oranges grown in Arizona and designated part of California.

Order, as amended. The provisions in paragraph (b) (1) (i) of § 914.94 (Navel Orange Regulation 94, 21 F. R. 9400, 9740) are hereby amended to read as follows:

(i) District 1: 1,247,400 cartons.

(Sec. 5, 49 Stat. 753, as amended; 7 U. S. C. 608c)

Dated: December 7, 1956.

[SEAL] FLOYD F. HEDLUND,
Acting Director, Fruit and Vegetable Division, Agricultural Marketing Service.

[F. R. Doc. 56-10165; Filed, Dec. 11, 1956; 8:52 a. m.]

Chapter XI—Agricultural Conservation Program Service, Department of Agriculture

[ACP-1956, Supp. 9]

PART 1101—NATIONAL AGRICULTURAL CONSERVATION

SUBPART—1956

TIME AND MANNER OF FILING APPLICATION AND REQUIRED INFORMATION

Pursuant to the authority vested in the Secretary of Agriculture under sections 7-17 of the Soil Conservation and Domestic Allotment Act, as amended, and the Department of Agriculture and Farm Credit Administration Appropriation Act, 1956, the 1956 National Agricultural Conservation Program, approved June 14, 1955 (20 F. R. 4281), as amended July 22, 1955 (20 F. R. 5341), August 30, 1955 (20 F. R. 6511), November 10, 1955 (20 F. R. 8491), April 9, 1956 (21 F. R. 2372), April 20, 1956 (21 F. R. 2651), June 29, 1956 (21 F. R. 4999), July 23, 1956 (21 F. R. 5638), and November 19, 1956 (21 F. R. 9102), is further amended as follows:

Section 1101.733 is amended by adding a paragraph (c) as follows:

(c) The final date for filing an application for payment is December 31, 1956, in Rhode Island; January 13, 1957, in Illinois; January 31, 1957, in Indiana and Iowa; March 1, 1957, in Vermont; March 15, 1957, in Arizona; March 31, 1957, in New Jersey; April 30, 1957, in New Hampshire; May 1, 1957, in Nevada; May 15, 1957, in Florida; June 15, 1957, in Minnesota and Pennsylvania; June 30, 1957, in Alabama, Arkansas, California, Colorado, Connecticut, Delaware, Kansas, Louisiana, Maine, Montana, New Mexico, South Carolina, Utah, Virginia, and Wyoming; August 1, 1957, in Maryland; December 31, 1957, in Georgia, Idaho, Kentucky, Massachusetts, Michigan, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Washington, West Virginia, and Wisconsin. In those States for which the final date for filing an application for payment is earlier than December 31, 1957, the State committee may extend the final date to a date not later than December 31, 1957, when failure to file the application was due to conditions over which the farmer had no control.

(Sec. 4, 49 Stat. 164; 16 U. S. C. 590d. Interprets or applies secs. 7-17, 49 Stat. 1148, as amended, 69 Stat. 55; 16 U. S. C. 590g-590q)

Done at Washington, D. C., this 7th day of December 1956.

[SEAL] E. L. PETERSON,
Assistant Secretary.

[F. R. Doc. 56-10161; Filed, Dec. 11, 1956; 8:51 a. m.]

[ACP-1956-P. R., Supp. 2]

PART 1102—AGRICULTURAL CONSERVATION; PUERTO RICO

SUBPART—1956

ALLOCATION OF FUNDS

Pursuant to the authority vested in the Secretary of Agriculture under sections 7-17 of the Soil Conservation and Domestic Allotment Act, as amended, and the Department of Agriculture and Farm Credit Administration Appropriation Act, 1956, the 1956 Agricultural Conservation Program for Puerto Rico, approved January 11, 1956 (21 F. R. 289), as amended March 14, 1956 (21 F. R. 1718), is further amended as follows:

Section 1102.602 is amended by deleting "$839,000.00" in the first sentence and substituting therefor "$868,000."

(Sec. 4, 49 Stat. 164; 16 U. S. C. 590d. Interprets or applies secs. 7-17, 49 Stat. 1148, as amended, 69 Stat. 55; 16 U. S. C. 590g-590q)

Done at Washington, D. C., this 7th day of December 1956.

[SEAL] E. L. PETERSON,
Assistant Secretary.

[F. R. Doc. 56-10164; Filed, Dec. 11, 1956; 8:52 a. m.]

[ACP-1956-Alaska, Supp. 4]

PART 1104—AGRICULTURAL CONSERVATION; ALASKA

SUBPART—1956

COUNTY FUNDS

Pursuant to the authority vested in the Secretary of Agriculture under sections 7-17 of the Soil Conservation and Domestic Allotment Act, as amended, and the Department of Agriculture and Farm Credit Administration Appropriation Act, 1956, the 1956 Agricultural Conservation Program for Alaska, approved August 2, 1955 (20 F. R. 5629), as amended November 21, 1955 (20 F. R. 8667), February 21, 1956 (21 F. R. 1262), and April 5, 1956 (21 F. R. 2299), is further amended as follows:

Section 1104.502 is amended by deleting "$27,000" in the second sentence and substituting therefor "$29,000."

(Sec. 4, 49 Stat. 164; 16 U. S. C. 590d. Interprets or applies secs. 7-17, 49 Stat. 1148, as amended, 69 Stat. 55; 16 U. S. C. 590g-590q)

Done at Washington, D. C., this 7th day of December 1956.

[SEAL] E. L. PETERSON,
Assistant Secretary.

[F. R. Doc. 56-10162; Filed, Dec. 11, 1956; 8:51 a. m.]

[ACP-1956-Hawaii, Supp. 2]

PART 1105—AGRICULTURAL CONSERVATION; HAWAII

SUBPART—1956

ALLOCATION OF FUNDS

Pursuant to the authority vested in the Secretary of Agriculture under sections 7-17 of the Soil Conservation and Domestic Allotment Act, as amended, and the Department of Agriculture and Farm Credit Administration Appropriation Act, 1956, the 1956 Agricultural Conservation Program for Hawaii, approved July 22, 1955 (20 F. R. 5341), as amended February 21, 1956 (21 F. R. 1262), is further amended as follows:

Section 1105.503 is amended by deleting "$185,000" in the first sentence and substituting therefor "$191,000."

(Sec. 4, 49 Stat. 164; 16 U. S. C. 590d. Interprets or applies secs. 7-17, 49 Stat. 1148, as amended, 69 Stat. 55; 16 U. S. C. 590g-590q)

Done at Washington, D. C., this 7th day of December 1956.

[SEAL] E. L. PETERSON,
Assistant Secretary.

[F. R. Doc. 56-10163; Filed, Dec. 11, 1956; 8:52 a. m.]

TITLE 6—AGRICULTURAL CREDIT

Chapter III—Farmers Home Administration, Department of Agriculture

Subchapter B—Farm Ownership Loans

[FHA Instruction 422.1]

PART 322—APPRAISAL OF FARMS

APPRAISAL REPORTS IN CONNECTION WITH FARM HOUSING LOANS

Section 322.1 (a), Title 6, Code of Federal Regulations (21 F. R. 6207), is revised to include a provision with respect to obtaining appraisal reports in connection with Farm Housing Loans, and to read as follows:

§ 322.1 *General*—(a) *Appraisals required.* An appraisal report will be required in connection with each initial Farm Ownership and Farm Housing loan, and in connection with each Soil and Water Conservation loan in excess of $5,000 to be secured by a lien on the farm to be improved. An appraisal report also will be prepared when required by Farmers Home Administration regulations or when requested by the County Committee, County Supervisor, or State Director in connection with making subsequent loans, initial Soil and Water Conservation loans not in excess of $5,000, and servicing loans where real estate is taken as security.

(R. S. 161, sec. 6 (3), 50 Stat. 870, sec. 41 (1), 60 Stat. 1066, sec. 510 (g), 63 Stat. 438, sec. 4 (c), 64 Stat. 100; 5 U. S. C. 22, 16 U. S. C. 590w (3), 7 U. S. C. 1015 (i), 42 U. S. C. 1480 (g), 40 U. S. C. 442 (c))

Dated: December 4, 1956.

[SEAL] D. H. SMITH,
Acting Administrator, Farmers Home Administration.

[F. R. Doc. 56-10132; Filed, Dec. 11, 1956; 8:46 a. m.]

TITLE 5—ADMINISTRATIVE PERSONNEL

Chapter I—Civil Service Commission

Subchapter B—Civil Service Regulations

PART 6—EXCEPTIONS FROM THE COMPETITIVE SERVICE

Part 6 is revised to read as follows:

Sec.

6.1 Method of filling excepted positions and status of incumbents.

SCHEDULE A

6.100 Positions other than those of a confidential or policy-determining character for which it is not practicable to examine.
6.101 Entire executive civil service.
6.102 Department of State.
6.103 Treasury Department.
6.104 Department of Defense.
6.105 Department of the Army.
6.106 Department of the Navy.
6.107 Department of the Air Force.
6.108 Department of Justice.
6.109 Post Office Department.
6.110 Department of the Interior.
6.111 Department of Agriculture.
6.112 Department of Commerce.
6.113 Department of Labor.
6.114 Department of Health, Education, and Welfare.
6.116 National Security Council.
6.118 General Accounting Office.
6.119 Board of Governors, Federal Reserve System.
6.121 Office of Defense Mobilization.
6.122 Veterans' Administration.
6.123 Federal Civil Defense Administration.
6.124 United States Information Agency.
6.125 Federal Power Commission.
6.126 Securities and Exchange Commission.
6.128 Small Business Administration.
6.129 Federal Deposit Insurance Corporation.
6.131 National Capital Housing Authority.
6.132 United States Soldiers' Home.
6.133 General Services Administration.
6.134 Federal Communications Commission.
6.135 United States Tariff Commission.
6.136 Railroad Retirement Board.
6.138 National Labor Relations Board.
6.140 Export-Import Bank of Washington.
6.141 Farm Credit Administration.
6.142 Housing and Home Finance Agency.
6.144 Selective Service System.
6.145 Civil Service Commission.
6.147 National Advisory Committee for Aeronautics.
6.148 Panama Canal Company, New York.
6.149 Foreign Operations Administration.
6.155 President's Committee on Government Employment Policy.
6.157 Federal Home Loan Bank Board.

SCHEDULE B

6.200 Positions other than those of a confidential or policy-determining character for which it is not practicable to hold a competitive examination.
6.202 Department of State.
6.203 Treasury Department.
6.206 Department of the Navy.
6.207 Department of the Air Force.
6.208 Department of Justice.
6.210 Department of the Interior.
6.224 United States Information Agency.
6.225 Federal Power Commission.
6.241 Farm Credit Administration.
6.242 Housing and Home Finance Agency.
6.244 Selective Service System.
6.245 Civil Service Commission.
6.256 District of Columbia Government.

SCHEDULE C

6.300 Positions of a confidential or policy-determining character.
6.302 Department of State.
6.303 Treasury Department.
6.304 Department of Defense.
6.305 Department of the Army.
6.306 Department of the Navy.
6.307 Department of the Air Force.
6.308 Department of Justice.
6.309 Post Office Department.
6.310 Department of the Interior.
6.311 Department of Agriculture.
6.312 Department of Commerce.
6.313 Department of Labor.
6.314 Department of Health, Education, and Welfare.
6.315 Executive Office of the President.
6.317 Interstate Commerce Commission.
6.318 General Accounting Office.
6.320 The Tax Court of the United States.
6.321 Office of Defense Mobilization.
6.322 Veterans' Administration.
6.323 Federal Civil Defense Administration.
6.324 United States Information Agency.
6.325 Federal Power Commission.
6.326 Securities and Exchange Commission.
6.327 National Mediation Board.
6.328 Small Business Administration.
6.330 Federal Trade Commission.
6.333 General Services Administration.
6.334 Federal Communications Commission.
6.335 United States Tariff Commission.
6.336 Railroad Retirement Board.
6.337 Civil Aeronautics Board.
6.338 National Labor Relations Board.
6.340 Export-Import Bank of Washington.
6.341 Farm Credit Administration.
6.342 Housing and Home Finance Agency.
6.343 Indian Claims Commission.
6.346 Federal Mediation and Conciliation Service.
6.349 Foreign Operations Administration.
6.350 Foreign Claims Settlement Commission of the United States.
6.351 Air Coordinating Committee.
6.352 Government Patents Board.
6.353 Subversive Activities Control Board.
6.354 Saint Lawrence Seaway Development Corporation.
6.357 Federal Home Loan Bank Board.

AUTHORITY: §§ 6.1 to 6.357 issued under R. S. 1753, sec. 2, 22 Stat. 403, as amended; 5 U. S. C. 631, 633.

§ 6.1 *Method of filling excepted positions and status of incumbents.* (a) The Commission shall decide whether the duties of any particular position are such that it may be filled as an excepted position under Schedule A, B, or C.

(b) To the extent permitted by law and the regulations in this chapter, appointments, position changes, and removals in the excepted service shall be made in accordance with any regulations or practices that the head of the agency concerned finds necessary.

(c) Persons appointed to excepted positions shall not acquire a competitive status by reason of such appointments.

NOTE: See also Part 21 of this chapter, issued pursuant to the Veterans' Preference Act of 1944, as amended, which is applicable to appointments to excepted positions; Part 22 of this chapter which is applicable in cases of discharges, suspensions for more than thirty days, furloughs without pay for thirty days or less, or reduction in rank or compensation of employees entitled to veteran preference; Part 9 of this chapter which is applicable to removals from positions listed in Schedule B of persons who have competitive status; § 2.502 (j) of this chapter under which the Commission may authorize promotions in excepted positions in order to avoid undue hardship or inequity in individual cases of meritorious nature without regard to the restrictions of section 1310 of the Supplemental Appropriation Act, 1952 (Public Law No. 253, 82d Congress), as amended; Part 10 of this chapter which is applicable to employment with reemployment rights; and Part 20 of this chapter which is applicable to reduction in force.

SCHEDULE A

§ 6.100 *Positions other than those of a confidential or policy-determining character for which it is not practicable to examine.* The positions enumerated in §§ 6.101 to 6.199 are positions other than those of a confidential or policy-determining character for which it is not practicable to examine and which are excepted from the competitive service and constitute Schedule A.

§ 6.101 *Entire executive civil service.* (a) Positions of Chaplain and Chaplain's Assistant.

(b) Cooks, except at fixed locations, such as, hospitals, quarantine stations, and penal institutions.

(c) Positions to which appointments are made by the President without confirmation by the Senate.

(d) Attorneys.

(e) Law clerk-trainee positions. Appointments under this paragraph shall be confined to graduates of recognized law schools or persons having equivalent experience and shall be for periods not to exceed nine months pending admission to the bar. No person shall be given more than one appointment under this paragraph.

(f) Chinese, Japanese, and Hindu interpreters.

(g) Any position in which the appointee will receive compensation aggregating not more than $1,100 a year, the duties of which are part-time or intermittent, but such appointments shall not be for job employment. In Washington, D. C., such appointments shall be subject to the prior approval of the Commission.

(h) [Reserved.]

NOTE: Paragraph (h), not included in this revision, was revoked effective 30 days after November 20, 1956. See 21 F. R. 8985.

(i) Positions on the Isthmus of Panama, except: Accountant, architect, architectural designer, bookkeeper, calculating machine operator, chemist, clerk (paying more than $175 in United States currency per month), dietitian, draftsman, employee counselor, medical technician, personnel aide, personnel assistant, pharmacist, physician, playground director, statistician, stenographer, storekeeper, surgeon, trained nurse, typist, harbor personnel of the Quartermaster Corps, Department of the Army, air traffic controller and air traffic communicator, Civil Aeronautics Administration, and Veterans' Administration Representative for the Panama Canal Zone with duty station at Balboa, Canal Zone.

(j) Subject to prior approval by the Commission, positions in Federal mental institutions when filled by persons who

have been patients of such institutions and been discharged, and are certified by the medical head thereof as recovered sufficiently to be regularly employed but it is believed desirable and in the interest of the persons and the institution that they be employed at the institution.

(k) Subject to prior approval of the Commission, temporary, part-time, or intermittent employment on construction or repair work of employees in recognized trades and crafts or other skilled mechanical crafts and in unskilled, semiskilled, or skilled manual-labor occupations and supervisory employees in these trades, crafts, and occupations, where the activity is carried on in places where there is no local Board of U. S. Civil Service Examiners to service the employing establishment and because of employment conditions there is a shortage of available candidates for the positions. Appointments under this paragraph shall not extend beyond one year, and the employment thereunder shall not exceed 180 working days a year. Seasonal employments of a recurring nature are not authorized under this paragraph.

(l) Any position directly concerned with the protection of the life and safety of the President and the members of his family.

(m) Positions without compensation provided such appointments meet the requirements of applicable laws relating to compensation.

(n) Professional, scientific, and technical experts for temporary, part-time or intermittent employment for consultation purposes.

(o) Nonsupervisory positions of custodial laborer (levels 1, 2, and 3) and general laborer (levels 2 and 3) in field establishments outside central office and regional and branch office cities of the Commission where there is no local Board of U. S. Civil Service Examiners to service the employing establishment, as follows:

(1) For temporary, intermittent, or seasonal employment (exclusive of positions covered by paragraph (k) of this section) not to exceed 180 working days a year in the Departments of Agriculture, Commerce, and Interior, and in the International Boundary and Water Commission.

(2) When it is specifically held by the Commission that this authority is applicable, for employment in localities that are isolated with respect to labor supply and where there is a shortage of available candidates for the positions.

(p) Physician, surgeon, or dentist employed under contract or on a part-time or fee basis, when, in the opinion of the Commission, appointment through competitive examination is impracticable.

(q) Positions of a scientific, professional or analytical nature when filled by bona fide members of the faculty of an accredited college or university who have special qualifications for the positions to which appointed. Employments under this provision shall not exceed 130 working days a year.

(r) Positions of a scientific, professional, or analytical nature when filled by bona fide graduate students at accredited colleges or universities provided that the work performed for the agency is to be used by the student as a basis for completing certain academic requirements toward a graduate degree. Employments under this provision may be continued only so long as the foregoing conditions are met, and the total period of such employment shall not exceed one year in any individual case: *Provided*, That such employment may, with the approval of the Commission, be extended for not to exceed an additional year.

(s) Temporary or intermittent positions when the appointees are to assist scientific, professional, or technical employees. Persons employed under this provision shall be (1) bona fide students at high schools or accredited colleges or universities pursuing courses related to the field in which employed, or (2) bona fide high school science and mathematics teachers. No person shall be employed under this provision (1) in a position of a routine clerical type; or (2) in excess of 130 working days a year; or (3) at a total compensation exceeding $1,270 during such period of one year.

§ 6.102 *Department of State*—(a) *Office of the Secretary.* (1) Two Physical Science Administration Officers (Science Adviser and Deputy Science Adviser), GS–1301–16, and three Physical Science Administration Officers (Assistant Science Advisers), GS–1301–15.

(2) Six positions of Member of the Executive Secretariat.

(3) Chief, Policy Reports Staff, Executive Secretariat.

(4) Four Assistants to the Director of the Executive Secretariat.

(5) Executive Officer, Executive Secretariat.

(6) Chief, Correspondence Review Staff, Executive Secretariat.

(b) *Office of the Special Assistant, Intelligence.* (1) Not to exceed 50 professional and technical positions.

(2) Two professional positions in the Division of Intelligence Acquisition and Distribution.

(c) *International Boundary and Water Commission, United States and Mexico.* (1) Gage readers employed part-time or intermittently at isolated localities when, in the opinion of the Commission, appointment through competitive examination is impracticable.

(d) *International Boundary Commission, United States, Alaska and Canada.* (1) Temporary and intermittent field employees such as instrumentmen, foremen, recorders, packers, cooks, and axemen, for not to exceed 130 working days or six months within any one calendar year.

(e) *Operations Coordinating Board.* (1) Thirteen regular or permanent members of the staff of the Board, grades GS–14 and GS–15.

(2) One technical position, GS–9, concerned with the maintenance of telecommunication inventories and facilities available to the United States in carrying out the responsibilities assigned to the Board.

(f) *Bureau of Inspection, Security, and Consular Affairs.* (1) Positions of investigator, evaluator, and other security officers, whose incumbents are directly engaged in the performance of security functions or in the supervision of such activities.

(2) Until December 31, 1956, all positions whose incumbents are exclusively and directly engaged in the administration of the Refugee Relief Act of 1953.

(g) *Bureau of Inter-American Affairs.* (1) Executive Director.

(h) *Office of Assistant Secretary for Public Affairs.* (1) Chief, Public Studies Division.

(2) Chief, Public Services Division.

(3) Chief, Historical Division.

(4) One Information Specialist, Public Services Division.

(i) *Bureau of International Organization Affairs.* (1) One Special Assistant to the Assistant Secretary.

§ 6.103 *Treasury Department*—(a) *Bureau of Narcotics.* (1) Fifty positions of Narcotic Agent for undercover work.

(b) *Bureau of Customs.* (1) Positions in foreign countries designated as "interpreter-translator" and "special employees," when filled by appointment of persons who are not citizens of the United States; and positions in foreign countries of messenger and janitor.

(2) The positions of Collector of Customs at Puerto Rico and the Virgin Islands.

(3) Part-time, intermittent or temporary Deputy Collectors and Deputy Collectors in Charge in Alaska at a salary rate not in excess of GS–8, for not to exceed 130 working days a year.

(4) Positions of day ("pick-up") laborers whose assignments are to intermittent duties of short duration that must be performed without delay in field establishments where hiring of "pick-up" laborers is authorized by the Bureau of Customs headquarters. Persons appointed under this authority may not be employed in this kind of work in the Bureau of Customs for more than 180 working days a year under this authority or under a combination of this authority and any other authority for excepted appointment that may be appropriate. This authority is not appropriate for job employment.

(c) *Coast Guard.* (1) Lamplighters.

(d) *Reconstruction Finance Corporation.* (1) Until September 30, 1957, Chief, Public Agency Division.

(2) Until September 30, 1957, five Supervisory Loan Examiners (D. C.) and eight Supervisory Field Representatives (Field).

(e) *Office of Production and Defense Lending.* (1) Until September 30, 1957, one Chief, Loan Administration Division, one Chief, Liquidation Division, and one Assistant Controller (Treasurer), Reconstruction Finance Corporation.

(f) *United States Savings Bonds Division.* (1) Positions of State Director and Deputy State Director, and Regional Director and Assistant Regional Director.

§ 6.104 *Department of Defense*—(a) *Office of the Secretary.* (1) Five Special Advisors in the immediate office of the Secretary or Deputy Secretary with re-

sponsibility for studies and recommendations in broad program areas. These positions have advisory rather than operating duties, except as operating or administrative responsibility may be exercised in connection with pilot studies.

(2) Positions assigned exclusively to Communications Intelligence Activities.

(3) Positions assigned to or in support of special classified training activities.

(b) *Entire Department (including the Office of the Secretary of Defense and the Departments of the Army, Navy, and Air Force).* (1) Until December 31, 1960, professional positions in Military Dependent School Systems overseas.

(2) Until December 31, 1960, positions in Attache Systems overseas, including positions in the Naval Research Branch Office in London.

(3) Until December 31, 1960, positions of clerk-translator, translator, and interpreter overseas.

§ 6.105 *Department of the Army*—(a) *General.* (1) Positions the duties of which are of a quasi-military nature and involve the security of secret or confidential matter, when in the opinion of the Commission, appointment through competitive examination is impracticable.

(2) During the emergency declared by the President to exist on May 27, 1941, all positions in the Department of the Army on the Isthmus of Panama.

(3) Unskilled laborers and munitions handlers engaged in handling Ordnance matériel, including ammunition, where temporary or intermittent employment is necessary.

(4) Student occupational therapist positions in Army hospitals. Appointments to these positions will not extend beyond the training period applicable to each individual case, which is a minimum of three months training and a maximum of twelve months training, depending upon the individual's previous clinical training.

(5) Positions under the program for utilization of alien scientists approved under pertinent directives administered by the Joint Chiefs of Staff of the Department of Defense when occupied by alien scientists initially employed under the program, including those who have acquired United States citizenship during such employment.

(6) Positions assigned exclusively to Army Communications Intelligence Activities.

(b) *Transportation Corps.* (1) Longshoremen and stevedores employed at ports of embarkation in the United States; and all positions on vessels operated by the Transportation Corps.

(c) *Engineer Department.* (1) Land appraisers employed on a temporary basis for a period not to exceed one year on special projects where knowledge of local values or conditions or other specialized qualifications not possessed by appraisers regularly employed by the Department are required for successful results.

(2) Nonsupervisory positions of custodial laborer (levels 1, 2, and 3) and general laborer (levels 2 and 3) on survey, construction, short-term maintenance, or floating plant operations located at sites outside District or Division Headquarters cities, where because of turnover, lack of housing facilities, mobility of work site, or remoteness of personnel servicing facilities, an adequate labor force can be recruited only by immediate gate-hiring on a local basis. This authority can be used only when the Commission has determined that it is specifically applicable to a given situation; and in no event can it be used for employment in Civil Service central office and regional and branch office cities or where there is a local Board of U. S. Civil Service Examiners to service the employing establishment.

(d) *U. S. Military Academy, West Point, New York.* (1) Civilian professors, instructors, registrar, teachers (except teachers at the Children's School), hostesses, chapel organist and the choirmaster, librarian when filled by an officer of the Regular Army retired from active service, and military secretary to the Superintendent when filled by a Military Academy graduate retired as a regular commissioned officer for disability.

(e) *Special Services Division.* (1) Until December 31, 1956, positions paid from the appropriation "Welfare of Enlisted Men," which entail responsibility for the direction or supervision of voluntary educational or recreational programs and which, as an integral part of the job, require close working associations with the military personnel for whom such programs are conducted. Positions of librarian, library assistant, recreation leader, and recreation supervisor are included herein.

(f) *National War College, Washington, D. C.* (1) Civilian directors of studies for employment of not to exceed one year: *Provided,* That such employment may, with the prior approval of the Commission, be extended for not to exceed one additional year.

(g) *Joint Brazil-United States Defense Commission.* (1) One position of clerk-stenographer-translator or civilian aide requiring a knowledge of English, Portuguese, and Spanish.

(h) *Army Language School, Presidio of Monterey, California.* (1) Language instructors when the type of instruction requires a period of actual foreign residence to qualify them for the instruction.

(2) Typists of foreign language material whose duties require them to make corrections in grammar and spelling of the material typed.

(i) *Army War College, Carlisle Barracks, Pennsylvania.* (1) One position of Educational Specialist for Employment of not to exceed one year: *Provided,* That such employment may, with the prior approval of the Commission, be extended for not to exceed one additional year.

(j) *Army Signal Corps.* (1) All positions on ocean-going cable barges operated by the Army Signal Corps.

§ 6.106 *Department of the Navy*—(a) *General.* (1) Intelligence and Counter Intelligence positions assigned exclusively to Naval Intelligence Activities.

(2) Positions under the program for utilization of alien scientists approved under pertinent directives administered by the Joint Chiefs of Staff of the Department of Defense when occupied by alien scientists initially employed under the program, including those who have acquired United States citizenship during such employment.

(3) Student trainees in naval shipyards, whose salaries shall not aggregate more than $1,100 a year. Only bona fide students engaged in the study of naval architecture shall be eligible for appointment under this subparagraph. Employment under this subparagraph shall not exceed 90 working days a year.

(4) Until December 31, 1960, positions in the Saipan District.

(5) Until December 31, 1960, two positions of Teachers in indigenous schools at Chichi Jima, Bonin-Volcano Islands.

(b) *United States Naval Academy*—(1) Professors, instructors, and teachers in the United States Naval Academy, the United States Naval Post-graduate School, and the Naval War College.

(c) *United States Naval Home.* (1) Positions of orderly when filled by the appointment of beneficiaries of the Home.

(d) *Military Sea Transportation Service.* (1) All positions on vessels operated by the Military Sea Transportation Service.

(e) *Naval Research Laboratory, Washington, D. C.* (1) Scientific and professional research associate positions when filled on a temporary or intermittent basis by persons having a doctoral degree in physical science or related fields of study, for research activities of mutual interest to the appointee and the Laboratory. Total employment under this provision may not exceed 10 positions at any one time. Employment under this provision shall not exceed one year in any individual case; provided, that such employment may, with the approval of the Commission, be extended for not to exceed an additional year.

§ 6.107 *Department of the Air Force*—(a) *Office of the Secretary.* (1) Five Special Assistants in the Office of the Secretary of the Air Force. These positions have advisory rather than operating duties except as operating or administrative responsibilities may be exercised in connection with pilot studies.

(b) *General.* (1) During the emergency declared by the President to exist on May 27, 1941, all positions in the Department of the Air Force on the Isthmus of Panama.

(2) Positions under the program for utilization of alien scientists approved under pertinent directives administered by the Joint Chiefs of Staff of the Department of Defense when occupied by alien scientists initially employed under the program, including those who have acquired United States citizenship during such employment.

(3) Until December 31, 1956, positions of librarian, recreation leader and recreation supervisor which entail responsibility for the direction or supervision

of voluntary educational and recreational programs and which, as an integral part of the job, require close working associations with military personnel for whom such programs are conducted.

(4) One Cadet Hostess at the Air Force Academy in Colorado.

(c) *Lookout Mountain Laboratory, Los Angeles, California.* (1) All positions.

§ 6.108 *Department of Justice*—(a) *General.* (1) Field deputy United States marshals employed on an hourly basis for intermittent service.

(2) Positions of temporary deputy marshals in lieu of bailiff in the United States courts when employed on an intermittent basis.

(3) United States Marshal in the Virgin Islands.

(b) *Immigration and Naturalization Service.* (1) Information Officer.

(2) Four positions of Regional Commissioner.

§ 6.109 *Post Office Department*—(a) *General.* (1) Clerks in fourth class post offices.

(2) Substitute rural carriers.

(3) Special delivery messengers in second, third, and fourth class post offices.

(4) Unskilled laborers employed as janitors and cleaners in small postal units in leased quarters at a compensation less than $2,870 per annum.

(5) One Administrttive Assistant to each Regional Office Manager (15 positions).

(6) One Administrative Assistant to the Assistant to the Regional Operations Manager (Dallas Office).

(7) One Administrative Assistant to the Assistant to the Regional Operations Manager (Cincinnati Office).

(8) Clerks employed on a part-time basis in third-class post offices in Alaska.

(9) Fourth-class postmaster positions in Alaska.

(10) Positions (other than Postmaster) in Samoa, The Trust Territory, Canton Island, and Wake Island.

(b) *Office of the Postmaster General.* (1) Two information specialists.

§ 6.110 *Department of the Interior*—(a) *General.* (1) Temporary, intermittent, or seasonal positions in the field service of the Department of the Interior, when filled by the appointment of persons who are certified as maintaining a permanent and exclusive residence within, or contiguous to, a field activity or district, and as being dependent for livelihood primarily upon employment available within the field activity of the Department.

(2) All positions on Government-owned ships or vessels operated by the Department of the Interior.

(3) Temporary or seasonal caretakers at temporarily closed camps or improved areas to maintain grounds, buildings or other structures and prevent damage or theft of Government property. Such appointments shall not extend beyond 130 working days a year without the prior approval of the Commission.

(4) Temporary, intermittent, or seasonal field assistants at GS–5, or its equivalent, and below in such areas as forestry, range management, soils, engineering, fishery and wildlife management, and with surveying parties. Employment under this authority shall not exceed 180 working days a year for positions at GS–4 and below in survey parties in the Bureau of Land Management and Geological Survey and shall not exceed 130 working days a year for other positions authorized under this subparagraph.

(5) Temporary emergency forest and range fire and blister rust control employees in the field service of the Department of the Interior employed for fire prevention or suppression or blister rust control for not to exceed 130 working days a year.

(6) Persons employed in field positions the work of which is financed jointly by the Department of the Interior and cooperating persons or organizations outside the Federal service.

(7) All positions in the Bureau of Indian Affairs and other positions in the Department of the Interior directly and primarily related to the providing of services to Indians when filled by the appointment of Indians who are one-fourth or more Indian blood.

(8) Subject to prior approval of the Commission, temporary, intermittent, or seasonal positions at GS–7 and below in nonprofessional mining activities in Alaska, such as drillers, miners, caterpillar operators and samplers, not to exceed 180 working days a year, when the activity is carried on in a remote or isolated area, there is no Board of U. S. Civil Service Examiners to service the employing establishment, and there is a shortage of available candidates for the positions.

(9) Subject to prior approval of the Commission, temporary, part-time, or intermittent employment of mechanics, skilled laborers, equipment operators and tradesmen on construction, repair, or maintenance work for not to exceed 180 working days a year in Alaska, when the activity is carried on in a remote or isolated area, there is no Board of U. S. Civil Service Examiners to service the employing establishment, and there is a shortage of available candidates for the positions.

(10) Seasonal airplane pilots and airplane mechanics in Alaska, not to exceed 180 working days a year.

(11)[1] Not to exceed March 31, 1957, positions in foreign countries that involve the performance for host governments of technical advisory work to which assignments are made pursuant to section 527 (c) of the Mutual Security Act of 1954, as amended, under inter-agency agreement with the International Cooperation Administration.

(b) *Bureau of Indian Affairs.* (1) All positions in the Neopit Lumber Mills on the Menominee Indian Reservation in Wisconsin, until December 31, 1958.

[1] Effective 30 days after November 20, 1956. See 21 F. R. 8985.

(2) Housekeeper positions at a gross salary not in excess of the entrance rate of grade GS–4 or its equivalent when, because of isolation or lack of quarters, appointment through competitive examination is, in the opinion of the Commission, impracticable.

(3) Subject to prior approval of the Commission, assistants in Alaska native schools (not including teachers and instructors) at a salary rate not in excess of that of GS–4 or its equivalent where the schools are in isolated or remote areas or lack suitable quarters.

(c) *Indian Arts and Crafts Board.* (1) The Executive Director.

(d) *Bonneville Power Administration.* (1) Four Area Managers.

(e) *Office of Territories.* (1) Until December 31, 1957, all positions in Alaska in the Alaska Railroad.

(2) The Clerk of the High Court of American Samoa.

(3) One position of part-time Secretary and one position of Administrative Educational Aid to the U. S. Resident Administrator for Canton Island.

(f) *National Park Service.* (1) Temporary, intermittent or seasonal park rangers at salaries equivalent to GS–4 or below, in positions such as Naturalist, Historian, and Archeologist, for not to exceed 180 working days a year.

(g) *Bureau of Reclamation.* (1) Appraisers and examiners employed on a temporary, intermittent, or part-time basis on special valuation or prospective-entrymen-review projects where knowledge of local values or conditions or other specialized qualifications not possessed by regular Bureau employees are required for successful results. Employment under this provision shall not exceed 130 working days a year in any individual case; provided that such employment may, with prior approval of the Commission, be extended for not to exceed an additional fifty days in any single year.

(h) *Federal Petroleum Board.* (1) Chairman of the Board.

(2) Two Members of the Board.

§ 6.111 *Department of Agriculture*—(a) *General.* (1) Agents employed in field positions the work of which is financed jointly by the Department and cooperating persons, organizations, or governmental agencies outside the Federal service. This authority is not applicable to positions in the Agricultural Research Service.

(2) Any local veterinarian employed on a fee basis or a part-time basis.

(3) Not to exceed 25 professional, scientific, or technical positions in grade GS–7 or higher to be filled on an exchange basis by qualified employees on the rolls of State Governments, colleges, or universities, for a limited period not to exceed one year.

(4) Local Agents, except veterinarians, employed temporarily outside of Washington, in demonstrating in their respective localities the necessity of eradicating contagious or infectious animal diseases.

(5) Temporary, intermittent, or seasonal employment in the field service of

the Department of Agriculture in the kinds of positions indicated below. This authority is applicable to positions where the salary is equivalent to GS–5 or below; except that for the forest worker positions under subdivision (v) of this subparagraph it may be used regardless of salary for wage board positions. Employment under this authority shall not exceed 130 working days a year for positions under subdivisions (ii), (iii), and (iv) of this subparagraph; and total employment under this subparagraph shall not exceed 180 working days a year.

(i) Field assistants for subprofessional services.

(ii) Subject to prior approval of the Commission, clerical positions and positions in the trades, crafts, and manual laborer occupational groups (exclusive of those covered by § 6.101 (k) and (o) at places other than at central office and regional and branch office cities of the Commission when (*a*) there is no local board of U. S. Civil Service Examiners to service the employing establishment, and (*b*) there is no appropriate register or there is a shortage of available eligibles.

(iii) Caretakers at temporarily closed camps or improved areas.

(iv) Field enumerators and supervisors.

(v) Forest workers engaged primarily for fire prevention or suppression activities and also other forest workers when the employment is with headquarters other than forest supervisor and regional offices.

(vi) Allotment checkers of the Commodity Stabilization Service.

(vii) Collectors of the Farmers Home Administration.

(6)[1] Positions in foreign countries.

(b) *Office of the Secretary.* (1) Special Livestock Loans Committeemen employed for not more than 180 working days a year, to approve and direct the servicing of emergency livestock loans.

(2) Not to exceed four positions at salaries equivalent to GS–13 or higher, for temporary appointment of not to exceed one year, to render advice or to assist in the administration of critical or emergency programs.

(c) *Rural Electrification Administration.* (1) Until June 30, 1960, not to exceed 12 positions, at grades GS–11 or higher, for employment of persons with extensive experience in the commercial or engineering phases of the telephone industry to provide specialized techniques and training in telephony. Appointments under this authority will be made only to positions of a staff, training, or advisory nature as distinguished from regular operating positions. Employment under this provision shall not exceed one year in any individual case; provided that such employment may, with the approval of the Commission, be extended for not to exceed an additional year.

(d) *Forest Service.* (1) Temporary, intermittent, or seasonal positions when filled by the appointment of persons who are certified as maintaining a permanent and exclusive residence within, or contiguous to, a national forest and as being dependent for livelihood primarily upon employment available within the national forest.

(2) Positions in Alaska of Laborers, Boat Operators, Mechanics, Equipment Operators, and Carpenters whose duties require the operation of boats in coastal waters and/or the establishment and maintenance of work camps in remote areas.

(e) *Commodity Stabilization Service.* (1) Six Area Directors at a salary equivalent to GS–15.

(2) Farmer fieldmen and farmer fieldwomen to interpret and explain and supervise farm programs.

(f) *Farmers Home Administration.* (1) State committeemen to consider, recommend, and advise with respect to the Farmers' Home Administration program.

(2) County committeemen to consider, recommend, and advise with respect to the Farmers' Home Administration program.

(3) Employees appointed for not to exceed one year to engage exclusively in the making and servicing of the following three types of emergency loans (pursuant to section 2 (a), (b), and (c) of Public Law 38, 81st Congress, as amended by Public Law 115, 83d Congress): (i) Production disaster loans required as a result of floods, freezes, storms, or other natural calamities, (ii) economic disaster loans, and, (iii) special livestock loans: *Provided,* That an appointment may, with the prior approval of the Commission, be extended for additional periods of not to exceed one year each.

(4) State Directors and not to exceed three positions of State Director-at-Large.

(g) *Agricultural Stabilization and Conservation Committees.* (1) State Administrative Officer.

(2) Members of State Committees.

(h) *Agricultural Marketing Service.* (1) Milk Market Administrators.

(2) All positions on the staffs of Milk Market Administrators.

(3) Positions of Cotton Classers, GS–9 and below, and Clerks, GS–2, employed on a seasonal basis in cotton-classing offices outside the Washington, D. C., Metropolitan Area. Employment under this authority shall not exceed 160 working days a year in the case of Cotton Classers or 130 working days a year in the case of Clerks.

(i) *Agricultural Research Service.* (1) Field employees on programs conducted under the terms of cooperative agreements or memorandums of understanding with States, or other non-Federal cooperating organizations, provided the employees are jointly selected and their salary is supplied by the cooperators on the basis of not less than a 40 percent contribution by each of the cooperators. This authority shall also be applicable to positions where the Department of Agriculture's share is less than 40 percent under a current cooperative agreement until such time as the agreement has been renegotiated; but in any event, it will not be applicable in such situations after June 30, 1957.

§ 6.112 *Department of Commerce*—(a) *General.* (1) Caretakers and light attendants employed on emergency fields and other air navigation facilities, who are paid on a fee basis.

(2) Agents to take and transmit meteorological observations in connection with airways whose duties require only part of their time, and whose compensation does not exceed $190 a month; for such employment in isolated locations in Alaska the compensation may not exceed $210 a month.

(3) Employment of individuals, firms or corporations for not to exceed one year for special statistical studies and statistical compilations, other than Personal Census Records Service, the compensation for which is derived from funds deposited with the United States under the act of May 27, 1935 (49 Stat. 292): *Provided,* That such employments may, with the approval of the Commission, be extended for not to exceed an additional year.

(4) Positions established in connection with activities of the International Geophysical Year, 1957–58, whose duties are performed primarily in field stations beyond the continental limits of the United States. Incumbents of these positions may be stationed in continental United States for periods of orientation, training, analysis of data, and report writing. Appointments under this authority shall not exceed two years, provided that with the prior approval of the Commission they may be extended for not to exceed an additional one-year period.

(b) *Office of the Secretary.* (1) The positions of Security Control Officer, Deputy Security Control Officer, and Chief, Personnel Security Division.

(2) One Civil Aviation Specialist.

(c) *Coast and Geodetic Survey.* (1) All civilian positions on vessels operated by the Coast and Geodetic Survey.

(2) Temporary positions required in connection with the surveying operations of the field service of the Coast and Geodetic Survey. Appointment to such positions shall not exceed 8 months in any one calendar year.

(d) *Bureau of the Census.* (1) Supervisors, assistant supervisors and supervisor's clerks and enumerators in the field service for temporary, part-time or intermittent employment for not to exceed one year: *Provided,* That such appointment of supervisor's clerks and enumerators may be extended for additional periods of not to exceed one year each. This subparagraph shall not be authority for employment in full time positions for longer than one year.

(e) *National Bureau of Standards.* (1) Scientific and professional research associate positions when filled on a temporary or intermittent basis by persons having a doctoral degree in physical science or related fields of study, for research activities of mutual interest to the appointee and the Bureau. Total employment under this provision may not exceed 10 positions at any one time. Employment under this provision shall not exceed one year in any individual case; provided, that such employment may, with the approval of the Commis-

[1] Effective 30 days after November 20, 1956. See 21 F. R. 8985.

sion, be extended for not to exceed an additional year.

(f) *Bureau of Public Roads.* (1) Temporary, intermittent, or seasonal employment in the field service of the Bureau of Public Roads at grades not higher than GS–5 for subprofessional engineering aide work on highway surveys and construction projects, for not to exceed 180 working days a year, whenever in the opinion of the Commission appointment through competitive examination is impracticable.

(g) *Business and Defense Services Administration.* (1) Not to exceed 30 positions, at grades GS–13 and higher, to be filled by appointment of persons, qualified as industrial specialists, who possess specialized knowledge and experience in the field of industrial production, industrial operations and related problems, applicable to one or more of the current segments of industry served by the Business and Defense Services Administration. Appointments under this authority may be made for a period not to exceed two years, and may, with prior approval of the Commission, be extended for an additional period of two years.

(h) *Maritime Administration.* (1) Public Information Officer.

(2) One Private Secretary to the Public Information Officer.

(3) Chief, Program Planning Office.

(4) One Private Secretary to the Chief, Program Planning Office.

(5) The positions of Chief Investigator and Security Officer and Deputy Chief Investigator and Security Officer.

(6) The position of Commandant, U. S. Maritime Service and Superintendent, U. S. Merchant Marine Academy.

(7) Dean of the U. S. Merchant Marine Academy.

(8) All positions on Government owned vessels or those bareboat chartered to the Government and operated by or for the Maritime Administration.

(9) Chief, Office of Ship Construction and Repair.

(10) One Special Assistant to the Administrator (Tanker Adviser).

(11) Two Special Assistants to the Deputy Administrator.

(i) *Federal Maritime Board.* (1) Secretary to the Federal Maritime Board.

(j) *Office of the Assistant Secretary for International Affairs.* (1) Ten positions at GS–13 and above in specialized fields relating to international trade or commerce in the Bureau of Foreign Commerce or in other units under the jurisdiction of the Assistant Secretary for International Affairs. Incumbents shall be assigned to advisory rather than to operating duties, except as operating and administrative responsibility may be required for the conduct of pilot studies or special projects. Employment under this authority will not exceed two years for any individual appointee.

(2) Until June 30, 1958, Managers and Deputy Managers of International Trade Fairs and Exhibit Programs in foreign countries where the duties require a considerable portion of the employee's time to be spent in travel status in foreign countries. Employment under this authority will not exceed two years for any individual appointee.

(k) *Weather Bureau.* (1) Subject to prior approval of the Commission, which shall be contingent upon a showing of inadequate housing facilities, meteorological aid positions at the following stations in Alaska: Barrow, Bethel, Kotzebue, McGrath, Northway, and St. Paul Island.

(2) Until December 31, 1960, Meteorologist Aid and Electronic Technician positions on Guam, Canton Island, Samoa, Wake Island, and in the Trust Territory.

(3) Cook positions on Swan Island.

(l) *Civil Aeronautics Administration.* (1) Medical Officer positions on Canton and Wake Islands.

(2) Laborer positions on Swan Island.

§ 6.113 *Department of Labor*—(a) *Office of the Secretary.* (1) Chairman and two members, Employees' Compensation Appeals Board.

(b) *Bureau of Employment Security.* (1) One Minority Groups Consultant.

(c) *Government Contract Committee.* (1) All positions on the staff of the Government Contract Committee established by Executive Order 10479 of August 13, 1953.

(d) *Bureau of Labor Statistics.* (1) Not to exceed 40 positions of Statistical Investigators, GS–3 and GS–4, employed on a temporary or intermittent basis for field-survey work. Persons appointed under this authority may not be employed in this kind of work in the Bureau of Labor Statistics for more than 180 working days in any single year under this authority or under a combination of this and any other authorities for excepted appointment that may be appropriate.

§ 6.114 *Department of Health, Education, and Welfare*—(a) *St. Elizabeths Hospital.* (1) Three Medical Officers (Surgical Resident).

(2) Student medical Interns for temporary or part-time employment.

(3) Temporary positions of graduate nurses appointed as students for the purpose of receiving twelve weeks of training equivalent to psychiatric affiliation. This authority shall be applied only to positions whose compensation is fixed in accordance with the provisions of section 3 of Public Law 330, Eightieth Congress.

(b) *Public Health Service.* (1) Special escorts to accompany patients of the Public Health Service in accordance with existing laws and regulations. Employment under this subparagragh shall be only for the period of time necessary for the escort to deliver the patient to his destination and to return.

(2) Positions at Government sanatoria when filled by patients during treatment or convalescence.

(3) All positions in leprosy investigation stations.

