

ITEM NUMBER ON HAND IN PROPER WORKING ORDER RECEIVED

Wire Spring Rat Traps		
Cage Type Rat Traps		
DDT Dusters		
"Flit Gun" DDT Sprayers		
Knap-Sack Type DDT Sprayers		
Semi-automatic Type DDT Sprayers		
Shovels		
Hoes		
Hand-drawn Carts		
Horse-Drawn Carts		
Wagons		
Motor Trucks		
Baskets		
City-Owned Garbage Cans		
City-Owned Trash Cans		

5. Water Supply

Is there any type of central water supply for the city _____? What percent of the town does it supply _____%. What is the source of the water _____? Is there a reservoir _____? Is the water supply chlorinated _____? What is the residual in PPM maintained at the reservoir _____ and at extremities _____? What type of chemical is used _____? How often is the water tested for chlorine content _____? What percent of the city derives its water from private wells _____? What percent of these are treated _____ and how often _____? How many cases of dysentery _____, diarrhea _____, typhoid or paratyphoid _____ other water-borne diseases _____ were reported during this month? Other remarks _____

6. Garbage, Rubbish and Sewage Disposal

How much garbage was collected during this month? _____ (tons). _____ (tons) were used as fertilizer and _____ (tons) were burned or buried in a city dump. No. of hours spent in collecting garbage was _____. Garbage was collected throughout the city every _____ days. Garbage was stored by household mainly in _____ between collections. _____ (tons) of rubbish were collected this month. _____ meters of ditches were cleaned. What % _____ of rubbish and what _____ % of garbage, was collected by volunteers. There is _____, is not _____ a central sewage system. This system serves _____ % of the city. It drains into _____

This is within _____ (meters) of _____ sources of water.
_____ (tons) (as an approximate estimate) of nightsoil were
collected in the city during the month.

Y _____ was spent on garbage collection during the month,
_____ % came from city sources, _____ % from prefectural sour-
ces, and _____ % came from _____.

Y _____ was spent on rubbish disposal, and _____ % came
from city sources and _____ % from prefectural sources and
_____ % from _____.
_____ % of the city toilets (benjos) are open and _____ %
drain into septic tanks and _____ % open into a central sew-
age system.

7. INSECT & RODENT CONTROL

_____ % of the rat traps used are owned by private in-
dividuals and _____ % are owned by city authorities.
_____ rats were trapped and _____ rats were poisoned during the
past month. These were disposed of by _____.
Y _____ was given to persons for bringing in rat tails during
this past month. _____ rats were killed by the city exterminator.
There are _____ rat exterminators on a full-time basis and _____
working on a part-time basis.
_____ rats were caught for each 100 traps left out for three days.
_____ traps are ~~checked~~ by the city exterminator. The traps are
checked every _____ days. The estimate rat population of the city
is _____. The last city-wide rat-extermination program
was held _____ and _____ rats were killed. _____ per-
sons are permanently employed in rodent control.

_____ ponds or other bodies of water covering more than
100 square meters were drained or treated with a larvacide dur-
ing this month. _____ potential mosquito breeding places
were destroyed. _____ pounds of DDT were used as a lar-
vacide during the month.

Here, list all places DDT'd during past month using title and
follow with the numbers of the establishment and the date and
cost charged to the owner, if any.

Sanitation Check Sheet for Hospitals & Clinics

Name of Inspector _____ Date of Inspection _____

Name & Address of Hospital or Clinic _____

Type of Patient Treated (General, Surgical, Contagious, Ob. & Gyn., ENT, Orthopedic, Pediatrics, Tuberculosis, Emergency Surgery) (Underline)

General Appearance and Sanitation

Is institution and surroundings clean and attractive? _____. Are windows intact and screened? _____. Are doors screened? _____. Are offices and halls clean, free from rubbish, stored materials and other unnecessary items? _____. Are there signs showing name of hospital? _____. Is the waiting room adequate in size and clean and neat? _____. Is the ventilation generally good and the halls and offices free from odors? _____. Are there any posters visible pertaining to public health problems, etc.? _____.

