DECLASSIFIED E.O. 12065 SECTION 3-402/NNBS NO:

INTERNE SURVEY

a. Name of Institution.
Saishunso National Tuberculosis Sanatorium

b. Location of institution (city, town and gun)
Suya, Nishigoshi Mura, Kikuchi Gun, Kumamoto Ken

c. Type. (It is believed that the following types will cover all institutions: ~~National Hospitals~~; National Sanatoria; ~~Prefectural~~; ~~Educational Ministry~~; ~~National Health Insurance~~; ~~Red Cross~~; ~~Municipal~~; and ~~Private~~.)

d. Total admissions 1948.
891

e. Total available beds.
649

f. Total bed occupancy (average).
610

g. Total number of out-patients daily (average).
28

h. Total number of full-time doctors.
14

i. Total number of part time doctors.
0

j. Total number of internes.
0

k. Number internes authorized by Welfare Ministry.
0

l. Total number autopsy performed during 1948.
1

Remarks:

DECLASSIFIED E.O. 12065 SECTION 3-402/NARS NO: [illegible]

INTERNE SURVEY

a. Name of Institution.
Kikuchi Keifuen National Leprosarium

b. Location of institution (city, town and gun)
Goshi Mura, Kikuchi Gun, Kumamoto Ken

c. Type. (It is believed that the following types will cover all institutions: ~~National Hospitals~~; National Sanatoria; ~~Prefectural~~; ~~Educational Ministry~~; ~~National Health Insurance~~; ~~Red Cross~~; ~~Municipal~~; and ~~Private~~.)

d. Total admissions 1948.
133

e. Total available beds.
1000

f. Total bed occupancy (average).
969

g. Total number of out-patients daily (average).
0

h. Total number of full-time doctors.
8

i. Total number of part time doctors.
0

j. Total number of internes.
0

k. Number internes authorized by Welfare Ministry.
0

l. Total number autopsy performed during 1948.
20

Remarks:

DECLASSIFIED E.O. 12065 SECTION 3-402/NNBG NO. [redacted]

INTERNE SURVEY

a. Name of Institution.
Tobase National Sanatorium

b. Location of institution (city, town and gun)
Tobase Mura, Uto Gun, Kumamoto Ken

c. Type. (It is believed that the following types will cover all institutions: ~~National Hospitals~~; National Sanatoria; ~~Prefectural~~; ~~Educational Ministry; National Health Insurance; Red Cross; Municipal~~ and ~~Private~~.)

d. Total admissions 1948.
59

e. Total available beds.
70

f. Total bed occupancy (average).
54

g. Total number of out-patients daily (average).
7

h. Total number of full-time doctors.
2

i. Total number of part time doctors.
0

j. Total number of internes.
0

k. Number internes authorized by Welfare Ministry.
0

l. Total number autopsy performed during 1948.
0

Remarks:

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 1

INTERNE SURVEY

a. Name of Institution.

Hitoyoshi General Hospital

b. Location of institution (city, town and gun)

#35, Oigami Machi, Hitoyoshi City, Kumamoto Ken

c. Type. (It is believed that the following types will cover all institutions: ~~National hospitals; National Sanatoria; Prefectural; Educational Ministry; National Health Insurance; Red Cross; Municipal; and Private.~~) Prefectural Social Insurance.

d. Total admissions 1948.
352

e. Total available beds.
61

f. Total bed occupancy (average).
30

g. Total number of out-patients daily (average).
178

h. Total number of full-time doctors.
6

i. Total number of part time doctors.
0

j. Total number of internes.
1

k. Number internes authorized by Welfare Ministry.
5

l. Total number autopsy performed during 1948.
0

Remarks:
Laboratory needs improvements such as general sanitation, equipment, etc.

DECLASSIFIED E.O. 12065 SECTION 3-402/NMDG NO. [illegible]

FILE

700

HEADQUARTERS
NAGASAKI MILITARY GOVERNMENT TEAM
Nagasaki, Kyushu, Japan

JAE/tn

APO 24-5
19 May 1949

SUBJECT: Intern Survey

TO : Commanding Officer, Kyushu Mil Govt Region, APO 24-5

1. In compliance with Ltr Hq KSMGR, dated 30 April 1949, subj: "Intern Survey", a survey of interns in hospitals with 50 beds and over was made in Nagasaki Prefecture.

2. Information resulting from survey is indicated in inclosure 1.

3. Team Public Health Section finds a lesser number of interns in the hospitals than authorized. There are not enough graduates from medical schools. Interns are choosing hospitals with complete services and facilities to serve their internship. Hospitals that are conveniently located in the larger cities draw more interns for reasons of transportation and living conditions.

4. Prefectural health department does not have any recommendations.

FOR THT COMMANDING OFFICER:

Orville L. Staggs

ORVILLE L STAGGS
Captain INF
Actg Adjutant

1 Incl:
Intern Survey

FILE

00675

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 77-1

	ADMISSIONS 1948	AVAILABLE BEDS (AVG)	BED OCCU-PANCY (AVG)	DAILY OUT-PATIENTS (AVG)	FULL TIME DOCTORS	PART TIME DOCTORS	INTERNES	INTERNES AUTHORIZED	AUTOPSIES 1948
Blair General Hosp, Nagasaki City, Municipal	876	98	75	372	12	1	3	5	1
Mitsubishi Hosp Nagasaki City, Private	959	100	82	990	16	0	2	8	0
Nagasaki Med College Hosp, No. 1, Nagasaki City, Education Ministry	1,223	131	128	217	71	0	41	23	19
Nagasaki Med College Hosp, No. 2, Isahaya City	1,057	143	114	147	19	27	4	24	20
Sasebo Municipal Hosp, Sasebo City, Municipal	2,303	226	170	613	20	2	5	28	1
Sasebo Kyosai Hosp, Sasebo City, Private	5,757	300	265	703	29	0	12	42	1
Omura National Hosp, Omura City Welfare Ministry	1,895	750	526	401	35	0	28	47	18
Kawatana Nat'l Hosp, Higashi-sonogi-gun, Welfare Ministry	892	254	128	173	14	0	2	6	7
Mitsubishi Takashima Coal Mine Hosp, Nishisonogi-gun Private	445	50	50	650	12	0	3	10	0

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO: 77-0041

809

HEADQUARTERS
SAGA MILITARY GOVERNMENT TEAM
Saga, Kyushu, Japan

KW/km

APO 24-5
19 May 1949

700

SUBJECT: Report on Interne Survey

TO : Commanding Officer, Kyushu Military Government Region, APO 24-5
Attn: Public Health Officer

1. Reference:

a. Letter, Hq I Corps, AG 700, subj: "Medical Interne Education," dated 18 Feb 1949.

b. Letter, Kyushu Mil Govt Region, subj: "Interne Survey," dated 30 Apr 1949.

2. In compliance with above cited references, the survey of the internes of this prefecture has been completed and the enclosed report is herewith submitted.

FOR THE COMMANDING OFFICER:

LaVern F. Spurgeon

LA VERN F. SPURGEON
1st Lt., QMC
Acting Adjutant

1 Incl:
1 - Rt of Interne Survey
(2)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [illegible]

BASIC: Ltr Hq Saga Mil Govt Team, APO 24-5, subj: "Rt on Interne Survey", dtd 19 May 49.

Report on Interne Survey of Saga Prefecture

Three hospitals in this prefecture are training internes. These are Saga National Hospital, Ureshino National Hospital and Saga Prefectural Hospital.

1. Saga National Hospital.

a. Name of institution - Saga National Hospital.

b. Location of institution - Takagise-mura, Saga-gun.

c. Type - National Hospital.

d. Total admissions in 1948 - 35,126.

e. Total available beds - 130.

f. Total bed occupancy, average - 96.

g. Total number of outpatients daily, average - 251.

h. Total number of full-time doctors - 14 include one dentist.

i. Total number of part-time doctors - none.

j. Total number of internes - 10.

k. Total number of autopsies performed during 1948 - 3

l. Total number of internes authorized by Welfare Ministry - 14.

m. Total number of deaths in hospital during 1948 - 62.

2. Ureshino National Hospital.

a. Name of institution - Ureshino National Hospital.

b. Location of institution - Ureshino-machi, Fujitsu-gun.

c. Type - National Hospital.

d. Total admissions in 1948 - 163,464.

e. Total available beds - 600.

f. Total bed occupancy, average - 454.

g. Total number of outpatients daily, average - 245.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170-9-10

h. Total number of full-time doctors - 25.

i. Total number of part-time doctors - none.

j. Total number of internes - 17.

k. Total number of autopsies performed during 1948 - 6.

l. Total number of internes authorized by Welfare Ministry - 38.

m. Total number of deaths in hospital during 1948 - 177.

3. Saga Prefectural Hospital.

a. Name of institution - Saga Prefectural Hospital, Koseikan.

b. Location of institution - Mizugaye-machi, Saga-shi.

c. Type - Prefectural Hospital.

d. Total admission in 1948 - 45,828.

e. Total available beds - 206.

f. Total bed occupancy, average - 127.

g. Total number of outpatients daily, average - 86.

h. Total number of full-time doctors - 20.

i. Total number of part-time doctors - 1.

j. Total number of internes - 22.

k. Total number of autopsies performed during 1948 - 1.

l. Total number of internes authorized by Welfare Ministry - 20.

m. Total number of deaths in hospital during 1948 - 89.

4. Recommendations of this section and the Prefectural Health Department.

Investigation by this section showed that the internes are not given enough practical work under supervision. More bed-side teaching should be encouraged and internes should be given more responsibility by allowing them a free hand in the investigation and treatment of patients under strict supervision.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO. [illegible]

In the National Examinations, not such stress is laid on the practical aspect of medicine and this probably accounts for the slacking of the clinical work of the internes. This requires to be rectified. Moreover, the hospitals do not display keen interest in the education of internes due probably to the fact that they do not fully realize what the intern system really is for.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 770021

737

OITA MILITARY GOVERNMENT TEAM
APO 24 UNIT 2

OHN/tk

18 May 1949

770

SUBJECT: Interne Survey

TO: Commanding Officer, Kyushu Mil Govt Region, APO 24 Unit 5
Attn: Public Health Officer

1. In compliance with letter your headquarters, subject same as above, dated 30 April 1949, the following report is herewith submitted.

a. The number of internes authorized is too large considering the size of hospitals and the number of full-time doctors assigned.

b. The internes receive little professional training during their year of internship but use it more as a vacation after their years of medical school.

c. It is recommended that the number of internes presently authorized by the Welfare Ministry be reduced and that the Welfare Ministry authorize interne training in a larger number of hospitals.

d. Information asked for on hospitals 50 beds and over is submitted in Inclosure #1.

FOR THE COMMANDING OFFICER:

1 Incl:
As stated (dup)

Albert E Wakefield
ALBERT E. WAKEFIELD
1st Lt, INF
Acting Adjutant

Incl #1 to letter, Oita Mil Govt Team, subject: "Interne Survey," dated 18 May 1949

a	b	c	d	e	f	g	h	i	j	k	l
Name of Institution	Location	Type	Total Adm. 1948	Total Available Beds	Total Bed Occupancy (average)	Total No. of Out-patients Daily (average)	Total No. of Full-time Doctor	Total No. of Part-time Dr.	Total No. of Internes	Total No. of Internes Authorized to the Hospital by the Welfare Ministry	Total No. of Autopsies Performed in 1948
Oita National Hospital	Danoharu, Oita City	National	872	160	53	145	8	0	0	0	0
Beppu National Hospital	Tanoyu, Beppu City	National	3,408	380	223	212	20	0	1	17	8
Kamegawa National Hospital	Uchikamado, Beppu City	National	2,925	735	508	306	42	2	81	46	28
Kyushu University Hot Spring Cure and Research Institution	Tsurumi-bara, Beppu City	National (Education Ministry)	339	85	45	26	28	0	7	8	3
National Beppu Onsen Ryoyo-sho	Midorigaoka Beppu City	National	111	50	24	2.5	2	0	0	0	0
National Nihoso Sanatorium	Ozai, Kita-amabe-gun	National	147	140	12	2	2	0	0	0	0
National Beppuso Sanatorium	Hamawaki, Beppu City	National	130	100	59.9	2.5	3	0	0	0	0
National Hikari-no-sono Sanatorium	Tsurumi, Beppu City	National	609	50	47	0.61	1	2	0	0	0
Prefectural Teachers' Sanatorium	Tsurumi, Beppu City	Prefectural	44	50	27	2	1	0	0	0	0
Oita Prefectural Hospital	Oita 2050, Oita City	Prefectural	790	165	70	220	15	0	12	18	6
Kyoritsu Hospital	Ozai, Kita-amabe-gun	Town & Village	373	53	25	50	4	2	0	0	0
Oita Kyosai Hospital	Shinkawa, Oita City	Public	446	126	28	165	9	0	0	0	0
Zeze Hospital	Oita 2698 Oita City	Private	180	56	8	25	2	0	0	0	3

DECLASSIFIED E.O. 12065 SECTION 3=402/NNDG NO.

a	b	c	d	e	f	g	h	i	j	k	l
Name of Institution	Location	Type	Total Adm. 1948	Total Available Beds	Total Bed Occupancy (average)	Total No. of Out-patients Daily (average)	Total No. of Full-time Doctor	Total No. of Part-time Doctor	Total No. of Internes	Total No. of Internes Authorized to the Hospital by the Welfare Ministry	Total No. of Autopsies Performed in 1948
Oita-ken Nomin Ryoyo-sho	Tsurumi 4333, Beppu City	Private (Welfare and Farming Coordinating Assn)	360	144	78	5	2	3	0	0	0
Asami Mental Disease Hospital	Asami, Beppu City	Private	110	50	28	1.8	1	0	0	0	0
Mental Disease Yamamoto Hospital	Beppu 2388, Beppu City	Private	159	53	20	2	1	0	0	0	0
Ogata-mura Nogyo Kyodo Kumiai Hospital	Ogata-mura, Ono-gun	Farmers' Assn of Ogata Village	394	70	1	59	7	2	0	0	0

DECLASSIFIED E.O. 12065 SECTION 3=402/NNDC No.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 770819

872

FILE

HEADQUARTERS
KAGOSHIMA MILITARY GOVERNMENT TEAM
KAGOSHIMA, KYUSHU, JAPAN

JEB/en

700
700
346

APO 970
18 May 1949

SUBJECT: Intern Survey

TO: Commanding Officer
Kyushu Military Government Region
APO 24 Unit 5
ATTN: Public Health Officer

FILE

In compliance with letter your headquarters, dated 30 April 1949, subject as above, attached herewith is information requested on 13 institutions in this ken.