(4) Positions concerned with problems in preventive medicine financed or participated in by the Department of Health, Education, and Welfare and a cooperating state, county, municipality, incorporated organization, or an individual in which at least one-half of the expense is contributed by the cooperating agency either in salaries, quarters, materials, equipment, or other necessary elements in the carrying on of the work.

(5) Medical and dental internes, externes, and residents; and student nurses.

(6) Positions of scientific, professional, or technical nature when filled by bona fide students enrolled in academic institutions provided that the work performed in the agency is to be used by the student as a basis for completing certain academic requirements required by an educational institution to qualify for a scientific, professional, or technical field; and provided further that appropriate exclusions of the positions under the authority of Public Law 330, 80th Congress, have been approved by the Civil Service Commission.

(7) Student Dietitians and Resident Physicians at Freedman's Hospital.

(8) Positions directly and primarily related to the providing of services to Indians when filled by the appointment of Indians who are one fourth or more Indian blood.

(9) Not to exceed 30 positions of clerical assistants employed on a part-time and intermittent basis to aid cooperating clinicians in non-Federal tuberculosis sanatoria in the keeping of records and the preparation of reports in connection with research studies into the effectiveness of antimicrobial agents in the treatment of tuberculosis. Persons appointed under this authority may not be employed in this kind of work in the Public Health Service for more than 180 working days in a single year under this authority or under a combination of this and any other authority for excepted appointment that may be appropriate.

(c) *Office of Education.*

(1) Positions concerned with problems in education financed and participated in by the Office of Education, Department of Health, Education, and Welfare, and a cooperating State educational agency, or university or college, in which there is joint responsibility for selection and supervision of employees, and at least one-half of the expense is contributed by the cooperating agency in salaries, quarters, materials, equipment, or other necessary elements in the carrying on of the work.

(2) Fifteen positions required in connection with the work of the President's Committee on Education Beyond the High School Level, as follows: Ten professional positions in the field of education and five administrative positions requiring knowledge of, or experience with, citizen and other lay groups participating in matters relating to higher education. Employment under this provision shall not extend beyond December 31, 1956.

§ 6.116 *National Security Council.* (a) All positions on the staff of the Council.

§ 6.118 *General Accounting Office.* (a) Two assistants to the Comptroller General.

§ 6.119 *Board of Governors, Federal Reserve System.* (a) All positions.

§ 6.121 *Office of Defense Mobilization.* (a) Not to exceed 18 non-operating specialist positions at the GS–13 level and above, the incumbents of which are responsible for advisory, staff planning, and coordination duties in the

areas of military, industrial, or civilian mobilization.

§ 6.122 *Veterans' Administration*—(a) *General.* (1) Positions in Veterans' Administration facilities when filled by the appointment of members of such facilities receiving domiciliary care if, in the opinion of the Veterans' Administration the duties can be satisfactorily performed by such members.

(2) Positions at Veterans' Administration hospitals when filled by paraplegic patients during treatment or convalescence.

(b) *Construction Division.* (1) Temporary construction workers paid from "purchase and hire" funds and appointed for not to exceed the duration of a construction project.

(c) *Department of Veterans' Benefits.* (1) Executive Director for Supervision.

(2) Five Area Management Supervisors.

§ 6.123 *Federal Civil Defense Administration.* (a) Seven Regional Administrators.

(b) Seven Deputy Regional Administrators.

(c) Seven Assistant Regional Administrators for Women's Activities.

(d) Two Labor Specialists GS–13, Industry Office, Technical Advisory Service.

(e) Not to exceed 5 positions requiring Q clearance to be used exclusively for work on top secret projects in cooperation with other agencies and to be filled by persons who have a specialized subject matter background required for the performance of the duties of the position.

(f) Not to exceed 5 positions to be filled by specialists who have had the valuable civil defense experience in other countries required for the performance of the duties of the position.

§ 6.124 *United States Information Agency.* (a) Chief, Office of Security.

(b) Two Liaison Officers (Congressional) in the Office of the General Counsel.

(c) One Chief of Religious Information.

§ 6.125 *Federal Power Commission.* (a) Three special assistants to the Commission.

§ 6.126 *Securities and Exchange Commission.* (a) Director, Division of Corporation Finance; Director, Division of Corporate Regulations; Director, Division of Trading and Exchanges.

(b) Ten positions of Regional Administrator.

§ 6.128 *Small Business Administration*—(a) Not to exceed June 30, 1957, fifteen Regional Directors.

(b) [Reserved.]

(c) Not to exceed June 30, 1957, one Confidential Assistant to the Special Assistant to the Administrator; and one Special Assistant to the Director, Office of Information.

(d) Not to exceed June 30, 1957, Chiefs of the following Divisions: Managerial Assistance, Financial Service, Procurement Assistance, Production Assistance, and Products Assistance.

(e) Not to exceed June 30, 1957, one Assistant Chief, Managerial Assistance Division.

(f) Not to exceed June 30, 1957, Chairman and three Members, Loan Review Committee.

(g) Not to exceed June 30, 1957, two Investigators, Office of the General Counsel.

(h) Not to exceed June 30, 1957, a maximum of thirty-three Branch Office Managers.

(i) Not to exceed June 30, 1957, the position of the top-ranking Financial Specialist in each Regional Office.

(j) Not to exceed June 30, 1957, one Deputy Director, Office of Information.

(k) Not to exceed June 30, 1957, the position of the top-ranking Production Specialist or Industrial Specialist in each Regional Office.

(l) Not to exceed June 30, 1957, two Special Assistants, Office of the Administrator.

(m) Not to exceed June 30, 1957, the Deputy Chairman, Loan Review Committee.

§ 6.129 *Federal Deposit Insurance Corporation.* (a) All field positions concerned with the work of liquidating the assets of closed banks or the liquidation of loans to banks, and all temporary field positions the work of which is concerned with paying the depositors of closed insured banks.

§ 6.131 *National Capital Housing Authority.* (a) Executive Director.

§ 6.132 *United States Soldiers' Home.* (a) All positions.

§ 6.133 *General Services Administration*—(a) *General.* (1) Custodians, guards, watchmen, laborers, and other employees engaged in the custody, care and preservation of plants, warehouses, shipyards, airfields, and surplus facilities of a similar nature pending disposition of such facilities.

§ 6.134 *Federal Communications Commission.* (a) [Reserved.]

(b) One Assistant Chief Engineer.

(c) One Assistant Chief Accountant.

(d) The Chief of each of the following Bureaus: Broadcast, Common Carrier, Safety and Special Radio Services, and Field Engineering and Monitoring.

§ 6.135 *United States Tariff Commission.* (a) The Secretary of the Commission.

§ 6.138 *National Labor Relations Board.* (a) Election Clerks and Election Examiners for temporary, part-time, or intermittent employment in connection with elections under the Labor Management Relations Act.

§ 6.140 *Export-Import Bank of Washington.* (a) The Secretary.

(b) Chiefs of the following divisions: Economics, Engineering, Examining, and Private Capital Participation.

(c) Three Special Assistants to the Board of Directors, grade GS–14 and above, with responsibility for carrying out special overseas assignments for the Board.

§ 6.141 *Farm Credit Administration.* (a) Until December 31, 1956, positions in the Federal Intermediate Credit Banks, the Production Credit Corporations, the Federal Land Banks, the Banks for Cooperatives, and positions filled by joint officers and employees for these institutions.

(b) National Farm Loan Association receivers and conservators.

(c) Not to exceed seven positions in the Credit Services of the Farm Credit Administration in grades GS–13 or above, requiring technical or administrative experience in the field of agricultural credit: *Provided,* That this authority may be used only when making appointments of persons who have acquired such experience in the Farm Credit Administration or in one or more of the institutions supervised by the Farm Credit Administration.

(d) Until December 31, 1956, positions in the Central Bank for Cooperatives.

§ 6.142 *Housing and Home Finance Agency*—(a) *Office of the Administrator.* (1) Until December 31, 1956, Executive Secretary and Deputy Executive Secretary of the National Committee and the Executive Secretary and Deputy Executive Secretary of each regional subcommittee established under Title VI of the Housing Act of 1954.

(2) Director, Compliance Division.

(3) Until December 31, 1956, six Regional Administrators.

(4) Director, Community Disposition Program.

(b) [Reserved.]

(c) *Federal Housing Administration.* (1) Until December 31, 1956, 80 Field Directors (State, District and Territorial).

(2) Until December 31, 1956, six Regional Directors.

(3) Director, Multi-Family Housing Division.

(4) Director, Title I Division.

(5) Director, Home Mortgage Division.

(d) *Public Housing Administration.* (1) Until June 30, 1957, the position of Special Representative at San Diego, California.

(e) *Federal Flood Indemnity Administration.* (1) Until December 31, 1957, one Assistant Commissioner for Program Studies.

§ 6.144 *Selective Service System.* (a) State Directors.

(b) Deputy or Assistant State Directors and State Medical Officers in State Headquarters.

(c) Until July 1, 1957, Executive Secretary, National Advisory Committee on the Selection of Physicians, Dentists, and Allied Specialists.

(d) Executive Secretary, National Selective Service Appeal Board.

§ 6.145 *Civil Service Commission.* (a) Positions of Members of the International Organizations Employees Loyalty Board.

§ 6.147 *National Advisory Committee for Aeronautics.* (a) Two alien scientists having special qualifications in the field of aeronautical research where such employment is deemed by the Chairman of the National Advisory Committee for Aeronautics to be necessary in the public interest.

§ 6.148 *Panama Canal Company, New York.* (a) All positions on vessels operated by the Panama Canal Company.

(b) Checkers employed on w. a. e. basis.

(c) One Receiving Clerk, one Delivery Clerk, and one Baggage Master-Storekeeper employed on dock (N. Y.).

(d)[1] One General Agent, Panama Canal Line, at Port-au-Prince, Haiti.

§ 6.149 *Foreign Operations Administration.* (a) Not to exceed 25 positions of a policy determining character at salaries in excess of $10,000 but not in excess of $15,000 per annum.

(b) Two private secretaries or confidential assistants to the Director, one to the Deputy Director, and one to each policy determining official receiving a salary of $15,000 per annum.

(c) Not to exceed 30 positions at GS–12 or above when filled by persons who have served overseas with the agency or its predecessor for not less than one year.

(d) The positions of Director for Personnel Security and Integrity, Deputy Director for Personnel Security and Integrity, and Director of the Inspections Division.

(e) One Special and Confidential Assistant to the Director, Office of Labor Affairs.

(f) Deputy Director, Office of Public Reports.

(g) Two Information Specialists, Office of Public Reports.

(h) Staff Assistant, Office of the Military Adviser.

(i) One Private Secretary to the Chairman, International Development Advisory Board.

§ 6.155 *President's Committee on Government Employment Policy.* (a) Executive Director.

§ 6.157 *Federal Home Loan Bank Board.* (a) One Secretary, Federal Home Loan Bank Board.

(b) One Director, Division of Examinations.

(c) All temporary field positions in the Federal Savings and Loan Insurance Corporation concerned with the work of liquidating the assets of closed insured institutions, or the liquidation of loans or the handling of contributions to insured institutions and the purchase of assets therefrom, and all temporary field positions of the Federal Savings and Loan Insurance Corporation the work of which is concerned with paying the depositors of closed insured institutions.

§ 6.158 *National Security Training Commission.* (a) The Executive Director.

SCHEDULE B

§ 6.200 *Positions other than those of a confidential or policy-determining character for which it is not practicable to hold a competitive examination.* The positions enumerated in §§ 6.201 to 6.299 are positions other than those of a confidential or policy-determining character for which it is not practicable to hold a competitive examination and which are excepted from the competitive service and constitute Schedule B. Appointments to these positions shall be subject to such noncompetitive examination as may be prescribed by the Commission.

§ 6.202 *Department of State.* (a) Persons formerly employed abroad in the Foreign Service of the United States (this means civilian employment in the executive branch) for a period of at least 4 years for service in executive and administrative positions, or for at least 2 years for professional positions, in grades GS–9 and above.

(b) Positions assigned exclusively to Department of State Cryptographic Security Activities.

(c) Director and Deputy Director, Foreign Buildings Operation.

§ 6.203 *Treasury Department.* (a) Positions of Chief National Bank Examiner, Assistant Chief National Bank Examiner, District Chief National Bank Examiner, National Bank Examiner, and Assistant National Bank Examiner, whose salaries are paid from assessments against national banks and other financial institutions.

(b) Cryptographer, United States Coast Guard.

(c) Not to exceed two positions of Accountant (Tax Specialist) at grades GS–13 and above to serve as specialists on the accounting analysis and treatment of corporation taxes. Employments under this paragraph shall not exceed a period of 18 months in any individual case.

§ 6.206 *Department of the Navy.* (a) Positions assigned exclusively to Navy Communications Intelligence Activities.

§ 6.207 *Department of the Air Force.* (a) Positions assigned exclusively to Air Force Communications Intelligence Activities.

(b) Civilian Deans and Professors at the Air Force Institute of Technology, Wright-Patterson Air Force Base, Dayton, Ohio.

§ 6.208 *Department of Justice.* (a) Assistants to cottage officers, National Training School for Boys, when filled by the appointment of bona fide students at colleges or universities at salaries not in excess of $720 per annum, subject to the approval of the Commission.

(b) Field Deputy U. S. Marshals, GS–5, 6, 7, and 8.

§ 6.210 *Department of the Interior.* (a) Any competitive position at an Indian school when filled by the spouse of a competitive employee of the school, when because of isolation or lack of quarters, the Commission deems appointment through competitive examination impracticable.

§ 6.224 *United States Information Agency.* (a) Persons formerly employed abroad in the Foreign Service of the United States for a period of at least 4 years for service in executive and administrative positions, or for at least 2 years for professional positions, in grades GS–9 and above.

§ 6.225 *Federal Power Commission.* (a) A Chief Engineer.

§ 6.241 *Farm Credit Administration.* (a) Positions of Custodian of Collateral and positions of representatives in the field service of the Central Bank for Cooperatives, the posts of duty of which are in the localities of the borrowing associations with which they are concerned, and the selection of the incumbents of which is either participated in by the borrowing association or is subject to acceptance by the associations.

§ 6.242 *Housing and Home Finance Agency*—(a) *Federal Housing Administration.* (1) Ten Minority-Group Housing Advisors.

§ 6.244 *Selective Service System.* (a) Positions in the Selective Service System when filled by persons who, as commissioned officer personnel in the armed forces have previously been trained for or have been on active military duty in the Selective Service program, and cannot, for some reason beyond their control, be brought to active military duty in the current Selective Service program.

§ 6.245 *Civil Service Commission.* (a) Assistant to the Chairman.

§ 6.256 *District of Columbia Government.* (a) Chairman, Secretary and Members of the Board of Police and Fire Surgeons, District of Columbia.

SCHEDULE C

§ 6.300 *Positions of a confidential or policy-determining character.* The positions enumerated in §§ 6.301 to 6.399 are positions of a confidential or policy-determining character which are excepted from the competitive service, to which appointments may be made without examination by the Commission and which constitute Schedule C.

§ 6.302 *Department of State*—(a) *Office of the Secretary.* (1) Five Special Assistants.

(2) Special Assistant for Atomic Energy.

(3) Foreign Affairs Officer (Atomic Energy).

(4) One Special Assistant for International Cooperation Affairs to the Under Secretary.

(5) Two Confidential Assistants and five Private Secretaries to the Secretary.

(6) [Reserved.]

(7) Three Special Assistants to the Under Secretary.

(8) Special Assistant (Fisheries) to the Under Secretary.

(9) Two Confidential Assistants and one Private Secretary to the Under Secretary.

(10) One Private Secretary to the Special Assistant for International Cooperation Affairs to the Under Secretary.

(11) One Staff Assistant.

(12) Secretary of the International Joint Commission—United States and Canada.

(13) One Administrative Assistant to the Staff Assistant.

(14) One Private Secretary to the Chairman, International Joint Commission—United States and Canada.

(15) The Chief of Protocol, Office of the Under Secretary.

(16) One Special Assistant for United Nations Charter Review.

[1] Effective 30 days after November 20, 1956. See 21 F. R. 8985.

(b) *Bureau of Inspection, Security and Consular Affairs.* (1) Deputy Administrator.
(2) One Staff Assistant to the Deputy Administrator.
(3) Administrator.
(4) One Confidential Staff Assistant to the Administrator.
(5) Director, Office of Security.
(6) Assistant Administrator, Refugee Relief.
(c) *Office of the Assistant Secretary for Congressional Relations.* (1) One Congressional Liaison Officer (House).
(2) Deputy Assistant Secretary.
(3) Congressional Liaison Officer (Senate).
(4) One confidential assistant to the Assistant Secretary.
(5) One Private Secretary to the Deputy Assistant Secretary.
(6) One Executive Assistant.
(7) Three Legislative Management Officers.
(8) One Administrative Assistant.
(d) *Office of the Assistant Secretary for Public Affairs.*
(1) [Reserved.]
(2) Two Deputy Assistant Secretaries.
(3) One private secretary to the Assistant Secretary.
(4) Director, UNESCO Relations Staff.
(5) One special assistant to the Assistant Secretary.
(6) One Private Secretary to the Deputy Assistant Secretary.
(7) One Chief, News Division.
(8) One Review Officer.
(9) Director, Official Position Program.
(10) One Private Secretary to the Deputy Assistant Secretary (Domestic Affairs).
(e) *Office of the Deputy Under Secretary for Economic Affairs.* (1) One Deputy Assistant Secretary for Economic Affairs.
(2) One private secretary to the Assistant Secretary.
(3) One Private Secretary to the Deputy Assistant Secretary.
(4) One Special Assistant to the Assistant Secretary.
(5) One Confidential Assistant to the Deputy Under Secretary.
(f) *Office of the Special Assistant—Intelligence.* (1) One Private Secretary.
(2) Special Assistant.
(3) Deputy Special Assistant.
(4) Private Secretary to the Deputy Special Assistant.
(g) *Office of the Counsellor.* (1) One private secretary to the Counsellor.
(2) One Special Assistant to the Counsellor.
(h) *Bureau of Near Eastern, South Asian, and African Affairs.* (1) Deputy Assistant Secretary.
(2) One private secretary to the Assistant Secretary.
(3) One private secretary to the Deputy Assistant Secretary.
(4) One Politico-Economic Adviser.
(5) One Politico-Military Adviser.
(6) One Deputy Assistant Secretary (Africa).
(i) *Bureau of International Organization Affairs.* (1) Two Deputy Assistant Secretaries.
(2) One private secretary to the Assistant Secretary.
(3) One private secretary to the Deputy Assistant Secretary.
(4) One Special Assistant to the Assistant Secretary.
(5) One Special Assistant to the Assistant Secretary (Public Affairs).
(j) *Bureau of European Affairs.* (1) Deputy Assistant Secretary.
(2) One private secretary to the Assistant Secretary.
(3) One private secretary to the Deputy Assistant Secretary.
(4) Deputy Assistant Secretary (German and NATO Affairs).
(5) Private Secretary to the Deputy Assistant Secretary (German and NATO Affairs).
(6) One Director, Planning Staff.
(k) *Bureau of Far Eastern Affairs.* (1) Deputy Assistant Secretary.
(2) One private secretary to the Assistant Secretary.
(3) One private secretary to the Deputy Assistant Secretary.
(4) One Deputy Assistant Secretary for Far Eastern Economic Affairs.
(5) One Regional Planning Advisor.
(l) *Bureau of Inter-American Affairs.* (1) Deputy Assistant Secretary.
(2) One private secretary to the Assistant Secretary.
(3) One Private Secretary to the Deputy Assistant Secretary.
(4) Special Assistant to the Assistant Secretary.
(5) One Special Assistant to the Assistant Secretary (Public Affairs).
(m) *Office of the Legal Adviser.* (1) Deputy Legal Adviser.
(2) One private secretary to the Legal Adviser.
(3) One private secretary to the Deputy Legal Adviser.
(n) *Executive Secretariat.* (1) Director.
(2) Deputy Director.
(o) *Office of the Assistant Secretary for Policy Planning.*
(1) [Reserved.]
(2) Deputy Assistant Secretary for Policy Planning.
(3) Special Assistant to the Assistant Secretary for Policy Planning.
(4) Executive Secretary.
(5) [Reserved.]
(6) Ten Members.
(7) One Private Secretary to the Assistant Secretary for Policy Planning.
(8) One Private Secretary to the Deputy Assistant Secretary for Policy Planning.
(9) One Alternate Department Representative on the National Security Council Planning Board.
(p) *Office of the Assistant Secretary—Controller.* (1) One Private Secretary to the Assistant Secretary—Controller.
(2) Deputy Assistant Secretary for Personnel.
(3) One Private Secretary to the Deputy Assistant Secretary for Personnel.
(4) One Confidential Assistant to the Assistant Secretary—Controller.
(q) *Office of the Deputy Under Secretary for Administration.* (1) One Confidential Assistant to the Deputy Under Secretary.
(2) Chief, Special Liaison Staff.
(3) Two Assistants to the Chief, Special Liaison Staff.
(4) One Private Secretary to the Chief, Special Liaison Staff.
(5) One Special Liaison Assistant, Special Liaison Staff.
(r) *Office of the Deputy Under Secretary for Policy.* (1) Two Special Assistants and one Confidential Assistant to the Deputy Under Secretary.
(s) *Operations Coordinating Board.* (1) One Confidential Assistant to the Executive Officer.
(2) One Private Secretary to the Deputy Executive Officer.

§ 6.303 *Treasury Department*—(a) *Office of the Secretary.* (1) Six Assistants to the Secretary.
(2) Two confidential assistants to the Secretary.
(3) One confidential assistant to the Under Secretary and each Assistant Secretary.
(4) One assistant to the Under Secretary.
(5) One assistant to the Secretary and Supervisor, Analysis Staff.
(6) One assistant to the Secretary (Legislative).
(7) One Head, Tax Analysis Staff.
(8) One Confidential Assistant to the General Counsel.
(b) *Office of the Treasurer of the United States.* (1) One confidential administrative assistant to the Treasurer of the United States.
(2) One confidential assistant to the Treasurer of the United States.
(c) *Bureau of Customs.* (1) Commissioner of Customs.
(2) One confidential assistant to the Commissioner.
(d) *United States Savings Bonds Division.* (1) National Director.
(e) *Office of Production and Defense Lending.* (1) Until September 30, 1957, one Staff Assistant to the Assistant Secretary of the Treasury, Reconstruction Finance Corporation.
(2) Until September 30, 1957, one Special Assistant to the Assistant Secretary of the Treasury, Reconstruction Finance Corporation.
(3) Until September 30, 1957, two Administrative Assistants, Office of the Assistant Secretary of the Treasury, Reconstruction Finance Corporation.
(4) Until September 30, 1957, the General Counsel, the Director of the Office of Loan Administration and Liquidation, and the Controller (Treasurer), Reconstruction Finance Corporation.

§ 6.304 *Department of Defense*—(a) *Office of the Secretary.* (1) Two confidential or special assistants and two confidential assistants (private secretaries) to the Secretary of Defense.
(2) Two confidential assistants (private secretaries) to the Deputy Secretary of Defense and one confidential assistant (private secretary) to each of the following: The Assistant Secretary of Defense, Manpower and Personnel; the Assistant Secretary of Defense, International Security Affairs; the Chairman of the Joint Chiefs of Staff; the Chairman of the Research and Development Board; the Defense Liaison Officer to the White House; the Assistant Secretary of Defense, Legislative Affairs; the Assistant Secretary of Defense, Applications Engineering; the Assistant Secre-

tary of Defense, Properties and Installations; the Assistant Secretary of Defense, Health and Medical; the Assistant Secretary of Defense, Supply and Logistics; the General Counsel; the U. S. Military Representative, NATO Standing Group; and the Assistant to the Secretary of Defense, Atomic Energy.

(3) One confidential assistant to the Assistant Secretary of Defense, Supply and Logistics.

(4) [Reserved.]

(5) One Administrative Secretary to the Secretary.

(6) One Special and Confidential Assistant to the Assistant Secretary of Defense, Legislative and Public Affairs.

(7) Three Chauffeurs for the Secretary of Defense.

(8) Two Special Assistants to the Deputy Secretary.

(9) Two Deputy Assistant Secretaries to the Assistant Secretary of Defense for Legislative and Public Affairs.

(10) [Reserved.]

(11) One Confidential Assistant to each of the following: The Assistant Secretary of Defense for Properties and Installation and the Assistant Secretary of Defense for International Security Affairs.

(12) One Executive Assistant to the Assistant Secretary of Defense for Legislative and Public Affairs.

(13) The Defense Advisor and Deputy Defense Advisor to USRO in Paris, France.

(14) Two private secretaries to the Defense Advisor to USRO in Paris, France.

(15) One Director, Office of Personnel Security Policy.

(16) One Deputy Assistant Secretary to the Assistant Secretary of Defense for International Security Affairs.

(17) One Confidential Secretary to the Special Advisor to the Assistant Secretary of Defense, Research and Development.

(b) *Office of Special Operations.* (1) The Director.

(2) Two Private Secretaries to the Director.

(c) *Court of Military Appeals.* (1) One Private Secretary and two Technical Assistants to each Judge of the Court.

§ 6.305 *Department of the Army*—(a) *Office of the Secretary.* (1) One private secretary or confidential assistant to the Secretary, to the Under Secretary, and to each Assistant Secretary of the Army.

(2) One Deputy or Special Assistant to each Assistant Secretary of the Army.

(3) The General Counsel.

(4) One Special Assistant to the Secretary.

(5) [Reserved.]

(6) One Publications Writer.

(7) One Special Assistant to the Under Secretary of the Army.

(8) One Special Assistant to the Deputy Assistant Secretary of the Army (Manpower and Reserve Forces).

(9) One Special Assistant to the Assistant Secretary of the Army (Logistics) for Procurement.

(10) One Confidential Assistant to the Special Assistant to the Deputy Assistant Secretary of the Army (Manpower and Reserve Forces).

(b) *General.* (1) One Administrative Assistant to the Personal Physician to the President.

(2) One administrative assistant and one private secretary to the Military Aide to the President.

§ 6.306 *Department of the Navy*—(a) *Office of the Secretary.* (1) Three civilian aides or executive assistants to the Secretary and two civilian aides or executive assistants to the Under Secretary and to each Assistant Secretary of the Navy.

(2) One private or confidential secretary to the Secretary, to the Under Secretary, and to each Assistant Secretary of the Navy.

(3) One chauffeur for the Secretary of the Navy.

(4) One Confidential Secretary to the Civilian Aide to the Secretary of the Navy.

§ 6.307 *Department of the Air Force*—(a) *Office of the Secretary.* (1) Three special assistants to the Secretary, and one special assistant to the Under Secretary, and to each Assistant Secretary of the Air Force.

(2) Two Private Secretaries to the Secretary, and one Private Secretary to the Under Secretary, to each Assistant Secretary of the Air Force, and one to each Special Assistant whose appointment is authorized under subparagraph (1) of this paragraph.

(3) The General Counsel.

§ 6.308 *Department of Justice*—(a) *Office of the Attorney General.* (1) The Executive Assistant to the Attorney General.

(2) The Pardon Attorney.

(3) Two private secretaries to the Attorney General.

(4) One chauffeur for the Attorney General.

(5) Two Special Assistants for Public Relations.

(6) One confidential assistant to the Attorney General.

(7) Two Secretaries for the Attorney General.

(8) Two Receptionists for the Attorney General.

(b) *Office of the Deputy Attorney General.* (1) The First Assistant to the Deputy Attorney General.

(2) One confidential assistant (private secretary) to the Deputy Attorney General.

(3) Head of Executive Office for United States Attorneys.

(c) *Office of the Solicitor General.* (1) The First Assistant to the Solicitor General.

(2) One position of Trial Attorney (General)—Second Assistant.

(3) One confidential assistant (private secretary) to the Solicitor General.

(d) *Anti-Trust Division.* (1) The First Assistant to the Assistant Attorney General.

(2) Second Assistant to the Assistant Attorney General.

(3) Chief, General Litigation Section.

(4) Chief, Trial Section.

(5) Chief, Special Litigation Section.

(6) Chief, Transportation and Litigation Section.

(7) Chief, Judgments and Judgment Enforcement Section.

(8) Chief, Legislation and Clearance Section.

(9) Chief, Appellate Section.

(10) Chief, Field Office (7 positions).

(11) One confidential assistant (private secretary) to the Assistant Attorney General.

(12) Chief, Economic Section.

(e) *Civil Division.* (1) The First Assistant to the Assistant Attorney General.

(2) Second Assistant to Assistant Attorney General.

(3) Third Assistant to Assistant Attorney General.

(4) Chief, Admiralty and Shipping Section.

(5) Chief, Court of Claims Section.

(6) Chief, Fraud Section.

(7) Chief, General Litigation Section.

(8) Chief, Government Claims Section.

(9) Chief, Japanese Claims Section.

(10) Chief, Patent Section.

(11) Chief, Supreme Court Section.

(12) Chief, Torts Section.

(13) Chief, Veterans Affairs Section.

(14) Chief, Admiralty and Shipping Section, New York.

(15) One confidential assistant (private secretary) to the Assistant Attorney General.

(f) *Criminal Division.* (1) The First Assistant to the Assistant Attorney General.

(2) Second Assistant to Assistant Attorney General.

(3) Chief, Administrative Regulations Section.

(4) Chief, Civil Rights Section.

(5) Chief, General Crimes Section.

(6) Chief, Trial Section.

(7) Chief, Appeals and Research Section.

(8) One confidential assistant (private secretary) to the Assistant Attorney General.

(9) Chief, Organized Crime and Racketeering Section.

(10) Chief, Fraud Section.

(g) *Tax Division.* (1) The First Assistant to the Assistant Attorney General.

(2) Chief, Trial Section.

(3) Chief, Appellate Section.

(4) Chief, Criminal Section.

(5) Chief, Compromise Section.

(6) One confidential assistant (private secretary) to the Assistant Attorney General.

(7) Second Assistant to Assistant Attorney General.

(h) *Lands Division.* (1) The First Assistant to the Assistant Attorney General.

(2) Chief, Lands Acquisition Section.

(3) Chief, Trial Section.

(4) Chief, Appellate Section.

(5) Chief, Legislation and General Section.

(6) One confidential assistant (private secretary) to the Assistant Attorney General.

(7) Second Assistant to Assistant Attorney General.

(8) Chief, Indian Claims Section.

(l) *Office of Alien Property.* (1) One Deputy Director.
(2) Chief, Legal and Legislative Section.
(3) [Reserved.]
(4) Chief, Claims Branch.
(5) Chief, Litigation Branch.
(6) Manager, Field Office (5 positions).
(7) One confidential assistant (private secretary) to the Assistant Attorney General.
(8) Chief, Management and Liquidation Branch.
(9) Chief, Inter-custodial and Property Branch.
(10) Second Assistant to Assistant Attorney General.
(j) *Immigration and Naturalization Service.* (1) General Counsel.
(2) One confidential assistant (private secretary) to the Commissioner.
(3) One Deputy Commissioner.
(4) Assistant Commissioner, Examinations Division.
(5) Assistant Commissioner, Investigations Division.
(6) Assistant Commissioner, Enforcement Division.
(7) Assistant Commissioner, Field Inspection and Security Division.
(8) Executive Assistant to the Commissioner.
(k) *Board of Immigration Appeals.* (1) Executive Assistant.
(2) The Chairman.
(3) Four Members of the Board.
(l) *Office of Legal Counsel.* (1) One confidential assistant (private secretary) to the Assistant Attorney General.
(2) The First Assistant to the Assistant Attorney General.
(m) *Bureau of Prisons.* (1) The Director.
(2) Three Assistant Directors.
(n) *Federal Prison Industries, Inc.* (1) The Commissioner of Industries.
(2) Associate Commissioner.
(o) *Office of United States Attorney.* (1) Secretary and confidential assistant to the United States Attorney (ten positions).
(p) *Internal Security Division.* (1) The First Assistant to the Assistant Attorney General.
(2) One Executive Assistant to the Assistant Attorney General.
(3) One Confidential Assistant to the Assistant Attorney General.
(4) One Confidential Assistant (Private Secretary) to the Assistant Attorney General.
(5) Chief, Appeals and Research Section.
(6) Chief, Subversive Organizations Section.
(7) Chief, Foreign Agents Registration Section.
(8) Chief, Subversive Activities Section.

§ 6.309 *Post Office Department*—(a) *Office of the Postmaster General.* (1) One special and confidential assistant to the Assistant Postmaster General (Bureau of Transportation).
(2) One Executive Assistant to the Postmaster General.
(3) Four Special Assistants to the Postmaster General.
(4) One Receptionist.
(5) One Special Assistant to the Deputy Postmaster General.
(6) One Assistant to the Executive Assistant to the Postmaster General.
(7) Two Confidential Assistants to the Postmaster General.
(8) One Private Secretary to the Executive Assistant to the Postmaster General.
(9) One Secretarial Assistant to the Postmaster General.
(b) *Bureau of Facilities.* (1) [Reserved.]
(2) One confidential assistant to the Assistant Postmaster General.
(3) One private secretary to the Assistant Postmaster General.
(4) One Deputy Assistant Postmaster General.
(5) One Private Secretary to the Deputy Assistant Postmaster General.
(c) *Bureau of Transportation.* (1) Information specialist.
(2) One Special Assistant to the Assistant Postmaster General.
(3) One Technical Assistant to the Assistant Postmaster General.
(4) One Confidential Assistant (Field Operations).
(5) One Deputy Assistant Postmaster General.
(6) One Confidential Assistant to the Assistant Postmaster General.
(7) One Private Secretary to the Assistant Postmaster General.
(d) *Bureau of Personnel.* (1) Confidential assistant to the Assistant Postmaster General.
(2) One Private Secretary to the Assistant Postmaster General.
(e) *Office of the Solicitor.* (1) The Solicitor.
(2) Two Private Secretaries to the Solicitor.
(3) One Deputy Solicitor.
(4) One Private Secretary to the Deputy Solicitor.
(f) *Bureau of Post Office Operations.* (1) Two Confidential Assistants to the Assistant Postmaster General.
(2) Two Special Assistants to the Assistant Postmaster General.
(3) One Staff Assistant to the Assistant Postmaster General.
(4) One Private Secretary to the Assistant Postmaster General.
(g) *Bureau of Finance.* (1) One Confidential Assistant to the Assistant Postmaster General and Controller.
(2) One Special Representative to the Assistant Postmaster General and Controller.
(3) One Private Secretary to the Assistant Postmaster General and Controller.

§ 6.310 *Department of the Interior*—(a) *Office of the Secretary.* (1) Assistant to the Secretary.
(2) One confidential assistant and one private secretary to the Secretary.
(3) Four special assistants to the Secretary.
(4) Six Confidential Assistants (Field Representatives).
(5) Chauffeur for the Secretary.
(6) Special assistant to the Under Secretary.
(7) Confidential assistant (administrative assistant) to the Under Secretary.
(8) One special assistant and one confidential assistant (administrative assistant) to each of the Assistant Secretaries for Mineral Resources, Public Land Management, and Water and Power Development.
(9) Director, Technical Review Staff.
(10) Assistant Director, Technical Review Staff.
(11) Advisor on International Affairs, Technical Review Staff.
(12) Planning Reports Review Coordinator, Technical Review Staff.
(13) One Confidential Assistant (Administrative Assistant) to the Director, Technical Review Staff.
(14) One Private Secretary to the Under Secretary.
(15) One Assistant to the Secretary (Public Relations).
(b) *Office of the Solicitor.* (1) One confidential assistant to the Solicitor.
(2) Two Special Assistants to the Solicitor.
(3) One Deputy Solicitor.
(4) Five Associate Solicitors.
(5) One Legislative Counsel.
(c) *Fish and Wildlife Service.* (1) The Director.
(2) One private secretary to the Director.
(3) One Assistant Director for Wildlife.
(4) One Associate Director.
(5) One Assistant Director for Field Operations.
(d) *Bureau of Mines.* (1) One private secretary to the Director.
(2) One Assistant Director (Programming).
(3) One Assistant Director (Health and Safety).
(4) One Deputy Director.
(5) One Assistant Director (Helium Activities).
(e) *Geological Survey.* (1) One Private Secretary to the Director.
(f) *Bureau of Reclamation.* (1) One private secretary to the Commissioner.
(2) Three Assistant Commissioners.
(g) *Southeastern Power Administration.* (1) Administrator.
(2) One private secretary to the Administrator.
(h) *National Park Service.* (1) Director.
(2) One private secretary to the Director.
(3) Two Assistant Directors.
(4) One Associate Director.
(i) *Bonneville Power Administration.* (1) Administrator.
(2) One private secretary to the Administrator.
(3) Executive Secretary.
(4) Two Assistants to the Administrator.
(j) *Bureau of Indian Affairs.* (1) [Reserved.]
(2) Two Assistants to the Commissioner.
(3) One Private Secretary to the Commissioner.
(4) One Assistant to the Commissioner (Industrial Development).
(k) *Southwestern Power Administration.* (1) Administrator.
(2) Assistant Administrator.
(3) One private secretary to the Administrator.

(l) *Office of Territories.* (1) One Director.
(2) One Private Secretary to the Director.
(3) Assistant Director (Alaskan Affairs) and Assistant Director (Insular Affairs).
(4) One Governor, American Samoa.
(5) One Secretary of American Samoa.
(6) One Chief Justice of American Samoa.
(7) One Deputy High Commissioner, Trust Territories of the Pacific Islands.
(8) One Private Secretary to the Governor of Virgin Islands.
(9) One Administrative Assistant to the Governor of Virgin Islands.
(10) Deputy Director.
(11) One Private Secretary to the Governor of Alaska.
(12) One Private Secretary to the Governor of Hawaii.
(13) Director, Alaska Road Commission.
(14) One Special Assistant to the Governor of Alaska.
(15) [Reserved.]
(16) One Clerical Assistant to the Governor of Alaska.
(17) Two Household Assistants to the Governor of Alaska.
(18) Director, Alaska Public Works.
(19) Chief Engineer, Alaska Public Works.
(20) Chief Engineer, Alaska Road Commission.
(21) One Administrative Assistant to the Governor of American Samoa.
(22) One Secretary to the Government Secretary of American Samoa.
(23) One Secretary to the Governor of Guam.
(24) One Secretary to the Government Secretary of Guam.
(25) Chief Justice of the Trust Territory.
(26) One Secretary to the High Commissioner of The Trust Territory.
(27) One Secretary to the Deputy High Commissioner of The Trust Territory.
(28) One Staff Assistant to the Governor of Alaska.

§ 6.311 *Department of Agriculture—*
(a) *Office of the Secretary.* (1) One administrative assistant to the Secretary.
(2) One assistant to the Secretary (States Relations).
(3) One assistant to the Secretary (Congressional Relations).
(4) One executive assistant to the Secretary.
(5) Five Confidential Assistants to the Secretary.
(6) One private secretary to the Secretary.
(7) Two chauffeurs for the Secretary.
(8) One Private Secretary and Administrative Assistant to the Executive Assistant to the Secretary.
(9) One Confidential Assistant to each of the three Assistant Secretaries other than the Administrative Assistant Secretary.
(10) One Private Secretary to each of the three Assistant Secretaries other than the Administrative Assistant Secretary.
(11) One Staff Assistant-Program Appraisal.
(12) One Special Assistant to the Secretary.
(13) One Private Secretary and Administrative Assistant to the Special Assistant to the Secretary.
(b) *Rural Electrification Administration.* (1) One private secretary and one Assistant to the Administrator.
(2) One Deputy Administrator.
(3) One Assistant Administrator.
(4) One Confidential Assistant to the Administrator.
(c) *Office of the Under Secretary.* (1) One confidential assistant to the Under Secretary.
(2) One private secretary to the Under Secretary.
(d) *Office of the General Counsel.* (1) One Deputy General Counsel.
(2) Three Assistant General Counsels.
(3) One Private Secretary to the General Counsel.
(e) *Foreign Agricultural Service.* (1) Two Assistant Administrators.
(2) One Assistant to the Administrator.
(3) The Administrator.
(4) The Deputy Administrator.
(5) One Private Secretary to the Administrator.
(f) *Farmers Home Administration.* (1) One Deputy Administrator.
(2) Two Assistant Administrators.
(3) One Assistant to the Administrator.
(4) One Confidential Assistant to the Administrator.
(5) One Private Secretary to the Administrator.
(6) One Assistant Administrator (Insured Loan Funds).
(g) *Agricultural Conservation Program.* (1) Chief, Agricultural Conservation Program.
(2) One Assistant Chief.
(3) One Private Secretary to the Chief.
(h) *Federal Crop Insurance Corporation.* (1) The Manager.
(2) One Assistant Manager.
(3) Members of the Board of Directors.
(4) One Private Secretary to the Manager.
(i) *Commodity Stabilization Service.* (1) Administrator.
(2) One Associate Administrator.
(3) Three Deputy Administrators.
(4) Two Assistant Deputy Administrators.
(5) Four Confidential Assistants to the Administrator.
(6) One private secretary to the Administrator.
(7) Director, Livestock and Dairy Division.
(8) Director, Grain Divison.
(9) Director, Transportation and Warehousing Division.
(10) Director, Cotton Division.
(11) Director, Oils and Peanut Division.
(12) Director, Sugar Division.
(13) Director, Tobacco Division.
(14) Director, Price Division.
(15) Director, Foods and Materials Requirements Division.
(16) Director, Soil Bank Division.
(j) *Commodity Credit Corporation.* (1) The President.
(2) The Executive Vice President.
(3) The Secretary.
(4) One Confidential Assistant to the President.
(k) *Extension Service.* (1) Director of Extension Work.
(2) One Assistant Director.
(3) One Confidential Assistant to the Director.
(4) One Private Secretary to the Director.
(l) *Soil Conservation Service.* (1) Chief.
(2) One Deputy Chief.
(3) One Confidential Assistant to the Chief.
(4) One Private Secretary to the Chief.
(m) *Office of the Director, Agricultural Credit Services.* (1) The Director, Agricultural Credit Services.
(2) One Confidential Assistant to the Director.
(3) One Private Secretary to the Director.

§ 6.312 *Department of Commerce—*
(a) *Office of the Secretary.* (1) Deputy Under Secretary for Transportation.
(2) Six Confidential Assistants to the Secretary.
(3) Two Private Secretaries to the Secretary.
(4) One Confidential Assistant and two Private Secretaries to the Under Secretary.
(5) One Confidential Assistant and one Private Secretary to the Under Secretary for Transportation.
(6) One Confidential Assistant and one Private Secretary to the Assistant Secretary for Domestic Affairs.
(7) One Confidential Assistant and one Private Secretary to the Assistant Secretary for International Affairs.
(8) One Confidential Assistant and one Private Secretary to the General Counsel.
(9) One Private Secretary to the Deputy Under Secretary for Transportation.
(10) Administrator, Defense Air Transport Administration.
(11) One Private Secretary to the Administrator, Defense Air Transport Administration.
(12) Deputy General Counsel.
(13) One Private Secretary to the Deputy General Counsel.
(14) One Special Assistant to the Secretary.
(15) One Chauffeur for the Secretary.
(16) One Deputy Assistant Secretary of Commerce for International Affairs.
(17) One Deputy Assistant Secretary of Commerce for Domestic Affairs.
(18) One private secretary to the Deputy Assistant Secretary for Domestic Affairs.
(19) One private secretary to the Deputy Assistant Secretary for International Affairs.
(20) One Executive Director, Foreign-Trade Zones Operations.
(21) One Associate General Counsel (Defense Production Activities).
(22) One Private Secretary to the Associate General Counsel (Defense Production Activities).

(23) One Confidential Assistant to the Administrator, Defense Air Transport Administration.

(24) One Confidential Assistant to the Assistant Secretary for Administration.

(25) Director, Advisory Committee on Export Policy Staff, Office of the Assistant Secretary of Commerce for International Affairs.

(26) Director, Office of International Trade Fairs.

(27) Associate Director, Office of International Trade Fairs.

(28) Director, Office of Strategic Information.

(b) *Inland Waterways Corporation.* (1) Chairman of the Advisory Board.

(c) *Civil Aeronautics Administration.* (1) One confidential assistant to the Administrator.

(2) Deputy Administrator.

(3) General Counsel.

(4) One private secretary to the Administrator, the Deputy Administrator, and the General Counsel.

(d) *Business and Defense Services Administration.* (1) Director, Office of Field Service.

(2) One Special Assistant to the Director, Office of Field Service.

(3) One Private Secretary to the Director, Field Service.

(4) Administrator.

(5) Two Confidential Assistants to the Administrator.

(6) One Private Secretary to the Administrator.

(7) Deputy Administrator.

(8) One Private Secretary to the Deputy Administrator.

(9) One Confidential Assistant to the Deputy Administrator.

(10) Three Assistant Administrators.

(11) One Private Secretary to each of the three Assistant Administrators.

(12) One Assistant Deputy Administrator.

(13) One Private Secretary to the Assistant Deputy Administrator.

(14) Chairman, Industry Evaluation Board.

(15) Director of Industrial Defense.

(e) *Bureau of Census.* (1) One private secretary to the Director.

(f) *Weather Bureau.* (1) One private secretary to the Chief.

(g) *National Bureau of Standards.* (1) One private secretary to the Director.

(h) *Bureau of Public Roads.* (1) Commissioner of Public Roads.

(2) Solicitor.

(3) One confidential assistant to the Federal Highway Administrator.

(4) One private secretary to the Federal Highway Administrator.

(5) One private secretary to the Solicitor.

(i) *Patent Office.* (1) Private secretary to the Commissioner, and to each of the Assistant Commissioners.

(j) *Coast and Geodetic Survey.* (1) One private secretary to the Director.

(k) *Federal Maritime Board.* (1) Two Confidential Assistants to the Chairman.

(2) One Confidential Assistant to each Member of the Board (other than the Chairman).

(l) *Maritime Administration.* (1) General Counsel.

(2) One Director, Office of National Shipping Authority and Government Aid.

(3) One Private Secretary to the Administrator.

(4) One Private Secretary to the General Counsel.

(5) One Private Secretary to the Director, Office of National Shipping Authority and Government Aid.

(m) *Bureau of Foreign Commerce.* (1) The Director.

§ 6.313 *Department of Labor*—(a) *Office of the Secretary.* (1) Four special assistants, two confidential assistants, and one confidential assistant (private secretary) to the Secretary of Labor.

(2) One chauffeur for the Secretary of Labor.

(3) One special assistant and one private secretary to the Under Secretary of Labor.

(4) One private secretary to each Assistant Secretary of Labor who is appointed by the President.

(5) One Special Assistant to the Assistant Secretary for International Labor Affairs.

(6) Private Secretary to the Secretary.

(b) *Office of the Solicitor.* (1) One Associate Solicitor.

(2) One private secretary to the Solicitor.

(c) *Office of Information.* (1) Director.

(2) One Private Secretary to the Director.

(d) *Bureau of Employment Security.* (1) Director.

