1											
		DIAGN	OSTIC		RELEASE		CON	TACT	CAR	RIERS			SYPH	IILIS	_	GONO	RRHEA			WATER				MI	ılk		TOTAL
	Diph.	Hem. Strep	Vinc.	Others	Diph.	Other	Diph.	Other	Diph.	Other	Spinal Fluid	Dark.	Sero.	Spinal	Quant.	Smear	Culture	Municipal	School	Private	Public	Pool	Pre. Past.	Past.	Ice Cream	Other	1
1. Contagious	849	848	2		18						60		29		2	87	46	2		2							1,945
2. Infirmary	2	4	3										651		8			5	2	19	9	1.		14			716 2
3. North Oakland	42	.44	13				9					2	3,352	3	48	345	29	394	15	1,123	376	27		ŀ			5,822 3
4. Birmingham	182	182	3										3,062		20	15		28		4		1.					3,497 4
5. Pontiac	2έ	29	1							[			172		\$	4	2	2		2							249
*6. South Oakland	20	50	2	1									1,059		12	23		287		21	1.	6					1,452 (
7. Berkley	12	13	2	1									560		3	8		211									810
8. Ferndale	49	49	4									1	2,279	1	26	32	2	15				3		362			2,823
9. Hazel Park	6	5					5						975		9	63	2	52				14					1,131 9
10. Royal Oak City	277	269	4				3	1			1 .	6	5,530	2	41	324	14	206				7		264			6,969 10
11,	5	5					4	_					680		11	19	2	. 96		,		5					827 11
12.	3	3					12	12				1	181		25	55	9	14				2		18			325 12
13. Subm. to State	10	17	3	1							3	1	742	1	3	15		19									823 13
TOTAL	1,493	1,488	37	3	18		33	13			64	11	19,272	7	207	550	106	1,331	17	1,171	386	66		678			27,391
					BLOOD	EXAMI	NATIONS					υ	RINALYS	IS		SPUTUM											
				Anti.	Rh.	Inf.	Sed.	T	Ι	I	· ·	Pre	}	l		1		Trans.	Misc.	Feces	Cou	igh .tes	Remarks.	Extra			1
	Count	Туре	Rh.	Prei,	Serial	Mon.	Rate	Chem.	Culture	Aggl.	Other	Natal	Routine	Other	т. в.	Culture	Other	Exu.	Exam.	reces	1 12	.063	Services,				
1. Contagious	891	32	28			8	7	140	3	27	5		1.387	26	23			46	52	31							2,706
2. Infirmary	23	20	44					1,166	1	555			496	1	1				1	2	:						2,310 2
3. North Oakland	14	331	654	7			1	4		10			159	1	27	57		2	5	60	2						1,332
4. Birmingham	2	339	643	7			2			25			1		13	3		2	1	1		2					1,041 4
5. Pontiac	3	26	46				1	2					3						1								82 5
6. South Oakland	8	11.0	166	1				2		9		1	7		8	5			2	5							322 6
7. Berkley	13	25	65	1			5		1				15		8	14			9		_						155
8. Ferndale	12	63	78	1		1		2	Ť T	4.			7	1	30	15		2		37	_						252
9. Hazel Park	53	21	94	2		· ·	,	10	†	3		1	14		10	11	1	1	4	2		2					237 5
10. Royal Oak City	189	630	1,336	2		<b>1</b>	43	29		2			84	2	43	24		1	23	26		10					2,444 10
11.	8	87	127	1			1 7	1	<b>†</b>	<del>                                     </del>			16		9	4		1	2	75		1					332 11
12.	11	5	9	T		Î		1 -	1	1			. 4			2		1	5			2					39 .12
13. Subm. to State	1	271	275	1		1	1	11	T		1		3		6	2		3	2	168					•		745 13
TOTAL	1,228	1,960	3,565	22		8	69	1,367	4	635	6		2,196	31	178	137	1	59	107	407		17		G	RAND 1	TOTAL	i