FOR THE COMMANDING OFFICER:

13 Incls:
As indicated

ROBERT V. DEXTER
1st Lt CAV
Executive Officer

FILE

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO. 170-1-9

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. National Sanatorium, Kirishima Hospital.

   b. Location of institution (city, town and gun). Kagoshima-Ken, Aira-gun, Kirishima-mura Matsunaga.

   c. Type. National Hospital.

   d. Total admissions 1948. 1122.

   e. Total available beds. 500

   f. Total bed occupancy (average). 380

   g. Total number of out patients daily (average). 499

   h. Total number of full-time doctors. 16

   i. Total number of part time doctors. None

   j. Total number of interns. 17

   k. Number of autopsies for 1948. 9

   l. Number of interns authorized by Welfare Ministry. 18

2. Additional information desired is:

   a. Pertinent findings of team public health section. None.

   b. Recommendations of team public health section and/or prefectural health department.

There is a necessity for more food rationed to hospitals to provide satisfactory meals for patients. It seems this is the only way to get family members out of hospitals.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO. 170-9-19

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. National Kagoshima Hospital

   b. Location of institution (city, town and gun).
   Kagoshima gun, Ishiki Mura, Shimo Ishiki #666

   c. Type. National Hospital

   d. Total admissions 1948. 901

   e. Total available beds. 200

   f. Total bed occupancy (average). 140

   g. Total number of out patients daily (average). 142

   h. Total number of full-time doctors. 18

   i. Total number of part time doctors. None

   j. Total number of interns. 19

   k. Number of autopsies for 1948. 7 Cases

   l. Number of interns authorized by Welfare Ministry. 19

2. Additional information desired is:

   a. Pertinent findings of team public health section.

   None

   b. Recommendations of team public health section and/or prefectural health department.

   No recommendations

Z, d 2'

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. Prefectural Hospital attached to the Medical College

   b. Location of institution (city, town and gun). Kagoshima City, Yamashita cho, #70

   c. Type. Prefectural Hospital

   d. Total admissions 1948. 1,401 patients

   e. Total available beds. 200

   f. Total bed occupancy (average). 150

   g. Total number of out patients daily (average). 264

   h. Total number of full-time doctors. 76

   i. Total number of part time doctors. None

   j. Total number of interns. 57

   k. Number of autopsies for 1948. 25 Cases (of which 22 were autopsies performed at the Medical School)

   l. Number of interns authorized by Welfare Ministry. 57 (About 30 is substantial)

2. Additional information desired is:

   a. Pertinent findings of team public health section.

   None

   b. Recommendations of team public health section and/or prefectural health department.

   No recommendations

Incl 3

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. Kagoshima City Hospital

   b. Location of institution (city, town and gun).
   #28 Tainokuchi Cho, Kagoshima City

   c. Type. Municipal Hospital

   d. Total admissions 1948. 514 patients

   e. Total available beds. 68

   f. Total bed occupancy (average). 45

   g. Total number of out patients daily (average). 384

   h. Total number of full-time doctors. 17 Doctors

   i. Total number of part time doctors. 1 Doctor

   j. Total number of interns. 19

   k. Number of autopsies for 1948. 10 Autopsies

   l. Number of interns authorized by Welfare Ministry. 19

2. Additional information desired is:

   a. Pertinent findings of team public health section.

   None

   b. Recommendations of team public health section and/or prefectural health department.

   No recommendations

Jack

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 770019

INTERN SURVEY

1. Intern Hospitals:

a. Name of institution. National Leprosarium, Hoshizuka Kei Ai En

b. Location of institution (city, town and gun). Kanoya City, Nishi Mata # 4,522

c. Type. National Sanatarium

d. Total admissions 1948. 993

e. Total available beds. 900

f. Total bed occupancy (average). 853.5

g. Total number of out patients daily (average). None

h. Total number of full-time doctors. 7 Doctors (of which one is a dentist)

i. Total number of part time doctors. None

j. Total number of interns. None

k. Number of autopsies for 1948. 19

l. Number of interns authorized by Welfare Ministry. None

2. Additional information desired is:

a. Pertinent findings of team public health section.

None

b. Recommendations of team public health section and/or prefectural health department.

No recommendations

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. Kagoshima Mental Hospital

   b. Location of institution (city, town and gun).
   #200 Nagayoshi cho, Kagoshima City

   c. Type.
   Private

   d. Total admissions 1948. 102

   e. Total available beds. 50

   f. Total bed occupancy (average). 40

   g. Total number of out patients daily (average). 12

   h. Total number of full-time doctors. 2

   i. Total number of part time doctors. None

   j. Total number of interns. None

   k. Number of autopsies for 1948. None

   l. Number of interns authorized by Welfare Ministry. None

2. Additional information desired is:

   a. Pertinent findings of team public health section.

   None

   b. Recommendations of team public health section and/or prefectural health department.

   No recommendations

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. **Prefectural Kagoshima Teachers' Sanatarium**

   b. Location of institution (city, town and gun).
   Hira Matsu, Shigetomi Mura, Aira-gun

   c. Type.
   Prefectural

   d. Total admissions 1948. **238**

   e. Total available beds. **150**

   f. Total bed occupancy (average). **97**

   g. Total number of out patients daily (average). **1**

   h. Total number of full-time doctors. **2**

   i. Total number of part time doctors. **None**

   j. Total number of interns. **None**

   k. Number of autopsies for 1948. **None**

   l. Number of interns authorized by Welfare Ministry. **None**

2. Additional information desired is:

   a. Pertinent findings of team public health section.

   None

   b. Recommendations of team public health section and/or prefectural health department.

   No recommendations

Jul 7'

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. Shinsei Hospital

   b. Location of institution (city, town and gun). #5500 Kami Fuku, Taniyama cho, Kagoshima Gun

   c. Type. Private

   d. Total admissions 1948. 273

   e. Total available beds. 80

   f. Total bed occupancy (average). 32

   g. Total number of out patients daily (average). 128

   h. Total number of full-time doctors. 7 (Of which one is a dentist)

   i. Total number of part time doctors. 3

   j. Total number of interns. 7

   k. Number of autopsies for 1948. None

   l. Number of interns authorized by Welfare Ministry. 7

2. Additional information desired is:

   a. Pertinent findings of team public health section.

   None

   b. Recommendations of team public health section and/or prefectural health department.

   No recommendations

Jul 8'

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. **National Akune Sanatarium**

   b. Location of institution (city, town and gun).
   Izumi gun, Akune-cho, Akasegawa No. 4,513

   c. Type.
   National Sanatorium

   d. Total admissions 1948. **143**

   e. Total available beds. **100**

   f. Total bed occupancy (average). **65.7**

   g. Total number of out patients daily (average). **162**

   h. Total number of full-time doctors. **3**

   i. Total number of part time doctors. **None**

   j. Total number of interns. **None**

   k. Number of autopsies for 1948. **None**

   l. Number of interns authorized by Welfare Ministry. **None**

2. Additional information desired is:

   a. Pertinent findings of team public health section.

   Hospital needs immediate repairs on roof.

   b. Recommendations of team public health section and/or prefectural health department.

   No recommendations

2nd 9'

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [illegible]

INTERN SURVEY

1. Intern Hospitals:

a. Name of institution. National Kagoshima Sanatarium

b. Location of institution (city, town and gun).
Ibusuki-gun, Ibusuki-cho, Juni cho, # 4,145

c. Type.
National Sanatarium

d. Total admissions 1948. 741

e. Total available beds. 500

f. Total bed occupancy (average). 489

g. Total number of out patients daily (average). 34

h. Total number of full-time doctors. 11 (of which one is a dentist)

i. Total number of part time doctors. 1

j. Total number of interns. None

k. Number of autopsies for 1948. 4

l. Number of interns authorized by Welfare Ministry. None

2. Additional information desired is:

a. Pertinent findings of team public health section.

None

b. Recommendations of team public health section and/or prefectural health department.

No recommendations

Incl 10

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 770019

INTERN SURVEY

1. Intern Hospitals:

a. Name of institution. National Chosa Sanatarium

b. Location of institution (city, town and gun).
Aira gun, Chosa Cho, Nishi Mochida

c. Type.
National Sanatarium

d. Total admissions 1948. 125 - Total admission in 1948

e. Total available beds. 100 - Available beds

f. Total bed occupancy (average). 56 - Bed occupancy

g. Total number of out patients daily (average).
No out patients daily

h. Total number of full-time doctors. 2 - Doctors on staff

i. Total number of part time doctors. None

j. Total number of interns. None

k. Number of autopsies for 1948. None

l. Number of interns authorized by Welfare Ministry. None

2. Additional information desired is:

a. Pertinent findings of team public health section.

Staff doctors are not seeing patients enough.

b. Recommendations of team public health section and/or prefectural health department.

None

Encl 11

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

a. Name of institution. Japan Red Cross Branch Sanatarium, Kinko Sanatarium

b. Location of institution (city, town and gun). Kagoshima gun, Taniyama-cho, Hirakawa # 2,545

c. Type. Red Cross

d. Total admissions 1948. 78 Total admissions

e. Total available beds. 60 Total beds

f. Total bed occupancy (average). 36.7 Total occupancy

g. Total number of out patients daily (average). 13

h. Total number of full-time doctors. 2

i. Total number of part time doctors. 1

j. Total number of interns. None

k. Number of autopsies for 1948. None

l. Number of interns authorized by Welfare Ministry. None

2. Additional information desired is:

a. Pertinent findings of team public health section.

Nurses should not do cleaning

b. Recommendations of team public health section and/or prefectural health department.

None

2nd 12'

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

INTERN SURVEY

1. Intern Hospitals:

   a. Name of institution. National Kajiki Sanatorium

   b. Location of institution (city, town and gun). Aira-gun, Kajiki-cho, Kida 1882

   c. Type National Sanatorium

   d. Total admissions 1948. 377

   e. Total available beds. 200

   f. Total bed occupancy (average). 158

   g. Total number of out patients daily (average). 30

   h. Total number of full-time doctors. 4

   i. Total number of part time doctors. None

   j. Total number of interns. None

   k. Number of autopsies for 1948. None

   l. Number of interns authorized by Welfare Ministry. 5

2. Additional information desired is:

   a. Pertinent findings of team public health section.
   None

   b. Recommendations of team public health section and/or prefectural health department.

   None

Incl 13

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [illegible]

700

KYUSHU MILITARY GOVERNMENT REGION
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

APO 24 Unit 5
17 May 1949

SUBJECT: Nursing Affairs

TO : Commanding Officer, Fukuoka Mil Govt Team, APO 24-5
Commanding Officer, Oita Mil Govt Team, APO 24-2
Commanding Officer, Nagasaki Mil Govt Team, APO 24-3
Commanding Officer, Kumamoto Mil Govt Team, APO 24-1
Commanding Officer, Kagoshima Mil Govt Team, APO 970
Commanding Officer, Miyazaki Mil Govt Team, APO 24-2
Commanding Officer, Saga Mil Govt Team, APO 24-2
Attn: Public Health Section

1. With the growth of the nursing program in Japan the need of an organized nursing section in each health department becomes apparent. Up to now not very much emphasis has been put on this section because the Japanese have not understood the function of nurses and those nurses that have been in the health department have been used to a great extent as clerks.

2. Each health department should try to develop a well organized nursing section and inclosure 1 "Prefectural Government set-up" is a guide that is being used fairly successfully in Kinki Region. The chief nurse should be a well qualified public health nurse who would guide the activities of the three members in her section.

3. Inclosure 2 and 3 are the proposed amendment to Welfare Ministry #28, 4 November 1947. These amendments have not yet been passed by the Diet and are therefore, not in effect yet. However, it is well to have this information on hand for future use and to begin planning the curriculum according to the new amendment.

4. Inclosure 4 and 4-a are copies of material presented by Miss Harder, SCAP Nursing Section, during the regional nursing conference in Yokohama. The plan was set up to accomodate

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 77-0019

Ltr, Kyushu MG Region, APO 24-5, dtd 17 May 1949, subj: "Nursing Affairs"

a 24 student class and shows how to plan for rotation in the required hospital services. It may be helpful in working in some of the nursing school.

BY ORDER OF COLONEL HILTON:

CHARLES L. BACHTEL
1st Lt SIG C
Adjutant

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [illegible]

862

FILE

HEADQUARTERS
MIYAZAKI MILITARY GOVERNMENT TEAM
APO 24, UNIT 2

BDD/kk

12 May 1949
49/PH/IT/1

700

SUBJECT: Interne Survey

TO : Commanding Officer, Kyushu Military Government Region,
APO 24, Unit 5
(Attn: Public Health Officer)

1. Reference: Letter, Hq. KSMG Subj: "Interne Survey" dated 30 April 1949.

2. In compliance with above reference letter the following information is submitted:

3. a. Miyazaki Prefectural Hospital
b. Miyazaki City
c. Prefectural
d. 1,165
e. 241
f. 120
g. 210
h. 13
i. 0
j. 20
k. Autopsies 109
l. Deaths 100
m. Internes authorized 20
n. Additional Information
(1) Rotating Internship, 12 months fairly good training. Internes do not accept enough responsibility in the emergency ward.
(2) The Number of internes should be limited to 10.

FILE

4. a. Miyakonojo National Hospital
b. Miyakonojo City
c. National
d. 936
e. 250
f. 180
g. 191

FILE

8

DECLASSIFIED E.O. 12065 SECTION 3-402/NNBB NO.

h. 18
i. 0
j. 9
k. Autopsies 1948 7
l. Deaths 1948 27
m. Internes Authorized 9
n. Additional Information
(1) First group of internes started 1 April 1949. Surgical service good. Patient turn-over is small. Active O.P.D.
(2) In-patient service can be increased. Staff and facilities are adequate for interne training.

5. a. Miyazaki National Sanitorium
b. Kawaminami Village
c. National
d. 336
e. 250
f. 180
g. 30
h. 5
i. 0
j. 0
k. 0
l. 86
m. 0
n. (1) Facilities and staff not adequate for interne training. Patient care is poor.
(2) 250 BEDS for T.B. patients immediately available if the staff can be increased.