(2) Deputy Director.

(3) One private secretary to the Director.

(e) *Bureau of Labor Statistics.* (1) One private secretary to the Commissioner.

(2) Deputy Commissioner.

(f) *Bureau of Apprenticeship.* (1) Director.

(2) Two Deputy Directors.

(3) One private secretary to the Director.

(g) *Women's Bureau.* (1) Assistant Director.

(2) One private secretary to the Director.

(3) One Special Assistant to the Director.

(h) *Bureau of Labor Standards.* (1) Director.

(2) One Associate Director.

(3) One private secretary to the Director.

(i) *Wage and Hour and Public Contracts Divisions.* (1) Deputy Administrator.

(2) One Confidential Assistant to the Administrator.

(j) *Office of International Labor Affairs.* (1) Executive Director.

(k) *Veterans Employment Service.* (1) Chief.

(l) *Bureau of Veterans Reemployment Rights.* (1) Director.

(m) *Bureau of Employees' Compensation.* (1) Director.

§ 6.314 *Department of Health, Education, and Welfare*—(a) *Office of the Secretary.* (1) Director of Security.

(2) One Confidential Assistant to the Secretary.

(3) [Reserved.]

(4) Publications Writer.

(5) One Deputy Director of Security.

(6) Two Assistants to the Secretary.

(7) One Executive Secretary.

(8) Two confidential secretaries to the Under Secretary.

(9) One Special Representative of the Secretary.

(10) One Assistant to the Secretary.

(11) One Congressional Liaison Officer.

(12) One Assistant Congressional Liaison Officer.

(13) One Assistant to the Under Secretary.

(b) *Office of Vocational Rehabilitation.* (1) Director, Vocational Rehabilitation.

(c) *Social Security Administration.* (1) Director, Bureau of Old Age and Survivors Insurance.

(2) Director, Bureau of Public Assistance.

(3) Director, Bureau of Federal Credit Unions.

(4) One Deputy Commissioner of Social Security.

(5) One Technical Adviser to the Commissioner of Social Security.

(d) *Office of Education.* (1) One Deputy Commissioner of Education.

(2) One Confidential Assistant to the Commissioner of Education.

(3) One Special Assistant to the Commissioner of Education.

(e) *Office of the Assistant Secretary for Federal-State Relations.* (1) One Confidential Assistant to the Assistant Secretary.

(2) One Special Assistant on Federal-State Problems.

(3) One Special Assistant.

(f) *Office of the General Counsel.* (1) General Counsel.

(2) One Associate General Counsel.

(g) *Office of the Assistant Secretary for Program Analysis.* (1) One Special Assistant to the Assistant Secretary.

§ 6.315 *Executive Office of the President*—(a) *Bureau of the Budget.* (1) Assistant to the Director.

(2) Two Assistant Directors.

(3) Two Private Secretaries to the Director.

(4) One Private Secretary to the Deputy Director.

(5) One Private Secretary to each of the two Assistant Directors.

(6) One Private Secretary to the Assistant to the Director.

(b) *Council of Economic Advisers.* (1) One secretary to the Chairman and one to each Member.

§ 6.317 *Interstate Commerce Commission.* (a) One private secretary to each Commissioner.

(b) Managing Director.

§ 6.318 *General Accounting Office.* (a) One Administrative Assistant (Confidential Assistant) to the Comptroller General.

(b) One Private Secretary to the Comptroller General.

§ 6.320 *The Tax Court of the United States.* (a) One Private Secretary and two Technical Assistants for the Chief Judge and each Judge.

§ 6.321 *Office of Defense Mobilization.* (a) Seven Assistant Directors.

§ 6.322 *Veterans' Administration*—(a) *Office of the Administrator.* (1) Two Special Assistants to the Administrator.

(2) One confidential assistant (private secretary) to the Administrator.

(3) One Confidential Administrative Assistant to the Administrator.

(4) Six Confidential Assistants to the Special Assistant to the Administrator.

(5) The Deputy Administrator.

(6) The General Counsel.

(7) One Assistant Administrator for Appraisal and Security.

(b) *Department of Medicine and Surgery.* (1) One confidential assistant (private secretary) to the Chief Medical Director.

(c) *Department of Insurance.* (1) The Deputy Administrator.

(d) *Department of Veterans Benefits.* (1) The Deputy Administrator.

§ 6.323 *Federal Civil Defense Administration.* (a) One Executive Assistant Administrator.

(b) One Assistant to the Administrator.

(c) One Assistant Administrator, Field and Congressional Relations; one Assistant Administrator, Civil Defense Planning Staff; one Assistant Administrator, Civil Defense Education Services; one Assistant Administrator, Civil Defense Operations Control Service; and one Assistant Administrator, Civil Defense Technical Advisory Service.

(d) Two Administrative Assistants to the Administrator.

(e) One Administrative Assistant to the Deputy Administrator.

(f) [Reserved.]

(g) One Secretary to the Assistant Administrator, Field and Congressional Relations.

(h) One General Counsel.

(i) One Assistant Administrator, General Administration.

(j) One Courier, Office of the Administrator.

(k) One Assistant Administrator, Inspection.

(l) One Deputy Assistant Administrator, Civil Defense Planning Staff.

(m) One Deputy Executive Assistant Administrator.

(n) One Assistant Administrator, Economic Requirements Service

§ 6.324 *United States Information Agency*—(a) One Secretarial Assistant to the Deputy Director.

(b) One Special Assistant to the Director.

(c) One Secretarial Assistant to the Director.

(d) One Secretary to the Director.

(e) [Reserved.]

(f) One Chief, Office of Research and Intelligence.

(g) One Special Assistant to the Deputy Director.

(h) One Staff Assistant to the Chief, Office of Research and Intelligence.

§ 6.325 *Federal Power Commission.* (a) One private secretary and one confidential assistant to each Commissioner.

(b) One assistant to the Chairman.

(c) General Counsel.

(d) Executive Director.

(e) One Private Secretary to the Executive Director.

(f) One Technical Assistant to each Commissioner.

§ 6.326 *Securities and Exchange Commission.* (a) One General Counsel.

(b) One Chief Accountant.

(c) One executive assistant to the Chairman.

(d) One Associate General Counsel.

(e) One Confidential Assistant to each Member of the Commission (5 positions).

(f) The Executive Director.

§ 6.327 *National Mediation Board.* (a) One private secretary to each member of the National Railroad Adjustment Board.

§ 6.328 *Small Business Administration.* (a) Three Deputy Administrators.

(b) One Special Assistant to each Deputy Administrator.

(c) Two Special and Confidential Assistants to the Administrator.

(d) One General Counsel.

(e) Director, Office of Financial Assistance.

(f) Director, Office of Procurement and Technical Assistance.

(g) Director, Office of Economic Adviser.

(h) Director, Office of Information.

(i) One Special Assistant to the Administrator.

(j) One Private Secretary to the Administrator.

(k) One Confidential Assistant (Private Secretary) to each Deputy Administrator.

(l) Deputy Director, Office of Economic Adviser.

(m) Deputy Director, Office of Procurement and Technical Assistance.

(n) Executive Secretary to the Loan Review Committee and Special Assistant to the Director, Office of Financial Assistance.

(o) One Program Coordinator (Department of Defense).

§ 6.330 *Federal Trade Commission.* (a) One private secretary or confidential assistant to the Chairman.

(b) General Counsel.

(c) Director, Bureau of Litigation.

(d) Director, Bureau of Investigation.

(e) Director, Bureau of Consultation.

(f) Director, Bureau of Economics.

(g) One Secretary of the Federal Trade Commission.

(h) Executive Director.

§ 6.333 *General Services Administration*—(a) *Office of the Administrator.* (1) Three Members of the Board of Review.

(2) The Deputy Administrator.

(3) The Assistant Administrator.

(4) Two Special Assistants to the Administrator.

(5) One Confidential Assistant to the Administrator.

(6) One Special Assistant to the Administrator (Federal Supply and Emergency Procurement).

(7) One Special Assistant to the Administrator (Legislative Liaison).

(8) Director of Public Information and Reports.

(9) The Assistant Administrator for Program Planning and Coordination.

(10) One Confidential Assistant to the Assistant Administrator.

(b) *Public Buildings Service.* (1) The Commissioner.

(c) *Federal Supply Service.* (1) The Commissioner.

(d) *National Archives and Records Service.* (1) The Archivist of the United States.

(e) *Emergency Procurement Service.* (1) The Commissioner.

(f) *Transportation and Public Utilities Service.* (1) The Commissioner.

§ 6.334 *Federal Communications Commission.* (a) One General Counsel.

(b) One Chief Engineer.

(c) One Chief Accountant.

(d) Two assistant general counsels.

(e) One Secretary to the Commission.

§ 6.335 *United States Tariff Commission*—(a) One Private Secretary to each Commissioner.

§ 6.336 *Railroad Retirement Board*—(a) One administrative (confidential) assistant to the Chairman.

§ 6.337 *Civil Aeronautics Board.* (a) Executive Director of the Board.

(b) One confidential assistant to each Member of the Board.

(c) One special assistant to the Chairman of the Board.

(d) General Counsel of the Board.

(e) Director, Bureau of Air Operations.

(f) Director, Bureau of Safety Regulations.

(g) Director, Bureau of Safety Investigations.

(h) Chief, Office of Enforcement.

(i) One Congressional Liaison Officer.

(j) One Private Secretary to the Congressional Liaison Officer.

§ 6.338 *National Labor Relations Board*—(a) One Private Secretary to the Chairman of the Board.

(b) One Solicitor.

(c) One Chief Legal Assistant to each Board Member.

(d) One Confidential Assistant to each Board Member.
(e) One Associate General Counsel, Division of Operations.
(f) One Associate General Counsel, Division of Law.
(g) Two Special Assistants to the General Counsel.
(h) One Confidential Assistant to the General Counsel.
(i) One Special Assistant to the Associate General Counsel, Division of Operations.

§ 6.340 *Export-Import Bank of Washington.* (a) One Executive Vice President.
(b) One Senior Vice President.
(c) One Confidential Assistant to the President.
(d) One Private Secretary to the President.
(e) One Private Secretary to the First Vice President.
(f) The General Counsel.
(g) One Private Secretary to each of the three members of the Board of Directors.
(h) One Special Assistant to the Board of Directors.

§ 6.341 *Farm Credit Administration.* (a) Three Directors of Credit Services.
(b) One General Counsel.
(c) One Special Assistant to the Governor.
(d) One First Deputy Governor.
(e) Four Deputy Directors of Credit Services.
(f) Deputy Governor in Charge of the Finance and Accounts and Administrative Divisions.

§ 6.342 *Housing and Home Finance Agency*—(a) *Office of the Administrator.* (1) One liaison officer.
(2) One Deputy Administrator.
(3) One Assistant Administrator for Plans and Programs.
(4) General Counsel.
(5) Assistant to the Administrator (International Housing Adviser).
(6) Assistant to the Administrator (Racial Relations).
(7) Community Facilities Commissioner.
(8) Deputy Urban Renewal Commissioner.
(9) President, Federal National Mortgage Association.
(10) One Assistant Commissioner, Community Facilities and Special Operations.
(11) Assistant Administrator for Congressional Liaison and Public Affairs.
(12) One Special Assistant to the Administrator.
(13) One Assistant Director for Operations, Division of Slum Clearance and Urban Redevelopment.
(14) One Special Assistant (Administrator's Office).
(15) One Assistant Administrator (Administrator's Office).
(b) *Federal Housing Administration.* (1) One Deputy Commissioner.
(2) One General Counsel.
(3) One Assistant Commissioner for Operations.
(4) One Assistant Commissioner, Technical Standards.
(5) One Assistant to the Commissioner.
(6) One Minority Group Housing Adviser.
(7) One Special Assistant to the Commissioner.
(8) One Assistant Commissioner for Programs.
(9) Director of Examination and Audit.
(10) Director, Program Division.
(11) One Confidential Assistant to the Assistant Commissioner for Programs.
(12) One Administrative Assistant to the Assistant to the Commissioner.
(c) *Public Housing Administration.* (1) One Special Assistant to the Commissioner (Liaison).
(2) One Special Assistant to the Commissioner (Racial Relations).
(3) General Counsel.
(4) Assistant Commissioner for Programs.
(5) Assistant Commissioner for Operations.
(6) One Deputy Commissioner.
(7) One Assistant Commissioner.
(8) One Confidential Assistant to the Commissioner.
(d) [Reserved]
(e) *Federal Flood Indemnity Administration.* (1) One Deputy Commissioner.
(2) One Assistant Commissioner for Indemnity Operations.
(3) One Assistant Commissioner for Loan Contract Operations.
(4) One Assistant Commissioner for Industry and Government Relations.

§ 6.343 *Indian Claims Commission.* (a) One private secretary to each Commissioner.

§ 6.346 *Federal Mediation and Conciliation Service.* (a) One General Counsel.
(b) Two Private Secretaries to the Director.
(c) One Private Secretary to each of the following: The Associate Director, the Assistant Director, and the General Counsel.
(d) One Private Secretary to the National Office Representative.
(e) One Special Representative.

§ 6.349 *Foreign Operations Administration*—(a) *Office of the Director.* (1) Two Assistants to the Director.
(2) One Confidential Assistant (Private Secretary) to the Director.
(3) One Private Secretary to the Director.
(4) One Confidential Assistant to the Deputy Director of Foreign Operations.
(5) Two Chauffeur-Guards for the Director.
(b) *Office of the Deputy Director for Management.* (1) Deputy Director for Management.
(2) Director for Research, Statistics and Reports.
(3) One Confidential Assistant to the Director for Research, Statistics and Reports.
(4) Deputy General Counsel.
(5) Director for Public Reports.
(6) Two Special Assistants for Congressional Liaison.
(7) One Confidential Assistant (Legal) to the General Counsel.
(8) One Assistant to the Deputy Director for Management.
(c) *Office of the Deputy Director for Operations.* (1) Deputy Director for Operations.
(d) *Office of the Deputy Director for Program and Planning.* (1) Deputy Director for Program and Planning.
(e) *Office of the Assistant Director for Refugees and Migration.* (1) Assistant Director for Refugees and Migration; (2) Deputy Assistant Director for Refugees and Migration.
(f) *Office of the Deputy Director for Congressional Cooperation.* (1) Assistant to the Deputy Director for Congressional Cooperation.
(g) *Office of the Deputy Director for Mutual Defense Assistance Controls.* (1) Assistant Deputy Director for Mutual Defense Assistance Controls.
(h) *Office of the Deputy Director for Technical Services.* (1) Deputy Director for Technical Services; (2) Assistant Deputy Director for Technical Services.
(i) *Executive Secretariat.* (1) Executive Secretary; (2) Executive Secretary to the Public Advisory Board; (3) Executive Secretary to the International Development Advisory Board.

§ 6.350 *Foreign Claims Settlement Commission of the United States.* (a) Special Assistant to the Commissioners.
(b) One Confidential Assistant to the Chairman.
(c) One Private Secretary to the Chairman and to each of the other two Commissioners.

§ 6.351 *Air Coordinating Committee.* (a) Executive Secretary.

§ 6.352 *Government Patents Board.* (a) One Confidential Assistant to the Chairman.

§ 6.353 *Subversive Activities Control Board.* (a) One Executive Secretary and Chief Clerk.
(b) One Private Secretary to each Member of the Board.
(c) One Confidential Administrative Assistant to each Member of the Board.

§ 6.354 *Saint Lawrence Seaway Development Corporation.* (a) One Private Secretary to the Administrator.
(b) One Special Assistant to the Administrator.

§ 6.357 *Federal Home Loan Bank Board.* (a) One Assistant to the Board.
(b) One Director, Federal Home Loan Bank Operations.
(c) One General Counsel.
(d) One Director, Division of Supervision.
(e) One Secretary to the Chairman of the Board.
(f) Two Secretaries to Board Members.
(g) One General Manager, Federal Savings and Loan Insurance Corporation.
(h) One Deputy General Manager, Federal Savings and Loan Insurance Corporation.

(E. O. 10440, 18 F. R. 1823, 3 CFR 1953 Supp.)

UNITED STATES CIVIL SERVICE COMMISSION,
[SEAL] WM. C. HULL,
Executive Assistant.

[F. R. Doc. 56-10141; Filed, Dec. 11, 1956; 8:48 a. m.]

TITLE 42—PUBLIC HEALTH

Chapter I—Public Health Service, Department of Health, Education, and Welfare

REVISION OF CHAPTER

Chapter I of Title 42 is revised, for purposes of republication, to read as set forth below.

In this revision minor editorial changes have been made, obsolete material has been deleted, and references brought up to date. In addition minor substantive changes have been made, particularly in Part 21. Since the substantive changes made affect only matters of internal management, notice and public procedure thereon are unnecessary.

This revision shall therefore be effective upon publication in the FEDERAL REGISTER.

Dated: December 5, 1956.

L. E. BURNEY,
Surgeon General.

Approved:

M. B. FOLSOM,
Secretary.

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NOTE: Citations to sections of the Public Health Service Act are to the sections as originally enacted and numbered. Many of these have been renumbered or substantially amended. Where the citation specifies "as amended" the current text or numerical designation should be checked through the U. S. Code, U. S. Statutes at Large and the slip laws.

Subchapter A—General Provisions

PART 1—AVAILABILITY OF RECORDS AND INFORMATION

Sec.

1.101 Public inspection of official records.
1.102 Clinical information; disclosure.
1.103 Nonclinical information; disclosure.
1.104 Disclosure upon court or other official order.
1.105 Disclosure to officers and employees of the Service.
1.106 Limitations on release of records.
1.107 Relation to other provisions of law.
1.108 Response to subpoena or other compulsory process.

AUTHORITY: §§ 1.101 to 1.108 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216.

§ 1.101 *Public inspection of official records.* Except as is otherwise provided in this part, the official records of the Public Health Service are available upon request for inspection by persons properly and directly concerned. Requests for permission to inspect official records of the Service are required to be addressed to the Surgeon General of the Public Health Service, Washington 25, D. C., unless otherwise directed in published organizational, procedural, or regulatory statements pertaining to specific records or classes of records. Such requests shall set forth the interest of the applicant in the subject matter of the records sought to be inspected.

§ 1.102 *Clinical information; disclosure.* (a) For the purposes of this section:

(1) "Patient" shall mean any person who is receiving or has received medical care or treatment or an examination at facilities of the Public Health Service or at other facilities by, or under the direction of, personnel of the Service or at its expense.

(2) "Clinical information" shall mean any information received by personnel of the Service from patients or regarding patients and related to their examination, care, or treatment.

(b) Clinical information in the records or in the possession of the Service is confidential and shall be disclosed only as necessary for the performance of the functions of the Service, or as follows:

(1) Upon a reasonable showing of the need therefor, the officer in charge of a hospital, station or other facility of the Service may authorize disclosure to a patient or a person designated by a patient (or, in the case of a deceased patient, to his next of kin or an authorized representative of his estate) of such clinical information as such officer determines to be medically appropriate for disclosure. The information shall not be disclosed to a person other than the patient except on the condition that it shall not be further disclosed for any purpose other than that for which it was shown to be needed. If the patient's examination, treatment or care was requested or arranged for by a governmental agency, the information shall not in any event be disclosed without the consent of that agency.

(2) Any governmental agency which, in accordance with applicable statutes, has requested or arranged for the examination, treatment, or care of a patient by the Service may upon request be furnished clinical information regarding such examination, treatment, or care.

(3) At the direction of the Surgeon General or his designee, clinical information may be furnished State or other public health agencies engaged in collecting data regarding disease.

(4) Nothing in this section shall preclude the officer in charge of any facility of the Service from disclosing (i) information as to the presence of a patient in the facility, or as to his general condition and progress, or (ii) such information regarding the commission of crimes or the occurrence of communicable disease as may be required to be disclosed by hospitals generally by the law of the State in which the facility is located.

§ 1.103 *Nonclinical information; disclosure.* (a) Information in the records or possession of the Service obtained by the Service under an assurance of confidentiality which the Surgeon General or his authorized representative, determines to be necessary for the purpose of any research, survey, investigation, or collection of statistical data may be disclosed only with the consent of the person, association, or agency to which such assurance was given, or whenever the Surgeon General specifically determines disclosure to be necessary (1) to prevent an epidemic or other grave danger to the public health or (2) to oppose any legal action related to the activities of the Service and brought against the United States or any of its officers or employees.

(b) Information in the records or in the possession of the Service concerning (1) the discussions of any councils or other bodies advisory to the Service or to the Surgeon General, or of any committees or panels of such councils or bodies, (2) reports made by such committees or panels to such councils or bodies, and (3) action taken or opinions expressed by individual members of such councils, bodies, committees or panels shall not be disclosed except as may be authorized by the Surgeon General with the assent of the council or advisory body involved. In addition, if the council or other advisory body so recommends, disclosure of its final conclusions on any subject considered by it may be prohibited by the Surgeon General.

(c) The following types of information in the records or possession of the Service are confidential and, subject to the provisions of paragraphs (a) and (b) of this section, shall be disclosed only as necessary for the performance of the functions of the Service, or as follows:

(1) Information concerning individuals, business enterprises, or public or private agencies obtained by the Service in connection with communicable disease control, water pollution control, licensing of biological products or the manufacture of such products, or with other regulatory functions of the Service may be disclosed to Federal, State or local authorities carrying on related

governmental functions to the extent necessary to carry out such related functions.

(2) Information and data obtained and tentative and final conclusions reached in course of or in connection with the conduct of research projects, surveys and investigations may be disclosed at such times and to such extent as the Surgeon General or his designee may determine to be in the public interest.

(3) Information obtained in connection with applications for employment, fellowships, traineeships or commissions or for research or other grants and information obtained for similar purposes may be disclosed upon consent of the person concerned.

§ 1.104 *Disclosure upon court or other official order.* Notwithstanding any other provision of this part, information in the records or in the possession of the Service, except information described in § 1.103 (a) and (b) and information the disclosure of which the Surgeon General determines would impair national security, shall be disclosed upon the order of a judge of a court of competent jurisdiction or of a responsible officer of any agency or body having power to compel appearances before it: *Provided, however,* That (a) clinical information shall be disclosed only in accord with applicable local law regarding the confidentiality of communications to physicians as expressly determined by the court, agency or body, and (b) in the case of an order requiring production of records other than to the court, agency or body involved, the Surgeon General or his designee may determine, in the light of the need to assure the integrity and safety of the records or the efficient administration of the Service, that the records shall be made available for examination or copying at such place as may be designated by him.

§ 1.105 *Disclosure to officers and employees of the Service.* No provision of this part shall be deemed to forbid any officer or employee of the Service to disclose any information to any other officer or employee of the Service in the course of official business.

§ 1.106 *Limitations on release of records.* Records of the Service containing information described or referred to in § 1.102 or § 1.103 shall not be released to or deposited with anyone not an authorized officer or employee of the Service except insofar as may be temporarily necessary for purposes of examination or copying.

§ 1.107 *Relation to other provisions of law.* The provisions of this part are in addition to other applicable provisions of law or regulation and shall not be deemed to authorize or compel disclosure of information inconsistently with such other provisions.

§ 1.108 *Response to subpoena or other compulsory process.* If any officer or employee of the Service is sought to be required, by subpoena or other compulsory process, to produce records of the Service or to disclose any information described in § 1.102 or § 1.103, he shall respond, call attention to the provisions of this part, and respectfully decline to produce records or disclose information inconsistently with such provisions: *Provided,* That where a patient (or, in the case of a deceased patient, his next of kin or an authorized representative of his estate) is a party to litigation or other proceedings in which any other person or party seeks to require the production of records of the Service or the disclosure of information described in § 1.102 before a court, agency or other body described in § 1.104, the patient (or, in the case of a deceased patient, his next of kin or an authorized representative of his estate) or his attorney shall be notified promptly, by mail or other reasonable means at his last address known to the Service, of the demand for the records or information and the officer or employee shall respond to the compulsory process in accordance with its terms, without prejudice, however, to any claim of the patient or his representative to the protection against the disclosure of clinical information set forth in the proviso to § 1.104.

PART 2—ACCEPTANCE AND ADMINISTRATION OF GIFTS

Sec.
2.1 Unconditional gifts.
2.2 Acceptance of gifts by Surgeon General.
2.3 Acceptance of gifts by Secretary.
2.4 Deposit and expenditure of money gifts.
2.5 Property accounting.
2.6 Gifts for patients.

AUTHORITY: §§ 2.1 to 2.6 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply secs. 501, 321, 58 Stat. 709, as amended, 695, as amended; 42 U. S. C. 219, 248.

§ 2.1 *Unconditional gifts.* A gift will be deemed unconditional if it is made to the Public Health Service for the benefit of the Service or for the carrying out of any of its functions, without further specification as to its purpose or the manner of its use; a gift will also be deemed unconditional if limited without further restriction (a) to one or more of the purposes of any part of Title III of the Public Health Service Act or (b) to one or more of the purposes of any Institute established pursuant to Title IV of the Public Health Service Act.

§ 2.2 *Acceptance of gifts by Surgeon General.* The Surgeon General and such officers and employees of the Service as he may designate for such purpose are authorized to accept on behalf of the United States, the following categories of unconditional gifts to the United States made by will or otherwise, for the benefit of the Public Health Service or for the carrying out of any of its functions:

(a) A gift of money not in excess of $1,000;

(b) A gift of personal property such as, but not limited to, recreational equipment, furniture, radio or television sets if the total market value of the property at the time of the gift does not exceed $1,000.

§ 2.3 *Acceptance of gifts by Secretary.* Gifts not within the category specified in § 2.2 may be accepted only by the Secretary, and conditional gifts may be accepted only by the Secretary of Health, Education, and Welfare on the recommendation of the Surgeon General.

§ 2.4 *Deposit and expenditure of money gifts.* Money gifts accepted in accordance with §§ 2.2 and 2.3 shall be deposited in the Treasury of the United States for expenditure as provided by law.

§ 2.5 *Property accounting.* Records of personal property accepted on behalf of the United States under §§ 2.2 and 2.3 shall be kept in accordance with instructions and policies of the Surgeon General.

§ 2.6 *Gifts for patients.* (a) Gifts of money or personal property donated solely for disbursement or distribution by the Service to patients at a designated Service hospital or station or to designated patients at a Service hospital or station shall not be deemed gifts to the United States. Custody of such gifts may be accepted by the medical officer in charge of the facility if in his opinion the gifts will contribute to the well-being of the patients.

(b) Gifts of money accepted under paragraph (a) of this section shall be deposited in the Treasury of the United States to the credit of an appropriate trust fund account of the Service. Disbursement shall be made by the agent cashier of the facility upon the authorization of the medical officer in charge of the facility or of a person designated by him for such purpose in accordance with the terms of the gift. If the facility does not have an agent cashier, the money shall be disbursed by a responsible official designated by the medical officer in charge and provision made for safekeeping and accounting.

(c) Gifts of personal property accepted under paragraph (a) of this section shall be placed in the custody of a responsible official designated by the medical officer in charge and distributed in accordance with the terms of the gift.

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SUBPART A—DEFINITIONS

§ 21.1 *Meaning of terms.* As used in this part, the term:

(a) "Act" means the Public Health Service Act, 58 Stat. 682, as now or hereafter amended.

(b) "Department" means the Department of Health, Education, and Welfare.

(c) "Secretary" means the Secretary of Health, Education, and Welfare.

(d) "Service" means the Public Health Service.

(e) "Surgeon General" means the Surgeon General of the Public Health Service.

(f) "Commissioned officer" or "officer", unless otherwise indicated, means either an officer of the Regular Corps or an officer of the Reserve Corps.

(Sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216)

SUBPART B—TITLES

AUTHORITY: §§ 21.11 to 21.13 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Statutory provisions interpreted or applied are cited to text in parentheses.

§ 21.11 *Officers other than medical officers.* The titles of officers, other than medical officers, in the junior assistant, assistant, senior assistant, full, and senior grades shall be "dental surgeon", "sanitary engineer", "pharmacist", "nurse officer", "scientist", "dietitian", "therapist", "sanitarian", "veterinarian", or a similar term descriptive of the specialty of such class of officers. The titles of officers, other than medical officers, in the director grade shall be the term "director" preceded by the term "dental", "sanitary engineer", "pharmacist", "nurse", "scientist", "dietitian", "therapist", "sanitarian", "veterinarian", or a similar descriptive term. The titles of officers, other than medical officers, in the grade of Assistant Surgeon General shall be "Assistant Surgeon General", except that following such title there shall be added a parenthetical identification, such as "dental" or "sanitary engineer".

(Sec. 206 (b), 58 Stat. 685, as amended; 42 U. S. C. 207 (b))

§ 21.12 *Designation of specialties.* Scientist officers and other officers having generally descriptive titles, in using their titles in correspondence outside the Agency and in the programs of scientific meetings, may designate their specialties in parentheses following their names and titles, as, for example, Richard Roe, Senior Scientist (Entomologist).

(Sec. 206 (b), 58 Stat. 685, as amended; 42 U. S. C. 207 (b))

§ 21.13 *Military titles.* An officer in uniform may use, for purposes of identification and address, the military or naval title of rank corresponding to the grade markings worn. An officer detailed for duty with the Army, Air Force, Navy, Coast Guard, or Coast and Geodetic Survey may use in official correspondence the title of military or naval rank corresponding to the grade markings worn, as, for example, Richard Roe, Major, U. S. P. H. S., or Richard Roe, Lieutenant Commander, U. S. P. H. S.

SUBPART C—APPOINTMENT

AUTHORITY: §§ 21.21 to 21.58 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 208, 58 Stat. 685, as amended; 42 U. S. C. 209.

PROVISIONS APPLICABLE BOTH TO REGULAR AND RESERVE CORPS

§ 21.21 *Meaning of terms.* The term "approved" as used in this subpart in connection with "school", or "college", "postgraduate school", or "training course" means, except as otherwise provided by law, a school, college, postgraduate school, or training course which has been accredited or approved by a professional body or bodies acceptable to the Surgeon General for such purpose, or which, in the absence of such a body, meets generally accepted professional standards as determined by the Surgeon General.

§ 21.22 *Submission of application and evidence of qualifications.*—(a) *Application form.* Every candidate for examination for appointment as an officer shall submit a written application on such form as may be prescribed by the Surgeon General.

(b) *Documentary evidence.* The application shall be accompanied by such documentary evidence as may be required by the Surgeon General.

§ 21.23 *False statements as disqualification.* Willfully false statements shall be cause for rejection of the application or, as provided in Subpart N of this part, for dismissal.

§ 21.24 *Physical examinations.* Every candidate for appointment as an officer shall undergo such physical examination as the Surgeon General may direct, and no candidate who is not found to be physically qualified shall be appointed as an officer.

§ 21.25 *Eligibility; junior assistant grade.*—(a) *Requirements; all candidates.* Except as provided in § 21.54 and as otherwise provided in this section, every candidate for examination for appointment in the grade of junior assistant:

(1) Shall be a citizen of the United States;

(2) Shall be at least 18 years of age; and

(3) Shall have been granted an academic or professional degree from an approved school, college, or postgraduate school, and, unless the required professional training has been otherwise obtained from an approved school, college, or postgraduate school, shall have majored in the profession in which the examination is being held.

(b) *Additional requirement; nurse officers.* Every candidate for examination for appointment as a nurse officer shall be currently registered as a graduate nurse under a nurse practice act of a State, Territory, or the District of Columbia.

(c) *Special requirement; therapists.* Every candidate for examination for appointment as a therapist shall have received a certificate from an approved school of physical therapy or an approved school of occupational therapy.

§ 21.26 *Eligibility; assistant grade.*—(a) *Requirements; all candidates.* Except as otherwise provided in this section, every candidate for examination for appointment in the grade of assistant:

(1) Shall meet the requirements for eligibility for examination for appointment in the grade of junior assistant;

(2) Shall be at least 21 years of age; and

(3) Shall have had at least 7 years of educational and professional training or experience subsequent to high school, except that a candidate who applies for examination for appointment in the Reserve Corps to serve as a medical or dental intern may be examined for such appointment upon the completion of 6 years of such education, training, or experience.

(b) *Additional requirements; dietitians.* Every candidate for examination for appointment as a dietitian shall have successfully completed an approved training course for dietetic interns.

§ 21.27 *Eligibility; senior assistant grade.* Every candidate for examination for appointment in the grade of senior assistant shall meet the requirements for eligibility for examination for appointment in the grade of assistant and shall have completed at least 10 years of educational and professional training or experience subsequent to high school.

§ 21.28 *Eligibility; grades above senior assistant grade.* Every candidate for examination for appointment in grades above that of senior assistant shall meet the requirements for eligibility for examination for appointment in the grade of senior assistant. Candidates for examination for appointment in the full, senior, or director grade shall have completed at least 7, 14, or 15 additional years, respectively, of postgraduate professional training or experience. When

officers of the Service are unavailable for the performance of duties requiring highly specialized training and experience in special fields related to public health, the Surgeon General may specify that a candidate for appointment to the Regular Corps with such highly specialized training and experience shall be examined for appointment in the full or senior grade upon completion of at least 5 or 12 additional years, respectively, of postgraduate professional training or experience, except that the total number of such appointments during a fiscal year shall not exceed three.

§ 21.29 *Eligibility; all grades; academic and professional education and professional training and experience.* The Surgeon General is authorized, subject to the other provisions of this subpart to adopt additional standards by which the education, training, and experience required under this subpart, and evidence thereof, shall be of such specific kind and quality, pertinent to the particular profession concerned, as in his judgment are necessary to limit the examination to qualified candidates.

§ 21.30 *Boards; appointment of; powers and duties.* The Surgeon General shall from time to time appoint boards and subboards of officers to consider the qualifications of candidates for appointment as officers, and shall refer to such boards the applications of those candidates who are eligible for examination for appointment. Such boards and subboards shall consist of three or more officers, the majority of whom, so far as practicable, shall be of the same profession as the candidate. The Surgeon General shall prescribe the duties of boards and subboards in relation to the examination process not otherwise prescribed in this subpart.

§ 21.31 *General service.* Officers shall be appointed only to general service and shall be subject to change of station.

§ 21.32 *Certification by candidate; requirement of new physical examination.* If a candidate for appointment in the Regular Corps or an officer of the Reserve Corps on inactive service has passed a physical examination within a period of 6 months from the date on which it is contemplated that he will be appointed or called to active duty, he shall, prior to being appointed or called to active duty, certify that to the best of his knowledge and belief he is free from all disease or injury not noted in his record at the time of his examination and that he is willing to serve in any climate. If a candidate for appointment in the Regular Corps, or an officer of the Reserve Corps on inactive service, has not passed a physical examination within a period of 6 months from the date on which it is contemplated that he will be appointed or called to active duty, he may, prior to being appointed or called to active duty, be required to undergo such physical examination as the Surgeon General may direct to determine his physical qualification for appointment or call to active duty in accordance with standards prescribed for original appointment, or he may be appointed or called to active duty after executing the certificate described in this section, but shall be physically examined to determine his physical qualification for continued active service in accordance with standards prescribed for original appointment within a period of 15 days after reporting for duty at his first station.

PROVISIONS APPLICABLE ONLY TO REGULAR CORPS

§ 21.41 *Professional examinations, holding of; subjects to be included.* From time to time the Surgeon General may order examinations to be held in such professions and for such grades as he deems necessary for the purpose of providing merit rolls of eligible candidates for appointment in the Regular Corps and shall, if a professional examination is to be required, prescribe the subjects relating to each such profession in which candidates will be examined.

§ 21.42 *Examinations; junior assistant, assistant, or senior assistant grade.* The examination for appointment to the junior assistant, assistant, or senior assistant grade in the Regular Corps shall consist of (a) a written professional examination relating to the fundamentals of the candidate's profession and their relationship to the activities of the Service, and (b) an examination as to the candidate's general fitness, which shall include an oral interview, and a review and evaluation of the candidate's academic and professional education and professional training and experience, and may include other written tests to determine the candidate's fitness for appointment as an officer.

§ 21.43 *Examination; full grade and above.* The examination for appointment to the full, senior, or director grade in the Regular Corps shall consist of a review and evaluation of the candidate's academic and professional education and professional training and experience. The Surgeon General may, however, direct that the examination of a candidate for appointment to any such grade shall also include an oral interview, a written or oral professional examination, or both.

§ 21.44 *Clinical or other practical demonstration.* In the discretion of the Surgeon General a candidate for appointment to any grade up to and including the senior assistant grade in the Regular Corps may be required to perform successfully a clinical or other practical demonstration which, if required, shall constitute a part of the professional examination.

§ 21.45 *Rating values.* The examination of every candidate for appointment to any grade in the Regular Corps shall be rated by a board appointed pursuant to § 21.30 in accordance with such relative values for each part of the examination as are prescribed by the Surgeon General. No candidate who receives a final rating below 80 shall be appointed in the Regular Corps.

§ 21.46 *Merit roll.* Each board appointed pursuant to § 21.30 to consider the qualifications of candidates for appointment as officers shall assign a numerical rating to each candidate for appointment in the Regular Corps who passes the examination, and shall submit a report to the Surgeon General of the ratings and the relative standing of all such candidates for each grade in each profession. The Surgeon General shall submit each such report with his recommendations to the Secretary, and, if approved by the Secretary, the report shall constitute a merit roll from which the Secretary shall, in accordance with relative standing, recommend available persons to the President for nomination as commissioned officers of the Regular Corps. A board may consider any newly discovered evidence relating to the physical, professional, or personnal qualifications of any candidate examined for appointment. Upon recommendation of such board after review of such evidence, the Surgeon General, with the approval of the Secretary, may correct the rating of a candidate or may qualify or disqualify a candidate. The placing of a candidate's name on a merit roll shall give no assurance of an appointment. A merit roll shall expire when a new merit roll in the same profession and grade has been established, but no merit roll shall continue in effect longer than two years after its approval by the Secretary. Every candidate who has not been nominated by the President for appointment prior to the expiration of a merit roll on which his name appears, shall, unless he requests the opportunity to be reexamined, be rated with the next group of candidates of the same profession for appointment in the same grade and shall be given the same rating he had on the expired merit roll. If two candidates who were examined at the same time receive the same numerical rating, the elder candidate shall assume relative standing on the merit roll over the younger candidate. If a candidate whose name is being transferred from an expired to a new merit roll has the same numerical rating as a candidate whose name is being placed on the new merit roll for the first time, the former shall assume relative standing on the merit roll over the latter. The name of a candidate may be removed from a merit roll in the event that he refuses an appointment when offered. No candidate's eligibility for appointment shall exceed two years unless he again becomes eligible as the result of another examination.

§ 21.47 *Examination; anticipation of meeting qualifications.* A potential candidate for appointment in any grade in the Regular Corps may be examined within a period of nine months prior to the date upon which it is anticipated that he will qualify for appointment under this subpart. Upon successful completion of the examination, his name will be entered on a merit roll. In the event that his name, in order of relative standing among all candidates, precedes that of fully qualified candidates, his name, for purpose of appointment, shall be passed over in favor of fully qualified candidates until such time as he becomes fully qualified, but in no event shall he otherwise lose his relative standing on the merit roll, except as provided in

§ 21.46. If the candidate fails to qualify for appointment at the time that it was anticipated that he would qualify, his name shall be removed from the merit roll.

PROVISIONS APPLICABLE ONLY TO RESERVE CORPS

§ 21.51 *Appointment of officers having specialized training or experience in administration and management.* The Surgeon General may recommend for original appointment in the Reserve Corps candidates who have specialized training or experience in administration and management relating to the functions of the Service. All such candidates shall be subject to the same eligibility requirements for original appointment as are applicable to other candidates, except that such a candidate may substitute experience in administration or management for the requirement of professional training or experience.

§ 21.52 *Waiver of entrance qualifications for original appointment in time of war or national emergency.* If, in time of war or national emergency proclaimed by the President, the Secretary determines that there is need for commissioned personnel to meet the needs of the Service, other than persons eligible for examination for original appointment under the eligibility requirements prescribed in this subpart, he may prescribe standards of eligibility for examination for the original appointment of officers in the Reserve Corps without regard to such eligibility requirements. Such standards shall, however, authorize the examination only of candidates with specialized experience in administration or management or candidates with training or experience in fields relating to public health. The permanent grade of an officer who becomes eligible for examination for appointment pursuant to such standards and who becomes eligible for appointment after passage of an examination shall be limited to the junior assistant or the assistant grade, except that, if upon examination a candidate is found to be exceptionally qualified for the performance of highly specilized duties with the Service pursuant to § 21.55, he may be recommended for appointment to any grade up to and including the director grade. Any appointment made pursuant to this section shall be terminated not later than 6 months following the termination of the war or the national emergency proclaimed by the President.

§ 21.53 *Examination.* The examination of candidates for original appointment as officers to any grade in the Reserve Corps shall consist of a review and evaluation of their academic and other education and their training and experience. In the discretion of the Surgeon General the examination of any such candidate may include an oral interview, a written examination, or both.

§ 21.54 *Students.* A potential candidate for appointment in the Regular Corps who is pursuing a course of instruction which, upon completion, would qualify him under §§ 21.25 or 21.26 for examination for appointment in the junior assistant or assistant grade may be examined for and appointed in the Reserve Corps in the junior assistant grade but shall not be called to extended active duty until the successful completion of such course of instruction, except that he may be called to active duty for purposes of training for periods not to exceed 120 days during any fiscal year.

§ 21.55 *Appointment to higher grades; candidates exceptionally qualified in specialized fields.* Any candidate eligible for examination for appointment in the grade of assistant pursuant to § 21.26 who, upon examination for such purpose, is found exceptionally qualified for the performance of duties requiring highly specialized training or experience may be recommended for appointment in the Reserve Corps in any grade up to and including the director grade without regard to the additional years of postgraduate training or experience prescribed for grades above the assistant grade.

§ 21.56 *Reappointment.* An officer of the Reserve Corps, after being examined and found qualified for reappointment, may be recommended for reappointment to the same grade in the event that his commission expires before he becomes eligible for reappointment to a higher grade, or may be recommended for reappointment to a higher grade to be effective on or after the date on which he meets the qualifications prescribed in this subpart for original appointment to such higher grade.

§ 21.57 *Examination for reappointment.* The examination of an officer of the Reserve Corps on active duty who is being considered for reappointment in such corps shall consist of a review and evaluation of his record with the Service. The examination of an officer of the Reserve Corps on inactive duty who is being considered for reappointment in such corps shall consist of (a) a review and evaluation of his record with the Service while on active duty, if any, and (b) the record of his training or experience during the period of his inactive duty preceding such examination. In the discretion of the Surgeon General the examination for reappointment of an officer, whether on active or inactive duty, may include an oral interview.

§ 21.58 *Physical examination for reappointment.* Every officer of the Reserve Corps being considered for reappointment shall undergo such physical examination as the Surgeon General may direct. An officer on active duty may be recommended for reappointment unless he is found to have a physical disability which is determined to render him physically unfit to perform the duties of his office under section 402 of the Career Compensation Act of 1949, as amended. Except as otherwise provided in § 21.59, an officer not on active duty may be recommended for promotion only if he meets the physical qualifications for original appointment. If an officer is not available to be physically examined because of circumstances which make it impracticable for the Service to require such examination, he may, in the discretion of the Surgeon General, be reappointed without such examination, but shall be examined as soon thereafter as practicable and his physical qualification or disqualification for continued or future active service shall be determined on the same basis as if the physical examination had been given prior to reappointment.

SUBPART D—INCREASED PAY AND ALLOWANCES

§ 21.61 *Duty involving frequent and regular participation in aerial flight.* Except as otherwise designated by the Secretary, all duty performed under competent orders by commissioned officers involving frequent and regular participation in aerial flights shall be as a non-crew member pursuant to section 204 (a) (3) of the Career Compensation Act of 1949, as amended, and shall entitle such officers to the pay authorized by subsection (c) of such section.

(Sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interprets or applies sec. 209 (a), 58 Stat. 686, as amended, sec. 204, 63 Stat. 809, as amended; 42 U. S. C. 210 (a), 37 U. S. C. 235, E. O. 10152, 15 F. R. 5489, 3 CFR 1950 Supp.)

SUBPART E—ALLOTMENTS

AUTHORITY: §§ 21.71 and 21.72 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 209 (c) 58 Stat. 686, as amended; 42 U. S. C. 210 (b).

§ 21.71 *Generally.* An officer on active duty may be permitted to allot a part or all of his monthly pay and allowances for the payment of insurance premiums, the purchase of securities of the Federal Government, or for other proper purposes approved by the Surgeon General: *Provided,* That no officer, without the approval of the Surgeon General, may have in force more than two allotments at one time, exclusive of allotments for insurance premiums.

§ 21.72 *On active duty or traveling outside continental United States.* An officer on active duty whose permanent or temporary post of duty is outside the continental United States or in Alaska or who, while stationed in the United States, is traveling on official business outside the continental United States or in Alaska, may be permitted to allot, in addition to allotments for the purposes as indicated in § 21.71, a part or all of his monthly pay and allowances for the support of his family or dependents, except that no officer, without the approval of the Surgeon General, may have in force more than two allotments at one time, exclusive of allotments for insurance premiums.

SUBPART F—LEAVE

AUTHORITY: §§ 21.81 to 21.91 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 219, 64 Stat. 426; 42 U. S. C. 210–1.

DEFINITIONS

§ 21.81 *Meaning of terms.* For the purpose of computing and granting leave pursuant to this subpart:

(a) A "year" or "leave year" means the period beginning July 1 of any calendar year and ending June 30 at the succeeding calendar year, except com-

mencing January 1, 1958, such terms shall mean a calendar year.

(b) "Annual leave" means any period of one work day or more during which an officer is relieved from his scheduled working hours, other than for sick leave, and all non-work days within such period.

(c) A "work day" means a day on which an officer is scheduled to perform more than brief periods of work, including a day when an officer is scheduled to serve as officer of the day, to be on call, or to perform official travel.

(d) A "non-work day" means a day designated by an officer in charge on which an officer has no scheduled working hours, including a day on which an officer is ordinarily scheduled to perform only brief periods of work, such as ward rounds in a hospital.

(e) "Off-work hours" means the period between the normal completion and commencement of scheduled working hours on two consecutive work days.

(f) "Station leave" means authorized absence from duty and station on non-work days, off-work hours, or for a period of less than one work day.

(g) "Sick leave" means any period of one day or more with respect to which an officer is excused from duty because of sickness, disability, or need of medical services.

LEAVE WITH PAY

§ 21.84 *Accrual and accumulation of annual leave.* An officer shall accrue annual leave at the rate of 30 days for each full year of active service with the Service, and for any portion of a year at the rate of one day for each 12 consecutive days of such service. Annual leave accrued during a leave year, but unused at the end of such year, shall be carried forward as accumulated leave for use in succeeding leave years, except that accumulated leave credited to an officer at the beginning of a new leave year in excess of 60 days shall be canceled. Annual leave taken during a leave year shall be charged first against the leave accrued or to accrue during that year. No annual leave shall accrue (a) during any period of such leave immediately preceding the termination or inactivation of a commission, or retirement, (b) during any period in which an officer is placed on leave without pay while detailed pursuant to section 214 (b) or 214 (c) of the act, or (c) during any period of absence without leave.