## Bureau Of Laboratories - Oakland County Dep't Of Health

				NOSE	AND TH	ROAT CU	LTURES					l	-							-							
	DIAGNOSTIC RELEASE CONTACT CARRIERS						GONORRHEA WATER						MI	LK		TOTAL											
	Diph.	Hem. Strep	Vinc,	Others	Dipb.	Other	Diph.	Other	Diph.	Other	Spinal Fluid	Dark.	Sero.	Spinal	Quant.	Smear	Culture	Municipal	School	Private	Public	Pool	Pre. Past.	Past.	Ice Cream	Other	
1. Contagious	545	542	3	9	11	11					32		21		1	32	32			I							1,239
2. Infirmary						<u> </u>							683	<u> </u>	3	8	2	31		148	1.2						917
3. North Oakland	195	196	17										3,439		11	310	33	493	,	777	235	1					5,707
4. Birmingham	316	325	14	3	L								3,375		-11	14	2	10		8	. 1						4,079
5. Pontiac	21	19	1				10			,			240	1	3	7	4	5		3						1.1	314
6. South Oakland	28	26							7				1,215	2	11	40	2	273		73						7	1,677
7. Berkley	71	134	1									<u> </u>	502		1	8	1	100		. 3			L				821
8. Ferndale	60	. 62	1		1								3,036	1	28	22	1	5		2	1	. ,.		271			3,490
9. Hazel Park	19	19	2								3		1,039		15	. 34		32		`							1,169
10. Royal Oak City	339	363	8			18	1					3	5,915	1	39	92	5	148		8		2	L				6,941
11.	8	27	. 1					-					798		7	31	1	63		1		1		4			9421
12,	3	6	1									1	225	1	22	230	15	4			**						50g1
13. Subm. to State	17	18	1								4	1	790		9	15	3	19		. 8							8871
TOTAL	1,622	1,737	50	12	11	. 35	10	)	7		39	5	21,278	6	161	843	101	1,183		1,031	281	4		275			28,691
					BLOOK	EXAMI	NATIONS					τ	RINALYS	SIS		SPUTUM								-			
				Anti.	Rh.	Inf.	Sed.			1		Pre	T				1	Trans.	Misc.	Feces	-	Cough Flate	Remarks,	Extra			
	Count	Туре	Rh.	Prel.	Serial	Mon.	Rate	Chem.	Culture	Aggl.	Other	Natal	Routine	Other	T. B.	Culture	Other	Exu.	Exam.	Fec	,	§ 2	Services,	Etc.			
1. Contagious	636	16	8			2	2	117	8	3	51		890	13	1				51	1.0	8	1					1,817
2. Infirmary	16		. 1					1.374					564						3		2						1,968
3. North Oakland	8	470	767					11		1			143	17	6	1	1		5	1	1						1,431
4. Birmingham		658	716					14		1		L			4	3			23		2		L				1,425
5. Pontiac	2	37	59				1	1					6	1	2	2			. 3		1						113
6. South Oakland	20	168	257				7	19				<u> </u>	13	3	14	1			4		5	1					509
7. Berkley	10	73	141				9	1					14	1		2	2		5	13	1						268
8. Ferndale	4	78	98					4					3	3	5	5 5	i		4		3		<u> </u>				204
9. Hazel Park	32						3	6					5	5					4		4		l				225
10. Royal Oak City	71		2,173				12	35		2			28	3	27	7 21			10	12	2	2					3,8251
11.	7	173	219				.3	1		3			4		5	3	3			20	0						4381
12.	55		60					5		1			1	L	2	2	1		2		3						133 1
13. Subm. to State		250													9	11	9		2	333	3						133 <sup>1</sup> 879 <sup>1</sup>
TOTAL	861		4,682			3	37	1,588	16	11	51		1,672	36	80	50	р		116	41	5	4		c	RAND	TOTAL	41,926