6. a. Sadohara Hospital
b. Sadohara Town
c. Private
d. 420
e. 52
f. 48
g. 120
h. 5
i. 0
j. 0
k. 3
l. 22
m. 0
n. Not adequate for interne training

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7. a. Asahi Kasei Bemberg Hospital
   b. Nobeoka City
   c. Private (Chemical Company)
   d. 430
   e. 70
   f. 44
   g. 315
   h. 9
   i. 0
   j. 0
   k. 39
   l. 41
   m. 0
   n. (1) O.P.D. Active. In-patient care not too good.
      (2) Facilities adequate for 3 or 4 internes

FOR THE COMMANDING OFFICER:

WADE K MEDFORD
1st Lt, Inf
Adm Officer

DECLASSIFIED E.O. 12065 SECTION 3-402/NMSG NO. [redacted]

FILE

KYUSHU MILITARY GOVERNMENT REGION
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

JB/ky

APO 24 Unit 5
9 May 1949

700

SUBJECT: Nursing Records in Health Centers

TO : Commanding Officer, Fukuoka Mil Govt Team, APO 24-5
Commanding Officer, Saga Mil Govt Team, APO 24-5
Commanding Officer, Nagasaki Mil Govt Team, APO 24-5
Commanding Officer, Kumamoto Mil Govt Team, APO 24-1
Commanding Officer, Kagoshima Mil Govt Team, APO 970
Commanding Officer, Oita Mil Govt Team, APO 24-2
Commanding Officer, Miyazaki Mil Govt Team, APO 24-2
ATTENTION: Public Health Section

1. The two sets of inclosures are suggested procedures for record keeping in the Health Centers. At present only the Model Health Centers have all the records referred to here so the record keeping procedures should be set up there first.

2. The Military Government Public Health Section is requested to give one copy of the translation to the Model Health Center. The English copy should be filed in the Public Health Section for future reference.

BY ORDER OF COLONEL HILTON:

CHARLES L. BACHTEL
1st Lt SIG C
Adjutant

2 Incls:
1. Suggested list of Records to be used in the Health Center in English and Japanese
2. Copies of Japanese Records for Health Centers (To be retained in M.G. Public Health Section)

DECLASSIFIED E.O. 12065 SECTION 3 402/NARS NO.

FILE

700

KYUSHU MILITARY GOVERNMENT REGION RCW/ky
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

APO 24 Unit 5
30 April 1949

SUBJECT: Interne Survey

TO : Commanding Officer, Fukuoka Mil Govt Team, APO 24-5
Commanding Officer, Saga Mil Govt Team, APO 24-5
Commanding Officer, Nagasaki Mil Govt Team, APO 24-5
Commanding Officer, Kumamoto Mil Govt Team, APO 24-1
Commanding Officer, Kagoshima Mil Govt Team, APO 970
Commanding Officer, Oita Mil Govt Team, APO 24-2
Commanding Officer, Miyazaki Mil Govt Team, APO 24-2
ATTN: Public Health Officer

1. Reference:

a. Letter, Hq I Corps, AG 700, Subj: "Medical Intern Education", dated 18 February 1949.

2. A survey of the internes in Kyushu Region will be made. The Prefectural Health Department should be able to supply all of the statistics required.

3. The survey will be limited to hospitals 50 beds and over. The following information is desired:

a. Name of institution.

b. Location of institution (city, town and gun)

c. Type. (It is believed that the following types will cover all institutions: National Hospitals; National Sanatoria; Prefectural; Educational Ministry; National Health Insurance; Red Cross; Municipal; and Private.)

d. Total admissions 1948

e. Total available beds.

f. Total bed occupancy (average)

g. Total number of out patients daily (average)

DECLASSIFIED E.O. 12065 SECTION 3 NND

h. Total number of full-time doctors.

i. Total number of part time doctors.

j. Total number of internes.

4. Additional information desired is:

a. Pertinent findings of team public health section.

b. Recommendations of team public health section and/or prefectural health department.

5. Report will be prepared in duplicate to reach this headquarters by 21 May 1949.

BY ORDER OF COLONEL HILTON:

CHARLES L. BACHTEL
1st Lt SIG C
Adjutant

DECLASSIFIED E.O. 12065 SECTION 3 NND/NARS

FILE

700

843

BASIC: Ltr, Kyushu Mil Govt Region, APO 24-5, Subj: "Interne Survey", dtd 30 April 49

1st Ind LBF/yt

HEADQUARTERS FUKUOKA MILITARY GOVERNMENT TEAM, APO 24-5, 20 May 1949

TO: Commanding Officer, Kyushu Mil Govt Region, Hq & Hq Det, APO 24-5
ATTN: Public Health Officer

FILE

1. In accordance with the basic communication the following information is submitted.

2. Interns in Fukuoka-ken:

a. Name	b. Location	c. Type	d. Admissions 1948	e. No. of Beds	f. Aver. Bed Occupancy	g. Out-Patients per day	h. Full-time Doctors	i. Part-time Doctors	j. No. Interns W.M. Allocation	k. Length of Internship	l. Salary or Allowance	m. 1948 Deaths Autopsies Operations
Kurume H.C.	Umemitsu Kurume	Ken				13	2		50/50	1 mo.		
Fukuoka H.C.	Nagahama, Fukuoka	City				80	11			1 mo.		
Wakamatsu H.C.	Wakamatsu-machi, Wakamatsu	Ken				35	3		31/31	1 mo.		
Kokura City Hosp.	Mashaku-machi, Kokura	Public	30,153	221	84	256	22		2/2	1 yr		D. 78 O. 1726 A. 7
Yahata Iron Works Hosp.	Okura, Yawata	Private	97,787	324	268	3216	45		39/39	1 yr	Al. ¥1000 a mon.	D. 244 O. 1776 A. 5
Moji R.R. Hosp.	Kiyotaki-machi, Moji	Communication Ministry	38,697	770	105.9	1002.4	38		24/24	1 yr	Train ticket	D. 39 O. 2732
Chikushi Nat. Hosp.	No-tame, Fukuoka	Welfare Ministry	1,828	630	431	225	33	2	56/36	1 yr	Allowance	D. 207 O. 1136 A. 22

FILE

a. Name	b. Location	c. Type	d. Admissions 1948	e. No. of Beds	f. Aver. Bed Occupancy	g. Out-Patients per day	h. Full-time Doctors	i. Part-time Doctors	j. No. Interns W.M. Allocation	k. Length of Internship	l. Salary or Allowance	m. 1948 Deaths Autopsies Operations
Kurume Nation. Hosp.	Kokubu-machi, Kurume	Welfare Ministry	1,176	380	294	179	21		20/25	1 yr	Allowance	D. 107 O. 1011 A. 2
Kurume Med. Col. Hosp.	Asahi-machi, Kurume	Foundation	405	337	308	124			79/50	1 yr		D. 55 O. 1150 A. 56
Kinen Hosp.	Takara-machi, Kokura	Social Insurance	36,668	125	110	544	192	1	7/15	1 yr		D. 97 O. 859 A. 2
Fukuoka Nation. Hosp.	Daimyo-machi, Fukuoka	Welfare Ministry	20,805	118	57	832	5		2/3	1 yr		D. 31 O. 74
Relief Soc. Tobata Hosp.	Osawami-machi, Tobata	Public	1,083	112	260	103						D. 41 O. 1058
Kyushu Univ. Hosp.	Kata-kasu, Fukuoka	National	272,075	1010	745	394	331		229/170	1 yr		D. 254 O. 4727 A. 190
Mitsui Tagawa Hosp.	Ito-Tagawa machi, Tagawa	Private	3,477	313	246	1,374	26		1/1	1 yr	Under consideration	D. 322 O. 2318
Relief-Society Fukuoka Hosp.	Yakuin Horibata, Fukuoka	Public	764	70	51	877	30	2	12/12	1 yr	"	D. 83 O. 960
Relief Society Waka-matsu Hosp.	Sakai-machi, Waka-matsu	"	20,764	93	568	477	14		4/2	1 yr	"	D. 41 O. 237
Kokura Nation. Hosp.	Kita-gata, Kokura	National		500	364	373			9/30	1 yr		

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.
Name	Location	Type	Admissions 1948	No. of Beds	Aver. Bed Occupancy	Out-Patients per day	Full-time Doctors	Part-time Doctors	No. Interns W.M. Allocation	Lehgth of Internship	Salary or Allowance	1948 Deaths Autopsies Operations
Iizuka Hosp.	Tate-iwa, Iizuka	Private		221	191	12,349			10/30	1 yr		

3. Recommendation:

The Welfare Ministry, Prefectural Health Department and the Doctors Association should organize internship committees to evaluate and grade existing intern training facilities, and to campaign for improvement of the present low standard intern training program.

FOR THE COMMANDING OFFICER:

ERNEST R. KNIRSCH
1st Lt., FA
Acting Adjutant

DECLASSIFIED E.O. 12065 SECTION 3 NLJ/RAC/ date 1/4/94

49/PH/TB/#1

KYUSHU MILITARY GOVERNMENT REGION
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

APO 24 Unit 5
20 March 1949

SUBJECT: Tuberculosis Bed Survey, Kyushu Region

TO : Commanding General, I Corps, APO 301
ATTENTION: Public Health Officer

1. A survey of the available beds for Tuberculosis Patients reveals a total of 11,309 with an average occupancy of 9,324 beds.

2. Welfare Ministry Institutions.

a. National Hospitals

Total Maximum Bed Capacity	7,319
Total Beds Designated by Welfare Ministry	5,390
Total Beds Now available	6,513
Total Average Bed Occupancy	3,757
Tuberculosis Beds authorized capacity	3,221
Tuberculosis Beds Average Occupancy	2.051
Average Number out patients daily	3,686
Total Number Doctors	430
Total Number Nurses	1,663

b. National Sanatoria

Total Maximum Bed Capacity	7,451
Total Beds Designated by Welfare Ministry	5,350
Total Beds now available	5,243
Total Average Bed Occupancy	4,266
Tuberculosis Beds Authorized Capacity	5,156
Tuberculosis Beds Average Occupancy	4,126
Average Number Out-Patients Daily	406
Total Number Doctor	118
Total Number Nurses	999

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DECLASSIFIED E.O. 12065 SECTION 3 VOLUME [illegible]

c. In national institutions there is a total maximum bed capacity of 1,470. The welfare ministry has designated 10,740 as the bed capacity, but directors have made 11,756 available for use. This leaves a total of 3,014 beds that could be utilized in the present national institutions after renovation and with the addition of more personnel and equipment.

3. Prefectural Hospitals

Total Beds Now Available	982
Total Average Occupancy	525
Authorized Tuberculosis Bed Capacity	332
Average Tuberculosis Bed Occupancy	206
Average Number Out-Patients Daily	907
Average Number Tuberculosis Out-Patients	118
Total Number Doctors	112
Total Number Tuberculosis Doctors	18
Total Number Nurses	296
Total Number Tuberculosis Nurses	41

4. National Educational

Total Number Available Beds	1,497
Total Average Bed Occupancy	998
Authorized Tuberculosis Bed Capacity	339
Average Tuberculosis Bed Occupancy	243
Average Number Out-Patients Daily	806
Average Number Tuberculosis Out-Patients	84
Total Number Doctors	675
Total Tuberculosis Doctors	107
Total Number Nurses	658
Total Tuberculosis Nurses	216

5. National Health Insurance

Total Number Available Beds	302
Total Average Bed Occupancy	115
Tuberculosis Bed Authorized Capacity	23
Tuberculosis Bed Occupancy (average	23
Average Number Out Patients Daily	602
Average Number Tuberculosis Out Patients	66
Total Number Doctors	30
Total Tuberculosis Doctors	3
Total Number Nurses	75
Total Tuberculosis Nurses	5

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6. Red Cross

Total Beds Now Available	165
Total Average Bed Occupancy	145
Tuberculosis Authorized Bed Capacity	155
Tuberculosis Bed Occupancy (average)	145
Average Number Out Patients Daily	15
Average Number Tuberculosis Out Patients	11
Total Number Doctors	5
Total Tuberculosis Doctors	5
Total Number Nurses	27
Total Tuberculosis Nurses	27

7. Municipal

Total Number Available Beds	426
Total Average Bed Occupancy	247
Tuberculosis Beds Authorized Capacity	95
Tuberculosis Beds Occupancy (Average)	61
Average Number Out Patients Daily	771
Total Number Doctors	47
Total Tuberculosis Doctors	8
Total Number Nurses	121
Total Tuberculosis Nurses	23

8. Private

Total Number Available Beds	2228
Total Average Bed Occupancy	1256
Tuberculosis Bed Authorized Capacity	836
Tuberculosis Bed Average Occupancy	586
Average Number Out Patients Daily	4029
Total Number Doctors	219
Total Number Nurses	710

9. Institutions Under 50 Beds

Tuberculosis Beds Authorized Capacity	1152
Tuberculosis Beds Average Occupancy	882

10. In most cases, exclusive of Tuberculosis Sanatoria, the number of beds designated as being available for Tuberculosis patients depends entirely upon the decision of the individual hospital director.

DECLASSIFIED E.O. 12065 SECTION 3 NND/NARS

11. National institutions are the best source of Tuberculosis beds. The total of 3,014 beds that could be utilized for Tuberculosis have factors other than personnel, equipment and renovation which could hamper their use.

a. Securing personnel to staff certain isolated institutions as the Kawaminami National Hospital in Miyazaki and the Kagoshima National Sanatorium would be exceedingly difficult if more beds were made available. Physicians and other professional personnel are not prove to accept positions in remote areas.

b. In Oita Prefecture, Tuberculosis beds are concentrated in 1/3 of the prefecture. The distance to the hospital is a deterring factor for those in the outlying areas.

c. There is not a Tuberculosis bed on the entire Osumi peninsula in Kagoshima prefecture, an area of approximately 196.76 square kilometers with a population of 305,423. Kanoya City is located on this peninsula. In Kanoya there is an excellent Air Corps Hospital which may be released to the Japanese government.

12. There are 1,143 beds in National Educational, National Health Insurance and Prefectural Hospitals which are not usually occupied.

13. Contagious disease hospitals are inactive. In Fukuoka prefecture there are 141 such hospitals with 3,315 beds of which 2,650 are empty on the average.

14. Educational hospitals are considerably overstaffed even with the teaching and research that is done in these institutions. There are 520 full time physicians employed at the Kyushu University Hospital. (Total available beds 1,010 with an average occupancy of 761). Kumamoto Medical College employs 155 full time physicians (a 487 bed hospital with an average occupancy of 237).

15. Private hospitals are not a good source of Tuberculosis beds. Prices are high and patients do not receive good care been according to Japanese standards.