§ 21.86 *Granting of annual leave.* Within the limitations prescribed in § 21.84, annual leave with pay may be granted, upon application, by the Surgeon General at such time or times and for such periods as are approved by him. Annual leave not exceeding 30 days may be granted as provided herein as an advance of leave not yet accrued or accumulated. A period of absence from duty shall be considered as annual leave only if authorized in advance or if the absence and the reasons therefor are reported as promptly as circumstances permit and the absence is excused by the Surgeon General.

§ 21.87 *Computation of annual leave.* The number of days of annual leave taken shall be computed by counting each work day during the period of leave and all non-work days within such period, but excluding any period of station leave immediately preceding or immediately following such leave, except that in the case of annual leave taken immediately preceding the expiration, termination, or inactivation of a commission, or retirement, each day, following the day on which an officer is released from his assigned station, shall be counted as a day of leave.

§ 21.88 *Station leave.* During off-work hours and on non-work days, during which an officer has no scheduled working hours he shall be entitled to station leave unless the officer in charge otherwise directs. If an officer desires to take station leave for a period of less than one work day or on a non-work day during which he is scheduled to perform only a brief period of work, he must obtain the oral permission of the officer in charge. Station leave shall not be charged as annual leave.

§ 21.89 *Reporting of absence; granting of sick leave.* Absence from duty with pay because of sickness, disability, or need of medical services shall be reported immediately, and sick leave may be granted therefor. The officer responsible for granting sick leave may require every such absence in excess of 3 days to be supported by a medical certificate which shall state the nature of the sickness, disability, or need of medical services. A medical certificate also shall be furnished promptly to the Surgeon General at the end of each period of 30 days of continuous absence. Sick leave may be granted by the Surgeon General to the extent that circumstances justify, but it shall not be granted in advance.

§ 21.90 *Prolonged or frequent absence due to sickness or disability; review of status.* An officer's absence from duty due to sickness or disability for a period of more than 90 consecutive days or for an aggregate of more than 120 days in any one calendar year shall be reported to the Surgeon General, who shall appoint a board to consider whether such officer should be retired.

§ 21.91 *Reporting of whereabouts during annual, sick, or station leave.* During a period of annual, sick, or station leave an officer shall be considered to be in an active duty status and shall be subject to all regulations governing commissioned officers, including those relating to discipline. During all such periods of leave, an officer shall keep the officer in charge informed as to the place or places at which he may be located and shall be subject to recall to duty at any time.

LEAVE WITHOUT PAY WHILE ON DETAIL

§ 21.95 *Leave without pay while on detail.* The Surgeon General, with the approval of the Secretary, may place an officer on leave without pay while detailed pursuant to section 214 (b) or 214 (c) of the act for such period as may be agreed upon by the Surgeon General and the officer.

(Sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interprets or applies sec. 214 (d), 58 Stat. 690, as amended; 42 U. S. C. 215 (d))

SUBPART G—PROMOTION

AUTHORITY: §§ 21.101 to 21.142 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 210, 58 Stat. 697, as amended; 42 U. S. C. 211. Other statutory provisions interpreted or applied are cited to text in parentheses.

DEFINITIONS

§ 21.101 *Meaning of terms.* For purposes of this subpart:

(a) A "service promotion" means a permanent promotion, other than to a restricted grade, (1) to the assistant grade upon meeting the requirements for original appointment to such grade, (2) to the senior assistant, full, or senior grade upon completion of 3, 10, or 17 years of service, respectively, in and above the assistant grade, or (3) to such grades because of having seniority over an officer who receives such a promotion.

(b) An "accelerated promotion" means a permanent promotion to the senior assistant, full, or senior grade, other than to a restricted grade, prior to the date on which an officer would be entitled to a service promotion.

(c) A "selected promotion" means a permanent promotion to a restricted grade or to the director grade.

(d) A "temporary promotion" means a promotion which may be terminated at any time, as may be directed by the President.

(e) A "graded position" means a position which the Surgeon General has designated as requiring the services of an officer of a certain grade.

(f) A "restricted grade" means the senior grade or both the full and senior grade in a professional category to which promotions shall be made only if vacancies exist in such grade or grades.

(g) A "seniority list" means a list for each grade of each category in the Regular Corps which shall include the names of all officers of that grade and category in the order of their seniority in grade and relative standing for purposes of examination for promotion.

(h) A "promotion register" means a list for each grade of each category in the Regular Corps which shall include the names of all officers of that grade and category who have passed examinations for permanent promotion to the next higher grade.

(i) A "category" or "profesisonal category" means one of the categories into which the Regular Corps is divided for the purpose of establishing eligibility for promotion pursuant to section 209 (a) of the act.

PROVISIONS APPLICABLE ONLY TO REGULAR CORPS

§ 21.110 *Division of Regular Corps into professional categories.* The Regular Corps is divided into the following professional categories for the purpose of establishing eligibility of officers of such corps for promotion: medical, dental, sanitary engineer, scientist, nurse, pharmacist, veterinarian, sanitarian, dietitian, and therapist.

§ 21.111 *Prescription of numbers in grade.* The following maximum number of officers is authorized to be on active duty in the Regular Corps in each of the grades from the junior assistant grade to the director grade, inclusive, during the fiscal year beginning July 1, 1956, and ending June 30, 1957:

Director Grade	300
Senior Grade	450
Full Grade	355
Senior Assistant Grade	335
Assistant Grade	60
Junior Assistant Grade	0

(Sec. 206, 58 Stat. 684, as amended; 42 U. S. C. 207)

§ 21.112 *Establishment of seniority lists.* There shall be established for each grade of each category in the Regular Corps a seniority list which shall include the names of those officers of the Regular Corps on active duty, holding permanent commissions in such grade and assigned to such category. The names of officers on each seniority list shall be arranged in the order of their seniority pursuant to section 210 (j) of the act and this subpart.

§ 21.113 *Seniority in grade, junior assistant grade.* The order of seniority of officers of the Regular Corps on each seniority list for the junior assistant grade shall be established in accordance with the length of time each officer must serve before becoming eligible for promotion to the assistant grade. An officer having a shorter period of time to serve before becoming eligible for promotion shall assume seniority over an officer having a longer period of time to serve before becoming eligible for promotion.

§ 21.114 *Officers of the Regular Corps entitled to the same seniority in grade.* If two or more officers of the Regular Corps on the same seniority list are entitled to the same seniority, their relative standing on such list shall be determined as follows:

(a) An officer already in a grade shall have relative standing over an officer originally appointed to the grade.

(b) If two or more officers are originally appointed to the same grade on the same day, they shall have relative standing in accordance with their numerical scores on the examinations for appointment. If their numerical scores are the same, the elder officer shall have relative standing over the younger officer.

(c) If an officer is originally appointed on the same day that another officer is promoted to the same grade, the officer promoted to the grade shall have relative standing over the officer appointed to the grade.

§ 21.115 *Restricted grades.* Officers of the Regular Corps in the nurse, dietitian, and therapist categories shall be permanently promoted to the full and senior grades only if vacancies exist in such grades. Officers of the Regular Corps in the pharmacist and sanitarian categories shall be permanently promoted to the senior grade only if vacancies exist in such grade.

§ 21.116 *Promotion to assistant grade.* Each officer of the Regular Corps in the junior assistant grade, who is examined and found qualified for promotion, shall be eligible for a service promotion to the assistant grade on the first day of the month following the date on which he meets the qualifications prescribed for original appointment to the assistant grade, regardless of length of service in the junior assistant grade.

§ 21.117 *Annual promotion boards; appointment of; powers and duties.* At least once each calendar year on a date to be selected by him, the Surgeon General shall appoint one or more annual promotion boards for each professional category into which the Regular Corps is divided for purposes of promotion to consider the qualifications of officers of the Regular Corps for permanent promotions, and may appoint such subboards as are necessary to assist the boards. Such boards and subboards shall consist of three or more officers, the majority of whom, so far as practicable, shall be of the same profession as the officers to be considered for promotion. The Surgeon General shall prescribe the duties and procedures of boards and subboards in relation to the examination process not otherwise prescribed in this subpart.

§ 21.118 *Officers to be considered for promotion.* The Surgeon General shall submit to the appropriate annual promotion board for consideration for promotion the names of those officers of the Regular Corps who will become eligible for service promotions during such ensuing period of one year or less as he may prescribe and the names of a sufficient number of officers of the Regular Corps to meet the estimated needs of the Service for accelerated or selected promotions during the same period. The number of names referred to a board for consideration for accelerated or selected promotions shall be based (a) upon the number of vacancies in each particular grade existing or anticipated within such period, (b) the number of such vacancies which the Surgeon General determines to fill by means of such promotions, and (c) a determination as to whether the examination for promotion to the full grade or above shall be competitive or noncompetitive.

§ 21.119 *Disqualification of a member of a promotion board.* No member of a promotion board shall participate in the second of the first two consecutive considerations of an officer for promotion to the same grade when the member served as a member of a promotion board which failed to select such officer for promotion on the first of such two consecutive considerations.

§ 21.120 *Physical examination.* Every officer of the Regular Corps being considered for a permanent promotion shall undergo such physical examination as the Surgeon General may direct. An officer shall be recommended for promotion unless he is found to have a physical disability which is determined to render him physically unfit to perform the duties of his office under section 402 of the Career Compensation Act of 1949, as amended. If an officer is not available to be physically examined because of circumstances which would make it impracticable for the Service to require such examination, he may be recommended for promotion without taking such examination, but shall be examined as soon thereafter as practicable.

§ 21.121 *Examination; promotion to the assistant and senior assistant grades.* The examination for permanent promotion to the assistant and senior assistant grades in the Regular Corps shall consist of (a) a written professional examination in such subjects as are prescribed by the Surgeon General relating to the officer's profession, the various activities of the Service, and the Service laws and regulations, and (b) a review and evaluation of the officer's record with the Service, and (c), in the discretion of the Surgeon General, an oral interview to determine the officer's fitness for promotion. If, however, an officer who is to be considered for promotion to the assistant or senior assistant grade is not available to take the written professional examination because of circumstances which make it impracticable for the Service to administer such examination, his examination may, in the discretion of the Surgeon General, consist of a review and evaluation of his record with the Service.

§ 21.122 *Examination for promotion to the full grade and above.* The examination for permanent promotion to the full, senior, or director grade in the Regular Corps shall consist of a review and evaluation of an officer's record with the Service, and may, in the discretion of the Surgeon General, include an oral interview, a written or oral professional examination, or both.

§ 21.123 *Rating values.* The examination of every officer for permanent promotion to any grade in the Regular Corps shall be rated, except as provided in § 21.124, by a promotion board in accordance with relative values prescribed by the Surgeon General for each part of the examination.

§ 21.124 *Competitive examination for selected promotions.* If the Surgeon General prescribes that an examination for selected promotions shall be competitive, he may require that the board considering officers for such promotions shall recommend for promotion, out of the number of officers examined, only those officers who possess such special qualifications as he may prescribe, in which event the board shall rate only those officers who possess such qualifications.

§ 21.125 *Use of ratings in determining eligibility for promotion.* Every officer who receives a rating of 80 or above on a non-competitive examination shall be considered as having passed the examination. Every officer who receives a rating of 80 or above on a competitive examination and who, on the basis of his rating, falls within the number of officers to be selected for promotion, as prescribed by the Surgeon General pursuant to section 210 (c) of the act, shall be considered as having passed the examination.

§ 21.126 *Establishment of promotion registers.* There shall be established for each grade of each category in the Regular Corps a promotion register which

shall include the names of those officers of the Regular Corps who have passed examinations for permanent promotion to the next higher grade in the category to which assigned. The names of officers when originally entered on a promotion register shall be arranged in the order of their relative standing on their seniority list but next below the names of all officers already on such register. If an officer is not promoted within two years from the date his name is placed on a promotion register, he shall be reexamined for promotion. If he passes the examination, he shall retain his standing on the register, and if he fails to pass the examination, his name shall be removed from the register.

§ 21.127 *Recommendation for promotion.* Officers will be recommended to the President for promotion in the order of their standing on a promotion register, and no officer will be recommended ahead of any officer senior to him on such register, except that if an officer on a promotion register becomes eligible for a service promotion pursuant to section 210 (f) of the act, he shall be recommended for promotion ahead of officers above him on such register but junior to him on the seniority list. When an officer is promoted, his name shall be removed from the promotion register of the grade from which promoted.

§ 21.128 *Graded positions.* After considering the relative importance of the duties and responsibilities of a position in relation to the duties and responsibilities of other positions occupied by commissioned officers, the Surgeon General may determine that such position requires the services of an officer of a certain grade and may designate such position as a graded position.

§ 21.129 *Selection of officers for assignment to graded positions.* The Surgeon General may select an officer of the Regular Corps to be assigned to a graded position without regard to seniority or grade. Selection for such an assignment shall, however, be based upon a consideration of the qualifications of an officer for such assignment and his ability to perform the duties and responsibilities of the position as demonstrated by his training, experience, and record with the Service.

§ 21.130 *Temporary promotion upon assignment to a graded position.* If an officer of the Regular Corps is assigned to a graded position pursuant to § 21.129 and if his current permanent or temporary grade is lower than the grade designated for such position, the officer may be recommended to the President for a temporary promotion to such or any lower grade, provided that there is a vacancy in the grade to which the officer is to be recommended for promotion, and in the category of the officer so assigned.

§ 21.131 *Limitations on temporary promotions.* Except as otherwise provided in § 21.132, officers of the Regular Corps shall be recommended to the President for temporary promotions only as provided in § 21.130. Upon a subsequent assignment by the Surgeon General to a non-graded position, an officer shall revert to his permanent grade or to his temporary grade held pursuant to § 21.132. Upon a subsequent assignment by the Surgeon General to a graded position designated as requiring a lower grade, an officer shall revert to his permanent grade or to his temporary grade held pursuant to § 21.132 but shall be eligible for a new temporary promotion pursuant to § 21.130.

§ 21.132 *Temporary promotions in time of war or national emergency.* In time of war or national emergency proclaimed by the President, the Surgeon General may recommend to the President for temporary promotions officers of the Regular Corps, in addition to officers assigned to graded positions. Selection for such a temporary promotion shall be based upon a consideration of the qualifications of an officer for promotion and his ability to perform the duties and responsibilities of the higher grade as demonstrated by his training, experience, and record with the Service. If a temporary promotion is other than upon assignment to a graded position, it may be terminated by the Secretary at any time.

§ 21.133 *Effect of disciplinary action.* Nothing contained in this subpart shall be construed to authorize the promotion of an officer of the Regular Corps if such promotion would be inconsistent with action taken pursuant to the regulations on discipline to reduce the grade, promotion credit, or seniority of such officer.

PROVISIONS APPLICABLE ONLY TO RESERVE CORPS

§ 21.141 *Dividing Reserve Corps into professional categories.* Whenever the number of officers of the Regular Corps on active duty, plus the number of officers of the Reserve Corps who have been on active duty for 30 days or more, exceeds the authorized strength of the Regular Corps, the Surgeon General shall, for the purpose of establishing eligibility of officers of the Reserve Corps for temporary promotions, divide the Reserve Corps into professional categories which shall, to the greatest extent practicable, be the same as the categories into which the Regular Corps is divided pursuant to section 209 (a) of the act. The Surgeon General shall thereupon assign each officer of the Reserve Corps, on the basis of his training and experience, to one of such categories.

§ 21.142 *Temporary promotions; Reserve Corps.* Under the same conditions and subject to the same limitations as are applicable to an officer of the Regular Corps, an officer of the Reserve Corps may be selected for assignment to a graded position, and, if selected and if a vacancy exists among numbers in grade established by the Secretary pursuant to section 210 (1) of the act in the higher grade and in the category of the officer so assigned, he shall be recommended for a temporary promotion to such grade. To the extent that vacancies exist in each grade of each category among numbers in grade established by the Secretary pursuant to section 210 (1) of the act, officers of the Reserve Corps, in addition to officers assigned to graded positions, may be recommended for temporary promotions. In time of war or national emergency proclaimed by the President, officers of the Reserve Corps may be recommended for temporary promotions under the same conditions and procedures as are applicable to officers of the Regular Corps. Any promotion made pursuant to this section may be terminated by the Secretary at any time.

SUBPART H—SEPARATION OF CERTAIN OFFICERS

AUTHORITY: §§ 21.151 to 21.155 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 210, 58 Stat. 687, as amended; 42 U. S. C. 211.

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§ 21.151 *Separation of officers of Regular Corps originally appointed in or above the senior assistant grade.* As soon as practicable after the conclusion of the first 3 years of service of an officer of the Regular Corps originally appointed in or above the grade of senior assistant, the record of such officer shall be reviewed by a board appointed by the Surgeon General composed of three or more commissioned officers of the Regular Corps, the majority of whom, so far as practicable, shall be of the same professional category as the officer whose record is under review. If the board finds such officer not fully qualified for further service and if such finding is approved by the Surgeon General and the Secretary, such officer shall be separated from the Service.

§ 21.152 *Separation of officers because of pregnancy.* An officer who becomes pregnant shall be placed on annual leave upon her own application or at such time as the Surgeon General may determine to be in the interest of the Service, but not later than the end of the sixth month of pregnancy. After the expiration of such leave, an officer who has had not less than 10 months continuous active service immediately prior to such expiration shall, upon application, be granted 90 days of sick leave. If after the expiration of annual and sick leave, if any, the officer has not requested to be returned to duty and has not presented evidence to the Surgeon General that she is physically qualified for duty, the officer, if a member of the Reserve Corps, shall be placed on inactive duty, or, if a member of the Regular Corps, her commission shall be terminated. After being placed on annual leave pursuant to this section, no officer shall be granted sick leave, other than the 90 days of sick leave hereinabove authorized, because of sickness, disability, or need of medical services incident to pregnancy or puerperium.

§ 21.153 *Separation of officers of the Regular Corps for physical reasons under certain circumstances.* If a medical review board, after considering the case of an officer referred to it pursuant to § 21.161, finds (a) that an officer of the Regular Corps has a physical disability which is determined to render him physically unfit to perform the duties of his office under section 402 of the Career Compensation Act of 1949 as amended,

but which does not entitle him to retirement for physical disability or placement upon the temporary disability retired list under such section, or (b) that an officer of the Regular Corps who is physically examined within 15 days from the date of his original appointment pursuant to § 21.32, fails to meet the physical qualifications required for original appointment because of a condition which existed prior to his appointment, it shall report such facts to the Surgeon General. If such report is approved by the Surgeon General and the Secretary, the commission of the officer concerned shall be terminated.

§ 21.154 *Separation of officers of the Regular Corps for refusal to undergo examination under certain circumstances.* If the Surgeon General finds (a) that an officer of the Regular Corps eligible to take an examination for promotion refuses, without good cause, to take such examination, including the physical examination, or (b) that an officer of the Regular Corps whose retirement for physical disability is being considered by a medical review board appointed pursuant to § 21.161 has failed, without good cause, to supply any information or undergo any examination required by such board pursuant to § 21.162, he shall refer the case of such officer to a board of investigation appointed pursuant to § 21.283 for the purpose of determining whether the commission of such officer should be terminated. If the board recommends that the commission of such officer be terminated, and if such recommendation is approved by the Surgeon General and the Secretary, the commission of the officer concerned shall be terminated.

§ 21.155 *Security requirements.* The provisions of Executive Order No. 10450 of April 27, 1953, entitled "Security Requirements for Government Employment", shall be applicable to commissioned officers of the Service; and the Secretary, in accordance with the standards and procedures prescribed therein or adopted pursuant thereto, shall (a) cause investigations to be made of commissioned officers of the Service and of candidates for commission in the Regular or Reserve Corps, in order to ensure that their appointment and their retention in office are clearly consistent with the interests of the national security, and (b) suspend from assigned duties or separate from the Service any such officer upon a determination that such suspension or separation is necessary or advisable in the interests of the national security.

SUBPART I—MEDICAL REVIEW BOARD

AUTHORITY: §§ 21.161 to 21.163 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216.

§ 21.161 *Medical review board.* The Surgeon General shall appoint one or more medical review boards and may appoint such subboards as are necessary to assist the boards. Such boards and subboards shall consist of three or more medical officers and may include one or more dental officers. The Surgeon General shall refer to a medical review board the case of any officer who may be entitled to retirement for physical disability, the case of any officer whose name has been placed upon the temporary disability retired list and who is required to undergo a periodic physical examination, and the case of any officer who after his appointment in the Regular Corps or call to active duty in the Reserve Corps is required pursuant to § 21.32 to undergo a physical examination the results of which indicate a possible physical disqualification for further service. In addition, he may refer to such board the case of any candidate being considered for original appointment to either the Regular or the Reserve Corps, the case of any officer of the Reserve Corps being considered for reappointment, call to active duty, or continued active duty, the case of any officer of the Reserve Corps who having been reappointed without taking a physical examination is subsequently physically examined pursuant to § 21.58, and the case of any officer of the Regular Corps being considered for permanent promotion, in which questions exist concerning the physical qualification of such candidate or officer for appointment, reappointment, call to active duty, continued active duty, or promotion.

§ 21.162 *Powers and duties of medical review boards.* A board or subboard may require an officer whose case has been referred to it to undergo such further physical examination as it may direct and to appear before the board and answer any question or produce any document in his possession pertinent to his health history or his activities at the time when the alleged disability arose or was aggravated. Upon the conclusion of its examination and deliberation, the board shall report its findings and recommendations to the Surgeon General.

§ 21.163 *Action by the Surgeon General.* Upon receipt of a report from a medical review board the Surgeon General may return the report to the board for further investigation and recommendations, or may dissolve the board and appoint a new board to complete the investigation or to reinvestigate the case. Upon receipt of a final report from a medical review board the Surgeon General shall consider such report in determining the action to be taken.

SUBPART J—RETIREMENT

AUTHORITY: §§ 21.171 to 21.184 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 211, 58 Stat. 688; 42 U. S. C. 212.

AFTER THIRTY YEARS OF SERVICE

§ 21.171 *Retirement of officers in the senior grade.* Each officer of the Regular Corps in the senior grade, other than an officer in a restricted grade, who has completed 30 years of service for purposes of retirement and who does not request in writing prior to completion of such service that he be retired within 6 months after completion of such service, shall be retired by the Secretary not later than 6 months after completion of such service.

§ 21.172 *Retirement boards; appointment of.* The Surgeon General shall from time to time appoint retirement boards which shall consist of five or more officers, the majority of whom shall, insofar as practicable, be of the same professional category as the officer being considered for retirement.

§ 21.173 *Referral of records to retirement boards.* If an officer of the Regular Corps who is in the director grade, other than an officer during the period of his assignment in the grade of Assistant Surgeon General or above, or who is in the senior grade in a restricted grade does not request in writing prior to completion of 30 years of service for purposes of retirement that he be retired within 6 months after completion of such service, the Surgeon General shall refer his record, including the record of his physical condition, to an appropriate retirement board which shall review such record to determine his qualifications for continued active service.

§ 21.174 *Powers and duties of retirement boards.* A retirement board shall consider the record referred to it by the Surgeon General, and in addition may require for its consideration an oral or written statement from any officer, including the officer concerned, which it believes to be pertinent to an evaluation of the qualifications of such officer for continued active service. The recommendation of a majority of the members of a board shall be reported to the Surgeon General as the recommendation of the board.

§ 21.175 *Subsequent review of record.* If an officer of the Regular Corps is not retired as a result of a review of his record and if he is not subsequently retired for any other reason, the Surgeon General may again refer his record to a retirement board for review at any time, and shall refer his record to a retirement board for review within 3 months after a date which is 2 years subsequent to the date on which the record of such officer was last reviewed by a retirement board. Each review of his record shall be conducted as prescribed in § 21.174.

§ 21.176 *Prescription of numbers for retirement.* The Surgeon General may from time to time refer to appropriate retirement boards the records of all officers of the Regular Corps in a professional category, other than the record of an officer during the period of his assignment in the grade of Assistant Surgeon General or above, who have completed 30 or more years of service for purposes of retirement and who have not been retired, and may prescribe that, out of the number of such officers, a specified number of them shall be recommended for retirement.

§ 21.177 *Action by the Surgeon General and the Secretary.* If a retirement board finds that an officer should be retired and if such finding is approved by the Surgeon General and the Secretary, the officer concerned shall be retired.

RESTRICTED GRADE RETIREMENTS

§ 21.181 *Voluntary retirement; restricted grades.* An officer of the Regular Corps shall, upon his application and

subject to the approval of the Surgeon General, be retired pursuant to section 211 (f) of the act on or after such date as he becomes eligible for retirement pursuant to said section: *Provided*, That he has not been found qualified for a permanent promotion prior to the date upon which the Surgeon General approves his application for retirement.

§ 21.182 *Referral of records to retirement boards.* (a) If an officer does not request in writing within one month subsequent to the date on which he becomes eligible for retirement pursuant to section 211 (f) of the act that he be retired within six months after such date, the Surgeon General shall immediately after the expiration of such month refer his record, including the record of his physical condition, to a retirement board appointed pursuant to § 21.172 which board shall review his record to determine his qualifications for continued active service. In considering each such record the retirement board shall have the powers and duties prescribed in § 21.174.

(b) If the Surgeon General disapproves the application of an officer for retirement pursuant to § 21.181, he shall, not later than one year from the date on which the officer first applied for retirement, submit the officer's record to a retirement board for review as prescribed in paragraph (a) of this section: *Provided*, That the officer is still eligible for retirement at such time.

§ 21.183 *Subsequent review of records.* The records of officers who remain eligible for retirement pursuant to section 211 (f) of the act shall be subject to such additional reviews as are prescribed in §§ 21.175 and 21.176.

§ 21.184 *Action by the Surgeon General and the Secretary.* If a retirement board finds that an officer who is eligible for retirement pursuant to section 211 (f) of the act should be retired and if such finding is approved by the Surgeon General and the Secretary, the officer concerned shall be retired.

DISABILITY RETIREMENT

AUTHORITY: §§ 21.191 and 21.192 issued under sec. 413, 63 Stat. 824; 37 U. S. C. 283.

§ 21.191 *Establishment of medical review board to make findings and recommendations concerning disability retirements and separations.* The Surgeon General shall appoint one or more medical review boards and may appoint such subboards as are necessary to assist the boards for the purpose of making findings and recommendations relating to determinations relative to the disability retirement of commissioned officers of the Public Health Service. The boards and subboards shall be constituted as provided in § 21.161 and shall have the additional powers and duties prescribed in § 21.162. The Surgeon General shall refer to a medical review board the case of any officer who may be entitled to retirement for disability, and the Surgeon General shall have, with respect to cases involving disability retirement or separation, the powers conferred upon him pursuant to § 21.163.

§ 21.192 *Procedures; full and fair hearings.* (a) If the report of the medical review board, which has reviewed the case of an officer for retirement, where the officer did not specifically apply for such retirement, contains a finding that such officer is physically fit to perform the duties of his office and if such report is approved by the Surgeon General, the report shall be transmitted to the Secretary for appropriate action pursuant to paragraph (d) of this section.

(b) If the report of the medical review board, which has reviewed the case of an officer for retirement, recommends that such officer be retired or separated or finds that an officer who has specifically applied for disability retirement is physically fit to perform the duties of his office, and if such report is approved by the Surgeon General, a copy of the report shall be forwarded to the officer concerned who shall be informed that if he feels aggrieved by any of the board's findings or recommendations, he shall have the right, within 30 days of his receipt of the report to request the Surgeon General to grant him a full and fair hearing. If the officer's request for a hearing is received within 30 days of his receipt of the board's report the Surgeon General shall grant such officer a full and fair hearing by such means as the Surgeon General may determine most appropriate under the circumstances. Upon completion of such a hearing, the findings and recommendations of the hearing tribunal, together with the board's report, shall be transmitted through the Surgeon General to the Secretary for appropriate action pursuant to paragraph (d) of this section.

(c) If an officer, upon notification of his right to request a hearing, states in writing that he does not desire a hearing, or if a request for a hearing is not received within 30 days from the officer's receipt of the board's report, the Surgeon General shall forward the report to the Secretary for appropriate action pursuant to paragraph (d) of this section.

(d) Upon receipt by the Secretary of the material transmitted to him the officer concerned shall be retired, separated, or continued on active duty as the Secretary shall determine: *Provided*, That if the Secretary determines to retire, separate, or continue on active duty an officer who has not been given an opportunity to request a full and fair hearing, the Secretary shall return all the material involving such officer to the Surgeon General for a hearing pursuant to paragraph (b) of this section.

SUBPART K—TRAINING

AUTHORITY: §§ 21.201 to 21.204 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 218, 62 Stat. 47; 42 U. S. C. 218a.

§ 21.201 *Definition.* The term "approved educational institution or training program" as used in this subpart means an educational institution or training program which has been accredited or approved by a professional body or bodies acceptable to the Surgeon General for such purpose, or which, in the absence of such a body, meets generally accepted professional standards as determined by the Surgeon General.

§ 21.202 *Assignment of officers to educational institutions for training.* After considering the needs of the Service for officers with knowledge, skill, and experience in the specialties required by Service activities, the Surgeon General may assign an officer, with his consent, to an approved educational institution or training program for purposes of training for such length of time as the Surgeon General shall determine and under such conditions as may be agreed upon by the educational institution or training program and the Surgeon General.

§ 21.203 *Payment of tuition and fees.* When an officer of the Regular Corps is assigned to an educational institution or training program, the institution or training program shall be paid for tuition and other fees and charges, including student health service fees, registration fees, laboratory fees, and diploma fees, in the same amounts as are applicable to other students and in such manner as may be agreed upon by the institution or training program and the Surgeon General.

§ 21.204 *Other necessary expenses.* An officer upon assignment to an educational institution or training program for a period of 3 months or more shall be entitled to reimbursement for necessary expenses incident to his attendance incurred for the purchase of textbooks, equipment, and supplies on an actual cost basis not to exceed a total of $100.00 during each year of such training. Such reimbursement shall be made upon the submission of proper receipt for each item.

SUBPART L—UNIFORMS

AUTHORITY: §§ 21.211 to 21.242 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Statutory provisions interpreted or applied are cited to text in parentheses.

MALE OFFICERS

§ 21.211 *Generally.* The uniforms of male officers of the Service shall be the same as the uniforms now or hereafter prescribed for male commissioned officers of the Coast Guard of corresponding grades, except as follows:

(a) *Insignia.* Public Health Service insignia shall be substituted for Coast Guard insignia other than appropriate insignia of grade.

(b) *Miniature corps device on collar tip.* A metal Public Health Service miniature corps device shall be worn on the left shirt collar tip in lieu of the grade mark worn by commissioned officers of the Coast Guard.

(c) *Chin strap.* There shall be worn on the cap a sliding leather strap faced with gold-colored lace or thread, ½ inch wide, with a center band of maroon running lengthwise, 1/16 inch wide, with brass eyelets at each end, and with two slides of the same width and design as the strap at right angles to the strap.

FEMALE OFFICERS

§ 21.221 *Generally.* The uniforms of female officers of the Service shall be the same as the uniforms now or hereafter prescribed for commissioned officers of the Women's Reserve, U. S. Naval Reserve of corresponding grades, except

that Public Health Service insignia, other than appropriate insignia of grade, shall be worn in lieu of the insignia of the Women's Reserve, U. S. Naval Reserve.

§ 21.222 *Working uniforms.* Female officers while on duty at hospitals, or while performing other professional duties in which white working uniforms are customarily worn, shall wear a conventional white working uniform. A metal miniature corps device shall be worn on the left collar tip and a metal miniature grade mark shall be worn on the right tip of this uniform, each device being worn one inch from the front edge of the collar.

§ 21.223 *Detail to States.* Female officers detailed to State or local health departments while engaged in public health activities, consisting of home visiting or clinical work, may wear the uniform dress, if any, of the State public health department to which detailed, together with the garrison cap with miniature Public Health Service cap device on the left side and a miniature metal grade mark on the right side. While wearing State health department uniforms such officers shall wear the same collar-tip insignia as female officers on hospital duty.

§ 21.224 *Change in uniform.* In the event that changes in the uniform of the Women's Reserve, U. S. Naval Reserve, are prescribed, female officers of the Service may continue to wear any uniforms owned by them at the time they are notified of such changes for a period not to exceed two years thereafter, but uniforms acquired after such notification shall be in accordance with the prescribed changes.

MALE AND FEMALE OFFICERS

§ 21.232 *Insignia.* Public Health Service insignia shall be as follows:

(a) *Corps device.* An ornament of gold-colored metal or gold-colored lace or thread consisting of a fouled anchor and caduceus crossed as in the seal of the Service, 1 inch high and 1 inch wide. Except when incorporated as part of the cap device, the corps device shall be so placed on the uniform that the staff of the caduceus is vertical and the anchor is pointing inward.

(b) *Miniature corps device.* A corps device $1\frac{1}{16}$ inch high and $1\frac{1}{16}$ inch wide.

(c) *Cap device.* An ornament of gold-colored metal or gold-colored lace or thread consisting of a shield with a chief with thirteen stars surmounted with a spread eagle, head dextral, with the whole placed on the corps device, with dimensions as follows:

	Inches
Height of shield	$1\frac{3}{16}$
Height of eagle	$\frac{7}{8}$
Wing spread of eagle	$2\frac{1}{8}$
Staff of caduceus	$2\frac{1}{2}$
Length of anchor	$2\frac{1}{2}$

(d) *Miniature cap device.* A cap device with dimensions as follows:

	Inches
Height of shield	$\frac{1}{2}$
Height of eagle	$\frac{1}{2}$
Wing spread of eagle	$1\frac{3}{16}$
Staff of caduceus	$1\frac{3}{16}$
Length of anchor	$1\frac{3}{16}$

(e) *Buttons.* Buttons of the same composition and arrangement as on the corresponding article of uniform clothing of a commissioned officer of the Coast Guard or Women's Reserve, U. S. Naval Reserve, with the corps device of the Public Health Service embossed on the button.

§ 21.233 *Wearing of uniforms in time of war.* In time of war, officers of the Service on active duty shall appear in uniform unless otherwise directed by the Surgeon General.

§ 21.234 *Wearing of uniforms in time of peace.* In time of peace, the Surgeon General shall from time to time designate those stations of the Service at which, and those areas, if any, in which, officers of the Service shall wear uniforms.

§ 21.235 *Uniform of the day; generally.* An officer in charge of a station at which uniforms are required to be worn shall from time to time prescribe the uniform of the day to be worn at the station at seasons of the year and on dress occasions, and the Surgeon General may also prescribe the circumstances under which uniforms need not be worn.

§ 21.236 *Uniform of the day; certain officers.* Officers of the Service detailed for duty with other commissioned services shall wear the Public Health Service uniform of the day most nearly corresponding to that worn by the unit with which such officers are serving.

§ 21.237 *Wearing of uniforms; inactive, retired, or former officers.* Unless authorized by the Surgeon General, officers of the Reserve Corps on inactive duty and retired officers shall not wear uniforms except on occasions of ceremony. The Surgeon General may, however, authorize an officer to wear the uniform of his grade for a period not to exceed 30 days following the termination of his commission, his transfer to inactive duty, or his retirement.

(Sec. 510, 58 Stat. 711, as amended; 42 U. S. C. 228)

OTHER PERSONS

§ 21.241 *Persons authorized to wear similar insignia.* Employees of the Public Health Service while wearing uniforms in accordance with regulations of the Surgeon General approved by the Secretary may wear Public Health Service insignia.

(Sec. 510, 58 Stat. 711, as amended; 42 U. S. C. 228)

§ 21.242 *Wearing of certain insignia, or of ornamental jewelry resembling insignia.* Persons not in uniform and not representing themselves to be commissioned officers of the Public Health Service may wear ornamental jewelry resembling Public Health Service insignia, or may wear the corps device, or cap device, or miniatures thereof, in honor of a commissioned officer of the Public Health Service.

(Sec. 510, 58 Stat. 711, as amended; 42 U. S. C. 228)

SUBPART M—DECORATIONS

AUTHORITY: §§ 21.251 to 21.253 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216, E. O. 9993, 13 F. R. 5093; 3 CFR, 1948 Supp. Interpret or apply sec. 212 (d), 58 Stat. 689, as amended; 42 U. S. C. 213 (d).

§ 21.251 *Military, naval, or foreign government decorations*—(a) *Decorations evidencing service.* For service in time of war or service in any theatre of operations under circumstances and conditions comparable to service performed by members of the armed forces, commissioned officers of the Service shall be authorized to wear medals, ribbons, or decorations authorized to be worn by members of the armed services to signify such service, such authorization to be governed by the same rules and regulations as are prescribed for the armed forces. No decoration evidencing participation in a particular campaign or engagement shall be worn unless an officer was or is detailed to one of the armed services and was or is assigned to a unit awarded such decoration. No officer shall be entitled to wear a decoration awarded by any of the armed services to their members to signify service in time of peace unless an officer was or is detailed to one of the armed services and is authorized by the service to which detailed to wear such decoration.

(b) *Decorations evidencing personal merit.* Commissioned officers may be awarded, and may accept and wear, military ribbons, decorations, or medals awarded by the United States or by a foreign government for personal merit or achievement under the same circumstances as may now or hereafter be provided by law in the case of members of the armed forces of the United States.

§ 21.252 *Wound or service chevrons; overseas service bars.* Commissioned officers who served with the Army during World War I may wear on an Army type uniform, with respect to such service, the wound or service chevrons as prescribed by the Army (see 10 CFR, 1944 Supp., 709.27). One overseas service bar is authorized to be worn by commissioned officers of an Army type uniform, as prescribed in Army regulations (see 10 CFR, 1946 Supp., 709.27 (d)), for each period of 6 months of active service outside the continental limits of the United States or in Alaska from December 7, 1941, to September 2, 1946, both dates inclusive.

§ 21.253 *Other medals, ribbons, or badges.* Commissioned officers may wear medals, ribbons, or badges awarded to them by the Treasury Department. The distinctive badges adopted by military, hereditary, and patriotic societies composed of persons or descendants of persons who served in the armed forces of the United States or in the Service during the Colonial wars, the War of the Revolution, the War of 1812, the Mexican War, the Civil War, the Spanish-American War, the First World War, and the Second World War, respectively, may be worn on all occasions of ceremony by commissioned officers who are regular members of such organizations and entitled by their rules to wear such decorations.

SUBPART N—DISCIPLINE

AUTHORITY: §§ 21.261 to 21.322 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216.

GENERAL PROVISIONS

§ 21.261 *Applicability.* The provisions of this subpart shall apply to all commissioned officers, whether on leave, active duty, or retired, except that they shall not apply to officers on detail pursuant to section 214 of the act to the extent that this subpart may be inconsistent with the special service in which they are engaged. Officers detailed for duty with other commissioned services shall be subject to the laws for the government of the service to which detailed. During the effective period of any Executive order declaring the Service to be a military service and prescribing that the commissioned corps shall be subject to the Uniform Code of Military Justice, disciplinary action may be initiated, prosecuted, and completed either in accordance with the provisions of such order or in accordance with the provisions of this subpart.

§ 21.262 *Orders of superior officers.* Officers are required to observe and promptly to obey the lawful orders of the Surgeon General and all other official superiors. Such orders may be written or oral, but all countermanding orders shall be in writing unless the original order was oral and is countermanded by the officer who issued it.

§ 21.263 *Officer in charge; designation.* The officer in charge of a station shall have authority over all officers serving with him and shall enforce Service regulations and issue and enforce such lawful orders as he may deem necessary for proper administration of the station. As used in this subpart, "officer in charge" means the officer so assigned by the Surgeon General.

§ 21.264 *Officer in temporary charge; designation.* An officer in charge shall designate an officer assigned to his station to act as the officer in temporary charge in the event of his absence, disability, or death. Such designation may be made without regard to rank or professional category.

§ 21.265 *Officer in temporary charge; authority.* An officer in temporary charge shall make no substantial changes in the regular routine of the station unless such changes are found to be necessary from conditions of emergency or changed circumstances. Any order making such change together with the reasons therefor shall be entered in the files of the station over the signature of the officer in temporary charge.

§ 21.266 *Official correspondence.* All official communications written by officers relative to matters of official business shall be forwarded through the officer in charge.

§ 21.267 *Furnishing information.* No officer shall publish or furnish for publication any official reports of current statistics of the operations of the Service or any information concerning the Service without authority from the Surgeon General; nor shall an officer publish or offer for publication any article dealing with professional subjects or the policy of the Service unless the article shall have been submitted to and approved by the Surgeon General or his designated representative. No reports or information concerning the Service shall be volunteered to the press without the consent of the officer in charge, to whom representatives of the press shall be referred when requesting information.

§ 21.268 *Letters of recommendation.* No officer shall give any letter of recommendation with respect to any article of manufacture or on behalf of any firm or corporation.

§ 21.269 *Outside employment.* No officer on active duty shall render any professional services for remuneration except with written approval of the Surgeon General.

§ 21.270 *Misconduct.* The following actions or conduct shall constitute grounds for disciplinary action pursuant to this subpart:

(a) Willful disobedience of the lawful orders of a superior officer.

(b) Negligence or carelessness in obeying orders.

(c) Excessive use of drugs or intoxicating liquors.

(d) Conduct tending to bring discredit upon the officer or upon the Service, or upon both.

(e) Financial irregularities.

(f) Use of language disrespectful of official superiors or other officers.

(g) Any publication or public statement impugning the professional competency or personal character of another officer.

(h) Waste of public property or knowingly permitting such waste.

(i) Conviction of a felony or an offense involving moral turpitude.

(j) Willful submission of false information in application for appointment or in any proceeding of the Service.

(k) Abusive treatment of subordinate officers or employees, of patients or beneficiaries of the Service, or of members of the public in their dealings with the Service.

(l) Absence without leave.

(m) Violation of any regulation prescribed for the government of the Service.

§ 21.271 *Summary punishment*—(a) *Officer in charge.* The officer in charge may impose upon an officer subject to his authority the following punishment for misconduct during any period when the latter was so subject: (1) Private reprimand; and (2) suspension of privileges pending immediate report of such misconduct to and instructions from the Surgeon General.

(b) *The Surgeon General.* If an officer is absent without leave for 30 or more days during a calendar year, the Surgeon General may recommend to the Secretary that the commission of such officer be terminated and if the Secretary approves such recommendation, the commission of such officer shall be terminated. If the Surgeon General so determines, he may refer any case of absence without leave to a board of investigation for investigation and recommendations in accordance with the provisions of this subpart.

(c) *Recording of action taken.* Any action taken pursuant to this section shall be entered on the service record of the officer. Such entry shall include the date and nature of the offense and the action taken.

§ 21.272 *Leave of absence during pendency of charges.* An officer authorized to grant leave of absence shall not grant leave to an officer against whom charges are pending, but requests for leave at that time shall be referred to the Surgeon General for action.

§ 21.273 *Grievances.* If any officer shall consider himself aggrieved by another officer and shall fail to secure an adjustment of the matter to his satisfaction, he may report such fact in writing through the officer in charge to the Surgeon General.

BOARDS OF INVESTIGATION

§ 21.281 *Order to appear before board; time limitations.* When an officer is charged by his superior officer, or by any responsible person or persons, with conduct constituting a ground for disciplinary action under this subpart, he may be ordered to appear before a board of investigation, but no officer shall be so ordered to appear or punished for any offense connected with the Service committed more than one year before the issuance of such order. Any period during which an officer is outside the continental United States or in Alaska or any period during which discovery of the offense was prevented by the giving of false information by or in behalf of an officer shall not be counted as part of such one-year limitation.

§ 21.282 *Convocation.* A board of investigation may be convoked by order of the Secretary or the Surgeon General. Such order shall indicate the time and place of assembly.

§ 21.283 *Composition.* The board of investigation shall consist wholly of commissioned officers of the Service and of not less than three members, who shall be appointed by the Secretary upon recommendation of the Surgeon General. The members of the board shall, if practicable, be equal or senior in rank to the accused officer and shall, if practicable, include at least one officer of the same profession as the accused officer.

§ 21.284 *Punishment.* The board shall hear the case and make a report of its findings. If the accused officer is found guilty, the board shall make recommendations as to punishment which shall be limited to the following:

(a) Dismissal from the Service.

(b) Reduction of grade, with a specific recommendation with regard to promotion credit and seniority in the grade to which reduced.

(c) Loss of seniority with a specific recommendation with regard to promotion credit.

(d) Official reprimand by circular letter.

(e) Official reprimand by the Surgeon General.

(f) Any combination of the punishments prescribed in paragraphs (b), (c), (d) and (e) of this section.

§ 21.285 *Service representative.* In connection with any proceeding before a board of investigation, the Surgeon General shall detail an officer of the Service, not liable to be summoned as a witness, to prepare a statement of the charges and specifications against the accused officer and to act in the interest of the Government as Service representative before the board. The Service representative shall not be a member, and shall be independent of the control, of the board. The Service representative shall investigate all the circumstances of the case. All persons connected with the Service shall furnish the Service representative with such information within their knowledge as he may request. He shall have the right to be furnished with such instructions and papers or copies thereof as may be necessary for his guidance.

§ 21.286 *Notice of charges; right to counsel.* When charges are preferred against an officer for the investigation of which a board of investigation is ordered, the officer shall be furnished a copy of such charges and the specifications thereof and shall be notified that he may, if desired, have counsel to aid in his defense.

§ 21.287 *Presiding officer.* The senior officer of the board shall be the presiding officer. He shall (a) preserve order, (b) decide upon matters relating to the routine of business, (c) request the presence of witnesses, (d) administer oaths as required, and (e) adjourn the board from day to day. He shall be authorized at any time to order the exclusion from the room of any person other than the members of the board, the recorder, the stenographer, the accused and his counsel, and the Service representative, and to order a closed session limited to members of the board for the purpose of deliberation upon objections to questions and evidence and upon the validity of challenges and pleas, and of formulating its findings and recommendations. Should any member of the board object to a decision of the presiding officer, the question shall be submitted to and decided by a majority vote of the board.

§ 21.288 *Recorder.* The junior officer of the board shall be recorder. Under the direction and control of the board it shall be his duty (a) to record the proceedings, (b) to append original documents (or authenticated copies thereof) to the record, (c) to have custody of the record and all documents submitted to the board, (d) to assist the board in systematizing the information it may receive, (e) to render the board such assistance as will enable it to present the facts to the convoking authority, (f) to read the charges and specifications when the accused is arraigned, (g) if practicable, to read the record of the proceedings of the preceding session at the opening of each session, (h) as may be directed by the presiding officer, to prepare and send out requests to witnesses to appear and testify, and (i) in conjunction with the presiding officer, to authenticate the proceedings by his signature.

§ 21.289 *Stenographer.* Stenographic assistants shall be employed to record the testimony.