## OAKLAND COUNTY DEPARTMENT OF HEALTH

## LABORATORY COLLECTION SCHEDULE

	MOND	AYS THRU FRIDAYS
	STATIONS	TIME DUE
1.	KEEGO HARBOR (Keego Pharmacy)	
2.	ORCHARD LAKE CLINIC (Dr. Haddock) (ON CALL ONLY	<u>(</u> ) 1:15
3.	FARMINGTON (Smith-Bradley Pharmacy)	
4.	OAK PARK (Efros Pharmacy)	. 1:45
5.	FERNDALE (Professional Arts Pharmacy)	. 1:55
6.	HAZEL PARK (Vis John Pharmacy)	
7.	ROYAL OAK (South Oakland Health Center)	
8.	ROYAL OAK (Land's Pharmacy)	. 2:30
9.		. 2:45
10.	MEDICAL ARTS PHARMACY (Woodward & Coolidge)	. 3:00
11.	BERKLEY (Baker's Pharmacy)	. <b>3:</b> 15
12.		
13.	ROCHESTER (Crissman's Pharmacy)	. 4:00
14.	PONTIAC (North Oakland Health Center)	. 4:30
<b>15</b> .	HEALTH DEPT. LABORATORY	. 4:45
	SATURD	AYS AND HOLIDAYS
		TIME DUE
1.	KEEGO HARBOR (Keego Pharmacy)	9:00 AM
2.	ORCHARD LAKE CLINIC (Dr. Haddock) (ON CALL ONLY	7) 9:15
3.	FARMINGTON (Smith-Bradley Pharmacy)	. 9:40
4.	OAK PARK (Efros Pharmacy)	. 10:00
5.	FERNDALE (Professional Arts Pharmacy)	
6.	HAZEL PARK (Vis John Pharmacy)	
7.	ROYAL OAK (South Oakland Health Center)	
8.	ROYAL OAK (Land's Pharmacy)	11:30
9.	CLAWSON (Sid's Pharmacy)	11:45
10.	MEDICAL ARTS PHARMACY (Woodward & Coolidge)	
11.	BERKLEY (Baker's Pharmacy)	12:05 PM
12.	BIRMINGHAM (Police Station)	12:30
13.	ROCHESTER (Crissman's Pharmacy)	
14.	PONTIAC (North Oakland Health Center)	Closed
15.	HEALTH DEPT. LABORATORY	1:30

### MEDICAL EXAMINER'S DIVISION

On January 1, 1947, the functions of an elected Coroner were delegated to the Health Department. The Health Director became the Medical Examiner with the power to appoint Deputy Medical Examiners. Qualified physicians, registered to practice medicine in Oakland County are chosen on a regional basis, so as to expedite the functions of this Division.

Close cooperation between the medical groups, law enforcement agencies, the Prosecuting Attorney's Office and the Morticians is responsible for the efficient working of the Division.

## OAKLAND COUNTY DEPUTY MEDICAL EXAMINERS

(John D. Monroe, M. D., Medical Examiner)

R.W. Albrecht, M.D.	Keego Harbor	F.A. Lamoreaux, M.D.	South Lyon
B.D. Bauer, M.D.	Hazel Park	S.M. Lewis, M.D.	Ferndale
E.W. Bauer, M.D.	Hazel Park	T.W. Ling, M.D.	Farmington
W.G. Beattie, M.D.	Ferndale	C.E. Lockwood, M.D.	Holly
R.H. Berg, M.D.	Oxford	J.A. Maloney, M.D.	Southfield
R. Buehrig, M.D.	Clarkston	H. Mark, M.D.	Oak Park
R.W. Bullard, M.D.	Clarkston	T.S. McInerney, M.D.	Royal Oak
W.L. Christensen, M.D.	Royal Oak	H.E. Meisner, M.D.	<b>Huntington Woods</b>
L.F. Cobb, M.D.	Pontiac	J.F. Naz, M.D.	Clarkston
E.F. Collins, M.D.	Pontiac	C.A. Neafie, M.D.	Pontiac
M.J. Delaney, M.D.	Farmington	C.J. Pelletier, M.D.	Ferndale
G.L. Dunlap, M.D.	Keego Harbor	P.W. Ports, M.D.	Farmington
E.E. Elder, Jr., M.D.	Waterford	I.C. Prevette, M.D.	Pontiac
E.W. Foust, M.D.	Royal Oak	M.G. Prosser, M.D.	Waterford
J.J. Gadbaw, M.D.	Farmington	H.L. Riggs, M.D.	Pontiac
E.J. Geist, M.D.	Rochester	L.G. Rowley, M.D.	Drayton Plains
W.C. Gibson, M.D.	Milford	J.J. Ruva, M.D.	Drayton Plains
P.L. Gradolph, M.D.	Ferndale	K.W. Saunders, M.D.	Holly
W.A. Grant, M.D.	Milford	D.S. Smith, M.D.	Pontiac
J.D. Green, M.D.	Birmingham	E.W. Spohn, M.D.	Royal Oak
D.A. Haddock, M.D.	Orchard Lake	H.F. Stahl, M.D.	Oxford
C.R. Henry, M.D.	Ferndale	W.W.Weisberg, M.D.	Oak Park
R.C. Jacobi, M.D.	Oxford	H.B. Yoh, M.D.	Clarkston
L.L. Kazdan, M.D.	Oak Park	A.R. Young, M.D.	Pontiac