16. The program of each tuberculin positive individual receiving a chest X-Ray should offer a source of many tuberculosis admissions to hospitals. Military government has also repeatedly recommended close cooperation between health center directors and national hospitals. Examination of records from national institutions reveals that practically no admissions have been referred from health centers.

DECLASSIFIED E.O. 12065 SECTION 3 NND

17. Team Public Health officers report approximately 23.129 Tuberculosis patients who are in need of hospitalization.

18. Recommendations

a. Where adaptable, the 3,014 beds which could be made available in national institutions should be designated as Tuberculosis beds by the Welfare Ministry.

b. The Welfare Ministry and the Educational Ministry should urge hospital directors to make more beds available for Tuberculosis patients in general hospitals.

c. There should be facilities for treatment for all phases of Tuberculosis in national institutions. If not possible for every hospital to treat all phases, a clearing hospital could be instituted in some prefectures and after the more specialized forms of treatments are completed, patients could be sent to the other hospitals for routine treatment.

d. Major emphasis in expansion and construction of hospitals should be placed on the more highly populated areas, but not to the neglect of rural areas where there are absolutely no facilities for Tuberculosis treatment such as in Oita prefecture and on the Osumi peninsula in Kagoshima. Special efforts should be made to convert the Kanoya Air Corps hospital into a National Sanatorium following its release to the Japanese.

e. Conversion of inactive contagious disease hospitals into sanatoria.

f. The Educational Ministry should urge medical schools to hire physicians on a part time basis so that their services could be utilized by institutions that are understaffed.

g. Closer cooperation between health center directors and the directors of national institutions is needed.

h. Concentrated health education designed to disprove beyond doubt the general publics misconceptions concerning Tuberculosis.

i. Publishing of literature and production of detailed films on home care of Tuberculosis patients is a need for education of the Public Health Nurse.

Ltr Hq Kyushu Mil Govt Region, APO 24-5, subj: "Tuberculosis Bed Survey, Kyushu Region," dtd 20 April 49, cont'd

j. Minsei-iin and other Welfare institutions to be urged to become more active in financial help. Similarly, improvement in the social function of the health center.

k. Increase the flexibility of the Daily Life Security Law so that persons other than those entirely destitute can receive medical benefits.

FOR THE COMMANDING OFFICER:

CHARLES F. LAWSON
Captain TC
Acting Adjutant

1 Incl:
Tuberculosis Bed Survey,
Kyushu Mil Govt Region

DECLASSIFIED E.O. 12065 SECTION 3 NLJ/RAC

KYUSHU MILITARY GOVERNMENT REGION
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

RWO/1gr

APO 24 Unit 5
19 April 1949

SUBJECT: Insect Light Traps

TO : Commanding Officer, Fukuoka Mil Govt Team, APO 24-5
Commanding Officer, Kagoshima Mil Govt Team, APO 970
Commanding Officer, Kumamoto Mil Govt Team, APO 24-1
Commanding Officer, Miyazaki Mil Govt Team, APO 24-2
Commanding Officer, Nagasaki Mil Govt Team, APO 24-5
Commanding Officer, Oita Mil Govt Team, APO 24-2
Commanding Officer, Saga Mil Govt Team, APO 24-5

A conference was held at Hainzuka 15 April 1949 with representatives of Kyushu prefectural agriculture sections and national and prefectural experiment stations to discuss insect damage to crops and methods of extermination. On this occasion Mr. Roberts, Natural Resources Section, SCAP, made the following statements concerning light traps:

a. "The insect light traps have not proved satisfactory.

b. "It is believed that encouragement has been given to use of the traps by persons in a position to profit from their existence."

c. "It is expected that ESS, SCAP, will take steps to halt allocation of critical material for future manufacture of light traps."

d. "The amount of electricity to be made available for operation of light traps this summer is questionable."

BY ORDER OF COLONEL HILTON:

C. F. LAWSON
Capt TC
Acting Adjutant

DECLASSIFIED E.O. 12065 SECTION 3 NLJ/RAC NARS, Date 12-18-92

49/PH/a/#2

RCW/ky

KYUSHU MILITARY GOVERNMENT REGION
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

APO 24 Unit 5
12 April 1949

700

SUBJECT: Health Center Survey

TO : Commanding General, I Corps, APO 301
ATTENTION: Public Health Officer

1. A survey of the health centers on Kyushu reveals the same situation existing in all prefectures. In each prefecture there is one model which is located in an adequate building with fairly good equipment and sufficiently staffed, although the personnel are poorly trained. Few of the remaining health centers perform all of the twelve basic functions, are poorly staffed, and poorly equipped.

2. The Kyushu "Average" Health Center cannot be construed as being a true average because the Models are necessarily included in its computation making for a larger staff, better equipment, etc., than is generally the case.

3. The twelve basic functions:

a. Public Health Nursing - Tremendous progress is noted, although public health nurses are still performing duties other than nursing such as clerical and laboratorial work. A greater number of home visits are being made. The accomplishments of the individual public health nurse depends primarily on the cooperation she receives from the health center director, and secondarily on her own initiative.

b. Maternal and Child Hygiene - As a rule this service is not particularly active because of lack of personnel. Those working on this service do not pursue their duties to the fullest extent.

c. Vital Statistics - Reporting seems to be functioning well in most health centers, but little utilization of charts and graphs is found.

DECLASSIFIED E.O. 12065 SECTION 3 NND/NARS DATE

d. Diagnostic Laboratory Service - Generally the only tests performed are sputums, smears, and urinalysis and not in a proportion consistent with population.

e. Dental Hygiene - Present mainly in the models only. Not being utilized in a preventive aspect as much as for purely treatment purposes.

f. Nutrition Service - Present in many health centers, but active in only the models. Inadequate nutritional surveys occupy most of the nutritionist's time. Only a small amount of nutritional advice is given.

g. Sanitation - Active in most health centers. Environmental sanitation is improving. Food and Animal Disease Control is one of the best public health services.

h. Public Health Education - Only small accomplishments are noted.

i. Medical Social Services - Extremely inactive. Workers have little concept of their positions and need more training.

j. Communicable Disease Control - Control of the five major epidemic diseases is fairly good. Little attention is paid to the other communicable diseases.

k. Tuberculosis Control - This health problem, Japan's most important, receives scant consideration from health department officials or those concerned with its control in the health center. Registers are inadequate. Case finding and case follow-up is almost non-existent.

l. Venereal Disease Control - Health Centers place dependence upon clinics, hospitals and other agencies for the control of venereal diseases. Very little diagnosis, treatment, or contact tracing is done. Patients lapsed from treatment are not investigated usually.

4. Although administration of health activities has improved, the health centers rely upon the public health sections in villages, towns and cities to which they give very little supervision.

DECLASSIFIED E.O. 12065 SECTION 3 NND 963

Ltr Kyushu Mil Govt Region, APO 24-5, subj: "Health Center Survey", dated 12 April 1949

5. The main factors curtailing activities of the health center are lack of personnel and personnel who are adequately qualified. Qualified personnel accept clinical appointments because salaries far surpass those in the health departments.

FOR THE COMMANDING OFFICER:

CHARLES L. BACHTEL
1st Lt SIG C
Adjutant

10 Incls:
1. Minimum Health Center, Kyushu Mil Govt Region
2. Average Health Center, Kyushu Mil Govt Region
3. Maximum Health Center, Kyushu Mil Govt Region
4. Health Center Survey, Fukuoka Mil Govt Team
5. Health Center Survey, Oita Mil Govt Team
6. Health Center Survey, Nagasaki Mil Govt Team
7. Health Center Survey, Kumamoto Mil Govt Team
8. Health Center Survey, Kagoshima Mil Govt Team
9. Health Center Survey, Miyazaki Mil Govt Team
10. Health Center Survey, Saga Mil Govt Team

DECLASSIFIED E.O. 12065 SECTION 3-402/NMBG NO: [redacted]

HEALTH CENTER EVALUATION

1. NAME OF HEALTH CENTER: [redacted] Date [redacted]
   Place [redacted] Prefecture [redacted]
   District Population [redacted] Area [redacted] Redistricted [redacted]

2. DIRECTOR: [redacted] MD [redacted] Time in possition [redacted]

3. BUILDING:
   Cost [redacted] Participation %: Local [redacted]
   Prefecture [redacted] National [redacted]
   Size [redacted] Size of plot [redacted] Capable of expansion [redacted]
   New [redacted] Rebuilt [redacted] Ownership [redacted]
   Construction: brick [redacted] stone [redacted] composite [redacted]
   Screened [redacted] Cleanliness [redacted]
   Is working space adequate [redacted] are families living in bldg. [redacted]
   Attach scale drawing showing ground area and plan of building, designate living quarters and clinic space; show if two divisions use same rooms. If excess equipment is on hand, attach list.

4. PERSONNEL:

DIVISIONS	Physicians	Dentists	Dental Hygienists	Midwives	Veterinarians	Sanitarians	Pharmacists	Nutritionists	X-ray Technicians	P. H. Nurses	Others	Total
Administrative Affairs												
Medical Affairs												
Pharmaceutical Affairs												
Environmental Sanitation												
Sanitary Teams												
Food and Animal Disease Control												
Communicable Disease Control												
Tuberculosis Control												
Venereal Disease Control												
Prevention												
Maternity and Child Hygiene												
Dental Hygiene												
Nutrition												
Health Education												
Public Health Statistics												
Public Health Nursing												
Medical Social Service												
Laboratories												
Total										[redacted]	[redacted]	[redacted]

FILE

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDB NO: [illegible]

No. persons attending refresher courses 0 Local 0
Prefectural 0 National 0
PHQ 0 Adm. 0 VD 0
Sanitation 0 Nursing 0 Veterinary 0
Social service 0 Lab. 0 Statistics 0

5. GENERAL AFFAIRS DIVISION:
How often do prefectural officials visit health center Twice yearly
No. clinic patients in month 25 No. under Daily Life Security 0
No. doctors in district 25 No. food establishments 20
Fees collected last month ¥300 Budget per annum ¥34,999
Operating expenses per annum ¥90,006
Is liaison maintained with hospitals No
are supply requirements anticipated No Narcotics safe No
Accurate running supply inventory maintained No
Supplies shored well No
Allocations of controlled items made equitably and prompt No
Central records No Is clinic schedule posted No
are fee schedules posted No are patients received courteously No are patients orientated Not Adequately
Is minimum equipment available No
List shortages
List transportation available None

6. SANITATION DIVISION:
Environmental sanitation:
are sanitary teams under health center No
Is work planned No by whom Town & City Offices
Teams trained No are teams assigned areas No
Is equipment satisfactory No Is transportation available No
How is garbage disposed of are areas clean No
Veterinary affairs:
No. monthly inspections: butcher shops 1
fruit markets 0 dairies 0 slaughter houses 0
restaurants 0 hotels 0 drinking establishments 0
food manufacturers 0 milk plants 0
fish markets 0 cream plants 0
Rabies vaccinations % completed 0
Quarantine facilities available No

7. COMMUNICABLE DISEASE DIVISION:
Immunizations % completed Smallpox 70 Typhoid 90
Diphtheria 0 Typhus 0 Pertussis 0 Other
are biologicals refrigerated properly No Is contact tracing done No
Is isolation and quarantine carriedout properly No
VD patients treated monthly: Lues 0 Gonorrhea 0
Chancroid 0 attach monthly clinic report.
Tuberculosis: No. TB deaths in district 2 No. cases on register 0 No. tests done in past year 300 No. positive 8
No. X-rays direct 0 indirect 0
No. X-rays positive 0 No. BCG inoculations 300
No. pneumothorax refills 0 No. pneumothorax patients 0
No. patients from area in sanatoria 0 Is contact tracing done No
No. contact found positive 0 No. clinic visits per annum

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [redacted]

Health Center Evaluation [redacted] Health Center

8. NUTRITION DIVISION: None
No. patients receiving individual instruction monthly_____
No. nutrition chasses monthly_____Attendance_____
No. baby feeding instructions_____
Is instruction covering current rations_____

9. MATERNAL AND CHILD HEALTH DIVISION: None
No. prepartum patients monthly_____No. postpartum_____
No. children patients monthly _____

10. DENTAL HYGIENE DIVISION: None
No. monthly examinations_____No. monthly treatments_____

11. HEALTH STATISTICS DIVISION:
No. schedules handled last month__8__Birth__148__Death__10__
Stillbirth__2__Marriage__36__Divorce__1__
No. physicians report cards received last month__0__
Are epidemiological records made available to other divisions__No__
Are up-to-date carts prepared__No__

12. HEALTH EDUCATION DIVISION:
Are programs coordinated with other divisions__No__
Do other divisions assist in planning and supervising an education program__No__
Types of programs used: school__No__community__No__
special groups__No__HC district__No__prefectural__No__
national__No__
Media used last month: No. lectures__0__news articles__0__
posters__0__books__0__pamphlets__0__records__0__
radio talks__0__filrs__0__film strips__0__charts__0__
plays__0__Kamishibai__0__puppet shows__0__other__0__

13. NURSING DIVISION:
No. home visits last month to: infants__0__preschool children__0__
school children__0__prenatal__0__TB patients__0__
TB contacts__0__VD patients__0__VD contacts__0__
Communicable disease patients__0__Other patients__0__
Do nurses hold individual clinic conferences with patients__No__
Do nurses take histories on VD, TB, Maternal and Child Patients__No__
Are patients referred back to nurses for further guidance__No__
Are nurses working in: Admitting__Yes__Laboratory__Yes__
Pharmacy__Yes__X-ray room__Yes__
Do nurses give: Intramuscular injections__Yes__Intravenous__Yes__
Do nurses assist in clinics outside health center__No__
Types of clinics: TB__-__VD__-__Prenatal__-__Child__-__Other__-__
Do nurses do janitorial work__Yes__Is there a chief nurse__No__
Are there nursing districts__No__Do nurses keep records of home visits__No__How often are nursing staff meetings held__0__

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [redacted]

Which other nurses attend [redacted] What is base salary of staff nurse [redacted] Total average [redacted]
Does the health center have equipped nursing bags or boxes [redacted]
Does the health center have reference books on nursing available [redacted]

14. MEDICAL SOCIAL SERVICE DIVISION: [redacted]
No. patients interviewed_____ No home visits_____
No. liaison visits_____

15. LABORATORY DIVISION:
Is equipment adequate [redacted] List equipment not in working order_____
No. examinations last month: smears [redacted] sputum [redacted] urine [redacted]
stools [redacted] cultures [redacted] sedimentation rates [redacted]
blood counts [redacted] complement fixation [redacted] precipitation [redacted]
chemical [redacted] food [redacted] milk [redacted] water [redacted]
serodiagnostic [redacted] spinal fluid [redacted] other [redacted]

16. REMARKS:

The above data are minimum values for each item in the survey and do not represent any one particular health center.