§ 21.290 *The record.* Except as otherwise provided, the entire proceedings of the board shall be fully set forth in the record, which shall be signed by the presiding officer and the recorder. Such record shall be confidential and shall not be disclosed except for the purposes of the proceedings, but the accused and his counsel shall be permitted access to the record for the purpose of preparing the defense of the accused in such proceedings.

§ 21.291 *Oath of board members.* When the board assembles, the recorder shall read the order convoking it. Such order shall be read in the presence of the Service representative, the stenographer, the accused officer, and his counsel. The recorder shall then administer the following oath to each member of the board: "I do solemnly swear (or affirm) that I will carefully and impartially investigate and try the case now about to be opened; that in announcing my conclusions and recommendations to be embodied in the report of this board to be submitted to the convoking authority, I will be governed wholly by the evidence adduced, and I will not be influenced for or against the accused by anything not clearly shown in the recorded evidence; so help me God." The presiding officer shall then administer the same oath to the recorder of the board.

§ 21.292 *Oath of recorder and stenographer.* The recorder and the stenographic assistants shall be sworn by the presiding officer to keep a true record of proceedings, as follows: "I do solemnly swear (or affirm) that I will faithfully perform the duties of recorder (or stenographer) to this board, and that I will not divulge any of the proceedings of the investigation; so help me God."

§ 21.293 *Affirmations.* The closing phrase invoking the Diety in the oaths prescribed in this subpart shall be omitted in cases of affirmation.

§ 21.294 *Sessions.* The board shall sit daily, except Sundays and holidays, until a decision is reached unless temporarily adjourned or dismissed by the authority which convoked it: *Provided,* That the presiding officer may, for good cause, grant a continuance to either party for such time and as often as may appear to be just. When the proceedings of the board have commenced, they shall not be suspended or delayed on account of the absence of any of the members if a majority but not less than three members is present, and in the absence of the accused officer without good cause the board may proceed as if he were present.

§ 21.295 *Challenges.* The presiding officer shall ask the accused whether he objects to being tried by any member of the board, and, in case of objection, he shall state his reasons therefor. The recorder shall enter a minute of the inquiry and of the answer upon the records. A challenged member shall have the rigift to reply to the accused. All parties except the unchallenged members shall be excluded until a decision has been reached upon the validity of the challenge by the remaining members of the board. Should the challenge be sustained, the facts shall be reported by the presiding officer to the Surgeon General, and if the number of members is reduced below three, the board shall adjourn until instructions are received. Each challenge, whenever the accused wishes to challenge more than one member, shall be received and considered separately.

§ 21.296 *List of witnesses.* The Service representative and the accused shall each furnish the presiding officer a list of his witnesses. Other witnesses may be introduced at a later stage of the investigation upon giving reasonable notice. The notice to testify shall be prepared by the recorder and signed by the presiding officer.

§ 21.297 *Reading of charges and specifications.* The recorder shall read in the presence of the accused the charges and specification of charges preferred against him, and the accused shall be called upon to plead on each specification and charge seriatim, as follows: The recorder shall read the specification of the first charge, and the presiding officer shall then address the accused by name and designation and ask whether he is guilty or not guilty of the specification just read. Each specification shall be read and the accused asked to plead in each instance until all of the specifications of the first charge have been covered. Then the charge shall be read and the accused be required to plead to that. The specifications and charges shall be pleaded to in this manner until all have been covered.

§ 21.298 *Plea to charges.* If the accused officer is present and refuses to plead, the presiding officer shall direct a plea of "not guilty" to be entered.

§ 21.299 *Plea in bar.* A plea in bar of investigation shall be in writing, signed by the accused, and appended to the record. Witnesses may be called and arguments submitted by both parties upon such plea. The board shall deliberate upon the matter in closed session, and, upon reopening, the board's decision shall be announced by the presiding officer. If the plea is sustained, a report shall be forwarded to the convoking authority and the board shall adjourn to await further orders.

§ 21.300 *Preliminary instructions to witnesses.* Witnesses other than the accused shall be present only when testifying, and they shall be warned that they are not to converse on any matter pertaining to the pending investigation.

§ 21.301 *Calling of witnesses; oath.* The witnesses shall be called before the board separately. The presiding officer shall administer to each the following oath: "I do solemnly swear (or affirm) that I will make true answers to such questions as may be propounded to me; so help me God." Witnesses shall be

cautioned before giving their testimony to testify only to facts which are within their own knowledge.

§ 21.302 *Verification of testimony.* After the testimony of the witness is closed the whole of his testimony as recorded may be read over to him and, when corrected in such parts as are in error, he shall sign it. The signatures of the witnesses shall be authenticated by the presiding officer of the board.

§ 21.303 *Witness fees.* Upon the application of the presiding officer payment of the usual witness fees to witnesses unconnected with the Government service may be authorized.

§ 21.304 *Evidence; admissibility.* Evidence may be received by the board even though inadmissible under rules of evidence applicable to court procedure. The Service representative or the counsel for the accused may, however, object to the admission of evidence or testimony on the ground that it is irrelevant, immaterial, incompetent, or otherwise improper, and if such objection is overruled by the board he shall be allowed to enter his objection upon the record. Notwithstanding the provisions of § 21.281, whenever it shall appear to the board to be material to the charges to prove or disprove a particular habit of the accused, evidence as to his record in that regard for a period of 3 years prior to the order convoking the board shall be admissible.

§ 21.305 *Depositions.* Depositions of individuals who are unable to appear in person before the board and whose testimony is material to a complete investigation of the case may be received, provided that the accused shall be given an opportunity to have present when the deposition is taken a representative who may cross-examine the witnesses.

§ 21.306 *Order of examination.* The evidence on the part of the Service shall be first taken. The evidence for the defense shall be taken when the Service rests. Either side may rest at pleasure. The examination of witnesses shall close by taking such testimony as may be offered in rebuttal, surrebuttal, impeachment, or to sustain the credibility of those witnesses whose testimony an effort has been made to impeach. The board may recall a witness at any stage of the proceedings, provided that the right of cross-examination by the accused and the Service representative shall not be denied. Each witness shall first be examined in chief by the party who summons him, and then cross-examined by the opposite party. In case of new matter being introduced on cross-examination, the party calling the witness may examine him with respect to such matter, and, under like circumstances, a recross-examination shall be permitted. The board may put such questions to the witness as may be deemed necessary; a question by a member of the board generally shall not be asked until the Service representative and the accused have finished their examinations.

§ 21.307 *Testimony of accused.* The accused may in any case, testify in his own behalf, but his failure to do so shall create no presumption against him. If the accused does testify in his own behalf, he shall be subject to cross-examination concerning any facts to which he has testified.

§ 21.308 *Defense rebuttal.* When the examination of witnesses is closed the accused may present arguments in his defense, in writing or orally, in person or by counsel. This statement, if written, may be read before the board. The whole shall become a part of the record.

§ 21.309 *Reply of Service representative.* The Service representative shall have the right to reply to the defense in writing or orally, and this reply shall become a part of the record.

§ 21.310 *Close of hearing.* When the Service representative and the defense have completed their arguments, the hearing shall be closed. The board may, however, before its finding, authorize reopening for the introduction of new evidence, provided it be shown that the evidence is material and its omission would leave the case incomplete. The board shall then retire to consider the record.

§ 21.311 *Consideration by board.* (a) When the board has sufficiently examined the evidence, the presiding officer shall put the question upon each specification of each charge, beginning with the first, whether the specification is "proved", "not proved", or "proved in part". No written minute of the votes shall be preserved unless so ordered by the unanimous vote of the board. In any oral vote the member of the board who is junior in rank shall vote first. When a majority of the board agrees upon a finding it shall be so recorded.

(b) When the members have voted upon all the specifications of any charge, the question shall be put upon the charge to each member: "Is the accused guilty of the charge, or not guilty?". When a majority decision is arrived at, the result shall be recorded. The board shall then proceed to the next charge and specifications until votes have been taken and decisions recorded upon all the charges and specifications.

(c) When the members of the board have voted upon all the charges, if the accused has been found guilty upon any of them, the members shall proceed to vote upon the punishment to be recommended. Each member shall write down the punishment which he believes should be recommended and shall hand his vote to the presiding officer, who shall announce the result. If a majority shall not have agreed upon the nature and degree of the punishment to be recommended, the presiding officer shall proceed, beginning with the mildest punishment that has been proposed and continuing, if necessary, to the next more severe punishment, and so on, successively, until a punishment to be recommended has been decided upon by a majority of the members of the board.

(d) A finding of guilty shall not be entered on a charge other than a charge specified. In case evidence develops which in the opinion of the Service representative warrants additional charges and specifications, appropriate recommendation shall be made with respect thereto by the Service representative to the Surgeon General. The Service representative shall give due notice to the presiding officer, whereupon the board shall await further instructions from the Surgeon General.

§ 21.312 *Findings and recommendations of board.* After all charges and specifications have been voted upon, the recorder, under the direction of the board, shall draw up the findings, specifying as to each charge whether the accused has been found guilty or not guilty, and, on approval by the board, shall enter such findings upon the record, together with the recommendations of the board as to punishment and clemency if the accused has been found guilty of any charge.

§ 21.313 *Recommendations of board.* In arriving at its recommendations as to the nature and degree of the punishment, if any, to be imposed, the board shall take into consideration all previous convictions and the official record of the accused. If mitigating circumstances have appeared during the proceedings which could not be taken into consideration in determining the degree of guilt found by the verdict, the board may avail itself of such circumstances as grounds for recommending clemency. Any recommendation for clemency shall be inserted immediately after the recommendation as to punishment.

§ 21.314 *Report to accompany record.* The board shall prepare a report to accompany the record and in such report shall review the evidence as a whole, with specific reference to all evidence and to any conclusions of law on controverted questions upon which the findings are based. The report of the board shall be signed by the members concurring; any member or members not concurring, in whole or in part, may submit and sign a minority report.

§ 21.315 *Transmittal of record and report.* After the record (including the transcript of the testimony) and other documents have been signed, they shall be forwarded by the presiding officer to the Surgeon General. The board shall then adjourn pending further orders.

ACTION UPON FINDINGS AND RECOMMENDATIONS OF BOARD

§ 21.321 *Action by Surgeon General.* The Surgeon General shall review the record, report, and recommendations of the board, and may either order further investigation by the board or transmit the papers in the case to the Secretary with his recommendations.

§ 21.322 *Action by the Secretary.* No recommendation for punishment shall be effective until approved by the Secretary. The Secretary shall review the record, report, and recommendations of the board and the recommendations of the Surgeon General, and may either order a further investigation by the

board or approve the findings and recommendations in whole or in part; or, upon the basis of the approved findings, he may order punishment or a grant of clemency or other disposition not inconsistent with these regulations. The disposition of a case by the Secretary shall be final.

SUBPART O—BURIAL PAYMENTS

AUTHORITY: §§ 21.331 to 21.333 issued under sec. 12, 68 Stat. 481; 5 U. S. C. 2162.

§ 21.331 *Commissioned officers.* Upon the death of a commissioned officer the Surgeon General or his designee may pay the necessary expenses for those items enumerated in section 2 of the Act of July 15, 1954 (68 Stat. 478; 5 U. S. C. 2152), in accordance with and subject to those limitations prescribed in said Act. Not more than an aggregate of $600.00 shall be paid for the following:

(a) Preparation of remains for burial (including cremation of remains upon request of the person recognized as the one to direct the disposition of the remains);

(b) Casket or urn, with outside box;

(c) Hearse service; and

(d) Funeral director's services.

In addition, an amount not to exceed $50.00 shall be paid for the interment of the remains when the interment is in a cemetery other than a national cemetery.

§ 21.332 *Reimbursement.* In any case where expenses, which are authorized to be paid under § 21.331, are borne by an individual, reimbursement to such individual or his representative may be made for such expenses, subject, however, to the limitations as to amount prescribed in § 21.331.

§ 21.333 *Dependents of commissioned officers.* The Surgeon General or his designee may pay, with respect to a dependent (as defined in section 102 (g) of the Career Compensation Act of 1949, as amended) of a commissioned officer on active duty, who dies while residing with such commissioned officer outside the continental limits of the United States or in Alaska or while in transit to or from such place of duty, the necessary expenses incurred for the transportation of the remains to such person's home or to such other place as the Surgeon General shall determine to be the appropriate place of interment.

SUBPART P—QUARTERS

AUTHORITY: §§ 21.341 to 21.348 issued under sec. 302, 63 Stat. 812, as amended; 37 U. S. C. 252.

§ 21.341 *Definitions.* As used in this subpart, the terms:

(a) "On active duty" and entitled to "active-duty pay" shall apply to a commissioned officer of the Public Health Service while on the active list or while required to perform duty in accordance with law for which he is entitled to active-duty pay: *Provided,* That such terms shall not apply to any officer while absent from duty under conditions which, under the laws governing the Public Health Service, would prevent him from receiving full pay.

(b) "Permanent station" shall mean the place where an officer is assigned to duty under orders which do not in terms provide for the termination thereof.

(c) "Dependent" shall include the officer's lawful wife, and unmarried children under twenty-one years of age, including step-children and adopted children when such step-children or adopted children are in fact dependent upon the officer. It shall also include the father or mother of the officer, if in fact dependent upon such officer for his or her chief support.

(d) "Quarters" includes fuel, water, and electricity and other necessary utilities services.

§ 21.342 *Adequacy of quarters.* For the purposes of this subpart the Surgeon General and, with respect to any station of the Service, the officer in charge of such station shall be competent superior authority as defined in Executive Order 9255 dated October 13, 1942, 3 CFR, 1943 Cum. Supp. The Surgeon General shall determine the adequacy of quarters for the officer in charge. The officer in charge shall determine the adequacy of quarters for officers on duty at the station.

§ 21.343 *Assignment of quarters.* Quarters at each station of the Service, if available, shall be assigned by the Surgeon General to the officer in charge, and such other quarters as may be available for additional officers shall be assigned by the officer in charge to officers on duty whose presence on the station is essential to the prompt and proper performance of Service functions. An officer ordered to assume permanent charge of a station will, in reporting his arrival, state that he has occupied the quarters assigned by the Surgeon General, if such be the case. In the assignment of quarters consideration shall be given to the number, age, and sex of dependents, if any. An officer assigned adequate quarters shall be entitled to rental allowance if by reason of orders of competent authority his dependents are prevented from occupying such quarters.

§ 21.344 *Leaves of absence.* An officer shall be entitled to retain quarters assigned at his station during leaves of absence authorized by laws or regulations, or when on temporary duty. An officer under suspension shall continue to occupy quarters as when on duty status.

§ 21.345 *Voluntary and joint occupancy of quarters.* Quarters at the permanent station shall be conclusively presumed to be adequate while occupied voluntarily by an officer having no dependents, or by an officer with his dependents, jointly by two or more officers, with or without dependents, or jointly by an officer and the dependents of another officer.

§ 21.346 *Permission to occupy unassigned quarters.* Any unassigned quarters at a station may, with the permission of a competent superior authority and so long as not needed for assignment to officers on permanent duty at the station, be occupied by officers not permanently stationed thereat, but no officer unaccompanied by dependents will be permitted to occupy as quarters at a station other than his permanent station more than one room and a bath.

§ 21.347 *Application for quarters.* An officer reporting to a station under orders for permanent duty shall upon arrival make written application to the officer in charge for assignment to quarters. The officer in charge shall assign the reporting officer to quarters if adequate quarters are available or notify said officer in writing that adequate quarters are not available.

§ 21.348 *Appeal to Surgeon General.* In the event an officer assigned to quarters considers the quarters inadequate, he may appeal through the officer in charge to the Surgeon General, giving in detail the reasons for such appeal. The officer in charge shall forward this appeal with an endorsement setting forth his reasons for the assignment. The decision of the Surgeon General as to the adequacy of the quarters assigned shall be final.

SUBPART Q—TRAVEL AND TRANSPORTATION ALLOWANCES

AUTHORITY: §§ 21.351 and 21.352 issued under sec. 303, 63 Stat. 813; 37 U. S. C. 253.

§ 21.351 *Controlling regulations.* Regulations governing the allowances for travel and transportation and the conditions under which such travel and transportation may be performed by commissioned officers of the Public Health Service shall consist of those portions of the document entitled "Joint Travel Regulations", approved by the Federal Security Administrator on January 31, 1951, and approved by the Secretaries having jurisdiction over the other uniformed services, as are applicable to such officers of the Service, together with any revisions or additions to such document, so applicable, as have been approved since January 1, 1951, by said Administrator or the Secretary, as the case may be, or as may hereafter be approved by the Secretary.

§ 21.352 *Instructions by the Surgeon General.* The Surgeon General is authorized to adopt, and from time to time revise or add, administrative instructions relating to methods or procedures appropriate to implementing and enforcing the regulations governing travel and transportation allowances of the commissioned officers of the Service.

SUBPART R—DETERMINATIONS OF STATUS OF DEPENDENT PARENTS FOR PURPOSES OF BASIC ALLOWANCE FOR QUARTERS

AUTHORITY: §§ 21.381 to 21.387 issued under sec. 302, 63 Stat. 812, as amended; 37 U. S. C. 252.

§ 21.381 *Definitions.* For purposes of this subpart the term "parent" shall include a natural father or mother, a father or mother by adoption, a stepfather or stepmother, and any person, including a former stepfather or stepmother, who has stood "in loco parentis" to an officer at any time for a continuous period of not less than five years during the minority of such officer. A stepparent-stepchild relationship shall be deemed to be terminated by the stepparent's divorce from the blood parent,

but shall not be deemed to be terminated by the death of the blood parent.

§ 21.382 *Entitlement.* An officer shall be entitled to basic allowance for quarters because of a dependent parent upon the presentation of appropriate evidence, as required in this subpart, to establish the fact (a) that the parent is a parent as defined in § 21.381, and (b) that the parent is dependent upon the officer for over half of his or her support.

§ 21.383 *Proof of dependency.* If any person is claimed as a dependent parent, the officer shall submit form PHS 1637–2 (BF). In addition, the parent concerned shall submit an affidavit on form PHS 1637–3 (BF). The parent's affidavit shall be filed to cover the period from the date basic allowance for quarters is claimed to the date of execution of the affidavit, such period to be not less than one month.

§ 21.384 *Adopted parent.* If the parent claimed as a dependent is a parent by adoption, there shall be submitted, in addition to the evidence required by § 21.383, certified court orders of adoption or such other evidence as is acceptable to establish legally the fact of adoption.

§ 21.385 *Stepparent.* If the parent claimed as a dependent is a stepparent, the stepparent must submit, in addition to the affidavit required by § 21.383, a sworn statement to the effect that he or she married the blood parent of the officer and that he or she has not been divorced from such blood parent.

§ 21.386 *Parent "in loco parentis."* If the parent claimed as a dependent has an "in loco parentis" status, the officer, in addition to the evidence required by § 21.383 to be submitted by him, shall submit a sworn statement setting forth all circumstances relevant to proof of the relationship as may be prescribed by the Surgeon General.

§ 21.387 *Determinations.* Determinations of dependency and parental status, as required by this subpart, may be made by such officers and employees of the Public Health Service as may be designated by the Chief, Division of Finance, Public Health Service.

SUBPART S—CLAIMS FOR COMPENSATION; AVAILABILITY OF CLINICAL INFORMATION

§ 21.401 *Claims for compensation; disclosure of relevant clinical information.* Relevant clinical information in the records or in the possession of the Service concerning a commissioned officer or former officer of the Service may upon request therefor be furnished to a Federal department or agency with which a claim for compensation or other benefit has been filed based on the death of, or an injury or disease incurred by, such officer or former officer.

(Sec. 215, 58 Stat. 690 as amended; 42 U. S. C. 216)

PART 22—PERSONNEL OTHER THAN COMMISSIONED OFFICERS

LEPROSY DUTY BY CIVIL SERVICE OFFICERS AND EMPLOYEES

Sec.

22.1 Duty requiring intimate contact with leprosy patients; additional pay for civil service officers or employees.

SPECIAL CONSULTANTS

22.3 Appointment of special consultants.

BURIAL PAYMENTS

22.4 Non-commissioned personnel.

AUTHORITY: §§ 22.1 to 22.4 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Statutory provisions interpreted or applied are cited to text in parenthesis.

LEPROSY DUTY BY CIVIL SERVICE OFFICERS AND EMPLOYEES

§ 22.1 *Duty requiring intimate contact with leprosy patients; additional pay for civil service officers or employees.* Every civil service officer or employee of the Service assigned to full-time duty for a period of 30 days or more at a station of the Service devoted to the care of leprosy patients shall receive, while so assigned, in addition to the basic compensation provided by law for his position, a sum equal to 25 per centum of such compensation: *Provided,* That the rate of total basic and additional compensation received by any such civil service officer or employee on June 30, 1952, under laws and regulations then in effect shall not, so long as the officer or employee remains on continuous assignment to such duty, be reduced prior to July 1, 1957, by reason of the foregoing provisions of this section.

(Sec. 209 (g), 58 Stat. 687, as amended; 42 U. S. C. 210 (e))

SPECIAL CONSULTANTS

§ 22.3 *Appointment of special consultants.* (a) When the Public Health Service requires the services of consultants who cannot be obtained when needed through regular Civil Service appointment or under the compensation provisions of the Classification Act of 1949, special consultants to assist and advise in the operations of the Service may be appointed, subject to the provisions of the following paragraphs and in accordance with such instructions as may be issued from time to time by the Secretary of Health, Education, and Welfare.

(b) Appointments, pursuant to the provisions of this section, may be made by those officials of the Service to whom authority has been delegated by the Director of Administration of the Department.

(c) The per diem or other rates of compensation shall be fixed by the appointing officer in accordance with criteria established by the Surgeon General.

(d) No consultant appointed pursuant to the provisions of this section shall be employed for more than 130 working days in any fiscal year unless the Director of Administration, because of special circumstances, shall approve an extension thereof.

(Sec. 208 (c), 58 Stat. 686, as amended; 42 U. S. C. 209 (e))

BURIAL PAYMENTS

§ 22.4 *Non-commissioned personnel.* The following expenses may be allowed in the case of an employee of the Public Health Service who dies either as a result of disease or injury directly attributable to the performance of his official duties, or while detailed for duty outside the continental limits of the United States:

(a) Cost of preparation for burial of remains not to exceed $600.00, restricted to: cost of undertaker's services, embalming, and other preservative methods, casket, outside box when required, and hire of hearse.

(b) Cost of transportation of remains to place of burial. In any case where funeral expenses authorized in this section are borne by individuals, reimbursement to such individuals may be made.

(Sec. 212, 506, 58 Stat. 689, as amended, 710; 42 U. S. C. 213, 224)

Subchapter C—Medical Care and Examinations

PART 31—MEDICAL CARE FOR CERTAIN PERSONNEL OF THE COAST GUARD, COAST AND GEODETIC SURVEY, PUBLIC HEALTH SERVICE, AND FORMER LIGHTHOUSE SERVICE

DEFINITIONS

Sec.

31.1 Meaning of terms.

PROVISIONS APPLICABLE TO COAST GUARD, COAST AND GEODETIC SURVEY AND PUBLIC HEALTH SERVICE

31.2 Persons entitled to treatment.
31.3 Use of Service facilities.
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31.5 Application for treatment; active duty personnel.
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PROVISIONS APPLICABLE TO PERSONNEL OF FORMER LIGHTHOUSE SERVICE

31.11 Persons entitled to treatment.
31.12 Use of Service facilities.
31.13 Use of other than Service facilities.
31.14 Application for treatment; active duty personnel.
31.15 Continuance of medical relief after loss of status.
31.16 Retired personnel; extent of treatment.

AUTHORITY: §§ 31.1 to 31.16 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Statutory provisions interpreted or applied are cited to text in parentheses.

DEFINITIONS

§ 31.1 *Meaning of terms.* As used in this part, the term:

(a) "Act" means the Public Health Service Act, approved July 1, 1944, 58 Stat. 682, as amended.

(b) "Service" means the Public Health Service.

(c) "Surgeon General" means the Surgeon General of the Public Health Service.

(d) "Medical relief station" means a first-, second-, third, or fourth-class station of the Service.

(e) "First-class stations" means a hospital operated by the Service.

(f) "Second-class station" means a medical relief facility, other than a hospital of the Service, under the charge of a commissioner officer.

(g) "Third-class station" means a medical relief facility, other than a hospital of the Service, under the charge of a medical officer or employee of the

Service other than a commissioned officer.

(h) "Fourth-class station" means a medical relief facility designated by the Surgeon General, other than a first-, second-, or third-class station.

(i) "Designated physician" means a physician holding an appointment to act regularly for the Service for a class or classes of specified beneficiaries at a place where there is no medical relief station.

(j) "Designated dentist" means a dentist holding an appointment to perform dental service for the Service for a class or classes of specified beneficiaries.

(k) "Active duty" means active duty status as distinguished from being on inactive status or retired and includes periods of authorized leave or liberty.

(l) "Dependent members of families" in the case of male personnel means the lawful wife, the unmarried children (including stepchildren or adopted children) under 21 years of age, and the father or mother if in fact dependent upon such son for his or her chief support; and in the case of female personnel, the unmarried children (including stepchildren or adopted children) under 21 years of age if their father is dead or they are in fact dependent on such mother for their chief support, the father or mother if in fact dependent upon such daughter for his or her chief support, and the husband if in fact dependent upon such wife for his chief support: *Provided, however,* That in the case of members of the Women's Reserve of the Coast Guard the husbands of such members shall not be considered dependents.

PROVISIONS APPLICABLE TO COAST GUARD, COAST AND GEODETIC SURVEY AND PUBLIC HEALTH SERVICE

§ 31.2 *Persons entitled to treatment.* To the extent and under the circumstances prescribed in §§ 31.2 to 31.10, the following persons shall be entitled to medical, surgical, and dental treatment and hospitalization by the Service:

(a) *Coast Guard.* (1) Commissioned officers, chief warrant officers, warrant officers, cadets, and enlisted personnel of the Regular Coast Guard, including those on shore duty and those on detached duty, whether on active duty or retired;

(2) Regular members of the Coast Guard Reserve when on active duty or when retired for disability;

(3) Temporary members of the Coast Guard Reserve when on active duty or in case of physical injury incurred or sickness or disease contracted while performing active Coast Guard duty;

(4) Members of the Women's Reserve of the Coast Guard when on active duty or when retired for disability;

(5) Members of the Coast Guard Auxiliary in case of physical injury incurred or sickness or disease contracted while performing active Coast Guard duty.

(b) *Coast and Geodetic Survey.* Commissioned officers, ships' officers, and members of the crews of vessels of the Coast and Geodetic Survey, including those on shore duty and those on detached duty whether on active duty or retired.

(c) *Public Health Service.* (1) Commissioned officers of the Regular Corps of the Service, whether on active duty or retired;

(2) Commissioned officers of the Reserve Corps of the Service when on active duty or when retired for disability.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.3 *Use of Service facilities.* Except as otherwise provided in §§ 31.3 to 31.10, the persons specified in § 31.2 shall be entitled to medical, surgical, and dental treatment and hospitalization only at medical relief stations and by designated physicians and designated dentists, and the cost of services procured elsewhere shall not be borne by the Service.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.4 *Use of other than Service facilities.* (a) When a person specified in § 31.2 who is on active duty requires immediate medical, surgical, or dental treatment or hospitalization and the urgency of the situation does not permit treatment at a medical relief station or by a designated physician or designated dentist, an officer of the same service as the patient may arrange for treatment or hospitalization at the expense of the Service.

(b) When the circumstances are such that an officer of the same service as the patient is not available to make the necessary arrangements, the treatment or hospitalization may be obtained by or on behalf of the patient at the expense of the Service.

(c) In every case of treatment or hospitalization as defined in paragraph (b) of this section, the responsible superior officer of the patient shall be notified as promptly as possible and a full report shall be submitted by such officer to the Surgeon General through appropriate official channels. As soon as practicable, unless the interests of the patient or the Government require otherwise, treatment or hospitalization shall be continued at a medical relief station or by a designated physician or designated dentist or at another appropriate Federal medical facility.

(d) When the necessary medical relief cannot be obtained from a medical relief station or a designated physician or designated dentist, preference shall be given to other Federal medical facilities when reasonably available and when conditions permit.

(e) Vouchers on proper forms covering expenses for treatment or hospitalization under the circumstances specified in paragraphs (a) and (b) of this section shall be forwarded to the Surgeon General through appropriate official channels. Each such voucher shall be accompanied by or contain a statement of the facts necessitating the treatment or hospitalization. Unreasonable charges for emergency treatment or hospitalization will not be allowed.

(f) Expenses for consultants or special services, or for dental treatment other than emergency measures to relieve pain, shall not be allowed except when authorized in advance by the headquarters of the Service or, in extraordinary cases, when subsequently approved by such headquarters upon receipt of report and satisfactory explanation as to the necessity and urgency therefor.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.5 *Application for treatment; active duty personnel.* (a) An applicant for medical relief who is on active duty shall furnish a certificate identifying him. Such certificate, in the case of Coast Guard personnel, shall be signed by an officer of the Coast Guard, and in the case of Coast and Geodetic Survey personnel, shall be signed by an officer of the Coast and Geodetic Survey. Commissioned officers of any of the services mentioned in § 31.2 and officers in charge of units may sign their own certificates. In an emergency, the officer in charge of a medical relief station, or a designated physician or designated dentist, may accept other evidence of status satisfactory to him.

(b) A temporary member of the Coast Guard Reserve except when on active duty or a member of the Coast Guard Auxiliary shall, when applying for medical relief, furnish a statement signed by a responsible superior officer setting forth the facts and circumstances giving rise to the need for medical relief. In emergencies, such statement shall be furnished promptly after the member has received the immediately required care and treatment. Such statement shall be presumptive evidence of the facts stated, but if investigation indicates that the injury, sickness, or disease was not incurred or contracted in the manner stated, further treatment may be denied.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.6 *Personnel absent without leave.* No member of any of the services enumerated in § 31.2 shall be entitled when absent without leave to medical relief except at a medical relief station or by a designated physician or designated dentist.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.7 *Continuance of medical relief after loss of status.* If a member is separated from any of the services enumerated in § 31.2, except persons specified in § 31.2 (a) (3) and (5) who shall be entitled to treatment after separation under the conditions set forth in such subparagraphs, while undergoing treatment by the Service, his treatment shall be discontinued immediately unless the physician in charge determines that the condition of the patient does not permit interruption of treatment, in which case the treatment shall be discontinued as soon as practicable and the condition of the patient permits. At that time he shall be discharged from treatment and shall not thereafter be afforded medical relief by the Service by reason of his previous service.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.8 *Retired personnel; extent of treatment.* (a) A retired member of the Coast Guard, Coast and Geodetic Survey, or Public Health Service specified in § 31.2 shall be entitled to medical, surgical, and dental treatment and hospital-

ization at medical relief stations of the first-, second-, and third-class, upon presentation of satisfactory evidence of his status.

(b) Elective medical or surgical treatment requiring hospitalization shall be furnished only at hospitals operated by the Service.

(c) Dental treatment shall be furnished to the extent of available facilities only at medical relief stations where full-time dental officers are on duty; at other medical relief stations the dental treatment shall be limited to emergency measures necessary to relieve pain.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.9 *Dependent members of families; treatment.* To the extent and under the circumstances prescribed in this part, the Service shall provide medical advice and out-patient treatment at first-, second-, and third-class medical relief stations and hospitalization at first-class stations to the dependent members of families of the following persons:

(a) *Coast Guard.* Commissioned officers, chief warrant officers, warrant officers, cadets, and enlisted personnel of the Regular Coast Guard, including those on shore duty and those on detached duty, whether on active duty or retired; and regular members of the United States Coast Guard Reserve and members of the Women's Reserve of the Coast Guard, when on active duty or when retired for disability.

(b) *Coast and Geodetic Survey.* Commissioned officers, ships' officers, and members of the crews of vessels of the United States Coast and Geodetic Survey, including those on shore duty and those on detached duty, whether on active duty or retired.

(c) *Public Health Service.* Commissioned officers of the Regular Corps of the Service, whether on active duty or retired, and commissioned officers of the Reserve Corps of the Service when on active duty or when retired for disability.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

§ 31.10 *Dependent members of families; use of Service facilities.* (a) A dependent member of the family of any person specified in § 31.9 shall, upon presentation of satisfactory evidence of such status, be entitled to medical advice and out-patient treatment at first-, second-, and third-class medical relief stations and hospitalization at first-class stations if suitable accommodations are available therein and if the condition of the dependent is such as to require hospitalization, both as determined by the medical officer in charge.

(b) Hospitalization at first-class stations shall be at a per diem cost to the officer, enlisted person, member of a crew or other person concerned. Such cost shall be at such uniform rate as may be prescribed from time to time by the President for the hospitalization of dependents of naval and Marine Corps personnel at any naval hospital.

(c) Hospitalization at first-class stations and out-patient treatment at first-, second-, and third-class stations may include such services and supplies as, in the judgment of the medical officer in charge, are necessary for reasonable and adequate treatment.

(d) Dental treatment shall be furnished to the extent of available facilities only at medical relief stations where full-time officers are on duty.

(Sec. 326, 58 Stat. 697; 42 U. S. C. 253)

PROVISIONS APPLICABLE TO PERSONNEL OF FORMER LIGHTHOUSE SERVICE

§ 31.11 *Persons entitled to treatment.* To the extent and under the circumstances prescribed in this part, the following persons shall be entitled to medical, surgical, and dental treatment and hospitalization by the Service: Lightkeepers, assistant lightkeepers, and officers and crews of vessels of the former Lighthouse Service, including any such persons who subsequent to June 30, 1939, have involuntarily been assigned to other civilian duty in the Coast Guard, who were entitled to medical relief at hospitals and other stations of hte Service prior to July 1, 1944, and who are now or hereafter on active duty or who have been or may hereafter be retired under the provisions of section 6 of the act of June 20, 1918, as amended (33 U. S. C. 763).

(Sec. 610 (b), 58 Stat. 714, as amended; 33 U. S. C. 763c)

§ 31.12 *Use of Service facilities.* Except as otherwise provided herein, the persons specified in § 31.11 shall be entitled to medical, surgical, and dental treatment and hospitalization only at medical relief stations and by designated physicians and designated dentists, and the cost of services procured elsewhere shall not be borne by the Service.

(Sec. 610 (b), 58 Stat. 714, as amended; 33 U. S. C. 763c)

§ 31.13 *Use of other than Service facilities.* (a) When a person specified in § 31.11 who is on active duty requires immediate medical, surgical, or dental treatment or hospitalization and the urgency of the situation does not permit treatment at a medical relief station or by a designated physician or designated dentist, an officer or other appropriate supervisory official of the Coast Guard may arrange for treatment or hospitalization.

(b) In every such case of treatment or hospitalization, a full report thereof shall be submitted to the Surgeon General through Coast Guard headquarters. As soon as practicable, unless the interests of the patient or the Government require otherwise, treatment or hospitalization shall be continued at a medical relief station or by a designated physician or designated dentist or at another appropriate Federal medical facility.

(c) When the necessary medical relief cannot be obtained from a medical relief station or a designated physican or designated dentist, preference shall be given to other Federal medical facilities when reasonably available and when conditions permit.

(d) Vouchers on proper forms covering expenses for treatment or hospitalization under the circumstances specified in paragraph (a) of this section shall be forwarded to the Surgeon General through Coast Guard headquarters. Each such voucher shall be accompanied by or contain a statement of the facts necessitating the treatment or hospitalization. Unreasonable charges for emergency treatment or hospitalization will not be allowed.

(e) Expenses for consultants or special services, or for dental treatment other than emergency measures to relieve pain, shall not be allowed except when authorized in advance by the headquarters of the Service or, in extraordinary cases, when subsequently approved by such headquarters upon receipt of report and satisfactory explanation as to the necessity and urgency therefor.

(Sec. 610 (b), 58 Stat. 714 as amended; 33 U. S. C. 763c)

§ 31.14 *Application for treatment; active duty personnel.* An applicant for medical relief who is on active duty shall furnish a certificate identifying him. Such certificate shall be signed by an officer or other appropriate supervisory official of the Coast Guard. In an emergency, the officer in charge of a medical relief station, or a designated physician or designated dentist, may accept other evidence of status satisfactory to him.

(Sec. 610 (b), 58 Stat. 714 as amended; 33 U. S. C. 763c)

§ 31.15 *Continuance of medical relief after loss of status.* If a person is separated while undergoing treatment by the Service, his treatment shall be discontinued immediately unless the physician or dentist in charge determines that the condition of the patient does not permit interruption of treatment, in which case the treatment shall be discontinued as soon as practicable and the condition of the patient permits. At that time he shall be discharged from treatment and shall not thereafter be afforded medical relief by the Service by reason of his previous service.

(Sec. 610 (b), 58 Stat. 714; as amended, 33 U. S. C. 763c)

§ 31.16 *Retired personnel; extent of treatment.* (a) Any retired person specified in § 31.11 shall be entitled to medical, surgical, and dental treatment and hospitalization at medical relief stations of the first, second, and third class, upon presentation of satisfactory evidence of his status.

(b) Elective medical or surgical treatment requiring hospitalization shall be furnished only at hospitals operated by the Service.

(c) Dental treatment shall be furnished to the extent of available facilities only at medical relief stations where full-time dental officers are on duty; at other medical relief stations the dental treatment shall be limited to emergency measures necessary to relieve pain.

(Sec. 610, (b), 58 Stat. 714; as amended, 33 U. S. C. 763c)

PART 32—MEDICAL CARE FOR SEAMEN AND CERTAIN OTHER PERSONS

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AUTHORITY: §§ 32.1 to 32.116 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 322, 58 Stat. 696, as amended; 42 U. S. C. 249. Other statutory provisions interpreted or applied are cited to text in parentheses.

DEFINITIONS

§ 32.1 *Meaning of terms.* When used in this part:

(a) "Act" means the act approved July 1, 1944, 58 Stat. 682, entitled "An act to consolidate and revise the laws relating to the Public Health Service, and for other purposes";

(b) The term "Service" means the Public Health Service;

(c) The term "Surgeon General" means the Surgeon General of the Public Health Service;

(d) The term "seamen" includes any person employed on board in the care, preservation, or navigation of any vessel, or in the service, on board, of those engaged in such care, preservation, or navigation, but does not include the owner or joint owners of a vessel or the spouse of any such owner;

(e) The term "vessel" includes every description of watercraft or other artificial contrivance used, or capable of being used, as a means of transportation on water, exclusive of aircraft and amphibious contrivances;

(f) "Medical relief station" means a first-, second-, third-, or fourth-class station of the Service;

(g) "First-class station" means a hospital operated by the Service;

(h) "Second-class station" means a medical relief facility, other than a hospital of the Service, under the charge of a commissioned officer;

(i) "Third-class station" means a medical relief facility, other than a hospital of the Service, under the charge of an acting assistant surgeon;

(j) "Fourth-class station" means a medical relief facility, other than a first-, second-, or third-class station, under the charge of an authorized Government representative;

(k) "Active duty", with respect to an enrollee of the United States Maritime Service, means that the enrollee is on the active list of that service, as distinguished from being on inactive status, and includes absence on authorized leave or liberty.

(Secs. 2, 321, 58 Stat. 682, as amended, 695, as amended; 42 U. S. C. 201, 248)

BENEFICIARIES

§ 32.6 *Persons eligible.* (a) Under this part the following persons are entitled to care and treatment by the Service as hereinafter prescribed:

(1) Seamen employed on vessels of the United States registered, enrolled, or licensed under the maritime laws thereof, other than canal boats engaged in the coasting trade, hereinafter designated as American seamen;

(2) Seamen employed on United States or foreign flag vessels as employees of the United States through the War Shipping Administration;

(3) Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on State school ships or on vessels of the United States Government of more than five tons' burden;

(4) Seamen on vessels of the Mississippi River Commission;

(5) Officers and crews of vessels of the Fish and Wildlife Service;

(6) Enrollees in the United States Maritime Service on active duty and members of the Merchant Marine Cadet Corps;

(7) Cadets at State maritime academies or on State training ships;

(8) Employees and noncommissioned officers in the field service of the Public Health Service when injured or taken sick in line of duty;

(9) Persons afflicted with leprosy.

(10) Seamen on foreign flag vessels other than those seamen employed on foreign flag vessels specified in subparagraph (2) of this paragraph;

(11) Non-beneficiaries for temporary treatment and care in case of emergency.

NOTE: § 32.6 does not list all the persons entitled to care and treatment by the Public Health Service.

(b) Separate regulations govern: (1) The medical care of certain personnel, and their dependents, of the Coast Guard, Coast and Geodetic Survey, and Public Health Service (see Part 31 of this chapter); (2) physical and mental examinations of aliens (see Part 34 of this chapter); (3) care and treatment of narcotic addicts (see Part 33 of this chapter); and (4) Medical Care for Indians. (See Part 36 of this chapter.)

(c) While regulations of the Public Health Service are not required with respect thereto, circular instructions by the Service cover the care and treatment or physical examination of the following:

(1) Persons not otherwise eligible for treatment, for purposes of study;

(2) Persons detained in accordance with quarantine laws;

(3) Persons detained by the Immigration and Naturalization Service, for treatment at the request of that Service;

(4) Persons entitled to treatment under the Employees' Compensation Commission Act and extensions thereof;

(5) Beneficiaries of other Federal agencies on a reimursable basis;

(6) Medical examinations of:

(i) Employees of the Alaska Railroad and employees of the Federal Government for retirement purposes;

(ii) Employees in the Federal classified service, and applicants for appointment, as requested by the Civil Service Commission for the purpose of promoting health and efficiency;

(iii) Seamen for purposes of qualifying for certificates of service; and

(iv) Employees eligible for benefits under the Longshoremen's and Harbor Workers' Compensation Act, as amended, as requested by any deputy commissioner thereunder.

AMERICAN SEAMEN

§ 32.11 *Use of Service facilities.* American seamen (hereinafter referred to in §§ 32.11 to 32.23, inclusive, as seamen) shall, on presenting evidence of eligibility, be entitled to medical, surgical, and dental treatment and hospitalization at medical relief stations of the Service.

§ 32.12 *Use of other than Service facilities.* (a) When a seaman requires medical, surgical, or dental treatment or hospitalization and the urgency of the situation does not permit treatment at a medical relief station, arrangements for necessary treatment or hospitalization at the expense of the Service from public or private medical or hospital facilities other than those of the Service may be made by the officer in charge of a medi-

cal relief station or a quarantine station or by the director of a Service district. When such emergency treatment is necessary preference shall be given to other Federal medical facilities when reasonably available and when conditions permit.

(b) If eligibility cannot be established at the time of application by the seamen or by the person who applies in his behalf, the applicant shall be notified that the authorization for treatment is conditional and that the payment of reasonable expenses by the Service for such treatment shall be subject to proof of eligibility.

(c) In every such case of emergency treatment or hospitalization, authorized either conditionally or unconditionally, a full report shall be submitted promptly by the authorizing officer to the Surgeon General. The authorizing officer shall keep himself informed regarding the progress of the case to the end that treatment or hospitalization shall not be unduly and unnecessarily prolonged. As soon as practicable, unless the interests of the patient or the Government require otherwise, treatment or hospitalization shall be continued at a medical relief station or at another appropriate Federal medical facility.

(d) Expenses for consultants or special services, or for dental treatment other than emergency measures to relieve pain, shall not be allowed except when authorized in advance by the headquarters of the Service or, in extraordinary cases, when subsequently approved by such headquarters upon receipt of report and satisfactory explanation as to the necessity and urgency therefor.

(e) Certified vouchers on proper forms covering expenses for emergency treatment or hospitalization shall be forwarded to the Surgeon General by the authorizing officer, and each such voucher shall contain a statement of the facts necessitating the treatment or hospitalization.

§ 32.13 *Application for treatment.* A sick or disabled seaman, in order to obtain the benefits of the Service, must apply in person, or by proxy if too sick so to do, at a medical relief station or to an officer of the Service as specified in § 32.12 and must furnish satisfactory evidence of his eligibility for such benefits.

§ 32.14 *Evidence of eligibility.* (a) As evidence of his eligibility an applicant must present a properly executed master's certificate or a continuous discharge book or a certificate of discharge showing that he has been employed on a registered, enrolled, or licensed vessel of the United States. The certificate of the owner or accredited commercial agent of a vessel as to the facts of the employment of any seaman on said vessel may be accepted in lieu of the master's certificate where the latter is not procurable. When an applicant cannot furnish any of the foregoing documents, his certification as to the facts of his most recent (including his last) employment as a seaman, stating names of vessels and dates of service, may be accepted as evidence in support of his eligibility. Documentary evidence of eligibility, excepting continuous discharge books and certificates of discharge, shall be filed at the station where application is granted. Where continuous discharge books and certificates of discharge are submitted as evidence of eligibility, the pertinent information shall be abstracted therefrom, certified by the officer accepting the application, and filed at the station.

(b) Except as otherwise provided in §§ 32.11 to 32.23, inclusive, documentary evidence of eligibility must show that the applicant has been employed for 60 days of continuous service on a registered, enrolled, or licensed vessel of the United States, a part of which time must have been during the 90 days immediately preceding application for relief. There may be included as a part of such 60 days of continuous service as a seaman time spent in training as (1) an active duty enrollee in the United States Maritime Service, (2) a member of the Merchant Marine Cadet Corps, (3) a cadet at a State maritime academy, or (4) a cadet on a State training ship. The phrase "60 days of continuous service" shall not be held to exclude seamen whose papers show brief intermissions between short services that aggregate the required 60 days: *Provided,* That any such intermission does not exceed 60 days. The time during which a seaman has been treated as a patient of the Service shall not be reckoned as absence from vessel in determining eligibility. When the seamen's service on his last vessel is less than 60 days, his oath or affirmation as to previous service may be accepted.

§ 32.15 *Sickness or injury while employed.* A seaman taken sick or injured on board or ashore while actually employed on a vessel shall be entitled to care and treatment without regard to length of service.

§ 32.16 *Seamen from wrecked vessels.* Seamen taken from wrecked vessels of the United States and returned to the United States, if sick or disabled at the time of their arrival in the United States, shall be entitled to care and treatment without regard to length of service.

§ 32.17 *Lapse of more than 90 days since last service.* Where more than 90 days have elapsed since an applicant's last service as a seaman and he can show that he has not definitely changed his occupation, such period of time shall not exclude him from receiving care and treatment (a) if due to closure of navigation or economic conditions resulting in decreased shipping with consequent lack of opportunity to ship or (b) in the event the applicant has been receiving treatment at other than Service expense.

§ 32.18 *Procedure in case of doubtful eligibility.* When a reasonable doubt exists as to the eligibility of an applicant for care and treatment, the matter shall be referred immediately to the headquarters of the Service for decision. If, in the opinion of the responsible Service officer, the applicant's condition is such that immediate care and treatment is necessary, temporary care and treatment shal be given pending receipt of the decision as to eligibility.