Examining Rooms

Are the floors clean? _____. Are examining tables neat and sanitary? _____. Are instruments neatly stored away and generally clean? _____. Is there adequate light for examinations? _____. Are there provisions for privacy? _____. Are the windows screened? _____. Can the windows be opened to admit air? _____. Are there any bad odors present? _____. Are walls and ceilings free from cobwebs? _____. Are infectious materials properly disposed of? _____. Is there adequate amounts of pure water? _____. Are adequate materials present for the disinfection of instruments? _____. Are elementary precautions being taken to avoid the spread of disease? _____. When were these rooms last DDT'd? _____.

Operating Rooms

Are floors clean and of impervious material? _____. Are there floor drains present and operating? _____. Is the room dusty? _____. Is the lighting adequate? _____. Are ceilings and walls clean? _____. Are windows screened? _____. Is the disposal of tissue, bandages, infected material adequate? _____. Are instruments clean? _____. Are sterile supplies protected? _____.

Treatment Rooms

Are the floors clean? _____. Are ceilings and walls clean and smooth? _____. Are instruments clean? _____. Are syringes and needles in antiseptic fluid or sterile trays? _____. Are tables, beds and cots clean and neat? _____. Are provisions made for privacy? _____.

Laboratories

Are bottles, apparatus, equipment neat and clean? _____. Is urine, sputum, stool specimens, blood specimens disposed of in a sanitary fashion? _____. Are floors, ceilings, walls clean? _____. Is the light adequate for the work that is performed? _____. Is the water supply adequate? _____.

X-Ray Rooms

Are these clean and well lighted? _____. Is the equipment clean and dusted? _____. Are the windows screened? _____. Is a towel or paper device present over the film holder of the chest plate machine? _____. Are precautions taken when X-raying contagious cases? _____. Is the darkroom clean and sanitary? _____. Are floors and tables littered and disorderly? _____.

Wards

Are the halls clean and well lighted? _____. Are all windows screened? _____. Do the windows have storm window attachments for bad weather? _____. Are the rooms free of cobwebs and dirt on the ceilings? _____. Are the rooms clean and free of dust? _____. Are the mats clean? _____. Is there any cooking being done in the rooms? _____. Is there any food visible in the rooms? _____. Have these areas been recently DDT'd? _____. How recently? _____. Do patients have masks on in the TBC wards? _____. Are contagious patients isolated? _____. Are visitors permitted except during definite hours? _____. Are sputum cups easily cleaned and are they definitely sterilized? _____. Is there a sanitary method of disposal of infected material? _____. Are the sexes carefully segregated? _____. How often do the patients bathe? _____. Is a central bath used? _____. Is the water in this bath disinfected in any way? _____.

Toilets, Sewage & Waste Disposal

Do the toilets open into a public sewer or septic tank? _____. Are they clean and free from odors? _____. Are windows screened? _____. Is there adequate artificial or natural light? _____. Are they regularly and properly DDT'd? _____. Are they located near a source of water? _____. Are the bases tight to prevent rats and flies from entering? _____. Are hand washing signs present? _____. Is any kind of antiseptic used in them with regularity? _____. What kind and how often? _____. Is there adequate ventilation? _____. Are there separate sections for men and woman? _____. Is infected material, urine, sputum, bandages, stool specimens autoclaved, boiled or disinfected? _____. What is the source of water? _____. Is the water ever checked for contamination? _____. Is it close to any type of sewage or waste disposal so that there may be contamination? _____. Is it chlorinated? _____. Are there frequent cases of dysentery or diarrhea in the hospital? _____.

Kitchen & Food Storage

Is kitchen clean and sanitary? _____. Are utensils clean and hung up or put away in a clean place? _____. Are windows screened? _____. Is this area frequently DDT'd? _____. Is food covered? _____. Is there a safe, rat-proof place for food storage? _____. Is there adequate refrigeration? _____. Do kitchen attendants wear clean clothes, short hair and are they neat? _____. Do these and other employees of the hospital have periodic physicals? _____.

Additional Remarks: _____

Recommendations: _____