17. RECOMMENDATIONS:

18. EVALUATION:
There are_____ health centers in this prefecture.
This health center ranks_____

(NB. All figures are for last month unless otherwise stated.
Attach map of health center.)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO: [illegible]

HEALTH CENTER EVALUATION

1. NAME OF HEALTH CENTER: Average Date
   Place Kyushu Region Prefecture Seven Total
   District Population 136,331 Area 368 Km² Redistricted

2. DIRECTOR: MD Time in possition

3. BUILDING:
   Cost ¥ 290,646 Participation %: Local 10%
   Prefecture 70% National 20%
   Size 124 Tsubo Size of plot 382 Tsubo Capable of expansion Yes
   New No Rebuilt Yes Ownership Prefectural
   Construction: brick stone composite X
   Screened No Cleanliness Fair
   Is working space adequate No are families living in bldg. Yes
   Attach scale drawing showing ground area and plan of building, designate living quarters and clinic space; show if two divisions use same rooms. If excess equipment is on hand, attach list.

4. PERSONNEL:

DIVISIONS	Physicians	Dentists	Dental Hygienists	Midwives	Veterinarians	Sanitarians	Pharmacists	Nutritionists	X-ray Technicians	P. H. Nurses	Others	Total
Administrative affairs												
Medical affairs												
Pharmaceutical affairs												
Environmental Sanitation												
Sanitary Teams												
Food and Animal Disease Control												
Communicable Disease Control												
Tuberculosis Control												
Venereal Disease Control												
Prevention												
Maternity and Child Hygiene												
Dental Hygiene												
Nutrition												
Health Education												
Public Health Statistics												
Public Health Nursing												
Medical Social Service												
Laboratories												
Total	2	0	0	2	2	1	0	1	5	0	0	36

FILE

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO: 1702-19

No. persons attending refresher courses 23 Local 6
Prefectural 10 National 2
PHO 1 Adm. 1 VD 2
Sanitation 1 Nursing 2 Veterinary 2
Social service 0 Lab. 0 Statistics 1
Tuberculosis 1

5. GENERAL AFFAIRS DIVISION:
How often do prefectural officials visit health center 1/month
No. clinic patients in month 480 No. under Daily Life Security 1
No. doctors in district 108 No. food estaolishments 248
Fees collected last month ¥73760 Budget per annum ¥1,056,664
Operating expenses per annum 1,518,483
Is liaison maintained with hospitals Yes
are supply requirements anticipated Yes Narcotics safe Yes
accurate running supply inventory maintained Yes
Supplies shored well Yes
allocations of controlled items made equitably and prompt Yes
Central records Yes Is clinic schedule posted
are fee schedules posted Yes are patients received courteously
Yes are patients orientated Yes
Is minimum equipment available Yes
List shortages Laboratory Equipment, Refrigerators
List transportation available 2 Bicycles

6. SANITATION DIVISION:
Environmental sanitation:
are sanitary teams under health center Yes
Is work planned Yes by whom Health Center
Teams trained Yes are teams assigned areas Yes
Is equipment satisfactory Yes Is transportation available No
How is garbage disposed Burned are areas clean Fair
Veterinary affairs:
No. monthly inspections: butcher shops 14
fruit markets 20 dairies 12 slaughter houses 17
restaurants 14 hotels 10 drinking establishments 52
food manufacturers 22 milk plants 4
fish markets 12 cream plants 0
Rabies vaccinations % completed 76
quarantine facilities available No

7. COMMUNICABLE DISEASE DIVISION:
Immunizations % completed Smallpox 89% Typhoid 84%
Diphtheria 76% Typhus 90% Pertussis 15% Other
are biologicals refrigerated properly Yes Is contact tracing done Yes
Is isolation and quarantine carriedout properly Yes
VD patients treated monthly: Lues 26 Gonorrhea 11
Chancroid 1 attach monthly clinic report.
Tuberculosis: No. TB deaths in district 162 No. cases on register 7822
560 No. tests done in past year 21505 No. positive
No. X-rays direct 296 indirect 1719
No. X-rays positive 122 No. BCG inoculations 12990
No. pneumothorax refills 37 No. pneumothorax patients 7
No. patients from area in sanatoria 44 Is contact tracing done Yes
No. contact found positive 12 No. clinic visits per annum 12664

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 77 0 1 0

Health Center Evaluation Kyushu Average Health Center

8. NUTRITION DIVISION:
No. patients receiving individual instruction monthly 50
No. nutrition classes monthly 1 Attendance 18
No. baby feeding instructions 94
Is instruction covering current rations Yes

9. MATERNAL AND CHILD HEALTH DIVISION:
No. prepartum patients monthly 87 No. postpartum 15
No. children patients monthly 92

10. DENTAL HYGIENE DIVISION:
No. monthly examinations 44 No. monthly treatments 13

11. HEALTH STATISTICS DIVISION:
No. schedules handled last month 809 Birth 466 Death 158
Stillbirth 18 Marriage 136 Divorce 11
No. physicians report cards received last month 101
Are epidemiological records made available to other divisions Yes
Are up-to-date carts prepared Yes

12. HEALTH EDUCATION DIVISION:
Are programs coordinated with other divisions Yes
Do other divisions assist in planning and supervising an education program Yes
Types of programs used: school Yes community Yes
special groups Yes HC district Yes prefectural Yes
national No
Media used last month: No. lectures 6 news articles 1
posters 31 books 0 pamphlets 40 records 0
radio talks 0 films 0 film strips 0 charts 0
plays 0 Kamishibai 0 puppet shows 0 other

13. NURSING DIVISION:
No. home visits last month to: infants 22 preschool children 5
school children 8 prenatal 10 TB patients 42
TB contacts 18 VD patients 7 VD contacts 11
Communicable disease patients 3 Other patients 0
Do nurses hold individual clinic conferences with patients Yes
Do nurses take histories on VD, TB, Maternal and Child Patients Yes
Are patients referred back to nurses for further guidance Yes
Are nurses working in: Admitting Yes Laboratory Yes
Pharmacy No X-ray room No
Do nurses give: Intramuscular injections Yes Intravenous No
Do nurses assist in clinics outside health center Yes
Types of clinics: TB - VD - Prenatal - Child - Other -
Do nurses do janitorial work No Is there a chief nurse Yes
Are there nursing districts Yes Do nurses keep records of home visits Yes How often are nursing staff meetings held Weekly

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [illegible]

Which other nurses attend No What is base salary of staff nurse ¥ 2,349 Total average 2031
Does the health center have equipped nursing bags or boxes Inadequate
Does the health center have reference books on nursing available Yes

14. MEDICAL SOCIAL SERVICE DIVISION:
No. patients interviewed 0 No home visits 3
No. liaison visits

15. LABORATORY DIVISION:
Is equipment adequate Yes List equipment not in working order

No. examinations last month: smears 75 sputum 23 urine 66
stools 221 cultures 3 sedimentation rates 45
blood counts 4 complement fixation 10 precipitation 89
chemical 0 food 4 milk 3 water 2
serodiagnostic 76 spinal fluid 0 other 0

16. REMARKS:

The figures above are average values for each item and do not represent any one particular health center.

17. RECOMMENDATIONS:

18. EVALUATION:
There are health centers in this prefecture.
This health center ranks

(NB. All figures are for last month unless otherwise stated.
Attach map of health center.)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO: 77-0-0-1-0

HEALTH CENTER EVALUATION

1. NAME OF HEALTH CENTER: Maximum Date
   Place Kyushu Region Prefecture Seven Total
   District Population 3,652,217 Area 15380KM2 Redistricted
   Time in possition 137 Months

2. DIRECTOR: MD

3. BUILDING:
   Cost ¥ 4,500,000 Participation %: Local 100%
   Prefecture 100% National 50%
   Size 502 tsubo Size of plot 1150 tsubo apaole of expansion Yes
   New Yes Rebuilt Ownership Prefectural
   Construction: brick stone composite X
   Screened Yes Cleanliness Excellent
   Is working space adequate Yes are families living in bldg. No
   Attach scale drawing showing ground area and plan of building, designate living quarters and clinic space; show if two divisions use same rooms. If excess equipment is on hand, attach list.

4. PERSONNEL:

DIVISIONS	Physicians	Dentists	Dental Hygienists	Midwives	Veterinarians	Sanitarians	Pharmacists	Nutritionists	X-ray Technicians	P. H. Nurses	Others	Total
Administrative affairs												
Medical affairs												
Pharmaceutical affairs												
Environmental Sanitation												
Sanitary Teams												
Food and Animal Disease Control												
Communicable Disease Control												
Tuberculosis Control												
Venereal Disease Control												
Prevention												
Maternity and Child Hygiene												
Dental Hygiene												
Nutrition												
Health Education												
Public Health Statistics												
Public Health Nursing												
Medical Social Service												
Laboratories												
Total	1	2	3	4	5	6	7	8	9	10	11	220

FILE

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO: 170019

No. persons attending refresher courses 304 Local 254
Prefectural 195 National 12
PHQ 81 Adm. 68 VD 28
Sanitation 86 Nursing 44 Veterinary 32
Social service 12 Lab. 19 Statistics 29
13 49

5. GENERAL AFFAIRS DIVISION:
How often do prefectural officials visit health center Daily
No. clinic patients in month 3329 No. under Daily Life Security 845
No. doctors in district 402 No. food establishments 1611
Fees collected last month ¥300,000 Budget per annum ¥7,688,239
Operating expenses per annum ¥7,688,239
Is liaison maintained with hospitals Yes
Are supply requirements anticipated Yes Narcotics safe Yes
Accurate running supply inventory maintained Yes
Supplies stored well Yes
Allocations of controlled items made equitably and prompt Yes
Central records Yes Is clinic schedule posted Yes
Are fee schedules posted Yes Are patients received courteously Yes Are patients orientated Yes
Is minimum equipment available Yes
List shortages None
List transportation available 3 Cars, 7 Bicycles

6. SANITATION DIVISION:
Environmental sanitation:
Are sanitary teams under health center Yes
Is work planned Yes By whom Health Center Sanitation Chief
Teams trained Yes Are teams assigned areas Yes
Is equipment satisfactory Yes Is transportation available Yes
How is garbage disposed Burned Are areas clean Yes
Veterinary affairs:
No. monthly inspections: butcher shops 90
fruit markets 200 dairies 110 slaughter houses 227
restaurants 742 hotels 200 drinking establishments 600
food manufacturers 360 milk plants 30
fish markets 180 cream plants 3
Rabies vaccinations % completed 100%
Quarantine facilities available Yes

7. COMMUNICABLE DISEASE DIVISION:
Immunizations % completed Smallpox 100% Typhoid 100%
Diphtheria 100% Typhus 100% Pertussis 30% Other Cholera 99%
Are biologicals refrigerated properly Yes Is contact tracing done Yes
Is isolation and quarantine carried out properly Yes
VD patients treated monthly: Lues 184 Gonorrhea 159
Chancroid 15 Attach monthly clinic report.
Tuberculosis: No. TB deaths in district 678 No. cases on register 4018 No. tests done in past year 10871 No. positive 48307
No. X-rays direct 4726 indirect 12740
No. X-rays positive 1026 No. BCG inoculations 48307
No. pneumothorax refills 403 No. pneumothorax patients 106
No. patients from area in sanatoria 1198 Is contact tracing done Yes
No. contact found positive 678 No. clinic visits per annum 31671

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO: 170-91-9

Health Center Evaluation Kyushu Maximum Health Center

8. NUTRITION DIVISION:
   No. patients receiving individual instruction monthly 650
   No. nutrition chasses monthly 18 Attendance 240
   No. baby feeding instructions 1120
   Is instruction covering current rations Yes

9. MATERNAL AND CHILD HEALTH DIVISION:
   No. prepartum patients monthly 942 No. postpartum 320
   No. children patients monthly 1128

10. DENTAL HYGIENE DIVISION:
   No. monthly examinations 3658 No. monthly treatments 398

11. HEALTH STATISTICS DIVISION:
   No. schedules handled last month 2996 Birth 1371 Death 409
   Stillbirth 76 Marriage 364 Divorce 37
   No. physicians report cards received last month 1291
   Are epidemiological records made available to other divisions Yes
   Are up-to-date carts prepared Yes

12. HEALTH EDUCATION DIVISION:
   Are programs coordinated with other divisions Yes
   Do other divisions assist in planning and supervising an education program Yes
   Types of programs used: school Yes community Yes
   special groups Yes HC district Yes prefectural Yes
   national Yes
   Media used last month: No. lectures 67 news articles 5
   posters 300 books 30 pamphlets 7000 records Yes
   radio talks 12 films 6 film strips 8 charts 15
   plays 0 Kamishibai 15 puppet shows 8 other 10

13. NURSING DIVISION:
   No. home visits last month to: infants 164 preschool children 100
   school children 592 prenatal 150 TB patients 342
   TB contacts 340 VD patients 47 VD contacts 171
   Communicable disease patients 52 Other patients 94
   Do nurses hold individual clinic conferences with patients
   Do nurses take histories on VD, TB, Maternal and Child Patients Yes
   Are patients referred back to nurses for further guidance Yes
   Are nurses working in: Admitting No Laboratory No
   Pharmacy No X-ray room No
   Do nurses give: Intramuscular injections No Intravenous No
   Do nurses assist in clinics outside health center Yes
   Types of clinics: TB Yes VD Yes Prenatal Yes Child Yes Other Yes
   Do nurses do janitorial work No Is there a chief nurse Yes
   Are there nursing districts Yes Do nurses keep records of home visits Yes How often are nursing staff meetings held Weekly

DECLASSIFIED E.O. 12065 SECTION 3-402/NMDG NO. [illegible]

Which other nurses attend Factory, School, Clinic, Midwife at is base salary of staff nurse ¥5444 Total average ¥9,920
Does the health center have equipped nursing bags or boxes Yes
Does the health center have reference books on nursing available
Yes

14. MEDICAL SOCIAL SERVICE DIVISION:
No. patients interviewed 153 No home visits 96
No. liaison visits 52

15. LABORATORY DIVISION:
Is equipment adequate Yes List equipment not in working order None

No. examinations last month: smears 2453 sputum 170 urine 1000
stools 2432 cultures 72 sedimentation rates 1232
blood counts 129 complement fixation 44 precipitation 1216
chemical 16 food 213 milk 104 water 88
serodiagnostic 1590 spinal fluid 6 other 10

16. REMARKS:

The above data represents maximum values for each item in the survey and not any one particular health center.