§ 32.19 *False document evidencing service.* The issuance or presentation of a false document as evidence of service with intent to procure the treatment of a person as a seaman shall be immediately reported to the headquarters of the Service.

§ 32.20 *Treatment during voyage; treatment when not arranged for.* The Service shall not be liable for the expense of caring for sick and disabled seamen incurred during a voyage, nor when the care of a seaman has not been arranged for by a responsible officer of the Service.

§ 32.21 *Injury while committing breach of peace.* Seamen injured in street brawls or while otherwise committing a breach of the peace shall not receive treatment at the expense of the Service while in jail or in a hospital other than a hospital belonging to or under contract with the Service.

§ 32.22 *Communicable diseases.* The Service shall not be liable for the expense of caring for seamen who are suffering from communicable diseases and who, in accordance with State or municipal health laws and regulations, are taken to quarantine or other hospitals under charge of local health authorities, unless such patients were admitted at the time at the request of a responsible officer of the Service.

§ 32.23 *Certificate of discharge from treatment.* A certificate of discharge from treatment may, at the discretion of the officer in charge, be given to a hospital patient, but such certificate, when presented at another medical relief station, shall not be taken as sufficient evidence of the applicant's eligibility for care and treatment, but may be considered in connection with other documentary evidence submitted by the seamen.

SEAMEN; EMPLOYEES OF THE UNITED STATES THROUGH WAR SHIPPING ADMINISTRATION

§ 32.41 *Conditions and extent of treatment.* Seamen employed on United States or foreign flag vessels as employees of the United States through the War Shipping Administration shall be entitled to care and treatment by the Service under the same conditions, where applicable, and to the same extent as is provided for American seamen.

SEAMEN; STATE SCHOOL SHIPS AND VESSELS OF THE UNITED STATES GOVERNMENT

§ 32.46 *Conditions and extent of treatment.* Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on State school ships or on vessels of the United States Government of more than five tons' burden, shall be entitled to care and treatment by the Service under the same conditions, where applicable, and to the same extent as is provided for American seamen.

SEAMEN; MISSISSIPPI RIVER COMMISSION

§ 32.51 *Conditions and extent of treatment.* Seamen on vessels of the

Mississippi River Commission shall be entitled to care and treatment by the Service under the same conditions, where applicable, and to the same extent as is provided for American seamen.

SEAMEN; FISH AND WILDLIFE SERVICE

§ 32.56 *Conditions and extent of treatment.* Seamen on vessels of the Fish and Wildlife Service shall be entitled to care and treatment by the Service under the same conditions, where applicable, and to the same extent as is provided for American seamen.

MARITIME SERVICE ENROLLEES AND MERCHANT MARINE CADETS

§ 32.61 *Use of Service facilities.* Enrollees in the United States Maritime Service on acitve duty and members of the Merchant Marine Cadet Corps shall, upon written request of the responsible officer of the station or training ship to which such enrollees or cadets are attached, identifying the applicant, be entitled to medical, surgical, and dental treatment and hospitalization at medical relief stations of the Service. Whenever an enrollee or cadet applies for relief without the above-mentioned written request and in the opinion of the responsible Service officer the applicant's condition is such that immediate care and treatment is necessary, temporary care and treatment shall be given pending verification of the applicant's status as an enrollee or cadet.

§ 32.62 *Use of other than Service facilities.* (a) When an enrollee on active duty or a cadet requires medical, surgical, or dental treatment or hospitalization for an emergency condition and the urgency of the situation does not permit treatment at a medical relief station or at a Maritime Service medical facility, arrangements for necessary treatment or hospitalization at the expense of the Service from public or private medical or hospital facilities other than those of the Service may be made by the officer in charge of a medical relief station or a quarantine station, by the director of a Service district, or by the responsible officer of the Service assigned to a Maritime Service station, to a Merchant Marine Cadet Corps school, or to a State maritime academy. When such emergency treatment is necessary preference shall be given to other Federal medical facilities when reasonably available and when conditions permit.

(b) If eligibility cannot be established at the time of application by the enrollee or cadet or by the person who applies in his behalf, the applicant shall be notified that the authorization for treatment is conditional and that the payment of reasonable expenses by the Service for such treatment shall be subject to proof of eligibility.

(c) In every such case of emergency treatment or hospitalization, authorized either conditionally or unconditionally, a full report shall be submitted promptly by the authorizing officer to the Surgeon General. The authorizing officer shall keep himself informed regarding the progress of the case to the end that treatment or hospitalization shall not be unduly and unnecessary prolonged. As soon as practicable, unless the interests of the patient or the Government require otherwise, treatment or hospitalization shall be continued at a medical relief station or at another appropriate Federal medical facility.

(d) Expenses for consultants or special services, or for dental treatment other than emergency measures to relieve pain, shall not be allowed except when authorized in advance by headquarters of the Service or, in extraordinary cases, when subsequently approved by such headquarters upon receipt of report and satisfactory explanation as to the necessity and urgency therefor.

(e) Certified vouchers on proper forms covering expenses for emergency treatment or hospitalization shall be forwarded to the Surgeon General by the authorizing officer, and each such voucher shall contain a statement of the facts necessitating the treatment or hospitalization.

§ 32.63 *Injury while committing breach of peace.* Enrollees on active duty or cadets injured in street brawls or while otherwise committing a breach of the peace shall not receive treatment at the expense of the Service while in jail or in a hospital other than a hospital belonging to or under contract with the Service.

§ 32.64 *Communicable diseases.* The Service shall not be liable for the expense of caring for enrollees on active duty or cadets who are suffering from communicable diseases and who, in accordance with State or municipal health laws and regulations, are taken to quarantine or other hospitals under charge of local health authorities, unless such patients were admitted at the time at the request of a responsible officer of the Service.

§ 32.65 *Absence without leave.* Enrollees on active duty or cadets who are absent without leave shall not be entitled to receive treatment by the Service except at a medical relief station.

CADETS AT STATE MARITIME ACADEMIES OR ON STATE TRAINING SHIPS

§ 32.76 *Conditions and extent of treatment.* (a) Cadets at State maritime academies or on State training ships while they are enrollees in the U. S. Maritime Service shall be entitled to care and treatment by the Service under the same conditions and to the same extent as is provided for enrollees in the U. S. Maritime Service on active duty: *Provided, however,* That the written request of the superintendent or other responsible officer of an academy, including the master of a training ship, shall be acceptable in lieu of the written request of the responsible officer of the Maritime Service.

(b) Cadets at State maritime academies or on State training ships when not enrolled in the U. S. Maritime Service shall be entitled to care and treatment by the Service under the same conditions, where applicable, and to the same extent as is provided for American seamen: *Provided, however,* That the written request of the superintendent or other responsible officer of an academy, including the master of a training ship, shall be acceptable in lieu of the documentary evidence of eligibility required of American seamen.

FIELD EMPLOYEES OF THE PUBLIC HEALTH SERVICE

§ 32.81 *Use of Service facilities.* Employees and noncommissioned officers in the field service of the Public Health Service when injured or taken sick in line of duty shall, upon presentation of satisfactory evidence of their status, be entitled to medical, surgical, and dental treatment and hospitalization at medical relief stations.

§ 32.82 *Use of other than Service facilities.* (a) Employees and noncommissioned officers in the field service of the Public Health Service when injured or taken sick in line of duty shall be entitled to the same care and treatment under the same conditions and to the same extent as is provided for American seamen in § 32.12.

(b) When employees or noncommissioned officers in the field service of the Public Health Service on duty in any foreign place are injured or taken sick in line of duty, the officer in charge shall make the necessary arrangements for treatment or hospitalization. If the patient himself is the only employee or noncommissioned officer of the Service on duty at a foreign place, the treatment or hospitalization may be obtained by or on behalf of the patient. In every such case, a full report shall be submitted to the Surgeon General by the officer in charge or by the patient himself where there is no superior on duty at the foreign place. In all other respects the provisions of § 32.12 shall govern where applicable.

PERSONS AFFLICTED WITH LEPROSY

§ 32.86 *Admissions to Service facilities.* Any person afflicted with leprosy who presents himself for care, detention, or treatment or who may be apprehended prusuant to regulations prescribed under section 332 or 361 of the act and any person afflicted with leprosy who is duly consigned to the care of the Service by the proper health authority of any State, Territory, or the District of Columbia shall be received into the Service hospital at Carville, Louisiana, or into any other hospital of the Service which has been designated by the Surgeon General as being suitable for the temporary accommodation of persons afflicted with leprosy.

(Sec. 331, 58 Stat. 698, as amended; 42 U. S. C. 255)

§ 32.87 *Diagnostic board for arriving patients.* At the earliest practicable date, after the arrival of a patient at the Service hospital at Carville, Louisiana, the medical officer in charge shall convoke a board of not less than three medical officers of the Service, who shall confirm or disapprove the diagnosis of leprosy.

(Sec. 332, 58 Stat. 698; 42 U. S. C. 256)

§ 32.88 *Detention or discharge according to diagnosis.* If the diagnosis of leprosy is confirmed, the patient shall be detained in the hospital as provided in

this part; if the diagnosis is not confirmed, the patient shall be discharged.

(Sec. 332, 58 Stat. 698; 42 U. S. C. 256)

§ 32.89 *Examinations and treatmnet.* Patients shall undergo the usual routine clinical examinations which may be required for the diagnosis of primary or secondary conditions, and such treatment as may be prescribed.

(Sec. 332, 58 Stat. 698; 42 U. S. C. 256)

§ 32.90 *Restrictions on movement within reservation.* No patient shall be allowed to proceed beyond the limits set aside for the detention of patients suffering from leprosy except upon authority from the headquarters of the Service and under prescribed conditions applicable to the individual patient. Should any patient violate his instructions in this regard, he shall upon his return, be properly safeguarded to prevent a repetition of the offense, or, at the discretion of the medical officer in charge, be permitted to give bond to the United States of America in a penal sum not exceeding $5,000 conditioned upon his faithful observance of this part.

(Sec. 332, 58 Stat. 698; 42 U. S. C. 256)

§ 32.91 *Isolation or restraint.* There shall be provided the necessary accommodation, within the limits set aside for persons afflicted with active leprosy, for isolation or restraint of patients when in the judgment of the medical officer in charge such action is necessary for the protection of themselves or others. The medical officer in charge shall maintain a separate register in which shall be recorded the names of patients who have been placed in isolation or restraint, and all circumstances attendant upon such isolation or restraint.

(Sec. 332, 58 Stat. 698; 42 U. S. C. 256)

§ 32.92 *Discharge.* The medical officer in charge of the Service hospital at Carville, Louisiana, shall convoke, from time to time, a board of three medical officers for the purpose of examining patients with a view to recommending their discharge. When in the judgment of the board a patient may be regarded as no longer a menace to the public health, he may be discharged, upon approval of the headquarters of the Service, as being either cured or an arrested or latent case.

(Sec. 332, 58 Stat. 698; 42 U. S. C. 256)

§ 32.93 *Notification to health authorities regarding discharged patients.* Upon the discharge of a patient the medical officer in charge shall give notification of such discharge to the proper health officer of the State, Territory, District of Columbia, or other jurisdiction in which the discharged patient is to reside. The notification shall also set forth the clinical findings and other essential facts necessary to be known by the health officer relative to such discharged patient.

(Sec. 332, 58 Stat. 698; 42 U. S. C. 256)

SEAMEN ON OTHER FOREIGN FLAG VESSELS

§ 32.106 *Conditions and extent of treatment; rates; burial.* (a) Except as provided in § 32.41 for seamen on certain foreign flag vessels, seamen on foreign flag vessels may, when suitable accommodations are available and on application of the master, owner, or agent of the vessel, be hospitalized at first-class stations or furnished out-patient treatment, including physical examinations, at first-, second-, and third-class stations at rates prescribed by the Surgeon General with the approval of the Administrator.

(b) Upon similar application, hospitalization of such seamen or private services in connection with their treatment may be arranged for at second- and third-class stations, with the understanding that all expenses shall be paid directly to the vendors by the master, owner, or agent of the vessel. For any professional services which may be furnished by Service personnel in connection with such hospitalization or treatment, the rates charged shall be those prescribed by the Surgeon General with the approval of the Administrator.

(c) If any such seaman dies while receiving treatment by the Service, the expenses of burial shall be paid directly to the vendors by the master, owner, or agent.

NONBENEFICIARIES; TEMPORARY TREATMENT IN EMERGENCY

§ 32.111 *Conditions and extent of treatment.* Persons not entitled to treatment by the Service may receive temporary care and treatment from the Service in case of emergency as an act of humanity. Such temporary care and treatment shall be limited to hospitalization at first-class stations and to out-patient treatment at first-, second-, and third-class stations.

RED CROSS PERSONNEL

§ 32.116 *Emergency medical care when serving with United States Coast Guard.* Red Cross uniformed personnel serving with the United States Coast Guard may be admitted upon proper evidence of their status with the United States Coast Guard to hospitals and second-class medical relief stations of the Public Health Service for emergency medical care and treatment. Hospitalization will be furnished at Service hospitals only and, provided suitable accommodations are available, at a per diem charge to each patient admitted under this regulation equivalent to the uniform per diem reimbursement rate for Government hospitals as approved by the President for each fiscal year.

PART 33—NARCOTIC ADDICTS

Sec.

33.1 Definitions.
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33.3 Prisoners; forfeiture and restoration of good conduct or industrial good time allowances; deductions from term of sentence; partial or total restoration.
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33.5 Prisoners, ex-prisoners and probationers; cash and clothing furnished upon discharge.
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33.7 Voluntary patients; admission and transportation upon discharge.
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AUTHORITY: §§ 33.1 to 33.8 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply secs. 2, 341–345, 58 Stat. 682, as amended, 898–701, as amended; 42 U. S. C. 201, 257–260, 261.

§ 33.1 *Definitions.* When used in this part:

(a) "Act" means the Public Health Service Act, approved July 1, 1944, 58 Stat. 682.

(b) "Habit-forming narcotic drug" or "narcotic" has the meaning prescribed in section 2 (j) of the Act, i. e., "opium and coca leaves and the several alkaloids derived therefrom, the best known of these alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp and its various derivatives, compounds, and preparations, and peyote in its various forms; isonipecaine and its derivatives, compounds, salts, and preparations; opiates (as defined in sec. 3228 (f) in the Internal Revenue Code)."

(c) "Addict" has the meaning prescribed in section 2 (k) of the Act, i. e., "any person who habitually uses any habit-forming narcotic drugs so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction."

(d) "Hospital" means the United States Public Health Service Hospital at Lexington, Kentucky, or the United States Public Health Service Hospital at Fort Worth Texas, and such other hospitals operated by the United States Public Health Service as may be hereafter designated by the Surgeon General as being especially equipped for the accommodation of addicts.

(e) "Prisoner" means an addict who has been sentenced to confinement upon conviction of an offense against the United States, including convictions by general courts-martial or by consular courts.

(f) "Probationer" means an addict who has been placed on probation by any court of the United States which has imposed as one of the conditions of such probation that he submit himself for treatment until discharged as cured.

(g) "Voluntary patient" means an addict who signs an application requesting, agreeing, and consenting to submit to treatment and who receives care and treatment at a hospital.

(h) "Ex-prisoner" means a prisoner whose sentence has expired and who, prior to the expiration thereof, applies for and receives further care and treatment.

(i) "Patient" means a "prisoner," "ex-prisoner," "probationer," or "voluntary patient" who is an inmate of a hospital.

(j) "Good conduct allowance" refers to commutation of sentence for good conduct provided by the act of June 21, 1902, as amended (18 U. S. C. 710), made applicable by section 343 of the Public Health Service Act to addicts confined in any institution in execution of a judg-

ment or sentence imposed upon conviction of an offense against the United States.

(k) "Industrial good time allowance" refers to the commutation of sentence for employment in industry provided by section 8 of the act of May 27, 1930 (18 U. S. C. 744h), made applicable by section 343 of the Public Health Service Act to addicts confined in any institution in execution of a judgment or sentence.

(l) "Cure" means, with respect to any patient, that, in the opinion of the medical officer in charge, he is no longer an addict.

(m) "Discharge," with respect to any patient, means release from the hospital pursuant to direction of the medical officer in charge.

(n) "Bureau of Prisons" means the Bureau of Prisons in the Department of Justice.

§ 33.2 *Prisoners; entitlement to industrial good time allowance.* (a) The Surgeon General shall designate industries, and supporting activities, employment in which may form the basis for industrial good time allowances pursuant to this section.

(b) All prisoners regularly assigned by the medical officer in charge to such industries or activities shall be eligible for industrial good time allowances in addition to good conduct allowances, except parole or conditional-release violators while serving the balance of sentences originally imposed, and prisoners assigned to segregation quarters.

(c) The standard industrial good time allowance shall be:

(1) 2 days per month for the first year during which the prisoner is so assigned; 4 days per month during the second, third, and fourth years; 5 days per month during the fifth and succeeding years;

(2) One-half of the foregoing allowances when regularly assigned on a part-time basis.

(d) Allowances at less than the standard rate may be made a condition of the assignment to the designated industries or activities of (1) prisoners serving their second or subsequent terms under sentences of more than one year, (2) prisoners transferred from other institutions for disciplinary reasons or (3) parole or conditional-release violators while serving new sentences.

(e) The medical officer in charge shall either allow or disallow industrial good time to those eligible. Allowances shall be credited for each calendar month as earned. Where computations are made for fractions of a month, resulting allowances of a fraction of a day shall be considered as a full day. The award of industrial good time shall be subject to the approval of the Director of the Bureau of Prisons.

(f) Upon recommendation of the medical officer in charge, and approval by the Surgeon General and the Director of the Bureau of Prisons, prisoners who have performed extraordinarily meritorious service may be granted additional industrial good time allowances; the total industrial good time allowance, however, shall not exceed three days for each month of employment in designated industries or duties for the first year or part thereof, or five days for each such month in any succeeding year or part thereof.

§ 33.3 *Prisoners; forfeiture and restoration of good conduct or industrial good time allowances; deductions from term of sentence; partial or total restoration.* (a) When the medical officer in charge has reason to believe that a prisoner has violated the rules of the hospital, thereby warranting a forfeiture of deductions from sentence for good conduct or industrial good time, or both, he shall appoint a trial court, to be composed of three officers of the hospital to investigate the alleged violation. The prisoner shall be notified of the investigation and given an opportunity to cross-examine all witnesses, unless, in the opinion of the trial court such cross-examination is not feasible, and he shall be permitted to call such witnesses as the court may deem necessary and proper. The prisoner may request the assistance of an officer of the Service to assist him in presenting his case. At the conclusion of the investigation, the trial court shall make formal findings of fact, and, if violations are found, recommendations as to the extent of the forfeiture to be imposed. The medical officer in charge may order further proceedings or upon the basis of the findings of the trial court that one or more violations have occured shall determine the amount of the good conduct or industrial good time allowances that the prisoner shall forfeit. The determination of the medical officer in charge shall be transmitted through the Surgeon General to the Director of the Bureau of Prisons for approval.

(b) The medical officer in charge may recommend a partial or total restoration of forfeited good conduct or industrial good time allowances. Such recommendation, with reasons therefor, shall be transmitted through the Surgeon General to the Director of the Bureau of Prisons for approval.

§ 33.4 *Continuation as ex-prisoner.* (a) When the medical officer in charge, upon examination of a prisoner not less than one month prior to the expiration of his maximum sentence, determines that the prisoner is still an addict and may be cured of such addiction by further treatment, he shall notify the prisoner, on a form prescribed by the Surgeon General, of the advisability of submitting to further treatment and of the estimated maximum time necessary to cure him of his addiction.

(b) Such prisoner may apply for further treatment, on a form prescribed by the Surgeon General, signifying that if his application is accepted, and in consideration of such acceptance, he agrees and consents to submit to care and treatment for the estimated maximum period necessary to cure him or until such earlier date on which he is certified as cured, and to comply with any regulations or rules which may be adopted governing the operation of the hospital and his conduct therein.

§ 33.5 *Prisoners, ex-prisoners, and probationers; cash and clothing furnished upon discharge.* Every prisoner, ex-prisoner, and probationer shall, in the discretion of the medical officer in charge, be furnished upon discharge with cash in amounts not exceeding similar allowances currently made to Federal prisoners on release from a penal, correctional, disciplinary or reformatory institution, and with suitable clothing.

§ 33.6 *Prisoners, ex-prisoners, and probationers; transportation furnished upon discharge.* Every prisoner, ex-prisoner, and probationer shall be furnished with transportation, by the cheapest usually traveled route, to the place of conviction or of bona fide residence within the continental United States, or to such other place within the continental United States as, in the opinion of the medical officer in charge, may afford the best opportunity for permanent rehabilitation.

§ 33.7 *Voluntary patients; admission and transportation upon discharge.* (a) A person seeking admission as a voluntary patient to one of the hospitals of the Service shall submit an application on a form prescribed by the Surgeon General. The medical officer in charge shall cause each applicant to be examined as soon as practicable after the applicant has presented himself for admission to the hospital and shall determine whether the applicant is an addict and whether the applicant may be cured of his addiction by care and treatment in the hospital, and such officer shall estimate the maximum time necessary to effect such cure and advise the applicant of such determinations.

(b) Voluntary patients shall be charged for their subsistence, care, and treatment in the hospital at a rate to be determined by the Surgeon General. Those patients, however, who have been determined by the medical officer in charge, on the basis of information concerning their financial resources and responsibilities, to be financially unable to pay shall not be so charged. The medical officer in charge may determine or redetermine the financial ability of a patient to pay at any time prior to or during the course of care and treatment of such patient at the hospital. In the absence of misrepresentation concerning a patient's financial resources or responsibilities, such determination or redetermination shall not have any retroactive effect upon the pay or non-pay status of the patient.

(c) Upon the discharge of any indigent voluntary patient as cured, the cost of his transportation, including subsistence allowance while traveling, may be paid by the Public Health Service to any place within the continental United States which, in the opinion of the medical officer in charge, will afford the best opportunity for such patient's permanent rehabilitation. Determinations of indigency for this purpose shall be made by the medical officer in charge and may be based upon information submitted by the patient concerning his financial resources and responsibilities.

§ 33.8 *Contraband.* Any article or thing not routinely furnished by the institution to patients or authorized by law

or by hospital authorities to be in possession of patients, including any letter or message intended to be received by an inmate of the hospital and introduced by persons other than those authorized by law or by hospital authorities, is contraband.

PART 34—MEDICAL EXAMINATION OF ALIENS

Sec.

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34.11 Deferral of examination; adequacy of facilities.
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34.14 Reexamination; convening of boards; expert witnesses; reports.

AUTHORITY: §§ 34.1 to 34.15 issued under sec. 215, 58 Stat. 690, as amended, sec. 234, 66 Stat. 198; 42 U. S. C. 216, 8 U. S. C. 1224. Interpret or apply secs. 322, 325, 58 Stat. 696, as amended, 697, secs. 212, 236, 66 Stat. 182, 200; 42 U. S. C. 249, 252, 8 U. S. C. 1182, 1226.

§ 34.1 *Applicability.* The provisions of this part shall apply to:

(a) The medical examination of (1) aliens applying for a visa at a consulate of the United States, (2) aliens arriving in the United States, and (3) aliens presented or referred by the Immigration Service in connection with determination of their admissibility into the United States, and

(b) The medical and other care, and burial, of aliens admitted to Public Health Service stations and hospitals at the request of the Immigration Service.

§ 34.2 *Definitions.* As used in this part, terms shall have the following meanings:

(a) *Immigration Service.* The Immigration and Naturalization Service of the Department of Justice.

(b) *Dangerous contagious disease.* Any of the following diseases:

1. Actinomycosis.
2. Amebiasis.
3. Blastomycosis.
4. Chancroid.
5. Favus.
6. Filariasis.
7. Gonorrhea.
8. Granuloma Inguinale.
9. Keratoconjunctivitis Infections.
10. Leishmaniasis.
11. Lymphogranuloma Venereum.
12. Mycetoma.
13. Paragonimiasis.
14. Ringworm of scalp.
15. Schistosomiasis.
16. Syphilis, infectious stage.
17. Trachoma.
18. Trypanosomiasis.
19. Yaws.

(c) *Medical certificate.* A document issued to the Immigration Service by a medical examiner, reporting the presence of any physical or mental defect, disease, or disability, or the previous occurrence of one or more attacks of insanity, in an alien.

(d) *Medical notification.* A document issued to a consular authority by a medical examiner, reporting the presence of any physical or mental defect, disease, or disability or the previous occurrence of one or more attacks of insanity, in an alien. Medical notification shall be made on the form prescribed for reporting the results of the medical examination of applicants for visas.

(e) *Medical officer.* A physician of the Public Health Service assigned or detailed by the Surgeon General of the Public Health Service to make mental and physical examinations of aliens.

(f) *Medical officer in charge.* A medical officer charged by the Surgeon General with responsibility for the conduct and supervision of all medical examinations made at a designated place or in a designated area.

§ 34.3 *Examinations; female aliens.* Female aliens shall be examined only in the presence of a female nurse or other female, or by a female physician.

§ 34.4 *Scope of examinations*—(a) *General.* In performing examinations and reexaminations, medical examiners shall give consideration to only those matters that relate to the physical or mental condition of the alien and shall issue certificates or notifications of a defect, disease, or disability or previous occurrence of one or more attacks of insanity as hereinafter provided only if the presence of such defect, disease, or disability or previous occurrence of one or more attacks of insanity has been clearly established.

(b) *Chest X-ray and serologic test*—(1) *Persons subject to.* A chest X-ray examination for tuberculosis and a serologic test for syphilis shall be required as part of the examination of (i) all applicants for immigrant visas, (ii) all students and exchange visitors who are required by a consular authority to have a medical examination upon application for a nonimmigrant visa, (iii) all other applicants for a nonimmigrant visa who are required by a consular authority to have a medical examination if such X-ray examination and serologic test are considered necessary by the medical examiner, and (iv) all applicants for adjustment of status or preexamination in the United States under the immigration laws and regulations: *Provided, however,* That a chest X-ray examination for tuberculosis shall not be required in any case if the alien is 10 years of age or under, and a serologic test for syphilis shall not be required in any case if the alien is 14 years of age or under, unless the medical examiner has reason to suspect that the applicant has tuberculosis or syphilis.

(2) *How and where performed.* (i) All X-ray films used in medical examinations performed under the regulations in this part shall be at least 70 mm. in size. In case of abnormal findings in the lungs, a full-sized film (approximately 14 x 17 inches; 35.6 x 43.2 cm.) shall be used on which to base the diagnosis.

(ii) When necessary X-ray and laboratory facilities are not available to the medical examiner, the applicant shall furnish a chest X-ray film, a reading thereof, and a serologic test report in order that the medical examination may be completed. If X-ray or serologic test facilities necessary for completion of the examination of a visa applicant are not available in the community where the examination is made, the medical examiner shall so state on the medical examination form and the procedures will be completed at the time of examination at the United States port of entry.

(iii) The X-ray reading and serologic test report shall be included in the medical examination report. When the medical examiner's conclusions are based on a study of more than one X-ray film, the medical examination report shall include at least a summary statement of findings in the earlier films, followed by a complete reading of the last film, and dates and details of any laboratory tests for tuberculosis.

(3) *Procedure for transmitting records.* The medical examination report shall be placed in a separate envelope which shall be sealed and attached to the alien's visa in such a manner as to be readily detached by the medical examiner at the United States port of entry. The X-ray film shall be included in this envelope or, in the case of large films, shall be placed in a separate envelope which shall be sealed and given to the alien for presentation at the port of entry. When more than one X-ray film is used as a basis for the medical examiner's conclusions, all films shall be included. However, the X-ray film or films used in connection with the examination of a visa applicant shall not be required to be attached to the visa or otherwise presented to the medical examiner at the United States port of entry when the medical examination report is signed by a commissioned medical officer of the Public Health Service or other medical examiner specified in instructions issued by the Chief of the Division of Foreign Quarantine of the Public Health Service.

(4) *Failure to present records.* If, on examination at the time determination of admissibility is to be made, no X-ray film or medical examination report, including X-ray reading and serologic test report, is presented with the visa in accordance with the provisions of this paragraph, a medical hold shall be issued pending completion of any necessary examination procedures.

§ 34.5 *Aliens free of defect, disease, or disability.* If an alien is found to have no physical or mental defect, disease, or disability and no history of a previous attack of insanity, the medical examiner shall so indicate to the consular or immigration authority concerned.

§ 34.6 *Aliens afflicted with defect, disease, or disability.* If an alien is found to have any physical or mental defect, disease, or disability or to have had one or more attacks of insanity, the medical examiner shall report his findings to the Immigration Service by medical certificate or to the consular authority by medical notification.

§ 34.7 *Certificates and notifications; Class A.* A Class A certificate or Class A

notification shall be issued with respect to aliens who:

(a) Are feeble-minded;

(b) Are insane;

(c) Have had one or more attacks of insanity;

(d) Are afflicted with psychopathic personality, epilepsy, or a mental defect;

(e) Are narcotic drug addicts or chronic alcoholics;

(f) Are afflicted with tuberculosis in any form;

(g) Are afflicted with leprosy;

(h) Are afflicted with any dangerous contagious disease;

Provided, however, That a Class A certificate or Class A notification of a mental defect, disease, or disability shall in no case be issued with respect to an alien having only mental shortcomings due to ignorance, or suffering only from a mental condition (i) attributable to remediable physical causes or (ii) of a temporary nature, caused by a toxin, drug, or disease.

§ 34.8 *Certificates and notifications; Class B.* A Class B certificate or Class B notification shall be issued with respect to an alien who has a physical defect, disease, or disability serious in degree or permanent in nature amounting to a substantial departure from normal physical well-being. The certificate, or notification, shall state the nature and extent of the defect; the degree to which the alien is incapable of normal physical activity; and the extent to which the condition is remediable.

§ 34.9 *Class A or Class B certificates; helpless aliens.* If an alien with respect to whom a Class A or Class B certificate is issued is helpless from sickness, mental or physical disability, or infancy, the medical examiner shall so state in the certificate.

§ 34.10 *Certificates and notifications; Class C.* A Class C certificate or Class C notification shall be issued with respect to an alien who has a defect, disease, or disability other than those for which a Class A or Class B certificate (or notification) is required to be issued.

§ 34.11 *Deferral of examination; adequacy of facilities.* (a) Whenever, upon an examination, it appears to the medical officer in charge that there is doubt about the physical or mental condition of an alien, completion of the examination shall be deferred for such observation and further examination of the alien as may be reasonably necessary to determine his physical or mental condition.

(b) When, in the judgment of the medical officer in charge, a medical examination in the United States or in a territory or possession thereof cannot be satisfactorily completed at a station or place at which it is undertaken, such examination shall be discontinued and such officer shall request of the Immigration Service that the alien be removed to a place where the examination may be satisfactorily completed.

§ 34.12 *Applicability of Foreign Quarantine Regulations.* Aliens arriving at a port of the United States shall be subject to the applicable provisions of Part 71 of this chapter (Foreign Quarantine Regulations of the Public Health Service) with respect to examination and sanitary and quarantine measures.

§ 34.13 *Medical and other care; death.* (a) Upon request by the Immigration Service, an alien detained by it shall be admitted to a hospital or station of the Public Health Service and receive therein necessary medical, surgical, and dental care. An alien found to be in need of emergency care in the course of an examination or reexamination in the United States, or in a territory or possession thereof, shall be given such care to the extent deemed practicable by the medical officer in charge, and if in need of further care he shall be referred to the immigration authority concerned, with the medical examiner's recommendations concerning such further care.

(b) In case of death of an alien the body shall be delivered to the consular or immigration authority concerned; but if such death occurs in the United States, or in a territory or possession thereof, public burial shall be provided upon request of the Immigration Service and subject to its agreement to pay the burial expenses. Autopsies shall not be performed unless approved by the Immigration Service.

§ 34.14 *Reexamination; convening of boards; expert witnesses; reports.* (a) The Surgeon General or, when authorized, the medical officer in charge, shall convene a board of medical officers to reexamine an alien

(1) Upon the request of the Immigration Service for a reexamination by such a board, or

(2) Upon an appeal by an alien who, having received a medical examination in connection with determination of admissibility to the United States (including examination on arrival, adjustment of status, and preexamination as provided in the immigration laws and regulations) has been certified for: feeble-mindedness; insanity; one or more previous attacks of insanity; psychopathic personality; epilepsy; mental defect; narcotic drug addiction; or chronic alcoholism.

(b) Such a board shall consist of three, when practicable, but in no case less than two, medical officers. If a board of two officers is unable to reach agreement, a new board shall be convened and shall reexamine the alien. In the event that a board consists of three medical officers, the decision of the majority thereof shall prevail.

(c) Reexamination shall include:

(1) A medical examination by the board. If the mental condition of the alien is in question and the board does not include at least one officer who has had special training in the diagnosis of mental defects, diseases, and disabilities, the board shall designate a physician with such training who shall also examine the alien, and his report shall be included in the record.

(2) A review of all records submitted by the alien, other witnesses, or the board.

(3) Use of any laboratory or diagnostic methods or tests deemed advisable.

(4) Consideration of statements regarding the alien's physical or mental condition made by a physician after his examination of the alien.

(d) An alien who is to be reexamined shall be notified of the time and place of his reexamination not less than five days prior thereto.

(e) The alien may introduce as witnesses before the board such physicians or medical experts as the board may in its discretion permit, at his own cost and expense: *Provided,* That the alien shall be permitted to introduce at least one expert medical witness. If any witnesses offered are not permitted by the board to testify, the record of the proceedings shall show the reason for the denial of permission.

(f) Witnesses before the board shall be given a reasonable opportunity to examine medical certificates and other records involved in the reexamination and to present all relevant and material evidence orally or in writing until such time as the proceedings are declared by the board to be closed. During the course of the hearing the alien's attorney or representative shall be permitted to examine the alien and he, or the alien, shall be permitted to examine any witnesses offered in the alien's behalf and to cross-examine any witnesses called by the board. If the alien does not have an attorney or representative, the board shall assist the alien in the presentation of his case to the end that all of the material and relevant facts may be adduced.

(g) The findings and conclusions of the board shall be based on its medical examination of the alien and on the evidence presented and made a part of the record of its proceedings.

(h) The board shall report its findings and conclusions to the Immigration Service, and shall also give prompt notice thereof to the alien if the reexamination has been held upon his appeal. The board's report to the Immigration Service shall specifically affirm, modify, or reject the findings and conclusions of prior examining medical officers.

(i) If the board finds that an alien reexamined by it has a defect, disease, or disability, or has had one or more attacks of insanity, not previously certified, it shall issue its certificate in accordance with the applicable provisions of this part.

(j) After submission of its report the board shall not be reconvened, nor shall a new board be convened, in connection with the same application for admission or for adjustment of status, except upon the express authorization of the Surgeon General.

PART 35—HOSPITAL AND STATION MANAGEMENT

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AUTHORITY: §§ 35.1 to 35.52 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 321, 58 Stat. 695, as amended; 42 U. S. C. 248.

SUBPART A—GENERAL

§ 35.1 *Hospital and station rules.* The officer in charge of a station or hospital of the Service is authorized to adopt such rules and issue such instructions, not inconsistent with the regulations in this part and other provisions of law, as he deems necessary for the efficient operation of the station or hospital and for the proper and humane care and treatment of all patients therein. All general rules governing the conduct and privileges of patients, and of members of the public while on the premises, shall be posted in prominent places.

§ 35.2 *Compliance with hospital rules.* All patients and visitors in stations and hospitals of the Service are expected to comply with the rules and instructions issued under the authority of the officer in charge.

§ 35.3 *Noncompliance; deprivation of privileges.* Any patient who wilfully fails or refuses to comply with rules or instructions of a hospital or station or with regulations of the Service, may, by the direction of the officer in charge, be deprived of recreational or other privileges accorded patients. Any visitor who wilfully fails or refuses to comply with any such rules, instructions, or regulations may, by direction of the officer in charge, be denied visiting privileges.

§ 35.4 *Noncompliance; discharge or transfer.* (a) If the officer in charge finds, upon investigation, that a patient other than a leprosy patient, by willful and persistent failure or refusal to comply with such rules, instructions, or regulations is seriously impeding the course of his own care and treatment, or that of other patients, he may (1) discharge the patient, or (2) if the patient is not a voluntary patient, arrange for his transfer to the custody of the authority responsible for his admission to the station or hospital. No patient shall be discharged or transferred on account of noncompliance if to do so would seriously endanger his life or health, nor shall any patient be discharged if his failure to comply is due, in the opinion of the officer in charge, to a mental disease or disorder.

(b) If the discharge or transfer of a patient is likely to endanger the health of persons other than the patient or officers or employees of the station or hospital, the officer in charge shall give advance notice to appropriate State, county, or municipal authorities of the discharge or transfer.

§ 35.5 *Entitlement to care after discharge or transfer by reason of noncompliance.* No person otherwise entitled to care, treatment, or hospitalization at Service facilities, or in other facilities at the expense of the Service, shall be denied such care or treatment by reason of his prior discharge or transfer from any such facility under the provisions of § 35.4.

§ 35.6 *Admissions; determination of eligibility for care.* Except as may otherwise be provided for specific classes of patients by the regulations of this chapter, the officer in charge of the station or hospital to which application is made is authorized to determine the eligibility of applicants, as beneficiaries of the Service, for care and for treatment. Such determinations shall be subject to review by the chief of the division of the Service responsible for administration of the station or hospital concerned upon referral made by the officer in charge in doubtful cases or upon appeal made by an applicant who has been denied care or treatment.

§ 35.7 *Admissions; designation of person to be notified.* Every in-patient, at the time of admission to the hospital or station or as soon thereafter as practicable, shall be requested to designate a person or persons to be notified in case of emergency.

§ 35.8 *Safekeeping of money and effects; withdrawals.* (a) A place for the safekeeping of money and effects of patients shall be provided at each station or hospital, and an itemized receipt therefor shall be furnished to the patient and to any other person who places money or effects therein for the benefit of the patient.

(b) Money and effects may be withdrawn only by or on behalf of the patient, by his legally appointed representative authorized to receive or dispose of his property (including the money and effects in the custody of the station or hospital), or by a person who is authorized, under the law of the State in which the station or hospital is located, to receive or dispose of the patient's money and effects. In any case in which the officer in charge has had actual notice of the appointment of a legal representative, withdrawals may be made only by such representative or in accordance with his written directions. No delivery shall be made under this paragraph unless (1) the person receiving the money or effects shall sign an itemized receipt therefor, or (2) the delivery is witnessed by two persons. The provisions of this paragraph do not prohibit withdrawals made necessary by the provisions of this part for the disposition of money and effects left by patients on death or on departure from the station or hospital, or by the provisions of § 35.10.

§ 35.9 *Disposition of money and effects left by other than deceased patients.* Money and effects left on the premises by a patient shall be forwarded promptly to him. If because his whereabouts are unknown his money and effects cannot be delivered to him within 120 days after his departure, his money shall be deposited into the Treasury and credited to the account entitled "Money and Effects of Former Patients (PHS (T) name of patient)," and his effects shall be held for him for six months and then sold in accordance with § 35.49, and the proceeds deposited into the Treasury and credited to the above account.

§ 35.10 *Destruction of effects dangerous to health.* The officer in charge shall cause to be destroyed effects brought into or received in the station or hospital area by patients which, in the judgment of such officer, are dangerous as a source of disease to the health or life of patients or personnel of the station or hospital or visitors therein and cannot otherwise be safely disposed of or rendered harmless by disinfection or other means. The destruction of effects shall be witnessed by at least one officer or employee designated for that purpose by the officer in charge, and appropriate records of the destruction shall be maintained.

§ 35.11 *Clinical records; confidential.* A complete clinical record shall be maintained for each patient admitted to a station or hospital of the Service. Such records shall be confidential and shall not be disclosed except as may be provided elsewhere in regulations of the Service.

§ 35.12 *Solicitation of legal business prohibited.* The solicitation, directly or indirectly, of legal business or of a retainer or agreement authorizing an attorney to render legal services, is prohibited in all stations and hospitals of the Service.

§ 35.13 *Entry for negotiation of release or settlement.* (a) No person shall be permitted to enter a station or hospital of the Service for the purpose of negotiating a settlement or obtaining a general or special release or statement from any patient with reference to any illness or personal injury for which the patient is receiving care or treatment, or

for the purpose of conferring with him as an attorney or representative of an attorney with reference to such illness or injury, unless the patient has signified his willingness to have such person enter for such purpose and, in the judgment of the officer in charge, the physical or mental condition of the patient will not thereby be impaired.

(b) Any person entering a station or hospital for a purpose enumerated in paragraph (a) of this section shall register in the manner prescribed by the officer in charge, and shall furnish for the records of the station or hospital the name of each patient by whom he has been received for such a purpose.

§ 35.14 *Solicitation of legal business; negotiation of release or settlement; assistance prohibited.* All employees of the Service and all persons attached in any capacity to a station or hospital, including patients, are forbidden to communicate, directly or indirectly, with any person for the purpose of aiding in the solicitation of legal business or in the negotiation of a settlement or the obtaining of a general or special release or statement from any patient with reference to any illness or personal injury for which the patient is receiving care or treatment therein. No patient is prohibited by this section from communicating on his own behalf with an attorney of his choice or with other persons.

§ 35.15 *Consent to operative procedures.* Except in emergencies when the patient is physically or mentally incapable of consenting and the delay required to obtain the consent of his natural or legal guardian would seriously endanger the patient's health, no operative procedure shall be undertaken unless the patient or, in the case of a minor or incompetent, his natural or legal guardian gives his consent, nor shall any major operative procedure or the administration of a general anaesthetic be undertaken unless such consent has been obtained in writing. The consent or refusal of consent shall be made a part of the clinical record.

§ 35.16 *Autopsies.* An autopsy may be performed on the body of a deceased patient only by direction of the officer in charge and only if consented to in writing by a person authorized under the law of the State in which the station or hospital is located to permit an autopsy under the circumstances of the particular death involved. Restrictions or limitations imposed by the person consenting thereto on the extent of an autopsy shal be observed. Documents embodying consent shall be made a part of the clinical record.

SUBPART B—TRANSFER OF PATIENTS

§ 35.21 *Authorization of transfer.* Except as otherwise provided by law or regulation with respect to certain classes of patients, the officer in charge of a station or hospital of the Service may provide, without any cost to the patient, for the transfer of the patient either from such station or hospital to another station or hospital of the Service or to any non-Service station or hospital at which the patient may be received, or from any non-Service hospital at which he is receiving care or treatment as a patient of the Service to a station or hospital of the Service.

§ 35.22 *Attendants.* Patients shall be transferred by such means and accompanied by such medical, nursing, or other attendants as may be necessary to protect the health and safety of the patient and other persons likely to come into contact with him, including in the case of a prisoner such guards as may be necessary to assure his safekeeping. A female patient requiring the services of attendants shall be accompanied by at least one female attendant. Medical or nursing attendants shall be qualified to care for persons suffering from the type of disease or disorder with which the patient is afflicted and shall be provided with equipment and medicines necessary for the care of the patient.

SUBPART C—DISPOSITION OF ARTICLES PRODUCED BY PATIENTS

§ 35.31 *Retention by patients.* Subject to the rules of the station or hospital, patients may be accorded the privilege of retaining articles produced by them in the course of their curative treatment with the aid of materials furnished by the Service. Articles not retained by patients shall be disposed of as provided in this subpart. The provisions of this subpart do not apply to the products of industrial activities established for narcotic addicts.

§ 35.32 *Board of appraisers.* The officer in charge shall appoint, from the personnel of the station or hospital, a board of three persons to serve at his pleasure. The board shall provide for the sale of articles having commercial value and shall keep appropriate records of such articles and their disposition.

§ 35.33 *Sale: prices; deposit of proceeds.* The board shall determine and redetermine from time to time the prices at which articles are to be sold, and in doing so shall consider the cost of materials used, reasonable handling charges, and the fair market value of the articles. The sale price shall be indicated on each article by tag or other appropriate means, and a list of articles offered for sale and their respective sale prices shall be posted from time to time in the hospital or station area. In its discretion, the board may offer such articles for purchase by other patients or by charitable organizations before offering them for purchase to the general public. No article shall be sold or resold to any officer or employee of the Service. Moneys received from the sale of articles shall be deposited into the Treasury to the credit of the appropriation from which the materials for making such articles were purchased.

§ 35.34 *Resale.* No article purchased under the provisions of this subpart shall be resold in the hospital or station area at a price to exceed the sale price fixed by the board for such article.

§ 35.35 *Unsalable articles.* Articles having no commercial value shall be stored, destroyed, or otherwise disposed of as the officer in charge may direct.

SUBPART D—DISPOSAL OF MONEY AND EFFECTS OF DECEASED PATIENTS

§ 35.41 *Inventory.* Promptly after the death of a patient in a station or hospital of the Service, an inventory of his money and effects left therein shall be made by two or more officers or employees of the Service designated for such purpose by the officer in charge.

§ 35.42 *Notice upon death.* The officer in charge shall notify in writing all persons known to him to whom delivery of the patient's money and effects might be made hereunder, and, in the case of an alien patient, a consul of the country of his apparent nationality. Each person so notified shall be requested to furnish information concerning (a) the existence or whereabouts of any persons to whom delivery of the deceased patient's money and effects may be made pursuant to these provisions, and (b) the permanent residence or home of the deceased.

§ 35.43 *Delivery only upon filing claim; forms; procedure.* (a) Delivery of the money and effects of a deceased patient shall be made only to a person who has filed a claim therefor on a form prescribed by the Surgeon General.

(b) A claimant shall furnish, in addition to the information on the prescribed form, such additional information as the officer in charge may consider necessary to establish the identity of the claimant and the truth of his statements.

(c) A person filing a claim as a legal representatives shall be required to present letters of administration or a certificate of a court attesting his qualification or appointment.

(d) If a claim is made after the money, or proceeds from the sale of the effects, of a deceased patient have been deposited in the Treasury, the claim shall be referred to the General Accounting Office. If the claim is for checks or evidences of indebtedness of the United States which have been transmitted to the issuing agency pursuant to §§ 35.47 and 35.48, the claimant shall be referred to such agency.

§ 35.44 *Delivery to legal representative; to other claimants if value is $1,000 or less.* The money and effects of the deceased patient shall in all cases be delivered to the legal representative, if any, of his estate. If the value is $1,000 or less, and the officer in charge has neither notice nor other knowledge of the appointment or qualification of a legal representative, nor reason to believe that a legal representative will be appointed or qualified, he shall deliver all the money and effects, as soon as practicable after the expiration of 10 days from the sending of notices to one of the following in the indicated order of priority:

(a) A person, if any, designated in writing by the patient to receive the same;

(b) The patient's surviving spouse;

(c) The patient's child or children in equal parts;

(d) The patient's parent or parents in equal parts;

(e) Any other person who would be entitled to receive the money and effects under the law of the patient's domicile:

Provided, That delivery of such money and effects may be made immediately upon application by one of the persons specified above if the officer in charge has neither notice nor other knowledge that a person higher in the indicated order of priority exists.