## SUMMARY OF MEDICAL EXAMINER'S CASES - 1955 - 1956

## OCCURRING IN OAKLAND COUNTY

Analdana			•
Accidents: Automobile		104	0.1
		104	91
Drowning		19	24
Fall		22	19
Conflagration		4	5
Suffocation		15	4
Absorption of gas Other accidents		2	1
Other accidents	m . t . 1	17	37
Suicide:	Total	183	181
Firearms		90	1.0
		22	16
Hanging		6	4
Poisoning	•	17	15
Other	m-4-1	5	5
Hamiaida	Total	50	40
Homicide: Firearms		0	
··		3	6
Other	matal	5	8
Other deaths without medical attention	Total	8	14
within 36 hours:			
Diseases of the heart and Circula	tory System	m 565	615
Diseases of the Nervous System (	Inc. Cere-	-	
bral hemorrhage)		123	117
Cancer		65	58
Diseases of the Respiratory Syste	m	81	90
Diseases peculiar to first year of	life	4	5
All other causes		67	44
	Total	905	929
Total number of calls made by Medical	Examiner	1,146	1,164
Number of Autopsies		49	63
Number Inquests		2	. 1
MEDICAL EXAMINER'S RECEI	PTS AND	EXPENDITUE	tes
1. Deputy Medical Examiner's fees for	e calle mad	lo <b>\$</b> 7 057 46	\$ 9,814.62
2. Medical Services	cars mac	5,867.00	5,375.00
3. Emergency room and morgue charge	05	35.00	288.50
4. Office Supplies	CB	11.00	10.50
I. CIIIO Supplies	Total	\$12,970.46	\$15,488.62
5. Receipts from Medical Examiner's			
Certificates		<b>\$ 35.00</b>	\$ 26.00

### OAKLAND COUNTY OFFICIALS - 1955-56

## OAKLAND COUNTY BOARD OF AUDITORS

Robert Y. Moore, Chairman John C. Austin, Vice-Chairman Robert E. Lilly, Secretary

### OAKLAND COUNTY CORPORATION COUNSEL

Harry J. Merritt

### OAKLAND COUNTY BOARD OF HEALTH

Ethan B. Cudney, M.D., Chairman N. J. Quickstad, Secretary Herbert Gardner Hugh Dean Ernest W. Bauer, M.D.

### OAKLAND COUNTY HEALTH COMMITTEE

#### 1955

Elmer W. Haack, Chairman Genevieve C. Schock Cyril E. Miller Harriet Phillips Louis F. Oldenburg Eugene Swem Winson S. Moberly

### 1956

Cyril E. Miller, Chairman John G. Campbell Winson S. Moberly Louis F. Oldenburg Harriet Phillips Genevieve C. Schock Eugene Swem Clayton F. Detmers

## OAKLAND COUNTY HEALTH DEPARTMENT PERSONNEL 1955-56

### PHYSICIANS:

John D. Monroe, M.D. Frank J. Condon, M.D. Charles A. Neafie, M.D. John S. Lambie, M.D. C. P. Mehas, M.D.