17. RECOMMENDATIONS:

18. EVALUATION:
There are _____ health centers in this prefecture.
This health center ranks _____

(NB. All figures are for last month unless otherwise stated.
Attach map of health center.)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 770919

KYUSHU MILITARY GOVERNMENT REGION
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

JB/tn

APO 24 Unit 5
11 April 1949

700

SUBJECT: Nursing Visit to Miyazaki Military Government Team, 31 March 1949.

TO : Commanding Officer, Kyushu Mil Govt Region

1. On 25 February 1949 a letter was sent to all teams explaining the grading committee for schools of nursing. In par 2, Public Health Officers on the teams were requested to arrange for a meeting for the writer of this report with the board of directors of the Midwives and Nurses Association. A schedule of travel was inclosed. This travel schedule was later changed for Oita and Miyazaki and written notice sent to those teams.

2. On reporting to the Public Health Section in Miyazaki Military Government Team on 31 March, it was learned that the Public Health Officer had failed to arrange for the requested meeting with the board of directors of the Midwives and Nurses Association, thus defeating the purpose of the writer's visit.

3. Grading of the schools of nursing is one of the first priorities in Public Health activities, for the period April through June 1949. The selection of the members for the grading school committee is of great importance if the schools of nursing are to be improved. The future of medicine and public health in Japan are both dependent on better nursing and much of the leadership must come from Military Government. However, since five of the teams do not have public health nurses the writer has tried to cover them to some extent but the success of this endeavor requires the cooperation of the team public health officer.

JOSEPHINE E. BACA
Public Health Nurse

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 770819

BASIC: Ltr Miss J. E. Baca, Kyushu Mil Govt Region, APO 24-5, dtd 11 Apr 49, subj: "Nursing Visit to Miyazaki M.G. Team, 31 Mar 49"

1st Ind SCH/blh

KYUSHU MIL GOVT REGION, HQ & HQ DET, APO 24 - 5, 12 April 1949

TO: Commanding Officer, Miyazaki Mil Govt Team, APO 24 - 2

1. Your attention is invited to the basic communication.

2. The attention of the Commanding Officer is especially invited to paragraph 2 of the basic communication. In this connection, hereafter it is desired that Section Chiefs make the necessary arrangements requested by inspectors and/or visiting section chiefs so as to insure the complete carrying out of any and all missions.

BY ORDER OF COLONEL HILTON:

CHARLES L. BACHTEL
1st Lt SIG C
Adjutant

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170019

KYUSHU MILITARY GOVERNMENT REGION
HEADQUARTERS AND HEADQUARTERS DETACHMENT
Fukuoka, Kyushu, Japan

JB/tn

APO 24 Unit 5
11 April 1949

700

SUBJECT: Annual Meeting of the Prefectural Branch Midwives' and Nurses' Association.

TO : Commanding Officer, Fukuoka Mil Govt Team, APO 24-5
Commanding Officer, Saga Mil Govt Team, APO 24-5
Commanding Officer, Nagasaki Mil Govt Team, APO 24-5
Commanding Officer, Kumamoto Mil Govt Team, APO 24-1
Commanding Officer, Miyazaki Mil Govt Team, APO 24-2
Commanding Officer, Oita Mil Govt Team, APO 24-2
Commanding Officer, Kagoshima Mil Govt Team, APO 970
Attn: Public Health Officer

1. During May and June most of the Prefectural Branch Midwives' and Nurses' Associations will hold their annual meetings in their individual prefectures. At this annual meeting some of the officers will be elected, plans for the year will be made and old business discussed so they will be fairly important meetings.

2. Miss Baca, Regional Public Health Nurse, has made plans to attend as many of these meetings as possible in an effort to help the members gain a better understanding of democratic organizations and parlimentary law.

3. The Public Health Officer is requested to inform the Association members that they can obtain assistance from the Ken Education Section which has a Women's Affairs Division comparable to the Women's Affairs Office in the Military Government Team.

4. Each Military Government Education Section has some material on file on democratic organization. The Ken Education Section has translations of this material which may be available to the Association. The following are especially recommended:

Democratic Organizations (printed by CI&E SCAP)
Techniques of Democracy (prepared & printed by Shikoku MG)

5. The Visual Aid Center of the Ken Education Section has a film entitled "How To Conduct A Meeting" which may be useful to the group.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 770819

Ltr, Kyushu Mil Govt Region, APO 24-5, dtd 11 Apr 1949, subj: "Annual Meeting of the Prefectural Branch Midwives' and Nurses' Association".

6. It is hoped that this Association will serve a more constructive purpose in the future than it has in the past but it is recognized that this can only be done when the members have acquired an understanding of this form of organization. Therefore, they should be urged to prepare for this next meeting by studying and using the material mentioned above.

BY ORDER OF COLONEL HILTON:

CHARLES L. BACHTEL
1st Lt SIG C
Adjutant

1 Incl:
List of Japanese in charge of Visual Aid Centers.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170919

The following is a list of the Japanese in charge of Films (CIE) in each prefecture.

Fukuoka	-	Mr. S. Shinkai
Nagasaki	-	Mr. T. Taura
Kagoshima	-	Mr. S. Iguchi
Kumamoto	-	Mr. T. Kuno
Oita	-	Mr. N. Ninomiya
Miyazaki	-	Mr. K. Sato
Saga	-	Mr. D. Masaki

Draft

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO. 77-0012-0

OITA MILITARY GOVERNMENT TEAM
APO 24 UNIT 2

CHN/rs

8 April 1949

700

SUBJECT: Efficiency of Prefectural Public Health Officials

TO: Commanding Officer, Kyushu Mil Govt Region, APO 24 Unit 5

1. In compliance with letter, your headquarters, subject: "Efficiency of Public Health Officials," dated 10 March 1949, the following report is submitted.

2. The more important members of the prefectural Public Health department listed in order of decreasing efficiency are as follows:

a.	Takanori Goto	Chief of Public Health Administration Section.
b.	Kumazo Hoashi	Chief of Preventive Medicine Section.
c.	Fujimaru Yamada	Chief of Pharmaceutical Affairs Section.
d.	Takeo Sato	Chief of Medical Affairs Section.
e.	Daikichi Asakura	Chief of Health Department.
f.	Teruo Kurihara	Chief of Epidemic Control Division.
g.	Minoru Sonoda	Chief of Diseases Prevention Division.
h.	Koichi Sato	Chief of Pharmaceutical Affairs Division.
i.	Shozo Shiraishi	Chief of Narcotic Division.
j.	Ritsuko Matsuzaki (female)	Chief of Nurses Division.
k.	Yoshimi Goto	Chief of Public Health Division.
l.	Toyohiko Ono	Chief of Veterinary Division.

FILE

3. This list does not include the chiefs of the less important divisions, some of whom are no doubt more efficient than the last few names on the above list.

FOR THE COMMANDING OFFICER:

LUTHER G. JONES, JR.
Captain, TC
Adjutant

FILE

DECLASSIFIED E.O. 12065 SECTION 3-402/NMDG NO.

700

RESTRICTED

351

XXXX
MEDIC 11

Kagoshima, Kagoshima Mil Govt Team, Kyushu, Japan, APO 970 2400, 8 Apr 49

70	0	0	0	70	0	70

1 Apr 49

None None None None None None None

None None None None None None None

None None None None None None None

None
None

None None

None

None

None

None None None None

None

None

None

1. The following units are rendered dispensary service by this dispensary: Kagoshima Mil Govt Team (mean strength-27), 610 ACWS Det 5 (mean strength-30), Kagoshima CIC Area (mean strength-13).
2. Dispensary beds available: Two
   Dispensary beds occupied : None

RESTRICTED

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. [illegible]

Line 37 - Remarks: Cont'd				Direct Adms and Change of Diagnosis															
Units*	Mean Strength*			All Causes	Disease	Injury	Com Resp Dis	NP	Bact Food Pois	Com Diarrheas	Dysentery Uncl	Mycotic Derm	Scabies	Gonorrhea		Syphilis		Other VD	
	W	N	T											W	N	W	N	W	N
Other I Corps																			
Kagoshima Mil Govt Team	27		27																
Hq & Hq Sq, 8MG, FEC																			
Kagoshima CIC Area	13		13																
5th Air Forces																			
610 AGWS, Det 5	30		30																
AGGREGATE	70		70																

*List all units provided primary (non-hospital) Medical care, entering each unit under the major command to which it is assigned or attached. Major commands are defined in Circular 73, Headquarters Eighth Army, 1948. The mean strength of each unit will be reported with a total mean strength for each major command represented.

When patients are admitted to a hospital or dispensary from units which are not provided primary (non-hospital) care by the hospital or dispensary concerned, the unit to which the patient is assigned or attached will be entered under the appropriate major command but mean strength will not be reported. Mean strengths in these cases will be reported by the medical installation providing primary care for the patient's unit.

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HEADQUARTERS
NAGASAKI MILITARY GOVERNMENT TEAM
Nagasaki, Kyushu, Japan.

WY/ts

APO 24-5
1 April 1949

SUBJECT: Efficiency of Prefectural Public Health Officials.

TO : Commanding Officer, Kyushu Military Government Region
APO 24-5
ATTN: Public Health Officer

1. In compliance with Par 2, Ltr your hdqs, dtd 10 March 49, subj: "Efficiency of Prefectural Public Health Officials", the following report is hereby submitted.

a. Director of Public Health Department

KUSANO, Tadashi (MD)	Competent and a good administor.

b. Chief of Sections.

Name	Position	Remarks	Ranking
YOSHIDA, Rokuro (MD)	Chief of Public Health Section	Good in office and field, but lacks initiative	1
FUKUDA, Michio (MD)	Chief of Preventive Medicine Section	Has a good personality. Slow but steady and reliable.	2
YAMANE, Teizo	Chief of Med. Affairs Sec.	Keen but uncooperative.	3
UEDA, Izumi	Chief of Pharmaceutical Sec.	Uncooperative	4

c. Assistance Chiefs of Sections.

Name	Position	Remarks	Ranking
TOMIYAMA, Takatsugu	Asst, Chief of Public Health Section	Progressive and competent.	1

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Name	Position	Remarks	Ranking
SAIKAWA, Hiroteru	Asst. Chief of Medical Section	Keen and competent	2
NAGANOMA, Yoshimitsu	Asst. Chief of Preventive Med. Sec.	Keen but uncooperative	3
SASADA, Eiichiro	Asst. Chief of Pharmaceutical Section	Slow and lacks initiative	4

d. Chiefs of Division of Public Health Sections.

Name	Position	Remarks	Ranking
ITO, Rokusaburo (MD)	Chief of Veterinary Affairs Div.	Keen and good in office	1
HONDA, Sueko	Chief of Nursing Affairs Div.	Keen and efficient	2
TAKAO, Fukuiichi	Chief of General Affairs Div.	Steady and reliable	3
TAIRA, Yoshio (MD)	Sanitary Engineering Div.	Keen and efficient	4
HIRAI, Tasue	Acting Chief of Nutrition Div.	Lacks experience,	5
YOSHIKAWA, Susumu	Chief of Med. Laboratory	Slow and lacks initiative	6
SHIRAISHI, Keizo (MD)	Superintendent of Health Centers	Does not show zeal.	7

e. Chiefs of Divisions of Medical Affairs Section

Name	Position	Remarks	Ranking
NAKASHIMA, Tohoru	Chief of Med Affairs Div.	Keen and efficient	1
KAWAGUCHI, Minoru	Chief of General Affairs Div.	Steady and reliable	2

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IWASAKI, Sugio	Chief of Vital Statistics Sec	Steady	3
MIMURA, Nagatoshi	Chief of Massage and Acupuncture Division	Lacks initiative	4

f. Chiefs of Division of Pharmaceutical Affairs Section

Name	Position	Remarks	Ranking
HONDA, Shigeo	Chief of Emergency Supplies Division	Competent	1
OGUSHI, Toshihisa	Chief of Distribution Division	Keen and progressive	2
MATSUO, Tarao	Chief of Narcotic Control Div	Competent	3
HAYASHIDA, Toshimi	Chief of Pharmaceutical Affairs Div.	Lacks initiative	4
NAKANO, Toyoyuki	Chief of General Affairs Div.	Lacks initiative and does not show zeal	5

g. Chiefs of Division of Preventive Medicine Section

FUKUDA, Chiyota (MD)	Director of Pref. Dejima Hosp.	Competent	1
TOKUNAGA, Toshio (MD)	Chief of Bact. Laboratory	Steady	2
SASAYAMA, Yasuyuki (MD)	Chief of Epidemic Diseases Control Division	Slow and lacks initiative	3
HIRAYAMA, Tsuneo	Chief of TB AND VD Control Div.	Slow and lacks initiative	4

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDS No.

h. Directors of Health Centers

Name	Position	Remarks	Ranking
TOYONAGA, Matao (MD)	Omura Health Center	Keen and efficient	1
YAMAGUCHI, Kamematsu (MD)	Isahaya Health Center	Keen.	2
SHIMA, Shigeichi (MD)	Izuhara Health Center	Efficient and reliable	3
UTSUNOMIYA, Shiro (MD)	Mushozu Health Center	Keen and steady	4
TASHIRO, Fumio (MD)	Fukue Health Center	Keen but uncooperative.	5
FUKUSHIMA, Tsuneki (MD)	Shimabara Health Center	Keen but uncooperative.	6
TANAKA, Yukio (MD)	Seto Health Center	Lacks initiative	7
MATSUNAGA, Toshio (MD)	Shisa Health Center	Does not show zeal	8
WADA, Masata (MD)	Obama Health Center	Keen but uncooperative	9
NAGASAKI, Yasunuki (MD)	Hirado Health Center	Newly assigned	10
SERA, Yasunori (MD)	Yoshii Health Center	Newly assigned	11

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i. Chief Clarks of Health Centers

