New Zealand.



ANALYSIS.

Title. 1. Short Title. 2. Interpretation. 8. Repeals. 4. Infectious diseases to be reported to Local Boards. Schedule.

1893, No. 20.

An Act to further amend "The Public Health Act, 1876." Title. [19th September, 1893.

BE IT ENACTED by the General Assembly of New Zealand in Parliament assembled, and by the authority of the same, as follows:----

1. The Short Title of this Act is "The Public Health Act 1876 Short Title. Amendment Act, 1893."

2. "The Public Health Act, 1876," is hereinafter referred to as Interpretation. "the principal Act."

3. The proviso to section number fourteen of the principal Act, Repeals. constituting the Christchurch Drainage Board a Local Board of Health: section number four of "The Public Health Act 1876 Amendment Act, 1877 "; "The Public Health Act 1876 Amendment Act, 1880"; and section number two of "The Public Health Act 1876 Amendment Act, 1881," are hereby repealed.

4. Every Local Board constituted by the principal Act shall pro- Infectious diseases vide, and supply gratis on demand to any medical practitioner, forms to be reported to Local Boards. printed in accordance with the Schedule to this Act.

It shall be the duty of the medical practitioner in attendance upon any person sick of small-pox, cholera, scarlet fever, measles, typhoid fever, diphtheria, or other infectious disease dangerous to the people, to immediately give notice thereof to the Local Board of the district in which such sick person resides. Such notice shall be in the form in the said Schedule, or to the effect thereof, and may be given by delivering or posting the same to the office of such Board. All such notices shall be transmitted through the post free of postage.

Every medical practitioner who refuses or neglects to give such notice, or to state to the householder where such sick person resides as early as possible the infectious nature of such disease, shall be liable for each offence to a penalty not exceeding ten pounds.

Schedule.

SCHEDULE. To the Local Board of Health for the District of [Insert the name of the district]. I HEREBY report a case of infectious disease, as follows :----Name of householder : Name of patient : Age : Address : Date :

Signature of medical attendant:

WELLINGTON : Printed under authority of the New Zealand Government, by SAMUEL COSTALL, Government Printer.-1893.