Director
Deputy Director
Deputy Director
Coordinator
Tuberculosis Consultant

### CLINICS:

Maryann Ingersoll, R.N. Evelyn Joyner, R.N. Kathleen Johns, R.N. Clinic Supervisor Clinic Nurse Clinic Nurse

### NURSING DIVISION:

Evelyn Kidneigh, R.N. Director of Nurses Martha E. Johnson, R.N. Asst. Director of Nurses Marjorie Gaston, R.N. Educational Supervisor Elaine Bevan, R.N. **Nursing Supervisor** Loraine Black, R.N. (Educational Leave 9/24/56) **Nursing Supervisor** Rose Boyd, R.N. **Nursing Supervisor** Anna Borgman, R.N. (Resigned 5/20/55) Nursing Supervisor Janet Campbell, R.N. (Resigned 3/11/55) Nursing Supervisor Helen Fergus, R.N. **Nursing Supervisor** Lorna Hawley, R.N. Nursing Supervisor Cynthia Boyea, R.N. Senior PHN Mable Boyle, R.N. (Employed 9/10/56) Senior PHN Hulda Edman, R.N. (Employed 1/9/56) Senior PHN Paz Asuncion, R.N. (Employed 6/18/56) PHN II Margaret Brokhoff, R.N. (Employed 2/2/55) PHN II Helen Clark, R.N. PHN II Myrtle Cummings, R.N. (Resigned 9/19/56) PHN II Helen Dwyer, R.N. (Employed 10/17/55) PHN II Marjorie Garrow, R.N. (Employed 9/15/55) PHN II Joyce Goodrich, R.N. (Employed 8/27/56) PHN II Mildred Halvorsen, R.N. PHN II Doris Hannah, R.N. (Employed 9/19/55) PHN II Helen Hawley, R.N. (Resigned 8/26/55) PHN II Jane Jaffray, R.N. (Resigned 2/5/55) PHN II Margaret Kilius, R.N. (Resigned 8/17/56) PHN II

## Nursing Division (continued)

Ellen Lippert, R.N.		PHN II
Ann Lund, R.N.	(Employed 8/29/55)	PHN II
Ann McClain, R.N.	(Employed 2/20/56)	PHN II
Laurene Richter, R.N.	(Employed $10/24/55$ )	РНИ П
Doris Tianen, R.N.	(Resigned 8/23/55)	PHN II
Dorothy Zutant, R.N.	(Resigned $4/1/56$ )	PHN II
Ruth Barkey, R.N.	(Employed 10/29/56)	PHN I
Gladys Bowie, R.N.	(Employed $10/1/56$ )	PHN I
Kathleen Byrne, R.N.	(Employed 11/26/56)	PHN I
Shirley Coe, R.N.		PHN I
Joanne Desjarlias, R.N.	(Resigned $7/31/56$ )	PHN I
Helen Folkers, R.N.	(Resigned 9/8/56)	PHN I
Elizabeth Giachino, R.N.	(Employed 10/29/56)	PHN I
Barbara Griffith, R.N.	(Employed 8/28/56)	PHN I
Marcella Kelchner, R.N.	(Employed 8/28/56)	PHN I
Lorraine Lundin, R.N.	(Employed 12/19/55 -	
	Resigned 12/26/56)	PHN I
Gabrielle McDermott, R.N.	(Employed 11/9/55 -	
	Resigned 7/13/56)	PHN I
Marie Middleton, R.N.	(Employed $9/6/55$ )	PHN I
Frances Nonneman, R.N.	(Employed $8/16/55$ -	
	Resigned 8/17/56)	PHN I
Grace Purdy, R.N.		PHN I
Rose Ronconie, R.N.	(Employed $10/9/56$ )	PHN I
Jeanette Skues, R.N.	(Resigned $1/8/55$ )	PHN I
Helen Smith, R.N.		PHN I
Joan Tabacchi, R.N.		PHN I
Evelyn Thomas, R.N.	(Employed $1/9/56$ )	PHN I
Evelyn Vis, R.N.	(Educational Leave 9/10/56)	PHN I
Harriet White, R.N.		PHN I