Name	Position	Remarks	Ranking
BABA, Takayoshi	Seto Health Center	Keen and progressive	1
YASUDA, Keiichi	Yoshii Health Center	Keen	2
HEIMA, Sosuke	Isuhara Health Center	Steady	3
YANASE, Hisatada	Fukue Health Center	Steady and reliable	4
UCHINO, Kiyomitsu	Mushozu Health Center	Keen	5
WATANABE, Harumi	Omura Health Center	Newly assigned	6
AZUMA, Fumitaro	Isahaya Health Center	Slow	7
IGUCHI, Yasutaro	Shisa Health Center	Slow and lacks initiative	8
MATSUNAGA, Eito	Obama Health Center	Lacks initiative	9
YOKOYAMA, Tadaichi	Hirado Health Center	Lacks initiative	10
YAMAMOTO, Toshiari	Nagasaki Health Center	Slow and lacks initiative	11
RYU, Kiyoshi	Shimabara Health Center	Lacks initiative and unreliable	12.

j. Chief Nurses of Health Centers

Name	Position	Remarks	Ranking
KONDO, Miyoshi	Isahaya Health Center	Progressive and reliable	1
TAZAKI, Toshi	Omura Health Center	Competent	2

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OGASAWARA, Hideko	Shimabara Health Center	Keen	3
KAWASAKI, Hisae	Shisa Health Center	Keen	4
NOMICHI, Masa	Seto Health Center	Keen	5
SONODA, Masako	Obama Health Center	Keen	6
KOTO, Chitose	Izuhara Health Center	Steady	7
TSUKAMOTO, Chiyoko	Hirado Health Center	Steady	8
SAKAMOTO, Fujiko	Mushozu Health Center	Lacks initiative	9
YAMADA, Mitsu	Fukue Health Center	Lacks initiative	10
URATA, Asako	Yoshii Health Center	Lacks initiative	11

k. Doctors in-charge of Prefectural Clinics

Name	Position	Remarks	Ranking
NISHIDA, Shitoo	In-charge of Tameshi and Kawara Clinics	Competent	1
TWANAGA, Tatsuma	In-charge of Yukinoura Clinic	Newly assigned	2

FOR THE COMMANDING OFFICER:

Vernon C. Hill
VERNON C HILL
Capt CAC
Adjutant

DECLASSIFIED E.O. 12065 SECTION 3 NND/NARS

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JEB/tn

HEADQUARTERS
KAGOSHIMA MILITARY GOVERNMENT TEAM
KAGOSHIMA, KYUSHU, JAPAN

APO 970
29 March 1949

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SUBJECT: Tuberculosis Control - Bed Survey

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TO: Commanding Officer
Kyushu Military Government Region
APO 24-5
ATTN: Public Health Section

1. References:

a. Letter, Hq I Corps, AG 319.1-BA, subj: "Studies of Military Government Programs", dated 10 February 1949.

b. Letter, Hq I Corps, AG 710-BA, subj: "Tuberculosis Control", dated 17 February 1949.

c. Letter, Kyushu Military Government Region, subject as above, dated 7 March 1949.

2. In compliance with reference 1,c, above, the following information is herewith submitted:

a. Information for each hospital and sanatorium caring for tuberculosis patients:

(1) (a) Kagoshima Medical College Hospital.

(b) #68 Yamashita Cho, Kagoshima City.

(c) Type: Prefectural.

(d) Total Bed Capacity: 200 beds.

(e) Total Bed Occupancy: 130 beds.

(f) No. of sick bed for TB: 50 beds.
(possible to alter following increase of patients)

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29 March 1949

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SUBJECT: Tuberculosis Control - Bed Survey

(g) No. of TB bed occupancy: 48 beds.

(h) Total No. full time doctors: 25 doctors. (In addition, there are 34 persons including 12 professors, 8 assistant professors, 3 lecturers and 11 assistants who assist in the hospital although they are teachers for Medical University.)

(i) Total No. of full time doctors for TB: None.

(j) No. of nurses: 89 which also includes 31 student nurses.

(k) No. of full time nurses for TB: 5.

(l) Daily average No. of all out patient: 235-300.

(m) Daily average No. of TB out patients: 38.

(n) No reasons for discrepancy for (f) and (g) above.

(2) (a) The Kinko Sanatorium of Japan Red Cross.

(b) Address: No. 2543 Hirakawa-cho, Taniyama, Kagoshima Gun.

(c) Incorporated - private.

(d) Total bed capacity: 60 beds.

(e) Total bed occupancy: 45 beds.

(f) No. of TB bed capacity: 60 beds.

(g) No. of TB bed occupancy: 45 beds.

(h) Total No. of full time doctors: 2.

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SUBJECT: Tuberculosis Control - Bed Survey

(i) Total No. of full time doctors for TB: 2.

(j) Total No. of full time nurses: 10.

(k) Total No. of full time nurses for TB: 10.

(l) Daily average No. of all out patients: 6.

(m) Daily average No. of TB out-patients: 2.

(n) None.

(3) Total numbers of beds for institutions of under 50 beds are: 107 beds.

(4) Additional information in compliance to paragraph 4 of same letter:

(a) Total No. of available TB beds in prefecture is: 1,415 beds.

(b) Total number of hospitalized TB patients in prefecture is: 1,109.

(c) Estimated number of patients who are not under care who should be hospitalized is: 1,723 patients.

(d) Brief analysis for discrepancies for (a), (c) and (d) is that some national sanatoriums (Ibusuki) lack of beds, doctor and nurse so that applicants have to enter according to receipt number order.

As for Kajiki, Chosa and Akune Sanatoriums which formerly belonged to "Iryo Dan" are incapable of accommodating such patients applicable to the Daily Security Law because of lack of bedding.

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High cost of expense is another reason, according to a survey of 31 Dec 1948. The average accommodation expense for one month is approximately 7,400 yen including accommodation charges of 2800 yen, boarding charges (food) of 2600 yen, practical nurse (to take care of patient) 2000 yen. It is necessary to reduce the expense through the Daily Life Security Law and by improving the National Health Insurance system.

b. Recommendations for improving situation:

(1) Create sanatoriums in the following places:

(a) Osumi district (Kanoya) 500 beds are needed for at present there are no sanatoriums or good general hospitals in this area. It is recommended that immediate measures be taken to convert the former Air Corps Hospital into a General Hospital or sanatorium.

(b) Sendai district 400 beds.

(c) Nansatsu district (around Izaku-Kaseda cho) needs 200 beds.

(2) Immediate measures recommended for the present time are:

(a) For patients at home: Home visiting and guidance by Public Health nurses an and medical examinations for family members.

(b) Use more pneumothorax treatments for applicable patients.

(c) Minsei-iin and other Welfare Institutions are urged to become more active

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in helping people out financially and to get more nourishing food for the patients.

FOR THE COMMANDING OFFICER:

Robert V. Dexter

ROBERT V. DEXTER
1st Lt CAV
Adjutant

DECLASSIFIED E.O. 12065 SECTION 3 NLJ/RAC NO. _____

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HEADQUARTERS
SAGA MILITARY GOVERNMENT TEAM
Saga, Kyushu, Japan

WHE/km

APO 24 - 5
29 March 1949

SUBJECT: Report on TB Bed Survey

TO : Commanding Officer, Kyushu Military Government Region, APO 24-5
Attn: Public Health Officer

1. Reference: Letter, Kyushu Mil Govt Region, subj: "Tuberculosis Control - Bed Survey", dated 7 March 1949.

2. In compliance with above cited reference, the survey of beds for tuberculosis patients in this prefecture has been completed and the following report is herewith submitted.

A. National Hospitals.

(1) Saga National TB Sanitarium (Nakabaru-mura):

f. TB bed capacity - 600

g. TB bed occupancy (average) - 514

n. Reasons for discrepancy - inadequate staff.

(2) Ureshino National Hospital (Ureshino-machi):

f. TB bed capacity - 225

g. TB bed occupancy (average) - 244.6

n. Reasons for discrepancy - surgical TB cases such as TB caries, TB lymph-adenitis, and other cases requiring surgical treatment are hospitalized in the surgical section wards.

(3) Takeo Hakusuiso National TB Hospital (Takeo-machi):

f. TB bed capacity - 80

g. TB bed occupancy (average) - 43.9

n. Reasons for discrepancy - inadequate facilities at present. Wards used to house attendants.

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BASIC: Ltr Saga Mil Govt Team, subj: "Report on TB Bed Survey," dtd 29 Mar 49

(4) Saga National Hospital (Takagise-mura):

f. TB bed capacity - 48

g. TB bed occupancy (average) - 39

n. Reasons for discrepancy in f and g - none

B. Prefectural Hospitals.

(1) Saga Prefectural Hospital Koseikan:

a. Name of institution - Saga Prefectural Hospital Koseikan

b. Location of institution - No.265, Mizugaye-machi, Saga-shi

c. Type-Prefectural (managed as a private concern by a group of doctors)

d. Total bed capacity - 206

e. Total bed occupancy (average) - 140

f. TN bed capacity - 29

g. TB bed occupancy (average) - 23

h. Total number of full-time doctors - 21

i. Total number of full-time doctors for TB - 9

j. Total number of full-time nurses (including students) - 63

k. Total number of full-time nurses for TB - 11

l. Daily average number of all out-patients - 230

m. Daily average number of TB out-patients - 59

n. Reasons for discrepancy in f and g - none

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BASIC: Ltr Saga Mil Govt Team, subj: "Report on TB Bed Survey," dtd 29 Mar 49

C. Uranosaki Social Health Insurance Hospital:

a. Name of institution - Uranosaki Social Health Insurance Hospital

b. Location of institution - No.417, Tateiwa, Yamashiro-machi, Nishi-matsuura-gun

c. Type - Public

d. Total bed capacity - 101

e. Total bed occupancy (average) - 39

f. TB bed capacity - 8

g. TB bed occupancy (average) - 8

h. Total number of full-time doctors - 7

i. Total number of full-time doctors for TB - 2

j. Total number of full-time nurses - 22

k. Total number of full-time nurses for TB - 3

l. Daily average number of all out-patients - 112

m. Daily average number of TB out-patients - 20

n. Reasons for discrepancy in f and g - none

D. Private Hospitals:

a. Name of institution - Yoshida Hospital

b. Location of institution - No.259, Oaza-Moroura, Higashimatsuura-gun

c. Type - Private (General with separate TB Sanitarium)

d. Total bed capacity - 65

e. Total bed occupancy (average) - 24

f. TB bed capacity - 33

g. TB bed occupancy (average) - 15

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BASIC: Ltr Saga Mil Govt Team, subj: "Report on TB Bed Survey," dtd 29 Mar 49

h. Total number of full-time doctors - 2

i. Total number of full-time doctors for TB - 1

j. Total number of full-time nurses - 5

k. Total number of full-time nurses for TB - 2

l. Daily average number of all out-patients - 45

m. Daily average number of TB out-patients - 5

n. Reasons for discrepancy in f and g - inconveniency of transportation and food shortage

E. Hospitals under 50 beds capacity:

a. Total number of hospitals treat TB cases - 20

b. Total bed capacity - 412

c. Total bed occupancy (average) - 204

d. TB bed capacity - 142

e. TB bed occupancy (average) - 70.9

F. Additional information:

a. Total available TB beds - 1,165

b. Total hospitalized TB patients - 944

c. Estimated No. of TB patients in need of hospitalization - 956

FOR THE COMMANDING OFFICER:

La Vern F. Spurgeon

LA VERN F. SPURGEON
1st Lt., QMC
Adjutant

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HEADQUARTERS
MIYAZAKI MILITARY GOVERNMENT TEAM
APO 24, UNIT 2

BDD/sw

700

28 March 1949
PH/TB/1/49

SUBJECT: Tuberculosis Control - Bed Survey

TO : Commanding Officer, Headquarters Kyushu Mil Govt Region
APO 24 Unit 5
Attn: Public Health Officer

1. Reference: Letter KSMG, subj: "Tuberculosis Control - Bed Survey," dated 7 March 1949.

2. In compliance with reference letter the following information is submitted.

3. Hospitals and Sanitoria Caring for TB patients.

a. Miyakonojo National Hospital:

(1)	TB Bed capacity	80
(2)	TB Bed Occupancy	80

b. Miyazaki National Sanitorium (Kawaminami)

(1)	TB Bed capacity	480
(2)	TB Bed occupancy	169
(3)	Lack of personnel forced the hospital to discontimue the use of 250 beds. The hospital is isolated, lonely and difficult to get to, making it difficult to retain an adequate staff.	

c. Miyazaki Prefectural Hospital:

(1)	Miyazaki City	
(2)	Prefectural	
(3)	Physical capacity	231 beds
(4)	Average bed occupancy	98
(5)	TB bed capacity	40
(6)	TB bed occupancy	25
(7)	Full time doctors	13
(8)	Full time doctors for TB	2
(9)	Full time nurses	48

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(10)	Full time nurses for TB	8
(11)	Daily average of all out patients	223
(12)	Daily average of TB out patients	2
(13)	Patients refuse admission to hospital because families are not allowed to accompany them.	

d. Asahi-Kasei Benburg Hospital:

(1)	Nobeoka City
(2)	Private
(3)	70 Beds
(4)	46 beds occupied
(5)	25 beds
(6)	24 patients
(7)	7 doctors
(8)	2 full time TB doctors
(9)	40 nurses
(10)	6 TB nurses
(11)	215 daily out patients
(12)	2 TB out patients
(13)	No discrepancy in 5 and 6 above.

e. Total figures for hospitals with less than fifty beds:

(1)	Total bed capacity	205
(2)	Average bed occupancy	99
(3)	TB bed capacity	82
(4)	TB bed occupancy	80
(5)	Full time doctors	13
(6)	Full time doctors for TB	5
(7)	Full time nurses	40
(8)	Full time TB nurses	14
(9)	Daily average out patients	200
(10)	Daily average TB out patients	2
(11)	No discrepancy in TB patients and available beds.	

f. Additional information:

(1)	Total number of available TB beds in prefecture	707
(2)	Total hospitalized TB patients	378
(3)	Estimated number of TB patients not under care who should be hospitalized	250

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BASIC: Ltr, Miyazaki Mil Govt Team, APO 24 Unit 2, dtd 28 March 1949.
subj: Tuberculosis Control - Bed Survey, contd.

4. The discrepency noted in 1 and 2 above is due largely to the fact that the Kawaminimi National Hospital has discontinued the use of 250 available beds because of a severe physician and nurse personnel shortage. Patients are refusing to go to hospitals where their families are not permitted to live on the wards . A recent survey of the availability of supplementary rations for tuberculosis patients showed that these patients were receiving proper feedings.

5. Sufficient beds for tuberculosis patients are immediately available without resorting to new construction if a proper staff can be maintained at The Miyazaki National Sanitorium (Kawaminami). The prefecture hospital at Miyazaki City can readily increase the TB bed capacity using existing facilities and personnel.