§ 35.45 *Disposition of effects; exceptions.* Irrespective of the provisions of this subpart, the officer in charge may (a) release from among the effects of the deceased patient so much of the patient's clothing as may be necessary for use in preparation of his body for burial and (b) cause to be destroyed, or otherwise disposed of, such used toilet articles of the patient as appear to have no commercial or other value.

§ 35.46 *Conflicting claims.* In any case in which conflicting claims are filed or the officer in charge considers it to be in the interest of persons who may be ultimately entitled thereto, delivery may be withheld from all persons other than a duly qualified legal representative.

§ 35.47 *Disposition of Government checks.* Notwithstanding any other provisions of this subpart, immediately upon completion of the inventory, checks drawn on the Treasurer of the United States shall be sent by safe means to the department, agency, or establishment of the Government of the United States issuing such checks. The transmittal shall be accompanied by a statement of the reasons therefor and of all available information which may aid the issuing unit in the disposition of the check transmitted. Notice of the disposition of any checks, with identifying information, shall be given to the person or persons, if any, to which money and effects are delivered in accordance with § 35.44.

§ 35.48 *Deposit of unclaimed money; sale of unclaimed effects and deposit of proceeds.* If, within 120 days after sending of notices no claim has been filed pursuant to the provisions of § 35.43, the patient's money, consisting of all types of United States currency and coin, shall be deposited in the Treasury to the credit of the trust-fund account entitled "Money and Effects of Deceased Patients, Public Health Service." If, within six months after the death of a patient, no claim has been filed pursuant to the provisions of § 35.43, his effects (including foreign currency and coin but excluding Postal Savings Certificates and other evidences of indebtedness of the United States) shall be sold at public auction or by sealed bids to the highest bidder and the proceeds deposited to the credit of the trust-fund account entitled "Money and Effects of Deceased Patients, Public Health Service." Postal Savings Certificates and other evidences of indebtedness of the United States shall be transmitted to the issuing department or agency with a statement of the occasion therefor.

§ 35.49 *Sale of unclaimed effects; procedures.* The following provisions shall govern the sale of effects:

(a) *Notice.* Reasonable advance notice of proposed sales shall be posted at such prominent places in the station or hospital area as the officer in charge may designate. In addition, a notice shall be posted at the nearest post office, and notices shall be sent by mail to all known persons to whom delivery of money and effects of the patient may be made under the provisions of this subpart. The officer or employee who posts or sends notices of sales shall make an appropriate affidavit on a copy of the notice as to his action in that respect, including in his affidavit the names of persons to whom copies of the notices were mailed and the mailing dates. The copy of the notice on which the affidavit appears shall be retained in the files of the station or hospital.

(b) *Form and contents of notice.* Notice of proposed sales shall be given on a form prescribed by the Surgeon General. The notice shall include: an inventory of the effects to be offered for sale; the names of the patients from whom the effects were received; the precise date, time, and place when and where the sale will be held; a statement that the articles will be available for inspection immediately prior to sale, if sold at public auction, or on a day and during the hours appointed for the inspection of articles if sold by sealed bid; a statement that the sale is to be held pursuant to the provisions of the regulations in this part, that, if the articles are to be sold by sealed bid, the right to reject all bids is reserved, and that, if otherwise authorized, delivery will be made of effects or proceeds of sales to persons filing claims prior to the sale of effects or prior to the transmittal of proceeds to the Surgeon General.

(c) *Time and place of sales.* All sales shall be held at reasonable hours and at such places within the station or hospital area as the officer in charge may designate.

(d) *Who shall conduct sales.* All sales shall be conducted by the officer in charge or by a responsible officer or employee designated by him.

(e) *Sale and delivery.* All effects offered for sale shall be sold to the highest bidder and delivered to him immediately upon payment of the sale price in cash or by postal money order or certified check and execution of an appropriate receipt by the person to whom delivery is made.

§ 35.50 *Disposition of unsold effects.* The officer in charge shall dispose of effects offered for sale but remaining unsold in such manner as he considers to be proper, but, if practicable, such effects shall be used for the benefit of other patients of the Service.

§ 35.51 *Manner of delivery; costs, receipts.* (a) If a person entitled under this subpart to receive the money and effects of a patient is unable to take possession thereof at the station or hospital, they shall be sent to him at the expense of the United States in the most economical manner available. The records of the station or hospital shall show the names and addresses of persons to whom money or effects have been sent, the date of sending, the means used, an itemized list of the money or effects sent, and a statement by a witnessing officer or employee verifying the foregoing from his own observation.

(b) If not delivered personally by an authorized officer or employee of the Service, money, evidences of indebtedness, and other valuable papers and documents shall be sent by registered mail (or other safe means).

(c) Persons receiving the money and effects of a patient shall be required to execute an itemized receipt therefor.

§ 35.52 *Delivery of possession only; title unaffected.* Except for delivery of effects to purchasers at sales held in accordance with § 35.49, delivery or deposit under this subpart of the money or effects, or the proceeds of a sale of the effects, of a deceased patient constitutes only a transfer of possession and is not intended to affect in any manner the title to such money, effects, or proceeds.

PART 36—INDIAN HEALTH

NOTE: Regulations on Indian health were formerly codified as Parts 84 and 85 of Title 25.

Subpart A—Scope and Definitions

Sec.
36.1 Purpose and effect.
36.2 Meaning of terms.

Subpart B—Availability of Services to Individuals in Programs (Including Facilities Constructed or Supported With Tribal Funds) Operated for Indian Beneficiaries By the Public Health Service

36.11 Services available.
36.12 Persons to whom services will be provided.
36.13 Charges to Indian beneficiaries for services provided in Public Health Service facilities or by Public Health Service personnel.

Subpart C—Contract Services

36.21 Availability of contract services.

AUTHORITY: §§ 36.1 to 36.21 issued under sec. 3, 68 Stat. 674; 42 U. S. C. 2003. Interpret or apply 42 Stat. 208, sec. 1, 68 Stat. 674; 25 U. S. C. 13, 42 U. S. C. 2001.

SUBPART A—SCOPE AND DEFINITIONS

§ 36.1 *Purpose and effect.* (a) The regulations in this part establish the general principles to be followed in the discharge of this Department's responsibilities for continuation and improvement of the Indian health services. Officers and employees of the Department will be guided by these policies in exercising discretionary authority with respect to the matters covered.

(b) The Surgeon General of the Public Health Service is authorized to adopt, and from time to time revise or add, administrative instructions relating to methods or procedures appropriate to implementing these principles, or for their supplementation as to matters not covered, including instructions providing for the continuation or appropriate modification of practices and procedures previously observed in the provision of Indian health services in particular jurisdictions.

§ 36.2 *Meaning of terms.* When used in this part, the term:

(a) "Indian health program" includes the Alaska Native Health Services.

(b) "Indian" includes Indians in the continental United States, and Indians, Aleuts and Eskimos in Alaska.

(c) "Jurisdiction" shall have the same geographical meaning as in Bureau of Indian Affairs usage.

(d) "Bureau of Indian Affairs" means the Bureau of Indian Affairs, Department of the Interior.

SUBPART B—AVAILABILITY OF SERVICES TO INDIVIDUALS IN PROGRAMS (INCLUDING FACILITIES CONSTRUCTED OR SUPPORTED WITH TRIBAL FUNDS) OPERATED FOR INDIAN BENEFICIARIES BY THE PUBLIC HEALTH SERVICE

§ 36.11 *Services available.* Within the limits of available funds, facilities, and personnel, the Public Health Service will make available, within the area served by the local facility, hospital and medical and dental care, including outpatient services, services of mobile clinics and public health nurses, and preventive care including immunizations and health examinations of special groups, such as school children.

§ 36.12 *Persons to whom services will be provided*—(a) *In general.* (1) Services will be made available, as medically indicated, to persons of Indian descent belonging to the Indian community served by the local facilities and program, and non-Indian wives of such persons.

(2) Generally, an individual may be regarded as within the scope of the Indian health and medical service program if he is regarded as an Indian by the community in which he lives as evidenced by such factors as tribal membership, enrollment, residence on tax-exempt land, ownership of restricted property, active participation in tribal affairs, or other relevant factors in keeping with general Bureau of Indian Affairs practices in the jurisdiction.

(b) *Doubtful cases.* (1) In case of doubt as to whether an individual applying for care is within the scope of the program, the Medical Officer in Charge shall obtain from the appropriate Bureau of Indian Affairs officials in the jurisdiction information pertinent to his determination of the individual's continuing relationship to the Indian population group served by the local program.

(2) If the applicant's condition is such that immediate care and treatment are necessary, services shall be provided pending identification as an Indian beneficiary.

(c) *Priorities when funds, facilities, or personnel are insufficient to provide the indicated volume of services.* Priorities for care and treatment, as among individuals who are within the scope of the program, will be determined on the basis of relative medical need and access to other arrangements for obtaining the necessary care.

§ 36.13 *Charges to Indian beneficiaries for services provided in Public Health Service facilities or by Public Health Service personnel*—(a) *In general.* In order to make the most effective use of funds and facilities available for needed health and medical services, individual Indians who are clearly able to pay the costs of hospital care (and of other major items of service specified in instructions of the Surgeon General) will be encouraged to do so, and services may be conditioned upon payment in appropriate cases. No charge may be made for immunizations, health examination of school children or similar preventive services.

(b) *Amount of charges.* Payment may be requested in accordance with a schedule of charges established for the jurisdiction by the Area Medical Officer, but such charges may in no case exceed the cost of providing the service, as determined by the Surgeon General or in accordance with instructions issued by him.

(c) *Circumstances under which payment may be requested; Authority of the Medical Officer in Charge.* Whenever it is established to the satisfaction of the Medical Officer in Charge, from information available from the local Bureau of Indian Affairs officers or from other sources, that an Indian applying for care for himself or his family is able to meet the scheduled charge for the needed care without impairing his prospects for economic independence, he may be asked to pay the scheduled charge. Charges may be reduced in individual cases, or payment may be waived and needed services may nevertheless be provided if, in the judgment of the Medical Officer in Charge, the health objectives in the area served will be advanced thereby.

SUBPART C—CONTRACT SERVICES

§ 36.21 *Availability of contract services.* Availability of contract services to individual Indian beneficiaries will be governed by the terms of the contract.

Subchapter D—Grants

PART 51—GRANTS TO STATES FOR PUBLIC HEALTH SERVICES

Sec.
51.1 Definitions.
51.2 Allotments; extent of health problems.
51.3 Basis of allotments.
51.4 Allotments; estimates; time of making; duration.
51.5 Plans; mode of submittal.
51.6 Plans; contents.
51.7 Plans; time of submittal and approval.
51.8 Payments to States; to cooperating agencies.
51.9 Required expenditure of State and local funds; funds of cooperating agencies.
51.10 Expenditure of Federal grant funds.
51.11 Use of Federal grant funds for training.
51.12 Personnel administration on a merit basis.
51.13 Fiscal accounting and control.
51.14 Reports; State health authority; cooperating agencies.
51.15 Audit.

AUTHORITY: §§ 51.1 to 51.15 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 314, 58 Stat. 693, as amended; 42 U. S. C. 246.

§ 51.1 *Definitions.* As used in this part:

(a) "Act" means the Public Health Service Act (58 Stat. 682, as amended; 42 U. S. C. 201).

(b) "Cooperating agency", which term is used only in relation to the heart disease control program, means a county, health district, other political subdivision of the State or other public or nonprofit agency, institution, or other organization in the State, to which payments for a heart disease control program are recommended by the State health authority.

(c) "Financial need" as applied to any State means the relative per capita income as shown by data supplied by the Bureau of Foreign and Domestic Commerce for the most recent five-year-period, available on January 1, preceding the fiscal year for which Federal grant funds are appropriated.

(d) "General health purposes" means the establishment and maintenance of public health services, other than community mental health services, within the meaning of subsection (c) of section 314 of the act.

(e) "Official forms" means forms and instructions supplied by the Public Health Service to the State health authority and to a cooperating agency for use in the submittal of plans or information required with respect to the operation of such plans.

(f) "Plans" refers to the information and proposals submitted by the State health authority pursuant to the regulations in this part for activities of the State and political subdivisions thereof for (1) the prevention, treatment and control of venereal disease, (2) the prevention, treatment and control of tuberculosis, (3) establishing and maintaining public health services, (4) the prevention, treatment and control of mental illness, including emotional, psychiatric and neurological disorders, (5) establishing and maintaining organized community programs of heart disease control, or (6) the prevention, control and eradication of cancer.

(g) "Plans" refers also to the information and proposals for establishing and maintaining organized community programs for heart disease control submitted in lieu of a State plan by a cooperating agency pursuant to this part.

(h) "Political subdivision" includes counties, health districts, municipalities, and other subdivisions of the State established for governmental purposes.

(i) "Population" as applied to any State or political subdivision, means the most recent official estimates of the Bureau of the Census available on January 1, preceding the fiscal year for which Federal grant funds are appropriated.

(j) "Public Health Service" means the Public Health Service in the Department of Health, Education, and Welfare.

(k) "State" includes any State, the District of Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin Islands.

(l) Insofar as the regulations in this part relate to the State mental health program, "State health authority" means, in the case of any State in which there is a single State agency other than the State health authority charged with responsibility for administering such program, the State mental health authority.

§ 51.2 *Allotments; extent of health problems.* For the purpose of making allotments to the several States:

(a) *Venereal disease.* The extent of the venereal disease problem shall be de-

termined by the Surgeon General taking into consideration such factors as:

(1) The varying composite and racial prevalence rates for syphilis;

(2) The extent to which treatment facilities have been provided as evidenced by the population under treatment for syphilis;

(3) The total number of syphilis patients brought to treatment in the primary or secondary stages during the previous year;

(4) The varying costs of providing equal services as determined by the inverse function of the syphilitic density, and the direct function of the size of the population of each State;

(5) The need for training centers and demonstrations in selected areas;

(6) The need for facilities for the prevention and control of venereal diseases in localities where there is an unusual concentration of population.

(b) *Tuberculosis.* The extent of the tuberculosis problem shall be determined by the Surgeon General taking into consideration such factors as:

(1) The morbidity of the disease;

(2) The mortality attributed to the disease;

(3) The relative need among the States of facilities for diagnosis and treatment of tuberculous persons.

(c) *General health.* The extent of special health problems shall be the relative population density of the several States, in inverse order.

(d) *Mental health.* The extent of the mental health problem shall be determined by the Surgeon General, taking into consideration such factors as:

(1) The prevalence of emotional and psychiatric disorders affecting mental health;

(2) Special conditions which create unequal burdens in the administration of mental health services among the States as indicated by the relative population of large urban and dispersed-population areas.

(e) *Cancer.* The extent of the cancer problem shall be determined by the Surgeon General taking into consideration such factors as:

(1) The mortality attributed to the disease;

(2) The relative population density of the several States in inverse order.

§ 51.3 *Basis of allotments.* Allotments to the several States for the purposes specified in § 51.2 shall be computed as follows:

(a) *Venereal disease.* Of the amount available for allotment for venereal disease control programs:

From 20 percent to 40 percent, on the basis of population, weighted by financial need.
From 60 percent to 80 percent, on the basis of the extent of the venereal disease problem.

(b) *Tuberculosis.* Of the amount available for allotment for tuberculosis control programs:

From 20 percent to 40 percent, on the basis of population, weighted by financial need.
From 60 percent to 80 percent, on the basis of the extent of the tuberculosis problem.

(c) *General health purposes.* Of the amount available for allotment for general health purposes other than for mental health:

From 90 percent to 95 percent, on the basis of population, weighted by financial need.
From 5 percent to 10 percent, on the basis of the extent of special health problems.

(d) *Mental health.* Of the amount available for allotment for mental health programs:

From 20 percent to 40 percent, on the basis of population weighted by financial need.
From 60 percent to 80 percent, on the basis of the extent of the mental health problem.

(e) *Heart disease.* Of the amount available for allotment for heart disease control programs:

(1) A portion on the basis of a uniform per capita allotment not to exceed 10 cents per capita for the first 100,000 population or part thereof of each State;

(2) The remaining amount on the basis of the remaining population of each State weighted by financial need.

(f) *Cancer.* Of the amount available for allotment for cancer control programs on a formula basis:

(1) From 40 percent to 60 percent on the basis of population weighted by financial need.

(2) From 40 percent to 60 percent on the basis of the extent of the cancer problem.

§ 51.4 *Allotments; estimates; time of making; duration.* (a) For each fiscal year, the Surgeon General shall, with the approval of the Secretary, determine the amount of the appropriation for each program which shall be available for allotment among the several States.

(b) Prior to the beginning of each fiscal year the Surgeon General shall prepare and make available to the States an estimated schedule of the amounts which it is expected will be allotted to each State during the fiscal year from estimated appropriations.

(c) Allotments for each program for the first six months shall be made prior to the beginning of the fiscal year or as soon thereafter as practicable, and shall equal not less than 60 percent nor more than 70 percent of the total sum determined to be available for allotment during that fiscal year. At the end of the second quarter, the amounts of allotments for the first six-month period which have not been certified for payment to the respective States pursuant to § 51.8 shall become available for allotment among the States in the same manner as moneys which had not previously been allotted.

(d) Allotments for each program for the remaining six months shall be made prior to the beginning of the third quarter or as soon thereafter as practicable, and shall equal the total sum remaining unpaid and unallotted from the amount available for allotment during the fiscal year.

(e) The Secretary of the Treasury and the respective State health authorities shall be notified of the amounts of allotments and of the period for which they are made.

§ 51.5 *Plans; mode of submittal.* (a) Each State making application for grants under section 314 of the act or for a cancer control program shall submit plans through its State health authority for each fiscal year for carrying out the purposes for which such grants are made available. A State making application for Federal grant funds for more than one of these purposes may consolidate its plan: *Provided,* That the information specifically required for a State plan is distinguished with respect to each purpose.

(b) Plans of cooperating agencies for heart disease control programs, in lieu of State plans, shall be submitted through the State health authority.

(c) Plans shall be prepared in accordance with official forms supplied by the Public Health Service and may be amended with the approval of the Surgeon General or his designee.

§ 51.6 *Plans; contents.* (a) A plan with respect to any program shall include:

(1) A description of the organization and proposals for conducting, extending, improving, and otherwise modifying health services to carry out in an acceptable manner the purposes for which grants are made available;

(2) A budget for carrying out the services described under subparagraph (1) of this paragraph;

(3) A statement that the plan if approved will be carried out as described and in accordance with this part.

(b) Effective for the fiscal year 1954; and for each subsequent fiscal year, the State health department shall, with respect to its total annual expenditures of Federal and required matching funds for its venereal disease, tuberculosis, heart, cancer, and mental health programs, provide in its State plan for the allocation of such expenditures to such programs in accordance with either of the following procedures:

(1) On the basis of objective criteria set forth in the State plan, allocate to such programs a portion of "supporting expenditures" which, together with any "specialized expenditures" identified for such program, will at least equal the total annual expenditures of Federal and required matching funds;

(2) Identify as "specialized" expenditures for such programs an amount equal to 80 percent or more of the total annual expenditures of Federal and required matching funds for those programs, provided the remaining 20 percent or less of such total expenditures were for purposes within the scope of the applicable approved State plan.

§ 51.7 *Plans; time of submittal and approval.* (a) A plan shall be submitted, as provided in §§ 51.5 and 51.6, prior to the beginning of the period to which it relates: *Provided,* That exceptions to this section may be made by the Surgeon General or his designee when necessary to meet emergencies.

(b) The budget for health services shall not be approved unless each item thereof relates to activities described in the plan.

(c) A plan for a heart disease control program submitted by a cooperating agency as provided in § 51.5 shall not be

approved unless recommended by the State health authority.

§ 51.8 *Payments to States; to cooperating agencies.* (a) Payments from allotments to a State shall be certified to the Secretary of the Treasury only after a plan has been approved. Payments from allotments to a State shall not exceed the allotment to such State or the total estimated expenditure necessary for carrying out the plan whichever is less.

(b) Payments from a State allotment for venereal disease control shall be reduced by the amount such State requests the Public Health Service to utilize in furnishing equipment, services, and supplies for special venereal disease activities.

(c) All payments shall be made to the State, except, with respect to the heart disease control program, amounts from the State's allotment may be certified for payment to a cooperating agency upon recommendation by the State health authority when (1) the State health authority has not prior to August 1 of the fiscal year for which allotment is made, presented and had approved a plan, or (2) the State is not authorized by law to make payments to a cooperating agency. Funds for heart disease control paid to a cooperating agency and remaining unobligated at the termination of the plan for any fiscal year shall be returned to the Treasury of the United States, unless plans for continued cooperation with such agency are submitted and approved for the succeeding fiscal year.

(d) Subject to the foregoing limitations, payments shall be made as follows:

(1) Payment for the first quarter shall be based upon an application for funds showing the estimated requirement for such quarter.

(2) Except for payment to a cooperating agency, payment for the second quarter shall be the amount of the difference between the unpaid balance of the allotment of the respective State for the first six months and the unencumbered cash balance of the respective fund in the State treasury at the beginning of the first quarter. With respect to payment to a cooperating agency from the State's allotment, payment in the second quarter shall be based on the requirements for such quarter and for the estimated unobligated balances at the beginning of the quarter as shown in an application for funds.

(3) Payment for subsequent quarters from the allotments for the final six-month period shall be made once in each quarter and shall be based upon an application for funds showing the estimated requirement for such quarter and the estimated unencumbered balance of the respective fund in the State treasury (or with respect to the heart disease control program, in the treasury of the cooperating agency) at the beginning of the quarter for which payment is to be made. All such payments shall be in the amount of the difference between the estimated requirement and the estimated unencumbered cash balance, except that for payments for cancer control the amount paid for either the third or the fourth quarter, together with the estimated unencumbered balance of Federal grant funds in the State treasury at the beginning of the quarter, shall not exceed 35 percent of the total amount available to the State for the year.

(4) For cancer control any amount in excess of 35 percent of the total allotment to a State remaining unpaid after the third quarter payment, and any unpaid balance in the allotment of a State remaining unpaid after the final payment to a State, shall be available for special project grants.

(5) Payments from allotments shall not be certified unless an application for payment and all required reports and documents have been received.

(6) Supplemental payment in any quarter may be certified upon submission of application accompanied by satisfactory justification.

§ 51.9 *Required expenditure of State and local funds; funds of cooperating agencies.* (a) Moneys paid to any State or to a cooperating agency pursuant to section 314 of the act shall be paid upon the condition that there be expended in the State during the fiscal year for which payment is made and for purposes specified in the plan with respect to which payment is made, public funds of the State and its political subdivision (or, in the case of payments to a cooperating agency having an approved heart disease control plan, funds of the cooperating agency) in amounts which shall be exclusive of any funds derived from loan or grant from the United States and which shall equal, separately for venereal disease control, mental health, general health, and heart disease, 50 percent of the Federal grant funds expended pursuant to the plan.

(b) Moneys paid to any State for tuberculosis prevention and case-finding shall be paid upon the condition that there be expended in the State, during the fiscal year for which payment is made and for direct expenses of prevention and case-finding as specified in the State plan, funds of the State and its political subdivisions (excluding funds spent in the purchase of care in hospitals and sanatoria and funds derived by loan or grant from the United States) in an amount equal to 100 percent of the Federal grant funds expended pursuant to the plan.

(c) Moneys paid to any State for a cancer control program shall be paid upon the condition that there be expended in the State, during such fiscal year and for purposes specified in the State plan, public funds of the State and its political subdivisions (excluding any funds derived by loan or grant from the United States) and contributions made available by voluntary agencies for carrying out the State plan in an amount equal to 50 percent of the amount of Federal grant funds to be expended pursuant to the State plan.

(d) The expenditures required for any one of the above programs mentioned in paragraph (a) or (b) of this section shall be additional to the expenditures required for other programs.

§ 51.10 *Expenditure of Federal grant funds.* (a) Federal grant funds paid to a State or to a cooperating agency shall be expended solely for the purposes specified in plans approved by the Surgeon General or his designee, and in accordance with the regulations in this part.

(b) Except as otherwise authorized by the Surgeon General, the provisions of State or local law which are applicable to the expenditure of moneys appropriated by the State or local subdivision shall apply respectively to Federal moneys paid to the State or to a political subdivision of the State as a cooperating agency.

(c) All encumbrances of Federal grant funds shall be liquidated within two years after the end of the fiscal year in which the encumbrance was incurred unless otherwise authorized by the Surgeon General or other officials to whom he has delegated authority to approve plans. The amount of encumbrances not so liquidated, adjusted by such amounts as otherwise authorized, will be treated for the purpose of determining payments under the regulations in this part as constituting a part of the unencumbered cash balance at the end of the second succeeding fiscal year.

§ 51.11 *Use of Federal grant funds for training.* Use of Federal grant funds for training personnel for State and local health work shall be authorized by the State health authority or by a cooperative agency in accordance with the minimum standards for sponsored training issued by the Public Health Service. Records of authorized training shall be maintained by the State health authority or cooperating agency and shall be audited for compliance with these standards.

§ 51.12 *Personnel administration on a merit basis.* A system of personnel administration on a merit basis shall be established and maintained for personnel employed in programs, the budgets of which provide for the expenditures of Federal grant funds or of State or local funds for matching purposes included in the plan of the State health authority. Standards for evaluating compliance with this requirement shall be contained in the merit-system standards of the Public Health Service in effect at the time of the expenditure.

§ 51.13 *Fiscal accounting and control.* The State and local public health agencies and cooperating agencies receiving Federal grant funds under the regulations in this part shall establish and maintain efficient methods for conducting fiscal affairs (including financial and property controls). Each State agency and cooperating agency shall maintain a separate and distinct fund account for each Public Health Service grant.

§ 51.14 *Reports; State health authority; cooperating agencies.* State health authorities and cooperating agencies shall make such reports pertinent to the operation of their plans and to the purposes for which grants are made available as may be required by the Surgeon General or his designee.

§ 51.15 *Audit.* Audit of the activities and programs described in the plan may be made after prior consultation with the State health authority or the cooperating agency. Records, documents, and information available to the State health authority or cooperating agency pertinent to the audit shall be accessible for purposes of audit.

PART 53—GRANTS FOR SURVEY, PLANNING AND CONSTRUCTION OF HOSPITALS AND MEDICAL FACILITIES

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AUTHORITY: §§ 53.1 to 53.169 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 622, 60 Stat. 1042, sec. 653, 68 Stat. 463; 42 U. S. C. 291e, 291u. Other statutory provisions interpreted or applied are cited to text in parentheses.

SUBPART A—DEFINITIONS

§ 53.1 *Definitions.* Except as otherwise stated, the following terms shall have the following meanings when used in the regulations in this part:

(a) *Area.* A logical hospital service area, taking into account such factors as population distribution, natural geographic boundaries, transportation and trade patterns, all parts of which are reasonably accessible to existing or proposed hospital facilities and which has been designated by the State agency as a base, intermediate, or rural area. Nothing in the regulations in this part shall preclude the formation of an interstate area with the mutual agreement of the States concerned.

(b) *Base area.* Any area which is so designated by the State agency and has the following characteristics: (1) Irrespective of the population of the area, it shall contain a teaching hospital of a medical school; this hospital must be suitable for use as a base hospital in a coordinated hospital system within the State; or (2) the area has a total population of at least 100,000 and contains or will contain on completion of the hospital construction program under the State plan at least one general hospital which has a complement of 200 or more beds for general use. This hospital must furnish internships and residencies in two or more specialties and must be suitable for use as a base hospital in a coordinated hospital system within the State.

(c) *Intermediate area.* Any area so designated by the State agency which: (1) Has a total population of at least 25,000 and (2) contains, or will contain on completion of the hospital construction program under the State plan, at least one general hospital which has a complement of 100 or more beds and which would be suitable for use as a district hospital in a coordinated hospital system within the State.

(d) *Rural area.* Any area so designated by the State agency which constitutes a unit, no part of which has been included in a base or intermediate area.

(e) *Coordinated hospital system.* An interrelated network of general hospitals throughout a State in which one or more base hospitals provide district hospitals and the latter in turn provide rural and other small hospitals with such services relative to diagnosis, treatment, medical research and teaching as cannot be provided by the smaller hospitals individually.

(f) *Hospital.* Public health centers and general, tuberculosis, mental, chronic disease, and other types of hospitals, and related facilities, such as laboratories, outpatient departments, nurses' home and training facilities, and central service facilities operated in connection with hospitals, but not institutions furnishing primarily domiciliary care. The term "hospital", except as applied generally to include public health centers, shall be restricted to institutions providing community service for inpatient medical or surgical care of the sick or injured; this includes obstetrics. It shall exclude Federal hospitals and institutions found to constitute a public hazard.

(g) *Allied special hospital.* Cardiac, eye-ear-nose-throat, isolation, maternity, children's orthopedic, and skin and cancer, as well as other hospitals providing similar specialized types of care commonly given in general hospitals. The term excludes mental, tuberculosis, and chronic disease hospitals.

(h) *Chronic disease hospital (hospital for the chronically ill and impaired).* A hospital for the treatment of chronic illness, including the degenerative diseases, and in which treatment and care is administered by or under the direction of persons licensed to practice medicine or surgery in the State. The term does not include hospitals primarily for the care of mentally ill or

tuberculosis patients, nursing homes, and institutions the primary purpose of which is domiciliary care.

(i) *General hospital.* Any hospital for inpatient medical or surgical care of acute illness or injury and for obstetrics, of which not more than 50 percent of the total patient days during the year are customarily assignable to the following categories of cases: Chronic convalescent and rest, drug and alcoholic, epileptic, mentally deficient, mental, nervous and mental, and tuberculosis.

(j) *Mental hospital.* A hospital for the diagnosis and treatment of nervous and mental illness but excluding institutions for the feeble-minded and epileptics.

(k) *Nonprofit hospital, nonprofit diagnostic or treatment center, nonprofit rehabilitation facility, and nonprofit nursing home.* Any hospital, diagnostic or treatment center, rehabilitation facility, or nursing home, as the case may be, owned and operated by one or more nonprofit corporations or associations, no part of the net earnings of which inures, or may lawfully inure, to the benefit of any private shareholder or individual.

(l) *Psychiatric hospital.* A type of mental hospital where patients may receive intensive treatment and where only a minimum of continued treatment facilities will be afforded.

(m) *Tuberculosis hospital.* A hospital for the diagnosis and treatment of tuberculosis excluding preventoria.

(n) *Hospital bed.* A bed for an adult or child patient. Bassinets for the newborn in a nursery, beds in labor rooms and in health centers, and other beds used exclusively for emergency purposes are not included in this definition.

(o) *Population.* In computing the population of the State or any area thereof for purposes of the regulations in this part, the State agency shall use the latest figures of civilian population certified by the Federal Department of Commerce with such adjustments as may be necessary to reflect changing local conditions. Such adjustments shall not result in any increase in the total population of the State over the figures certified by the Department of Commerce.

(p) *Public health center.* A publicly owned facility utilized by a local health unit for the provision of public health services, including related facilities such as laboratories, clinics, and administrative offices operated in connection with public health centers.

(q) *Local health unit.* A single county, city, county-city, or local district health unit, as well as a State health district unit where the primary function of the State district unit is the direct provision of public health services to the population under its jurisdiction.

(r) *Public health services.* Services provided through organized community effort in the endeavor to prevent disease, prolong life, and maintain a high degree of physical and mental efficiency. In addition to the services which the community already provides as a matter of practice, the term shall include such additional services as the community from time to time may deem it desirable to provide.

(s) *Diagnostic or treatment center.* A facility providing community service for the diagnosis or diagnosis and treatment of ambulatory patients, which is operated in connection with a hospital, or in which patient care is under the professional supervision of persons licensed to practice medicine or surgery in the State, or, in the case of dental diagnosis or treatment, under the professional supervision of persons licensed to practice dentistry in the State. This includes outpatient departments and clinics of public or nonprofit hospitals. The applicant must be either (1) a State, political subdivision, or public agency, or (2) a corporation or an association which owns and operates a nonprofit hospital.

(t) *Rehabilitation facility.* (1) A facility providing community service which is operated for the primary purpose of assisting in the rehabilitation of disabled persons through an integrated program of medical, psychological, social, and vocational evaluation and services under competent professional supervision. The major portion of such evaluation and services must be furnished within the facility; and the facility must be operated either in connection with a hospital or as a facility in which all medical and related health services are prescribed by, or are under the general direction of, persons licensed to practice medicine or surgery in the State.

(2) An integrated program brings together as a team specialized personnel from the medical, psychological, social, and vocational areas for the purpose of pooling information, interpretations and opinions for the development of a rehabilitation plan of services in which the disabled individual is viewed as a whole. When members of the team contribute to the diagnosis and treatment of illness, their contributions must be coordinated under medical responsibility. These integrated services may be provided in a facility to care for many types of disabilities or a single type of disability.

(3) A disabled person is an individual who has a physical or mental condition which, to a material degree, limits, contributes to limiting, or if not corrected, will probably result in limiting, the individual's performance or activities to the extent of constituting a substantial physical, mental, or vocational handicap.

(u) *Nursing home.* A facility which is operated in connection with a hospital, or in which nursing care and medical services are prescribed by or performed under the general direction of persons licensed to practice medicine or surgery in the State, for the accommodation of convalescents or other persons who are not acutely ill and not in need of hospital care, but who do require skilled nursing care and related medical services. The term "nursing home" shall be restricted to those facilities, the purpose of which is to provide skilled nursing care and related medical services for a period of not less than 24 hours per day to individuals admitted because of illness, disease, or physical or mental infirmity and which provide a community service.

(v) *Community service.* A facility renders a community service when the services provided in the facility are available to the general public in accordance with these regulations.

(w) *State.* The 48 States, Alaska, Hawaii, Puerto Rico, Virgin Islands, and the District of Columbia.

(x) *State agency.* As the context may require, the State agency designated by the State pursuant to sections 612 (a) (1), 623 (a) (1), 647 (a) (1), or 653 (a) (1), of the Federal act.

(y) *Surgeon General.* The Surgeon General of the Public Health Service.

(z) *Federal Act.* Title VI of the Public Health Service Act, as amended.

(aa) *Secretary.* The Secretary of Health, Education, and Welfare.

(Sec. 631, 60 Stat. 1046, as amended, sec. 654, 68 Stat. 463; 42 U. S. C. 2911, 291v)

SUBPART B—DISTRIBUTION OF GENERAL HOSPITAL BEDS

§ 53.11 *Plan of distribution.* It is the intention of the regulations in this part to provide for distribution of general hospital beds among the different areas of the State so as to provide comprehensive and adequate types of hospital services to all sizes of communities. In accordance with this intent the general methods by which general hospital beds shall be distributed among base areas, intermediate areas, and rural areas, shall be as provided for in §§ 53.12 to 53.14, inclusive.

§ 53.12 *State allowance.* (a) The number of general hospital beds required to provide adequate hospital services to the people residing in any State shall be:

(1) In States having 12 or more persons per square mile, 4.5 beds per thousand population;

(2) In States having less than 12 and more than 6 persons per square mile, 5 beds per thousand population; and

(3) In States having 6 persons or less per square mile, 5.5 beds per thousand population.

(b) If in any area (base, intermediate, or rural), as determined by the State Agency, there are, as of the date of initial approval of the State plan, more beds than required by these standards, such excess (but no increase in such excess after such date) may be eliminated in calculating the maximum allowance for the State as a whole.

§ 53.13 *Standards for construction program.* (a) The construction program under the State plan shall provide for general hospital beds, existing and proposed, in each area within the State in accordance with the following standards:

(1) In States having 12 or more persons per square mile, 2.5 beds per thousand population in rural areas, 4.0 beds per thousand in intermediate areas, and 4.5 beds per thousand in base areas;

(2) In States having less than 12 but more than 6 persons per square mile, 3 beds per thousand population in rural areas, 4.5 beds per thousand in intermediate areas, and 5 beds per thousand in base areas; and

(3) In States having 6 or less persons per square mile, 3.5 beds per thousand population in rural areas, 5.0 beds per thousand in intermediate areas, and 5.5 beds per thousand in base areas.

(b) In addition, the State agency shall subtract from the total number of beds permitted for each area under § 53.12 the total number of beds permitted for each area under paragraph (a) of this section or the number of beds in existence, whichever is greater. The total number of beds so determined for all areas may, in the discretion of the State agency and without regard to standards specified in § 53.12 and paragraph (a) of this section, be allocated to specific areas or held in reserve for subsequent allocation, or any combination of the two. Any allocation of beds under this paragraph shall be done in such a manner as to meet the special needs of the area or areas concerned, and to facilitate the coordination of hospital services. In allocating beds under this paragraph, the State agency shall give special consideration to hospitals serving persons in rural areas and and communities with relatively small financial resources.

§ 53.14 *Beds classified as general hospital beds.* The count of existing general hospital beds shall include the beds in the hospitals of this category as defined above, and also: (a) Beds in allied special hospitals, and (b) beds in any tuberculosis, mental or chronic disease hospital which are specifically assigned for the care of general patients, except where the beds so assigned in any institution number less than ten. Beds for persons hospitalized for the primary condition of tuberculosis, mental, or chronic disease shall be excluded.

SUBPART C—DISTRIBUTION OF TUBERCULOSIS, MENTAL, AND CHRONIC DISEASE HOSPITAL BEDS

§ 53.21 *State allowance.* (a) The number of beds required to provide adequate hospital services for tuberculosis patients, mental patients, and chronic disease patients in any State shall be:

(1) For tuberculosis patients, 1.5 times the average number of active and probably active new cases of tuberculosis found annually during the latest two-year period for which data are available, as certified by the State Health Department, provided that the total number of beds so determined shall not exceed 2.5 times the annual deaths from tuberculosis in the State over the five-year period from 1940 to 1944. As used in this paragraph, the term "probably active" means the probable clinical status of the disease when activity has not been determined from adequate roentgenologic and laboratory examinations;

(2) For mental patients, 5 per thousand population;

(3) For chronic disease patients, 2 per thousand population except as provided in § 53.61.

(b) The count of existing tuberculosis, mental, and chronic disease hospital beds shall include the beds in the hospitals of those respective categories, as defined in this section, and also beds in any general hospital which are specifically assigned for the care of tuberculosis, mental, and chronic disease patients respectivley, except where the beds so assigned in any institution number less than 10 in any category.

§ 53.22 *Distribution.* (a) Whenever practicable, tuberculosis hospitals receiving grants under the Federal Act shall be built in centers of population and in proximity to general hospitals.

(b) Whenever practicable, mental hospitals receiving grants under the Federal Act shall be located in centers of population and in proximity to general hospitals.

(c) Whenever practicable, chronic disease hospitals shall be built in centers of population and in proximity to general hospitals.

SUBPART D—DISTRIBUTION OF PUBLIC HEALTH CENTERS

§ 53.31 *State allowance.* The number of public health centers in a State (counting those existing as well as those proposed) shall not exceed one per 30,000 State population, except in States having less than 12 persons per square mile the number shall not exceed one per 20,000 population. The following shall be excluded from the count of public health centers:

(a) Existing facilities which the State agency, after consultation with the State health authority, has determined to be unsuitable for use as public health centers, and

(b) Auxiliary facilities such as laboratories and clinics, whether existing or proposed, and whether they are located within the same structure as the health department office or in a separate structure.

§ 53.32 *Distribution.* The general method of distribution of public health centers throughout the State shall conform to the plan of organization of local health units within the State. In instances where the State Health Department is not the State agency designated under section 623 (a) (1) of the Federal Act, the method of distribution shall be determined after consultation with the State health authority.

SUBPART E—DISTRIBUTION OF DIAGNOSTIC OR TREATMENT CENTERS

§ 53.41 *State allowance.* Diagnostic or treatment centers shall be planned in sufficient number to make at least the basic minimum services readily available to all persons in the State, provided that the total number of diagnostic or treatment centers in the State (counting those existing as well as those proposed) shall not exceed one per 10,000 State population. The basic minimum services are clinical laboratory and diagnostic X-ray. The count of existing diagnostic or treatment centers shall exclude:

(a) Offices of private physicians and dentists, whether for individual or group practice;

(b) Industrial clinics for employees only, first aid clinics, and similar facilities not furnishing a community service;

(c) Any diagnostic or treatment center which the State agency determines to be unsuitable in accordance with the objective criteria contained in the State plan. A diagnostic or treatment center shall in any event be regarded as unsuitable if it constitutes a public hazard.

§ 53.42 *Distribution.* (a) In determining the need for additional diagnostic or treatment services in a community as a basis for distribution of diagnostic or treatment centers, consideration shall be given to any such services provided by private physicians and dentists.

(b) Whenever practicable, diagnostic or treatment centers shall be coordinated with existing or proposed hospitals.

SUBPART F—DISTRIBUTION OF REHABILITATION FACILITIES

§ 53.51 *State allowance.* (a) Rehabilitation facilities shall be planned by each State so that all persons in the State shall have access to integrated rehabilitation services for all types of disabilities. The facility or facilities may be programmed in the State or by joint planning with one or more other States to service the residents of such States. In a State with more than 300,000 population the number of integrated service units existing and proposed for each disability, whether in multiple disability type facilities or in a single disability type facility shall not exceed one for the first 300,000 population and one for the major fraction of each unit of 300,000 population in excess thereof, and in a State with less than 300,000 population no more than one such integrated service unit may be planned for each type of disability, whether in multiple type disability facilities or in a single type disability facility. Within such limitations, a State may expand existing facilities to provide for a greater volume or greater variety of services.

(b) Existing facilities which the State agency has determined to be unsuitable in accordance with the objective criteria contained in the State plan shall be excluded from the count of rehabilitation facilities. A rehabilitation facility shall in any event be regarded as unsuitable if it constitutes a public hazard. Only those existing facilities that meet the definition of § 53.1 (t) will be charged against the State allowance.

§ 53.52 *Distribution.* (a) In determining the need for additional rehabilitation services as a basis for distribution of rehabilitation facilities, consideration shall be given to rehabilitation services provided in existing facilities regardless of whether such facilities are rehabilitation facilities as defined in § 53.1 (t).

(b) Whenever practicable rehabilitation facilities shall be constructed in centers of population and in close proximity to medical centers.

SUBPART G—DISTRIBUTION OF NURSING HOME BEDS

§ 53.61 *State allowance.* (a) The number of nursing home beds existing and proposed in a State shall be no less than 1 per thousand of the State's population and shall not, except as herein provided, exceed 3 beds per thousand. The State may, however, plan in excess of 3 nursing home beds per thousand but not to exceed 4 beds per thousand population in which case the State's allowance for chronic disease hospital beds shall be reduced so that the total number of nursing home beds and chronic disease beds existing and proposed shall not exceed 5 beds per thousand of the population.

(b) Beds in existing facilities which the State agency determines to be unsuitable in accordance with the objective criteria contained in the State plan shall be excluded from the count of nursing home beds. In any event beds in existing facilities which the State agency has determined to be a public hazard shall be excluded from the count of nursing home beds.

SUBPART H—PRIORITY OF PROJECTS

§ 53.71 *Manner of determination.* (a) The general manner in which the State agency shall determine the priority of projects included in the State construction program shall conform with the principles set out in this subpart.

(b) In determining the relative priority of projects, special consideration shall be given to those projects providing services to persons located in rural communities and communities with relatively small financial resources.

§ 53.72 *Balance among categories of hospital facilities.* Insofar as practicable, the State agency shall develop the construction program under Part C in relation to the proportionate need for each of the five categories of hospital facilities (general, mental, tuberculosis, chronic, and health centers). In determining proportionate needs, consideration shall be given to existing hospital facilities and those under construction without assistance under the Federal Act.

§ 53.73 *All categories of facilities; additional facilities as against replacements.* Initial installations and additions to existing facilities shall be given priorty over replacements, except:

(a) Where replacement is of minor character and necessary to the provision of needed additional facilities;

(b) Where replacement is essential to eliminate an existing needed facility which constitutes a public hazard.

§ 53.74 *General hospital.* The priority of these projects shall be determined after consideration of the following factors in the order of importance as given:

(a) The relative need for beds in the area (base, intermediate, or rural) in which the project will be located, taking into account the utilization of existing general hospital beds in the area;

(b) The extent to which beds will be made available for groups of the population which for any reason are less adequately served than other groups of the population.

§ 53.75 *Chronic disease hospital.* The priority of these projects shall be determined on the basis of the following factors in the order of importance as given:

(a) Relative need for additional chronic disease beds in the community or communities to be served by the project taking into account existing beds and giving special consideration to projects in which the chronic disease facilities will be operated as subunits of general hospitals;

(b) The extent to which beds will be made available to groups of the population which for any reason are less adequately served than other groups of the population.

§ 53.76 *Public health centers.* Highest priority in this category shall be given to the provision of facilities for local health units serving rural communities and communities with relatively small financial resources. Where the agency designated to administer the State plan is not the State health authority, the State agency shall determine the relative priorities to be established after consultation with the State health authority.

§ 53.77 *Diagnostic or treatment centers.* The priority of diagnostic or treatment center projects shall be determined after consideration of the following factors in the order of importance as given:

(a) The relative need for additional diagnostic or treatment services in the community or communities to be served by the project taking into account existing available services;

(b) The extent to which diagnostic and treatment services will be made available to groups of the population which for any reason are less adequately served than other groups of the population.

§ 53.78 *Rehabilitation facilities.* The priority of rehabilitation facility projects shall be determined after consideration of the following factors in the order of importance as given:

(a) Relative need for additional rehabilitation services in the community or communities to be served by the project taking into account existing rehabilitation services and giving special consideration to:

(1) Projects located in medical centers, medical schools or universities with medical schools or medical centers; and

(2) Projects providing a multiple disability service as distinguished from those providing a single disability service;

(b) The extent to which rehabilitation services will be made available to groups of the population which for any reason are less adequately served than other groups of the population.

§ 53.79 *Nursing homes.* (a) The priority of nursing home projects shall be determined after consideration of the following factors in the order of importance as given:

(1) Relative need for additional nursing home beds in the community or communities to be served by the project taking into account the utilization of existing suitable beds;

(2) The extent to which beds will be made available to groups of the population which for any reason are less adequately served than other groups of the population.

(b) Special consideration shall be given to nursing home projects operated by hospitals.

§ 53.80 *Size and character.* Insofar as practicable and without affecting the priority of facilities serving rural communities and areas with relatively small financial resources, special consideration shall be given to applications for construction of projects of a size and character consistent with efficient and economical operation.

§ 53.81 *Split projects.* Special consideration may be given to projects which are parts of facilities with respect to other parts of which applications have been approved prior to July 1, 1952.