## DENTAL DIVISION:

Richard M. Christl, D.D.S.		Senior Dentist
C. D. Christie, D.D.S.	(Employed 9/17/56)	Dentist
W. George Duncan, D.D.S.	(Employed 9/17/56)	Dentist
Carl L. Leftwich, D.D.S.		Dentist
Gertrude Gunz, D.D.S.		Dentist
D. W. Smith, D.D.S.	(Resigned $11/26/55$ )	Dentist
Colleen O'Halloran		Dental Assistant
Bernice Van Dorne	•	Dental Assistant
Cynthia Verrier	(Employed $10/1/56$ )	Dental Assistant
Helen Kulidjian, R.D.H.		Dental Hygienist

### TUBERCULOSIS CONTROL DIVISION

Ronald J. Clair (Employed 4/2/56) Coordinator-Investigator

Orval Russell X-Ray Technician

Virginia Colombo (Employed 4/19/56-

Resigned 9/21/56) Clerk-Technician Gena B. Doll (Resigned 6/18/56) Clerk-Technician

Pauline Glans (Employed 9/14/56) Clerk-Technician Dorothy Martin Secretary

Emma LeMonde Typist II Doris Mohr (Resigned 8/20/55) Typist II (Employed 9/19/55) Margaret Duncan Typist II

### SANITATION DIVISION:

Russell Coltson Director

Robert Coleman **Assistant Director** 

Oscar Boyea Sanitarian Owen Birchman (Employed 8/13/56) Sanitarian Gilbert W. Caswell (Resigned 7/21/56) Sanitarian Henry Costantino Sanitarian Charles Fuller Sanitarian Melvin Goldman Sanitarian

Edward O'Rourke Sanitarian James Scott Sanitarian

Theodore Barr, D.V.M. Meat & Milk Supervisor Max Gordon, D.V.M. Meat & Milk Inspector Lyle Moffitt, D.V.M. (Educational Leave 9/24/56) Meat & Milk Inspector

Hugh Wilson, D.V.M. Meat & Milk Inspector

### LABORATORY DIVISION:

Max Jarvis (Resigned 11/5/55) Senior Medical Technologist Paul Thivierge Senior Medical Technologist Mary E. Joy (Employed 4/2/56) Senior Medical Technologist Evelyn Sawyer Asst. Laboratory Technician **Margaret Threet** 

