

Encephalitis case report

Suspect no. _____
Confirmed no. _____

200

Name Yoko Nagata
Address 70 Hayashi-cho
Ku Bunkyo

Age and sex 8 Female
Aug 9

Date of onset _____

Date reported health center Aug 12

Central Aug 12

Date hosp. and where source Aug 12 Komagome

Encephalitis S-200=C-193

Name Yoko Nagata

Clinical Examination

~~clear~~

turbid

Blood

~~Xanthochromia~~

Leukocytes

~~Pressure~~

Pleocytosis

~~Nonne-Apelt~~

Pandy

~~Sugar~~

Protein

~~Chloride~~

Tryptophan

Encephalitis case report

Suspect no. 200
Confirmed no.

Name Yoko Nagata
Address 70 Hayashi-cho
Ku Bunkyo

Age and sex 8 Female
Date of onset Aug 9

Date reported health center Aug 12

Central Aug 12

Date hospi. and where source Aug 12 Komagome

Remarks

Confirmed date _____
Returned home date _____
Died date _____
Negative date _____
Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 199
 Confirmed no. _____

Name Ken Yamamoto
 Address 14 Kamisuna 2
Ma Setagaya
 Age and sex 12 Male
 Date of onset Aug 10 ✓
 Date reported health center Aug 12
 Central Aug 12
 Date hospi. and where Aug 12
 source

Remarks

Confirmed date _____
 Returned home date _____
 Died date _____
 Negative date _____
 Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 198
Confirmed no.

Name Toshiaki Yamamoto

Address 4 Uchikoshi

ku. Nakano

Age and sex 5 male

Date of onset Aug 8

Date reported health center Aug 12

Central Aug 12

Date hosp. and where source Aug 12 Toyotama

Remarks

Confirmed date _____

Returned home date _____

Died date _____

Negative date _____

Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 1917
Confirmed no.

Name - Shingo Ikeda

Address 439 Koenji 2

City Suginami

Age and sex 14 male

Date of onset Aug 11 ✓

Date reported health center Aug 12

Central Aug 12

Date hospi. and where source Aug 12 Toyotama

Remarks

Confirmed date	_____
Returned home date	_____
Died date	_____
Negative date	_____
Diagnosis	_____

Complement fixation test _____

Encephalitis case report

Suspect no. 196
Confirmed no. _____

Name Naonabu Shinno

Address 181 Mitaka Iguchi
Hu Kitatama

Age and sex 55 male

Date of onset Aug 10 ✓

Date reported health center Aug 12

Central Aug 12

Date hosp. and where source Aug 12 Showa

Remarks

Confirmed date _____
Returned home date _____
Died date _____
Negative date _____
Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 195
Confirmed no.

Name Shoko Fujiwara

Address 101 Azuma-cho
Hu Meguro

Age and sex 2 Female

Date of onset Aug 8

Date reported health center Aug 12

Central Aug 12

Date hosp. and where source Aug 12 Toyotama

Remarks

Confirmed date _____
Returned home date _____
Died date _____
Negative date _____
Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. _____
Confirmed no. _____

194

Name Einosuke Yamada

Address 235 Mukogahara-cho
ku Meguro

Age and sex 12 male

Date of onset Aug 9

Date reported health center Aug 12

Central Aug 12

Date hosp. and where Aug 12 Ebara
Source

Encephalitis

S-195=C-120

Name Akiho Fujishima

Clinical Examination

<u>Clear</u>	turbid	Blood
Xanthochromia	5 cc	Leukocyte
Pressure 170-90	Pleocytosis 43	
Nonne-Apelto +1	Pandy +1	
Sugar	Protein	
Chloride	Tryptophan	