FOR THE COMMANDING OFFICER:

Robert B Gunn

ROBERT B GUNN
1st Lt Inf
Adjutant

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OITA MILITARY GOVERNMENT TEAM
APO 24 UNIT 2

EVO/rs

28 March 1949

700

SUBJECT: Tuberculosis Control - Bed Survey

TO: Commanding Officer, Kyushu Mil Govt Region, APO 24 Unit 5
Attn: Public Health Section

1. In compliance with letter, your headquarters, subject as above, dated 7 March 1949, the following report is submitted:

a. TB Bed Survey of National Hospitals as follows:

(1) Nihoso National Sanitorium
Location -- #1000, Yokota, Ozai-mura, Kitaamabe-gun.
TB bed capacity -- 100
TB bed occupancy -- 90
Reason for discrepancy of these figures -- None.

(2) Beppu-so National Sanitorium
Location -- #3101, Oaza Hamawaki, Beppu City.
TB bed capacity -- 100
TB bed occupancy -- 72
Reason for discrepancy of these figures -- because certain facilities, namely beds, are being repaired.

(3) Hikarino-sono National Sanitorium
Location -- #4218, Tsurumi, Beppu City.
TB bed capacity -- 50
TB bed occupancy -- 47
Reason for discrepancy in figures -- None.

(4) Beppu National Hospital
Location -- #4548 Tsurumi, Beppu City.
TB bed capacity -- 100
TB bed occupancy -- 70
Reason for discrepancy in figures -- Beds are available but applications are not made.

(5) Oita National Hospital
Location -- #587, Danoharu, Oita City.
TB bed capacity -- 40
TB bed occupancy -- 0

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Reason for discrepancy in figures -- The beds were recently set aside for TB occupancy and will be opened for occupancy in April.

(6) Kamegawa National Hospital

(a) Main hospital
Location -- #1473, Uchikamado, Beppu City.
TB bed capacity -- 33
TB bed occupancy -- 33

(b) Branch hospital (seaside branch)
Location -- #501, Shoningahama, Beppu City.
TB bed capacity -- 66
TB bed occupancy -- 66

Reasons for discrepancies in figures -- None.

b. TB Bed Survey in Hospitals other than National Hospitals as follows:

(1) Kyoritsu Hospital (Public)
Location -- #1674, Kibaru, Ozai-mura, Kitaamabe-gun.
Type -- Public
Total bed capacity -- 53
Total bed occupancy -- 15
TB bed capacity -- 10*
TB bed occupancy -- 2*
*Reason for discrepancy in figures -- There is no full-time doctors for TB in this hospital at present and the patients are sent to the Nihoso Hospital for treatment.
Total number of full-time doctors -- 3
Total number of full-time doctors for TB -- Vacant
Total number of full-time nurses (including students) -- 9
Total number of full-time nurses for TB -- 3
Daily average number of all out-patients -- 40
Daily average number of TB out-patients -- 5

(2) Oita Prefectural Hospital
Location -- No. 2050, Nishijin-machi, Oita City.
Type -- Prefectural
Total bed capacity -- 165

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Total bed occupancy -- 120
TB bed capacity -- 33
TB bed occupancy -- 33
Total number of full-time doctors -- 15
Total number of full-time doctors for TB -- 3
Total number of full-time nurse (including students) -- 86
Total number of full-time nurses for TB -- 7
Daily average number of all out-patients -- 180
Daily average number of TB out-patients -- 15

(3) Kyosai Hospital (Public)
Location -- #1333, Shinkawa, Oita City.
Type -- Public
Total bed capacity -- 126
Total bed occupancy -- 27
TB bed capacity -- 18
TB bed occupancy -- 17
Reason for discrepancy in figures -- None.
Total number of full-time doctors -- 9
Total number of full-time doctors for TB -- 1
Total number of full-time nurses (including students) -- 29
Total number of full-time nurses for TB -- 2
Daily average number of all out-patients -- 145
Daily average number of TB out-patients -- 13

(4) Teachers' Sanatorium
Location -- #4224, Tsurumi, Beppu City.
Type -- Prefectural
Total bed capacity -- 50
Total bed occupancy -- 25
TB bed capacity -- 50*
TB bed occupancy -- 25*
*Reasons for discrepancy in figures -- Because applications are restricted as from teachers only and even though the beds are available applications for same are not made.
Total number of full-time doctors -- 1
Total number of full-time doctors for TB -- 1
Total number of full-time nurses (including students) -- 4
Total number of full-time nurses for TB -- 4
Daily average number of all out-patients -- 2
Daily average number of TB out-patients -- 2

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(5) Oita Ken Farmers' Sanitorium
Location -- #4333, Tsurumi, Beppu City.
Type -- Public
Total bed capacity -- 144
Total bed occupancy -- 80
TB bed capacity -- 144*
TB bed occupancy -- 80*
*Reasons for discrepancy in figures -- Beds are available but applications are not made.
Total number of full-time doctors -- 2
Total number of full-time doctors for TB -- 1
Total number of full-time nurses (including students) -- 13
Total number of full-time nurses for TB -- 13
Daily average number of all out-patients -- 5
Daily average number of TB out-patients -- 5

c. Total TB bed capacity in hospitals of less than 50 bed capacity -- 130. Total TB beds occupied -- 80.

d. (1) Total TB bed capacity in prefecture as of 28 February 1949 -- 755.

(2) Total TB beds occupied in prefecture as of 28 February 1949 -- 591.

(3) Estimated number of patients not under any care who should be hospitalized -- 2,500.

(4) Brief analysis of reasons of discrepancies in (1), (2) and (3) above:

(a) Most of the patients are of the low income class and are financially unable to bear the medical expense and/or maintain the family income.

(b) Most of the TB beds are concentrated in about 1/3 of the prefecture and the distance to the hospital is a deterring factor for those in the outlying areas.

(c) The prefecture has difficulty in raising funds to pay for 2/3 of the TB medical care. (Welfare Ministry paying for the remaining 1/3).

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(d) Difficulty in utilizing cereals as staple food whereas more rice could be used to better advantage.

e. (1) Recommendations for improving the local situation:

(a) Increase the flexibility of the Daily Life Security Law so that persons other than those most destitute can receive medical benefits.

(b) Increase rice quota for TB patients.

(c) Provide more accessible TB beds in the outlying areas.

(d) To make available for all TB hospitals, not only national and prefectural sanitoriums, the commodities distributed through LARA.

(2) Recommendations for TB bed expansion on basis of feasibility of construction and other facility expenditures:

(a) Expansion of TB bed capacities as follows:
1 Nihoso National Sanitorium -- from 100 to 120 bed capacity.
2 Beppu-so National Sanitorium -- from 100 to 120 bed capacity.
3 Kamegawa National Hospital -- Expansion would be possible but definite figures are not yet determined.

FOR THE COMMANDING OFFICER:

Luther G Jones Jr.

LUTHER G. JONES, JR.
Captain, TC
Adjutant

DECLASSIFIED E.O. 12065 SECTION 3-402/NMDG NO. 1

HEADQUARTERS
SAGA MILITARY GOVERNMENT TEAM
Saga, Kyushu, Japan

WHE/et

APO 24-5
25 March 1949

SUBJECT: Report on Diphtheria Epidemic in Ureshino

TO : Commanding Officer, Kyushu Military Government Region, APO 24-5
Attn: Public Health Officer

1. The recent diphtheria epidemic in the Ureshino area has subsided.

2. The last case occured March 15.

3. Total cases 46.

4. 18 carriers were found after culture examination of 745 suspects. These are under observation and treatment.

FOR THE COMMANDING OFFICER:

LaVern F. Spurgeon
LA VERN F. SPURGEON
1st Lt., QMC
Adjutant

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DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO: [redacted]

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HEADQUARTERS
KUMAMOTO MILITARY GOVERNMENT TEAM
KUMAMOTO, KYUSHU, JAPAN

APO 24 Unit 1
24 March 1949

SUBJECT: Tuberculosis Control--Bed Survey

TO : Commanding Officer, Kyushu Military Government Region,
Headquarters and Headquarters Detachment, APO 24 Unit 5
ATTN: Public Health Officer

1. In compliance with letter your headquarters of 7 March 1949, the following report is herewith submitted.

FOR THE COMMANDING OFFICER:

John C Barronton

JOHN C. BARRONTON
1st Lt Inf
Adjutant

1 Incl:
In dup.

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DECLASSIFIED E.O. 12065 SECTION 3-402/NMDG NO: 1 1 0 0 1 0

TUBERCULOSIS CONTROL --BED SURVEY

L. a. Name of institution: **Saishunso National Tuberculosis Sanatorium**

b. Location of institution (city, town and gun): **Suya, Nishigoshi Mura, Kikuchi Gun, Kumamoto Ken.**

c. Type (Prefectural, private, etc): **National**

d. Total bed capacity (actual physical capacity): **600**

e. Total bed occupancy (average): **512**

f. TB bed capacity: **600**

g. TB bed occupancy (average): **512**

h. Total number of full-time doctors: **14**

i. Total number of full-time doctors for TB: **14**

j. Total number of full-time nurses (including students): **161**

k. Total number of full-time nurses for TB: **161**

l. Daily average number of all out patients: **40**

m. Daily average number of TB out patients: **15**

n. Reasons for any large discrepancy in f and g above: **None**

DECLASSIFIED E.O. 12065 SECTION 3=402/NNDG NO. 77-0041

TUBERCULOSIS CONTROL --BED SURVEY

I. a. Name of institution: Ohmuta-Arao City General Hospital

b. Location of institution (city, town and gun): #2600, Motomura Machi, Arao City, Kumamoto Ken

c. Type (Prefectural, private, etc): City

d. Total bed capacity (actual physical capacity): 135

e. Total bed occupancy (average): 10

f. TB bed capacity: 30

g. TB bed occupancy (average): 2

h. Total number of full-time doctors: 3

i. Total number of full-time doctors for TB: Not assigned

j. Total number of full-time nurses (including students): 10

k. Total number of full-time nurses for TB: Not assigned

l. Daily average number of all out patients: 60

m. Daily average number of TB out patients: 2

n. Reasons for any large discrepancy in f and g above:
Inadequate transportation.

DECLASSIFIED E.O. 12065 SECTION 3=402/NMDG NO: 1/2001/19

TUBERCULOSIS CONTROL --BED SURVEY

I. a. Name of institution: Kumamoto General Municipal Hospital (Minsei)

b. Location of institution (city, town and gun): #900, Ken Gun Machi, Kumamoto City

c. Type (Prefectural, private, etc): Municipal

d. Total bed capacity (actual physical capacity): 65

e. Total bed occupancy (average): 62

f. TB bed capacity: 12

g. TB bed occupancy (average): 10

h. Total number of full-time doctors: 9

i. Total number of full-time doctors for TB: Not assigned

j. Total number of full-time nurses (including students): 25

k. Total number of full-time nurses for TB: 10

l. Daily average number of all out patients: 223

m. Daily average number of TB out patients: 30

n. Reasons for any large discrepancy in f and g above; None

DECLASSIFIED E.O. 12065 SECTION 3-402/NMDG NO. 1709

TUBERCULOSIS CONTROL --BED SURVEY

I. a. Name of institution: Hitoyoshi General Hospital

b. Location of institution (city, town and gun): #35, Oigami Machi, Hitoyoshi City

c. Type (Prefectural, private, etc): Health Insurance Association

d. Total bed capacity (actual physical capacity): 61

e. Total bed occupancy (average): 30

f. TB bed capacity: 7

g. TB bed occupancy (average): 7

h. Total number of full-time doctors: 7

i. Total number of full-time doctors for TB: Not assigned

j. Total number of full-time nurses (including students): 18

k. Total number of full-time nurses for TB: Not assigned

l. Daily average number of all out patients: 118

m. Daily average number of TB out patients: 20

n. Reasons for any large discrepancy in f and g above; None

DECLASSIFIED E.O. 12065 SECTION 3-402/NMDC NO. 17-0041-6

TUBERCULOSIS CONTROL --BED SURVEY

I. a. Name of institution: **Amakusa General Hospital**

b. Location of institution (city, town and gun): **Hondo Machi, Amakusa Gun, Kumamoto Ken**

c. Type (Prefectural, private, etc): **Health Insurance Association**

d. Total bed capacity (actual physical capacity): **70**

e. Total bed occupancy (average): **13**

f. TB bed capacity: **1**

g. TB bed occupancy (average): **1**

h. Total number of full-time doctors: **4**

i. Total number of full-time doctors for TB: **None**

j. Total number of full-time nurses (including students): **8**

k. Total number of full-time nurses for TB: **None**

l. Daily average number of all out patients: **72**

m. Daily average number of TB out patients: **6**

n. Reasons for any large discrepancy in f and g above: **Number of out patients as well as in patients have decreased tremendously due to the rumor that few patients had received poor treatment recently.**

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 170015

TUBERCULOSIS CONTROL --BED SURVEY

I. a. Name of institution: Yatsushiro General Hospital

b. Location of institution (city, town and gun): Higashi Matsuejo-Machi Yatsushiro City, Kumamoto Ken

c. Type (Prefectural, private, etc): Public Health Insurance Association

d. Total bed capacity (actual physical capacity): 70

e. Total bed occupancy (average): 33

f. TB bed capacity: 7

g. TB bed occupancy (average): 7

h. Total number of full-time doctors: 12

i. Total number of full-time doctors for TB: 1

j. Total number of full-time nurses (including students): 27

k. Total number of full-time nurses for TB: 2

l. Daily average number of all out patients: 300

m. Daily average number of TB out patients: 20

n. Reasons for any large discrepancy in f and g above; None

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDC NO. 170-19

TUBERCULOSIS CONTROL --BED SURVEY

I. a. Name of institution: **Prefectural Teachers Tuberculosis Sanatorium**

b. Location of institution (city, town and gun): **Hinagu Machi, Ashikita Gun, Kumamoto Ken**

c. Type (Prefectural, private, etc): **Prefectural**

d. Total bed capacity (actual physical capacity): **40**

e. Total bed occupancy (average): **40**

f. TB bed capacity: **40**

g. TB bed occupancy (average): **80**

h. Total number of full-time doctors: **2**

i. Total number of full-time doctors for TB: **2**

j. Total number of full-time nurses (including students): **2**

k. Total number of full-time nurses for TB: **2**

l. Daily average number of all out patients: **2**

m. Daily average number of TB out patients: **2**

n. Reasons for any large discrepancy in f and g above; **This Sanatorium is only for teachers of this prefecture.**