Asst. Laboratory Technician Flora Ardelan Laboratory Helper

Thomas Sawyer Deliveryman

## ADMINISTRATIVE DIVISION:

Mary Rood Administrative Assistant

Mary Ardelan (Resigned 3/10/56) Statistics Clerk

Barbara Lockard Clerk III Phyllis Hoadley Clerk III

## Administrative Division (continued)

Carolyn Anderson	Priscilla Taylor	(Resigned 8/18/56)	Clerk III
Yvonne Anger         Steno II           Gladys Ardelan         (Resigned 9/6/55)         Steno II           Anita Bommarito         Steno II           Deloris Christian         (Employed 5/12/56)         Steno II           Lola Lesnew         (Resigned 8/26/55)         Steno II           Elizabeth Ayris         (Employed 2/6/56)         Steno I           Janet Dillon         (Employed 1/30/56-         Resigned 9/7/56)         Steno I           Betty Dunaway         (Resigned 5/4/55)         Steno I           Louise Grinnell         (Employed 6/11/56)         Steno I           Delores Johnson         (Employed 1/3/55-         Steno I           Resigned 5/26/56)         Steno I           Nancy McDaniel         (Employed 9/7/55-         Steno I           Resigned 1/28/56)         Steno I           Betty Newbound         (Resigned 2/25/55)         Steno I           Nancy Ruselvan         (Employed 9/22/55)         Steno I           Marlene Scott         (Employed 6/33/55-         Resigned 6/23/56         Steno I           Marjorie Stover         (Employed 10/29/56)         Steno I           Patricia Winterstein         (Employed 10/29/56)         Steno I           Sheila Burrows         (Employed 9/11/56)         Ty	<u> </u>	(Hesighed 0/10/00)	
Gladys Ardelan	•		
Anita Bommarito  Deloris Christian  (Employed 5/12/56)  Steno II  Lola Lesnew  (Resigned 8/26/55)  Steno II  Elizabeth Ayris  (Employed 2/6/56)  Janet Dillon  (Employed 1/30/56-  Resigned 9/7/56)  Steno I  Betty Dunaway  (Resigned 5/4/55)  Steno I  Louise Grinnell  (Employed 6/11/56)  Delores Johnson  (Employed 1/3/55-  Resigned 5/26/56)  Nancy McDaniel  (Employed 9/7/55-  Resigned 1/28/56)  Steno I  Steno I  Steno I  Nancy Ruselvan  (Resigned 2/25/55)  Steno I  Marlene Scott  (Employed 9/22/55)  Marjorie Stover  (Employed 4/2/56)  Marjorie Stover  (Employed 4/2/56)  Steno I  Patricia Winterstein  (Employed 10/29/56)  Steno I  Steno I	•	(Resigned 9/6/55)	
Deloris Christian   (Employed 5/12/56)   Steno II	<u>-</u>	(Recargined 3/ 0/ 00)	
Lola Lesnew (Resigned 8/26/55)   Steno II		(Employed 5/12/56)	
Elizabeth Ayris (Employed 2/6/56) Steno I  Janet Dillon (Employed 1/30/56 -  Resigned 9/7/56) Steno I  Betty Dunaway (Resigned 5/4/55) Steno I  Louise Grinnell (Employed 6/11/56) Steno I  Delores Johnson (Employed 1/3/55 -  Resigned 5/26/56) Steno I  Nancy McDaniel (Employed 9/7/55 -  Resigned 1/28/56) Steno I  Betty Newbound (Resigned 2/25/55) Steno I  Nancy Ruselvan (Employed 9/22/55) Steno I  Marlene Scott (Employed 6/23/55 -  Resigned 6/23/56) Steno I  Marjorie Stover (Employed 4/2/56) Steno I  Patricia Winterstein (Employed 10/29/56) Steno I  Sheila Burrows (Employed 4/18/56 -  Resigned 9/29/56) Typist I  Elsie Beltz (Employed 9/11/56) Typist I  Ellen Comiskey (Employed 9/11/56) Typist I  Ellen Comiskey (Employed 9/11/56) Typist I  Shirley DeConinck (Employed 9/11/56) Typist I  Ruby Jessee (Employed 6/23/55 -  Resigned 8/25/56) Typist I  Clara Bodenbach (Employed 7/25/56) PBX-Receptionist			
Janet Dillon		, ,	
Resigned 9/7/56  Steno I		· · · · · · · · · · · · · · · · · · ·	DUCIO 1
Betty Dunaway         (Resigned 5/4/55)         Steno I           Louise Grinnell         (Employed 6/11/56)         Steno I           Delores Johnson         (Employed 1/3/55, -         -           Resigned 5/26/56)         Steno I           Nancy McDaniel         (Employed 9/7/55 -         -           Resigned 1/28/56)         Steno I           Betty Newbound         (Resigned 2/25/55)         Steno I           Nancy Ruselvan         (Employed 9/22/55)         Steno I           Marlene Scott         (Employed 6/23/55 -         Steno I           Marjorie Stover         (Employed 4/2/56)         Steno I           Marjorie Stover         (Employed 10/29/56)         Steno I           Patricia Winterstein         (Employed 10/29/56)         Steno I           Sheila Burrows         (Employed 4/18/56 -         Typist I           Elsie Beltz         (Employed 9/11/56)         Typist I           Ellen Comiskey         (Employed 9/11/56)         Typist I           Shirley DeConinck         (Employed 6/23/55 -         Typist I           Ruby Jessee         (Employed 6/23/56)         Typist I           Clara Bodenbach         (Employed 7/25/56)         PBX-Receptionist		* -	Steno I
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Nancy McDaniel       (Employed 9/7/55 -       Resigned 1/28/56)       Steno I         Betty Newbound       (Resigned 2/25/55)       Steno I         Nancy Ruselvan       (Employed 9/22/55)       Steno I         Marlene Scott       (Employed 6/23/55 -       Steno I         Marjorie Stover       (Employed 4/2/56)       Steno I         Marjorie Stover       (Employed 4/2/56)       Steno I         Patricia Winterstein       (Employed 10/29/56)       Steno I         Sheila Burrows       (Employed 4/18/56 -       Typist I         Elsie Beltz       (Employed 9/11/56)       Typist I         Ellen Comiskey       (Employed 9/11/56)       Typist I         Shirley DeConinck       (Employed 6/23/55 -       Typist I         Ruby Jessee       (Employed 6/23/56)       Typist I         Clara Bodenbach       (Employed 7/25/56)       PBX-Receptionist		• •	Steno I
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Resigned 9/29/56)  Elsie Beltz  (Employed 9/11/56)  Typist I  Ellen Comiskey  (Employed 9/17/56)  Typist I  Shirley DeConinck  (Employed 9/11/56)  Typist I  Ruby Jessee  (Employed 6/23/55 -  Resigned 8/25/56)  Typist I  Clara Bodenbach  (Employed 7/25/56)  PBX-Receptionist	Sheila Burrows		
Elsie Beltz (Employed 9/11/56) Typist I Ellen Comiskey (Employed 9/17/56) Typist I Shirley DeConinck (Employed 9/11/56) Typist I Ruby Jessee (Employed 6/23/55 - Resigned 8/25/56) Typist I Clara Bodenbach (Employed 7/25/56) PBX-Receptionist		· - ·	Typist I
Ellen Comiskey (Employed 9/17/56) Typist I Shirley DeConinck (Employed 9/11/56) Typist I Ruby Jessee (Employed 6/23/55 - Resigned 8/25/56) Typist I Clara Bodenbach (Employed 7/25/56) PBX-Receptionist	Elsie Beltz	•	
Shirley DeConinck (Employed 9/11/56) Typist I Ruby Jessee (Employed 6/23/55 - Resigned 8/25/56) Typist I Clara Bodenbach (Employed 7/25/56) PBX-Receptionist	Ellen Comiskey	• - •	
Ruby Jessee (Employed 6/23/55 - Resigned 8/25/56) Typist I Clara Bodenbach (Employed 7/25/56) PBX-Receptionist	Shirley DeConinck		
Clara Bodenbach (Employed 7/25/56) PBX-Receptionist	Ruby Jessee	(Employed 6/23/55 -	
Clara Bodenbach (Employed 7/25/56) PBX-Receptionist	-		Typist I
	Clara Bodenbach	• • • •	<u> </u>
	Ernestine Kline	(Employed 3/19/56)	PBX-Receptionist