Encephalitis case report

Suspect no. _____
Confirmed no. _____

194

Name Einosuke Yamada

Address 235 mukogahara-cho
ku Meguro

Age and sex 12 male

Date of onset Aug 9

Date reported health center Aug 12

Central Aug 12

Date hospi. and where Aug 12 Ebara
Source

Remarks

Confirmed date _____

Returned home date _____

Died date _____

Negative date _____

Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 193
Confirmed no. _____

Name Haruko Komiyama

Address 578 Kagahara
ku Oda

Age and sex 16 Female

Date of onset Aug 9 ✓

Date reported health center Aug 12

Central Aug 12

Date hosp. and where source Aug 12 Ebura

Remarks

Confirmed date _____
Returned home date _____
Died date _____
Negative date _____
Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 192
 Confirmed no. _____

Name Hironabu Machida

Address 3 Sumiyoshi-cho
Ku Nakano

Age and sex 12 male

Date of onset Aug 9

Date reported health center Aug 12

Central Aug 12

Date hosp. and where source Aug 12 Toyotama

Remarks

Confirmed date _____
 Returned home date _____
 Died date _____
 Negative date _____
 Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 191
 Confirmed no. _____

Name Matsue Sato

Address 256 Shimomura

Ku adachi

Age and sex 2 Female

Date of onset Aug 9 ✓

Date reported health center Aug 11

Central Aug 11

Date hosp. and where source Aug 11 Komagome

Remarks

Confirmed date _____

Returned home date _____

Died date _____

Negative date _____

Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 190
Confirmed no. _____

Name Misako Kataoka

Address 1,225 Mikakashima 2

ku Arakawa

Age and sex 3 Female

Date of onset Aug 9 ✓

Date reported health center Aug 11

Central Aug 11

Date hospi. and where source Aug 11 Komagome

Remarks

Confirmed date _____
Returned home date _____
Died date _____
Negative date _____
Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 189
Confirmed no.

Name Mitsuo Fujii

Address 4 Sashigaya
ku Bunkyo

Age and sex 4 male

Date of onset Aug 6 ✓

Date reported health center Aug 11

Central Aug 11

Date hospi. and where source Aug 11 Komagome

Remarks

Confirmed date _____
Returned home date _____
Died date _____
Negative date _____
Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 188
 Confirmed no. _____

Name Miyoko Tomita

Address 19 Kishi-cho 1

Ku Kita

Age and sex 5 Female

Date of onset Aug 8 'V

Date reported health center Aug 11

Central Aug 11

Date, hour and where Aug 11 Komagome

Name Encephalitis S-188-C-109
Miyoko Tomita

Clinical Examinations	
Cerebrospinal Fluid	Blood
<u>Clear</u>	Leukocytes
Turbid	
Xanthochromia	
Pressure <u>200</u>	Pleocytosis <u>27</u>
Nonne-Apelte + Pandy (+)	
Sugar	Protein
Chloride	Tryptophan

Encephalitis case report

Suspect no. 188
Confirmed no. _____

Name Miyoko Tomita

Address 19 Kishi-cho 1

Ku Kita

Age and sex 5 Female

Date of onset Aug 8 '51

Date reported health center Aug 11

Central Aug 11

Date hosp. and where source Aug 11 Komagome

Remarks

Confirmed date _____
Returned home date _____
Died date _____
Negative date _____
Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 187
 Confirmed no. _____

Name Toshie Saito

Address: 1182 Shimo-cho
Ku Kita

Age and sex ~~Aug 10~~ 38 f

Date of onset Aug 10 ✓

Date reported health center Aug 11

Central Aug 11

Date hosp. and where source Aug 11 Komagome

Remarks

Confirmed date _____
 Returned home date _____
 Died date _____
 Negative date _____
 Diagnosis _____

Complement fixation test _____

Encephalitis case report

Suspect no. 186
 Confirmed no. _____

Name Akio Sano

Address 13 Asakusabashi 3
Hu Daito

Age and sex 2 male

Date of onset Aug 9

Date reported health center Aug 11

Central Aug 11

Date hosp. and where source Aug 11 Komagome

Remarks

Confirmed date _____

Returned home date _____

Died date _____

Negative date _____

Diagnosis _____

Complement fixation test _____