## **OTHERS:**

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Harry Allaway	(Employed 4/18/55)	Custodial Worker
Walter Furneaux	(Resigned 4/8/55)	Custodial Worker
William Garling	(Employed $7/30/56$ )	<b>Custodial Worker</b>
Theodore R. Hardiman	(Employed $7/30/56$ )	<b>Custodial Worker</b>
Reuben Travis	(Employed 3/5/56 -	
	Resigned 9/10/56)	Custodial Worker



## 1955-56 ANNUAL REPORT

## OAKLAND COUNTY DEPARTMENT OF HEALTH

· · · · · · · · · · · · · · · · · · ·	Table of Contents	Page No
Foreword	• • • • • • • • • • • • • • • • • • • •	2
·	· · · · · · · · · · · · · · · · · · ·	3
School Enrollments	• • • • • • • • • • • • • • • • • • • •	4
Public Health Nursing Division		5
		9
Hearing Conservation Report .		10
Vision Conservation Report		11
	lates	12
		14
Deaths by Causes	• • • • • • • • • • • • • • • • • • • •	15
Communicable Diseases:		
		19
	activity Report	22
	Activity Report	23
Communicable Disea	ses by Areas	25
Rabies Control Activity Report		31
Environmental Sanitation Division	on	32
Dental Division with Activity	Report	34
Laboratory Activity Report & Co	ollection Schedule	36
Medical Examiner's Division wi	th Activity Report	39
Personnel:		
	ials	41
Health Department.	• • • • • • • • • • • • • • • • • • • •	42