SUBPART I—FLEXIBILITY OF ALLOTMENTS AND TRANSFER OF STATE ALLOTMENTS

§ 53.91 *Flexibility of allotments.* At any time subsequent to 30 days after January 12, 1955 and, thereafter, 30 days after the allotments are made for any fiscal year under Part G, a State may submit a request in writing to the Surgeon General that its allotment or a specified portion thereof for diagnostic or treatment centers, for chronic disease hospitals, or for nursing homes, be added to the allotment for one or both of the other categories. If such request is accompanied by a certification by the State agency (a) that it has afforded a reasonable opportunity to prospective project applicants to make applications for the utilization of funds in the specific category for which such funds were originally allotted and (b) that there have been no approvable applications for the funds sought to be transferred to the other category or categories, the Surgeon General will adjust the allotments in accordance with such request and notify the State agency.

(Sec. 654, 68 Stat. 463; 42 U. S. C. 291v)

§ 53.92 *Transfer of State allotments.* A State may submit a request in writing to the Surgeon General that its allotment or a specified portion thereof under Part G of the Federal Act for any type of facility be added to the corresponding allotment of another State for the purpose of meeting a portion of the Federal share of the cost of a project for the construction of a facility of that type in such other State. Upon a finding by the Surgeon General in the case of a hospital for the chronically ill and impaired, diagnostic or treatment center, or nursing home, or upon a finding by the Surgeon General and the Secretary in the case of a rehabilitation facility, (a) that construction of that facility with respect to which the request is made will meet needs of the State making the request, and (b) that use of the specified portion of such State's allotment, as requested by the State, will assist in carrying out the purposes of Part G of the Federal Act, then the requested portion of the allotment will be transferred and added to the corresponding allotment of the other State to be used for the purpose of paying part of the Federal share of the cost of constructing the facility with respect to which the request is made.

(Sec. 654, 68 Stat. 463; 42 U. S. C. 291v)

SUBPART J—GENERAL STANDARDS OF CONSTRUCTION AND EQUIPMENT

§ 53.101 *General.* (a) Plans and specifications for each project submitted to the Surgeon General for approval, and in the case of rehabilitation facilities, the approval of the Secretary, under the Federal Act shall be prepared in accordance with "General Standards of Construction and Equipment" for facilities of different classes and in different types of locations as prescribed by the

Surgeon General set forth in Subpart M of this part. The Surgeon General may approve, subject also in the case of rehabilitation facilities to the approval of the Secretary, plans and specifications which contain deviations from the requirements prescribed, if he is satisfied that the purposes of such requirements have been fulfilled.

(b) The design and construction covered by the plans and specifications must conform with the applicable State and local laws, codes, and ordinances and with the approved State plan. The plans and specifications must be complete and adequate for contract purposes and have the approval and recommendation of the State agency.

(c) Equipment shall be provided in the kind and to the extent necessary for the proper functioning of the facility as planned.

§ 53.102 *Size of mental and psychiatric hospitals.* No application for construction of a psychiatric hospital with a capacity of more than 500 beds or of a mental hospital with a capacity of more than 3,000 beds shall be approved. This requirement shall not be construed to prevent approval of applications for improvements of psychiatric and mental hospitals with bed capacities equal to or greater than those specified above, if such improvements are designed to provide more intensive treatment facilities within such hospitals.

§ 53.103 *Size of tuberculosis hospitals.* No application for construction of a tuberculosis hospital with a capacity of less than 100 beds shall be approved, except that an application for construction of a tuberculosis hospital with a capacity from 50 to 100 beds may be approved where necessary (a) to provide facilities for an isolated area too small to support a larger hospital, or (b) to expand, remodel, or alter existing hospital facilities.

§ 53.104 *Size of nursing homes.* No application shall be approved for construction of a nursing home, not an addition to a hospital, with a capacity of less than 10 beds.

SUBPART K—NONDISCRIMINATION AND SERVICES FOR PERSONS UNABLE TO PAY THEREFOR

§ 53.111 *General.* The State plan shall provide for adequate hospital, diagnostic or treatment center, rehabilitation facility, and nursing home service for the people residing in a State without discrimination on account of race, creed, or color, and shall provide for adequate facilities of these types for persons unable to pay therefor.

§ 53.112 *Nondiscrimination.* Before a construction application is recommended by a State agency for approval, the State agency shall obtain assurance from the applicant that the facilities to be built with aid under the Act will be made available without discrimination on account of race, creed, or color, to all persons residing in the area to be served by that facility. However, in any area where separate hospital, diagnostic or treatment center, rehabilitation or nursing home facilities, are provided for separate population groups, the State agency may waive the requirement of assurance from the construction applicant if (a) it finds that the plan otherwise makes equitable provision on the basis of need for facilities and services of like quality for each such population group in the area, and (b) such finding is subsequently approved by the Surgeon General. Facilities provided under the Federal Act will be considered as making equitable provision for separate population groups when the facilities to be built for the group less well provided for heretofore are equal to the proportion of such group in the total population of the area, except that the State plan shall not program facilities for a separate population group for construction beyond the level of adequacy for such group.

§ 53.113 *Hospital, diagnostic or treatment center, rehabilitation facility, and nursing home service for persons unable to pay therefor.* Before a construction application is recommended by a State agency for approval, the State agency shall obtain assurance that the applicant will furnish a reasonable volume of free patient care. As used in this section, "free patient care" means hospital, diagnostic or treatment center, rehabilitation facility, or nursing home service offered below cost or free to persons unable to pay therefor, including under "persons unable to pay therefor", both the legally indigent and persons who are otherwise self-supporting but are unable to pay the full cost of needed care. Such care may be paid for wholly or partly out of public funds or contributions of individuals and private and charitable organizations such as community chests or may be contributed at the expense of the hospital itself. In determining what constitutes a reasonable volume of free patient care, there shall be considered conditions in the area to be served by the applicant, including the amount of free care that may be available otherwise than through the applicant. The requirement of assurance from the applicant may be waived if the applicant demonstrates to the satisfaction of the State agency, subject to subsequent approval by the Surgeon General, that furnishing such free patient care is not feasible financially.

SUBPART L—METHODS OF ADMINISTRATION OF THE STATE PLAN

§ 53.121 *General.* The State plan shall provide for general methods of administration which are in accord with the principles set out in §§ 53.122 to 53.128.

§ 53.122 *Construction program.* The State hospital, diagnostic or treatment center, rehabilitation facility, and nursing home construction program shall be developed in the following manner:

(a) The State agency shall determine need for hospital facilities of all types, health center facilities, diagnostic or treatment centers, rehabilitation facilities, and nursing homes by applying the ratios heretofore specified and deducting existing facilities, except those justifying replacement under priority regulations.

(b) The State agency shall determine through field investigation, and otherwise, the approximate locations within each area at which needed hospital beds or health centers should most appropriately be built and the approximate locations at which needed diagnostic or treatment centers, rehabilitation facilities and nursing homes should be constructed.

(c) After having determined hospital, public health center, diagnostic or treatment center, rehabilitation facility, and nursing home needs, the State agency shall establish an over-all construction program. This program shall set forth all such needs in accordance with the standards specified in §§ 53.12, 53.21, 53.31, 53.41, 53.51, and 53.61 and shall show the relative need for each project included, irrespective of the availability of funds for construction and for maintenance and operation.

(d) The State agency shall from time to time as necessary, but at least annually, review the over-all hospital, public health center, diagnostic or treatment center, rehabilitation facility, and nursing home construction program. Annually, at a time fixed by the Surgeon General, the agency shall submit to him a report, which shall contain such revisions of the construction program, as the agency considers necessary.

(e) The State agency shall establish a separate construction schedule on such forms and for such periods as the Surgeon General may prescribe. Insofar as funds are available for construction and for maintenance and operation, construction shall be scheduled in the order of relative need.

(Sec. 623, 60 Stat. 1043, as amended; 42 U. S. C. 291f)

§ 53.123 *Personnel administration.* A system of personnel administration on a merit basis shall be established and maintained with respect to the personnel employed in the administration of the State plan. Such a system shall include provision for:

(a) Impartial administration of the merit system;

(b) Operation on the basis of published rules or regulations;

(c) Classification of all positions on the basis of duties and responsibilities and establishment of qualifications necessary for the satisfactory performance of such duties and responsibilities;

(d) Establishment of compensation schedules adjusted to the responsibility and difficulty of the work;

(e) Selection of permanent appointees on the basis of examinations so constructed as to provide a genuine test of qualifications and so conducted as to afford all qualified applicants opportunity to compete;

(f) Advancement on the basis of capacity and meritorious service; and

(g) Tenure of permanent employees. Substantial compliance with the merit system policies of the Public Health Service as set forth in Subpart N of this part will be deemed to meet the requirements of the regulations in this part.

(Sec. 623, 60 Stat. 1043, as amended; 42 U. S. C. 291f)

§ 53.124 *Fair hearings.* The State agency shall establish such rules and regulations as will provide an opportunity for an appeal to and a fair hearing before the State agency to every applicant for a construction project who is dissatisfied with any action of the State agency regarding its application.

(Sec. 623, 60 Stat. 1043, as amended; 42 U. S. C. 291f)

§ 53.125 *Construction standards.* The State agency shall adopt general standards of construction and equipment for the various types of hospitals, public health centers, diagnostic or treatment centers, rehabilitation facilities, and nursing homes assisted under this program. The standards adopted shall not be less than the general standards prescribed by the Surgeon General and set forth in Subpart M of this part.

§ 53.126 *Publicizing the State plan.* (a) Prior to the submission of the State plan and its annual revision to the Surgeon General, the State agency shall publish a general description of the provisions proposed to be included in the State plan and shall give reasonable notice of a public hearing at which all interested persons or organizations will be given an opportunity to be heard.

(b) After the Surgeon General has approved the State plan and its annual revisions the State agency shall publish a general description of its provisions in newspapers having general circulation throughout the State and shall make the approved State plan available for examination, upon request, to all interested persons or organizations.

(c) The provisions of this section shall also apply to any revisions of or supplements to the State plan pursuant to Part G of the Federal Act.

§ 53.127 *Processing construction applications.* (a) *Form of application.* Construction applications, including a detailed estimate of the cost of the project, shall be submitted to the Surgeon General through the State agency and shall be executed on forms prescribed by the Surgeon General.

(b) *Order of processing applications.* The State agency shall process applications received in the order of priority, except that the State agency may approve, recommend and forward to the Surgeon General applications out of the order of priority if:

(1) The State agency has afforded reasonable opportunity for development and presentation of projects in the order of priority, and

(2) If the State agency certifies to the Surgeon General that financial resources for the construction, maintenance and operation of projects of higher priority are not then available.

The priority of a project under the State plan shall not be affected by the fact that other projects of lower priority have previously been approved and recommended by the State agency.

(c) *Assurances from applicant.* In addition to assurance otherwise required by the State agency, before approving an application, the State agency must have assurance from the applicant:

(1) That actual construction work will be performed by the lump sum (fixed price) contract method, that adequate methods of obtaining competitive bidding will be or have been employed prior to awarding the construction contract, either by public advertising or circularizing three or more bidders, and that the award of the contract will be or has been made to the responsible bidder submitting the lowest acceptable bid: *Provided, however,* That the purchase and installation of equipment which is unique to a hospital, diagnostic or treatment center, rehabilitation facility, or nursing home, as well as kitchen, laundry, laboratory, and pharmacy equipment, need not be considered construction work for the purpose of this section, except that if open competitive bidding is employed to obtain any or all of these items, the award shall be made to the responsible bidder submitting the lowest acceptable bid.

(2) That section 2, Labor Standards (PHS Form 144 as revised) will be included in all construction contracts in excess of $2,000. That construction contracts in excess of $2,000 will prescribe the minimum rates of pay for laborers and mechanics engaged in the construction of the project as determined by the Secretary of Labor in accordance with the Davis-Bacon Act, 49 Stat. 1011, as amended, and the regulations issued pursuant thereto by the Secretary of Labor;

(3) That all construction contracts regardless of amount will include paragraph 8, Section 2, Labor Standards (PHS Form 144 as revised), relating to kickbacks;

(4) That the project will not be advertised or placed on the market for bidding until the final working drawings and specifications have been approved by the Surgeon General and the applicant has been so notified;

(5) That no construction contract or contracts for the project or a part thereof, the cost of which is in excess of the estimated cost approved in the application for that portion of the work covered by the plans and specifications, will be entered into without the prior approval of the Surgeon General;

(6) That the construction contract will require the contractor to furnish performance and payment bonds, the amount of which shall each be in an amount not less than fifty per centum (50%) of the contract price, and to maintain during the life of the contract adequate fire, workmen's compensation, public liability and property damage insurance;

(7) That any change or changes in the contract which (i) makes any major alteration in the work required by the plans and specifications, or (ii) raises the total contract price over the approved estimate of cost of the work covered by the plans and specifications will be submitted to the Surgeon General for prior approval;

(8) That the construction contract will provide that the Surgeon General, the State agency and their representatives will have access at all times to the work wherever it is in preparation or progress and that the contractor will provide proper facilities for such access and inspection;

(9) That the applicant will provide and maintain competent and adequate architectural or engineering supervision and inspection at the project to insure that the completed work conforms with the approved plans and specifications; and

(10) That a hospital, when completed, will be operated and maintained in accordance with minimum standards prescribed by the State agency for the maintenance and operation of hospitals aided under the Federal Act; that a diagnostic or treatment center, rehabilitation facility, or nursing home, when completed, will be operated and maintained in accordance with standards of maintenance and operation, if any, as prescribed by the State for such facilities.

Provided, That except with respect to subparagraph (1) of this paragraph, the State agency, subject to the approval of the Surgeon General, may approve modifications of the assurances required under this paragraph or waive technical compliance with any of the requirements of such assurances, if it finds that the purpose of such assurances and requirements is fulfilled.

(d) *Certification to the Surgeon General.* After the State agency has approved a construction application, it shall recommend it to the Surgeon General for approval and shall certify:

(1) That the application contains reasonable assurance as to title, payment of prevailing rates of wages, and financial support for the non-Federal share of the cost of construction and the entire cost of maintenance and operation when completed;

(i) Availability of funds for the non-Federal share of construction costs shall mean (*a*) funds immediately available, placed in escrow, or acceptably pledged, or (*b*) funds or fund sources specifically earmarked in a sum sufficient for that purpose or (*c*) other assurances acceptable to the Surgeon General.

(ii) To assure the availability of funds for maintenance and operation, the application for the construction of a new project must include a proposed operating budget, on a form prescribed by the Surgeon General, for the two year period immediately following its completion. In the case of an addition to an existing facility, the application must include a statement showing that funds are or will be available to meet the difference between proposed expenditures and anticipated income from the operation of the constructed addition for the two year period immediately following its completion.

(2) That the plans and specifications are in accord with Subpart M of this part;

(3) That the application is in conformity with the State plan approved by the Surgeon General and contains an assurance that the applicant will conform to the applicable requirements of the plan;

(4) That the application contains an assurance that the applicant will conform to the requirements of §§ 53.111,

53.112, and 53.113 regarding the provision of facilities without discrimination on account of race, creed, or color, and for furnishing needed hospital facilities for persons unable to pay therefor;

(5) That the application contains an assurance that the applicant will conform to State standards for operation and maintenance and to all applicable State laws and State and local codes, regulations, and ordinances;

(6) That the application is entitled to priority over other projects within the State and that in making this determination the State agency has complied with paragraph (b) of this section; and

(7) That the State agency has approved the application.

(c) *Amendments to application.* An amendment to any application approved by the Surgeon General shall be processed in the same manner as an original application, except that the original application's conformity with priority regulations shall suffice for the amendment. Minor changes not provided for under paragraph (c) (7) of this section are not considered amendments.

(Sec. 625, 60 Stat. 1045, as amended, sec. 654, 68 Stat. 463; 42 U. S. C. 291h, 291v)

§ 53.128 *Requests for construction payments*—(a) *Certification by State agency.* The State agency shall certify to the Surgeon General the amount of payments due to an applicant for the cost of work performed and materials and equipment furnished.

(1) Requests for payment under the construction contract shall be submitted in each of three stages, as follows:

(i) The first installment when not less than 25 percent of the work of construction of the building has been completed,

(ii) The second installment when the mechanical work has been substantially roughed in, and

(iii) The third installment when work under the construction contract is completed and final inspection made.

(2) Requests for payment of the Federal share of other allowable costs such as architect's fee, inspection cost, and cost of equipment shall be included in requests for payments made at one or more of the stages indicated in this paragraph.

(3) All costs that have been determined at the time the third payment for work performed under the construction contract is requested shall form the basis of a request for final payment of the Federal share of the entire project.

(4) With the consent of the Surgeon General, the State agency may adopt a different schedule of payments, but in no case shall such payments be less frequent than those scheduled in this paragraph.

(b) *Inspection by State agency.* As a basis for certification by the State agency that payment of an installment is due an applicant, the State agency, without expense to the Federal Government, shall make adequate inspections to determine that the work has been performed upon a project, or purchases have been made, in accordance with the approved plans and specifications.

(Sec. 625, 60 Stat. 1045, as amended, sec. 654, 68 Stat. 463; 42 U. S. C. 291h, 291v)

§ 53.129 *Fiscal and accounting requirements*—(a) *Construction allotments.* (1) The State agency shall be responsible for establishing and maintaining accounts and fiscal controls of all Federal and State funds allotted for construction projects. Federal and State funds shall be separately identified by maintaining separate fund accounts for this purpose.

(2) The fiscal records shall be so designed as to show at any given time the Federal funds allotted, encumbered, and unencumbered balances. If State contributions are made for construction, separate accounts, reflecting similar information, shall be maintained for State funds.

(b) *Construction payments.* (1) Where the State may receive Federal funds for applicants for construction project grants, or the State itself is an applicant, adequate records of account and fiscal controls shall be established and maintained by the State to assure proper accounting of all funds received and disbursed. Similar suitable accounts shall be maintained to show the receipt and disbursement of State, local or other funds used for matching purposes.

(2) The State agency shall require that applicants receiving Federal funds establish and maintain adequate accounting and fiscal records to reflect the receipt and expenditure of funds allotted and paid for construction projects.

(3) The States which by law are authorized to make payments to applicants shall promptly pay such applicants funds certified for payment by the Surgeon General for approved construction projects.

SUBPART M—APPENDIX A; GENERAL STANDARDS OF CONSTRUCTION AND EQUIPMENT

§ 53.131 *Introduction.*

The standards set forth in this subpart have been established by the Surgeon General of The U. S. Public Health Service as required by Title VI of the Public Health Service Act. These standards constitute minimum requirements for construction and equipment and shall apply to all projects for which Federal assistance is requested under the act. They are considered necessary to insure properly planned and well constructed hospitals and public health centers which can be maintained and efficiently operated to furnish adequate services.

Throughout these General Standards reference is made to certain sizes of hospitals such as, "up to and including 100 beds", "over 100 beds", etc. These references are not meant to be applied strictly. They indicate the approximate sizes at which certain changes in requirements will occur.

It should be particularly noted that the small hospital of 50 beds or under presents a special problem. The size of the various departments will be generally smaller and will depend upon the requirements of the particular hospital. Some of the functions allotted separate spaces or rooms in these General Standards may be combined provided that the resulting plan will not compromise the best standards of medical and nursing practice. In other respects the General Standards set forth herein, including the area requirements, will apply.

In the case of types of hospitals not specifically treated herein the Standards for General Hospitals will apply. Due allowance will be made for the specialized or unusual requirements of the particular hospital involved.

Since these are minimum requirements it is desirable only that they form a basis for development of higher standards. In the interest of promoting the development of higher standards it is the intention of the Public Health Service to make suggestions and disseminate the latest information as to current good practice in planning and design of health facilities. This information will be distributed from time to time to State agencies and other interested persons.

No attempt has been made in establishing these standards to comply with all of the various State and local codes and regulations. However, strict compliance with all applicable State and local codes and regulations is required. Likewise, compliance is required with minimum standards of construction and equipment promulgated by the State Agency where such requirements provide a higher standard than these Federal requirements.

§ 53.132 *Site survey and soil investigation.*

1. The aplicant shall provide for a survey and soil investigation of the site and furnish a plat of the site. The purpose of this survey and soil investigation is to obtain all information necessary for the design of the building foundations and mechanical service connections and development of the site. It is suggested that this matter be deferred until the Architect has been selected in order that he may co-operate with the Engineer who obtains the data.

2. If any existing structures or improvements on the site are to be removed by the owners or others, the buildings or improvements must be so designated on the plat.

3. Any discrepancies between the Survey and the recorded legal description shall be reconciled or explained.

4. The plat shall indicate:

(a) The courses and distances of property lines.

(b) Dimensions and location of any buildings, structures, easements, rights-of-way or encroachments on the site.

(c) Details of party walls, or walls and foundations adjacent to the lot lines.

(d) The position, dimensions and elevations of all cellars, excavations, wells, backfilled areas, etc., and the elevation of any water therein.

(e) All trees which may be affected by the building operations.

(f) Detailed information relative to established curb and building lines and street, alley, sidewalk and curb grades at or adjacent to the site and the materials of which they are constructed.

(g) All utility services and the size, characteristics, etc., of these services.

(h) The location of all piping, mains, sewers, poles, wires, hydrants, manholes, etc., upon, over or under the site or adjacent to the site if within the limits of the survey.

(i) Complete information as to the disposal of sanitary, storm water and subsoil drainage and suitability of subsoil for rainwater or sanitary disposal purposes if dry wells are used.

(j) Official datum upon which elevations are based and a bench mark established on or adjacent to the site.

(k) Elevations on a grid system of not less than 20-foot intervals to indicate changes of slope, etc., over that portion of the site to be developed.

(l) Elevations of contours, bottoms of excavations, etc.

(m) Contemplated date and description of any proposed improvements to approaches or utilities adjacent to the site.

5. The plat shall bear a certification by the City Engineer or other qualified official, that the true street lines and the officially established grades of curbs, sidewalks and sewers are correctly given.

6. Adequate investigation shall be made to determine the sub-soil conditions. The in-

vestigations shall include a sufficient number of test pits or test borings as will determine, in the judgment of the Architect, the true conditions.

7. Samples of strata of soil or rock taken in each pit or boring shall be retained in suitable containers. Each sample container shall be identified as to the boring and elevations at which taken and the labels initialed by the Engineer making the soil investigation.

8. The following information shall be noted on the plat:

(a) Thickness, consistency, character, and estimated safe bearing value of the various strata encountered in each pit or boring.

(b) Amount and elevation of ground water encountered in each pit or boring, its probable variation with the seasons and effect on the subsoil.

(c) The elevation of rock, if known and the probability of encountering quicksand.

(d) Average depth of frost effect below surface of ground.

(e) High and low water levels of nearby bodies of water affecting the ground water level.

(f) The probability of freshets overrunning the site.

(g) Whether the soil contains alkali in sufficient quantities to affect concrete foundations.

(h) The elevation and location of the top of workings relative to the site, if the site is underlaid with mines, or old workings are located in the vicinity.

(i) Whether the site is subject to mineral rights which have not been developed.

GENERAL DESIGN AND CONSTRUCTION STANDARDS

§ 53.133 *Site.*

The site of any hospital should be reasonably accessible to the center of community activities. Public transportation should be available within a reasonable distance, especially if an out-patient service is to be maintained.

Hospitals should be located in relation to the center of population, close to where patients live and where competent special medical and surgical consultation is readily available and where employees can be recruited and retained.

The site should not be near insect breeding areas, noise or other nuisance producing industrial developments; airports, railways or highways producing noise or air pollution, or near penal or other objectionable institutions or near a cemetery.

Adequate roads and walks shall be provided within the lot lines to the main entrance, ambulance entrance and service entrance.

The site for a public health center should be convenient to the center of community activities.

§ 53.134 *General hospital.*

Units required in the General Hospital:

Administration Department

Up to and including 100 beds:
- Business office with information counter.
- PBX Board and night information.[1]
- Administrator's office.
- Director of nurses' office.[1]
- Medical record room.
- Staff lounge.
- Lobby.
- Public toilets.

Over 100 beds:
- Business office.
- Information counter.
- PBX Board and night information.[1]
- Administrator's office.
- Director of nurses' office.
- Admitting office.
- Medical social service room.[1]
- Medical record room (should be easily available to O. P. D.)
- Staff lounge.
- Library, conference and board room.
- Lobby.
- Retiring room.[1]
- Public toilets.

Adjunct Diagnostic and Treatment Facilities

Except for the morgue and autopsy, this department preferably should be located convenient to both in- and out-patients.

Laboratory:
- Adequate facilities for chemical, bacteriological, serological, pathological and hematological services. Approximately 4½ sq. ft. per bed should be provided for this purpose.

Basal metabolism and electrocardiography:
- Up to and including 100 beds; No special provisions required. Can be done in bed rooms.
- Over 100 beds: One room near the laboratory.

Morgue and autopsy: [1] may not be required in hospitals under 50 beds if other facilities such as undertaker or coroner are available. Where provided: Combination morgue and autopsy with mortuary refrigerator.

Radiology: Each hospital to have at least 1 radiographic room with adjoining darkroom, toilet, and office. Hospitals of 150 beds and over should have at least 1 additional radiographic room. The radiology department should have ray protection as required.

Physical therapy: [1] In hospitals of 100 beds and over: Space should be provided for electrotherapy, hydrotherapy, massage, and exercise. Equipment to be furnished when competent technician is acquired.

Pharmacy:
- Up to and including 100 beds: Drug room with minimum facilities for compounding.
- Over 100 beds: Complete pharmacy and may include space for manufacturing and solution preparation depending on policy of hospital.

Nursing Department

General:
- No room should have more than 4 beds. Each room shall have a lavatory. Nursing units composed of multi-bed rooms shall have a quiet room. No patients' bed rooms shall be located on any floor which is below grade.

Approximately ⅓ of the hospital beds shall be in one-bed rooms, ⅓ in two-bed rooms, and ⅓ in four-bed rooms.[1]

Size of nursing unit: Not more than 35 beds.[1] Larger units permissible, if additional facilities are provided.

Minimum room areas: 80 sq. ft. per bed in two- and four-bed rooms. 100 minimum sq. ft. in one-bed rooms.

Service rooms in each nursing unit:
- Nurses' station.
- Utility room.
- Floor pantry (one per floor).
- Toilet facilities.
- Bedpan facilities.
- One bathroom.
- Stretcher alcove.[1]
- Linen and supply storage.
- Janitors' closet.

Isolation suite: One for each hospital unless contagious disease nursing unit is available in hospital.

Treatment room: [1] One for each two nursing units per floor.

Solarium: One for each nursing floor.[1]

Nurses' toilet room: One for each nursing floor.

In hospitals of 100 beds and over the maternity department shall be housed in a separate wing or floor.

Nursery Department

Full term nursery:
- Area required: Not less than 24 square feet per bassinet, 30 square feet recommended.
- Number of bassinets: No more than 12 bassinets in each full term nursery, 8 recommended.
- Examination and work room: One examination and work room between each two full term nurseries.

Premature nursery: Recommended in hospitals of 16 or more maternity beds and required in hospitals of 25 or more maternity beds.
- Area required: 30 square feet per bassinet.
- Number of bassinets: Not more than six in each premature nursery.
- Workroom: Each premature nursery to have own work areas.

Suspect nursery:
- Area required: 40 square feet per bassinet.
- Number of bassinets: Approximately 10% of full term bassinets. Not more than 6 bassinets in each suspect nursery.
- Workroom: One workroom for each two suspect nurseries.

Formula room: Location in obstetrical nursery area or near kitchen optional.

Surgical Department

(Shall be located to prevent traffic through it to any other part of the hospital)

Operating rooms:
- Major: One operating room for each 50 beds or major fraction thereof up to and including 200 beds. Above 200 beds the number of operating rooms will be based on the expected average of daily operations.
- Cystoscopy: One in each hospital over 100 beds highly desirable. Should have an adjoining toilet room. Location in hospital optional.
- Fracture room: [1] One in each hospital over 100 beds. Shall have an adjoining splint room. Location in hospital optional.

Auxiliary rooms:
- Sub-sterilizing facilities.
- Scrub-up facilities.
- Nurses' locker room with toilet.
- Janitors' closet.
- Instrument storage.
- Clean-up room.
- Anesthesia equipment storage.
- Surgical Supervisor station.
- Doctor's locker room with toilet.
- Storage closet.
- Stretcher alcove.[1]
- Storage room for sterile supplies beginning at 100 beds.
- Dark room beginning at 100 beds.[1]

Central sterilizing and supply room:
- Divided into work space, sterilizing space and sterile storage space.
- Adjacent room for storage of unsterile supplies.
- Location in hospital optional.

Obstetrics Department

(Shall be located to prevent traffic through it to any other part of the hospital. Shall be completely separated from Surgical Department)

Delivery rooms: One for each 20 maternity beds.

Labor beds: One for each 10 maternity beds.

Auxiliary rooms:
- Sub-sterilizing facilities.
- Scrub-up facilities.
- Clean-up room or utility room.
- Supervisors' station.
- Nurses' locker room with toilet starting at 50 beds.[1]
- Sterile storage closet.
- Stretcher alcove.[1]
- Janitors' closet.
- Doctors' locker room with toilet starting at 50 beds.

[1] Desirable but not mandatory.

Emergency Department

Accident room:
With separate ambulance entrance.[1]
Should be separated from operating suite and obstetrical suite.
Additional facilities will depend on amount of accident work expected.

Service Department

Dietary facilities:
Main kitchen and bakery.
Dietitian's office.
Dishwashing room.
Adequate refrigeration.
Garbage refrigerator.[1]
Can washing facilities.
Day storage room.
Personnel dining space.
Provide 12 square feet per person; may be designed for multiple seatings.
Cafeteria or table service optional.
Housekeeping facilities:
Laundry; unless commercial or other laundry facilities are available, each hospital shall have a laundry of sufficient capacity to process full 7 days' laundry in work week and contain the following areas:
Sorting area.
Processing area.
Clean linen and sewing room separate from laundry.
Sewing room may be included in clean linen room in hospitals up to and including 100 beds.
Where no laundry is provided in the hospital, a soiled linen room and a clean linen and sewing room shall be provided.
Housekeeper's office: May be combined with clean linen room in hospitals up to 100 beds.
Mechanical facilities:
Boiler and pump room.
Shower and locker facilities.[1]
Engineers' space.
Maintenance shops: In hospitals up to and including 100 beds at least one room shall be provided.[1] In larger hospitals separation of carpentry, painting and plumbing should be provided.
For minimum requirements for mechanical and electrical work see the respective sections.
Employees' facilities:
Nurses' locker room without nurses' residence:
Locker room: one locker for each two hospital beds.[1]
Rest room.
Toilet and shower room.
Nurses' locker room with nurses' residence adjacent:
Rest room.
Lockers as required.
Toilet room.
Female help lockers:
Locker room.
Rest room.
Toilet and shower room.
Male help lockers:
Locker room.
Toilet and shower room.
Ratio of male and female help will vary and size of locker rooms must be adjusted accordingly.
Storage:
Inactive record storage.
General storage: 20 square feet per bed and to be concentrated in one area insofar as possible. Mechanical maintenance storage may be in a separate area.

Out-Patient Department

(If survey indicated that the out-patient department is unnecessary it may be omitted)

General:
Out-patient department should be located on the most easily accessible floor. It should have convenient access to radiology, pharmacy, laboratory, and physical therapy.
The size will vary in different locations and is not necessarily proportional to the size of the hospital. The patient load must be estimated to determine the number of rooms required.
An out-patient department may be combined with the public health center clinics if the health center is a part of the hospital.
Administrative:
Waiting space with public toilets.
Appointment and cashiers' office.
Social service office.
Clinical:
History or screening room.
Examination and treatment rooms:
Eye, ear, nose, and throat room.[1]
Dental facilities (2 chairs desirable).[1]
Utility room.

Contagious Disease Nursing Unit[1]

Where 10 or more beds are contemplated for nursing contagious diseases, they should be housed in a separate contagious disease nursing unit.
Patient rooms:
A maximum of 2 beds in each room.
Glazed partition between beds.[1]
Patient rooms shall have a view window from corridor.
Each patient room shall have a separate toilet and a lavatory in the room.
Each nursing unit shall contain:
Nurses' station.
Utility room.
Nurses' work room.
Treatment room.
Scrub sinks strategically located in the corridor.
Serving pantry with separated dishwashing room adjacent.
Doctors' locker space and gown room.
Nurses' locker space and gown room.
Janitors' closet.
Storage closet.
Stretcher alcove.[1]

Pediatric Nursing Service[1]

Where 16 or more pediatric beds are contemplated, a separate pediatric nursing unit shall be provided and contain the following items:
General:
Each bed in a multi-bedroom shall be in a clear glazed cubicle.[1]
Each room shall have a lavatory.
Patients' rooms wherever possible should have clear glazing between them and in the corridor partitions.
Minimum area:
80 square feet per bed in two-bed rooms and over.
100 square feet in single rooms.
40 square feet per bassinet in nurseries.
Each nursing unit shall contain:
Nursery with bassinets in cubicles.
Isolation suite.
Treatment room.
Nurses' station: with adjoining toilet room.
Utility room.
Floor pantry.
Play room or solarium.
Bath and toilet room: with raised free-standing tub and 50% children's fixtures.
Bed pan facilities.
Wheelchair and stretcher alcove.[1]
Janitors' closet.
Storage closet.

Psychiatric Nursing Unit in the General Hospital[1]

General: Layout and design of details to be such that the patient will be under close observation and will not be afforded opportunity for escape, suicide, hiding, etc. Care must be taken to avoid sharp projections of corners of structure, exposed pipes, heating elements, fixtures, etc., to prevent injury by accident.
Minimum room areas:
80 square feet per bed in 4-bed rooms.
100 square feet in single rooms.
40 to 50 square feet per patient in day rooms.
Each nursing unit shall contain:
Doctors' office.
Examination room.
Nurses' station.
Day room.
Utility room.
Bedpan facilities.
Pantry.
Dining room.
Toilet room.
Shower and bathroom.
Continuous tub room (for disturbed patients).
Patients' laundry (personal) for women's wards only.
Patients' locker room.
Storage closet (for recreational and occupational therapy).
Stretcher closet.
Linen closet.
Supply closet.
Janitors' closet.

§ 53.135 *Tuberculosis hospital.*

Administration Department

From 50 up to and including 200 beds:
Business office with information counter.[2]
Medical social service office.[2]
Medical director's office.
Secretary's office.[2]
Supervisor's office.
Medical record and film filing room.[2]
Viewing room, library[2] and conference room. Singly or in combination.
Lobby and waiting room.
Retiring room.[1]
Toilets.
Over 200 and up to 500 beds:
Business office and information counter.[2]
Business manager's office.[2]
Secretary.[2]
Admitting office.[2]
Two medical social service offices.[2]
Medical director's office.
Secretary.
Assistant medical director's office.
Supervisor's office.
Secretary.
Assistant director of nurses' office.
Medical record room.[2]
Library[2] and conference room.
Staff lounge and locker room.
Lobby and waiting room.
Retiring room.[1]
Toilets.

Adjunct Diagnostic and Treatment Facilities

Except for the morgue and autopsy this department should be preferably located convenient to both in- and out-patients.
Laboratory:
Adequate facilities for chemical, bacteriological, serological, pathological and hematological services.
Basal metabolism and electrocardiography:
One room near the laboratory.
Morgue and autopsy:
From 50 up to and including 200 beds,[2] combination morgue and autopsy room with mortuary refrigerator.
Over 200 and up to 500 beds:
Morgue with mortuary refrigerator.
Autopsy room.
Shower and toilet room.
Separate exit.
Radiology:
From 50 up to and including 200 beds:[2]
Radiographic room.
Dark room.
Dressing booths.
Must be convenient to out-patient department as well as in-patients.

[1] Desirable but not mandatory.

[2] These facilities need not be provided if the Tuberculosis Hospital is in connection with a general hospital in which such facilities exist.

Over 200 and up to 500 beds:
Radiographic room.
Dark room.
Dressing booths.
Viewing room.
Roentgenologist's office.
Film file room.
Must be convenient to out-patient department as well as in-patients.

Pharmacy:
From 50 up to and including 200 beds: [2]
Drug room with minimum facilities for mixing.
Over 200 and up to 500 beds: Complete pharmacy and may include space for manufacturing and solution preparation depending on policy of hospital.

Dental and eye, ear, nose, and throat:
From 50 up to and including 200 beds:
Dental facilities (2 chairs desirable).[2]
One eye, ear, nose, and throat room.[2]
Over 200 and up to 500 beds:
Dental facilities (2 chairs desirable).
Eye, ear, nose, and throat room.
Waiting room.

Occupational therapy:
Library.
Barber shop.
Canteen.
Assembly room.
Flexible space for learning and working in crafts and classroom for patient instruction shall be provided.

Nursing Department

General: At least 30 percent of the hospital beds shall be in single rooms.[1] No room shall have more than four beds.[2] Each room shall have a lavatory. No patients' bedrooms shall be located on any floor which is below grade.

Size of nursing unit: No nursing unit shall be larger than 50 beds.

Minimum room areas:
80 square feet per bed in two- and four-bed rooms.
100 square feet in one-bed rooms.

Service rooms in each nursing unit:
Nurses' station.
Utility room.
Floor pantry (one per floor).
Toilet and washroom:
Water closets—1 to each 8 patients.
Lavatories.
Dental basins.[1]
Storage closet for supplies.
Bath and shower room:
Bath tubs and/or showers—1 to 14 patients.
Gowning space.
Bed pan facilities.
Linen closet.
Janitors' closet.
Space for wheel chairs and stretchers.[1]
Storage closet for equipment.

Doctors' office and treatment room—one for each nursing unit.

Solarium: One for each nursing unit.

Sputum technique facilities.

Nurses' toilet room: One for each nursing floor.

Nurses' cloak closet—one for each nursing floor.

Surgical Department

(Shall be located to prevent traffic through it to any other part of the hospital)

From 50 up to and including 200 beds: [2]
Major operating room.
Sterilizing room.
Central supply and work room.
Scrub-up facilities.
Clean-up room.
Storage closet.
Janitors' closet.
Doctors' locker room with toilet and showers.
Nurses' locker room with toilet and showers.

Over 200 and up to 500 beds:
Major operating room: One for each 200 beds or major fraction thereof.
Minor operating and fracture room.
Sub-sterilizing facilities.
Clean-up room.
Scrub-up facilities.
Janitors' closet.
Storage room for sterile supplies.
Anesthesia storage.
Surgical supervisor office.
Doctors' locker room with toilet and shower.
Nurses' locker room with toilet and shower.
Storage closet.
Stretcher alcove.
Central sterilizing and supply room divided into work space, sterilizing space, and sterile storage space.
Adjacent room for storage of unsterile supplies.

Pneumothorax suite:
Pneumothorax room with dressing booths.
Fluoroscopy room.
Waiting space.
From 50 up to and including 200 beds: One pneumothorax suite for 100 beds or major fraction thereof.
Over 200 and up to 500 beds: One pneumothorax suite for 100 beds or major fraction thereof.

Service Department

Dietary facilities:
Main kitchen and bakery.[2]
Dietitian's office and special diets kitchen.[2]
Patients' dishwashing room.
Staff and help dishwashing room.[2]
Adequate refrigeration.[2]
Garbage refrigerator.[1]
Can washing room.
Day storage room.[2]
Help dining room.[2]
Staff dining room.[2]
Patients' dining space—to serve 40 percent of the patients.[1]
Provide 12 square feet per person in dining rooms. May be designed for two seatings. Cafeteria or table service optional.

Housekeeping facilities:
Laundry: [2]
Sorting area.
Processing area.
Clean linen room.
Sewing room.
Laundry capacity shall be adequate to process full 7 days laundry in workweek.
Housekeeper's office.
Incinerator.

Mechanical facilities: [2]
Boiler and pump room.
Engineers' office.
Shower and locker facilities.
Maintenance shops:
Carpentry.
Painting.
Plumbing.
For minimum requirements for mechanical and electrical work, see the respective sections.

Employees' facilities: [2]
Nurses' locker room without nurses' residence:
Locker room with lockers as required.
Rest room.
Toilet and shower room.
Where nurses' residence is adjacent provide only rest room and toilet.
Female help locker room:
Locker room.
Rest room.
Toilet and shower room.
Male help locker room:
Locker room.
Rest room.
Toilet and shower room.

Storage: [2]
General storage. Provide 20 square feet per bed, preferably concentrated in one area.
Record storage.

Out-patient department: [2]
Out-patient department should be located on most easily accessible floor. Must be convenient to radiology, pharmacy, and laboratory departments.
Size will vary in different locations and with the availability of other examination and diagnostic facilities, and is not necessarily proportionate to the size of the hospital. The estimated patient load will determine the number, size, and scope of individual facilities in out-patient department.
Facilities required:
Administrative:
Waiting room with public toilets.
Information, appointment and records office.
Medical social service office.
Janitors' closet.
Clinical:
History or screening room.
Examination rooms.
Dressing booths.
Pneumothorax room.
Fluoroscopy room.
Utility room.
Storage room.

§ 53.136 *Mental hospital.*

General. A mental hospital should be on a large acreage with ample space around all buildings for recreation, attractive landscaping and the proper segregation of the various patient classification groups and building functions; and should be readily accessible to the community which it is to serve. It is strongly urged that mental hospitals be not greater than 1,500 beds.

The mental hospital presents a special problem of patient classification, treatment and supervisory function. In the following minimum requirements an over-all organization is designated with certain supervisory or organizational functions mentioned in their most desirable, but not mandatory, locations and these may, therefore, be changed to other locations.

Patients have been classified and grouped according to behavior, and requirements vary somewhat for each classification. Minimum room area requirements are grouped into the following main categories, as follows:

A. Medical and surgical, and chronic disease classification: 70 square feet per bed in alcoves and four-bed rooms; 100 square feet in single rooms.

B. Tuberculosis classification: 70 square feet per bed in alcoves and four-bed rooms; 100 square feet in single rooms.

C. Reception, convalescent, chronic disturbed, industrial classifications: 70 square feet per bed in alcoves and four- (or more) bed rooms; 80 square feet in single rooms.

D. Infirm and inactive: 60 square feet per bed in four- (or more) bed rooms; 80 square feet in single rooms.

No patient bedrooms shall be located on any floor which is below grade.

Administration. This area includes the administrative, business and public contact functions of the institution.

Location: Near main entrance to institution and close to reception area.

General:
Entrance lobby.
Public toilets (male and female).
Information and telephones (main switchboard).
Post office.
Personnel toilets (male and female).
Mechanical room.

Offices:
Director.
Assistant director.
Conference room.

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[1] Desirable but not mandatory.

[2] These facilities need not be provided if the Tuberculosis Hospital is in connection with a general hospital in which such facilities exist.

Business administrator.
Business.
Public relations and services.
Secretaries.
Janitors' closet.

Medical:
Central records office.
Central records room.
Inactive records storage.

Reception. This area includes the reception and treatment of new patients, most of whom will be entering a mental hospital for the first time. Since they are new patients, and in need of very careful treatment, it is necessary to separate and prohibit contact between patients in the following classifications of behavior:

Quiet.
Depressed.
Disturbed.

In addition, each of the above classifications should be separated by sexes, and each classification should have its own complete Nursing Units with all nursing facilities available, and each should be readily accessible to an outdoor area. All safety and security measures should be observed in this group. Intensive care and treatment will be given these new patients in an effort to cure them in the first few weeks of treatment. Should the patient fail to recover in this comparatively short period of time he will be sent to other Nursing Areas for continued treatment. Three other Nursing Areas will be classified according to the behavior of the patients which they are to house.

The Reception Area should be set well apart from the other areas of the hospital, and should contain sufficient diagnostic, treatment, recreational and occupational facilities, to furnish complete treatment in order that these new patients may recover without having been transferred to the other areas of the Mental Hospital.

The number of beds required in this Reception Area must be determined by study of the total Receiving and Intensive Treatment Facilities in the community which is served. The total number of beds in this and the convalescent area should be in accord with the admissions within a three- to six-month period.

Location: Near administration area.

General:
Lobby.
Visitors' toilets (male and female).
Main visitors room with alcoves.
Janitors' closets.
Mechanical room.

Administration:
Medical records office.
Information.
Chief psychiatrist's office and conference room.
Secretaries' offices.
Clinical psychologist's office.
Chief of nursing service and staff.
Chief of social service and offices.
Personnel toilets (male and female).

Staff facilities:
Doctors' toilet room.
Nurses' lounge and toilet room.

Admission:
Ambulance entrance.
Patients' bath and toilet.[1]
Utility room.[1]
Examination and consultation rooms.

Adjunct diagnostic and treatment facilities:
Minor surgery and treatment room.
Portable X-ray storage room.[1]
Dark room.[1]
Small laboratory.[1]
Patients' toilet and shower.
Small treatment room (for shock therapy, etc.).
Patients' exercise room (directly accessible to outdoor exercise yard).

[1] Desirable but not mandatory.

Occupational therapy:
Occupational therapy room (to be located near quiet patient units).
Storage closets.
Occupational therapists' office.[1]
Barber and beauty shop.

Nursing units: The following classifications of nursing units of not more than 25 beds will be required:
Quiet nursing units (male and female).
Depressed nursing units (male and female).
Disturbed nursing units (male and female).
For small reception facilities a combination of patient classifications may be provided in one nursing unit of not more than 25 beds provided that contact between the patients of each classification may be prohibited or limited.

Suggested bed distribution of nursing units:

Each disturbed nursing unit:	*Patients*
Two 4-bed wards	8
Three 2-bed or 3-bed wards	6 or 9
Four or six 1-bed rooms	4 or 6
Two 1-bed rooms (isolation unit) [1]	2
Total	20 to 25

Each depressed nursing unit:	*Patients*
Two 4-bed wards	8
Two 3-bed alcoves	6
Four 1-bed rooms	4
(Isolation unit) [1]	2
Total	20

[1] Desirable but not mandatory.

Quiet unit: Same bed distribution as disturbed nursing units.

Facilities in each nursing unit:
Doctor's consultation room for each two units).
Examination room.
Nurses' station.
Utility room.
Bed pan facilities.
Small dining room and pantry:
Essential for disturbed.
Convenient for depressed.
Unnecessary for quiet.
Patients' locker room.
Linen closet.
Patients' shower and bath room.
Patients' dressing room.
Patients' toilets.
Patients' wash room.
Continuous tub room (for disturbed units).
Day room (40 to 50 square feet per patient and preferably divided into one small and one large room).
Occupational therapy storage closet.
Janitors' closet.

Dietary:
Patients' dining room cafeteria service: this dining room will be used by patients from convalescent houses as well as from reception area (two seatings may be used).
Janitors' closet.
Coat room and toilets (male and female)[1]
Kitchen (serving).
Dishwashing room (enclosed).
Employees' toilet.
Patients' toilet (male and female).
Refrigerated garbage storage.
Can washing room.

Convalescent. This area is considered a part of the reception area and will house new patients who have been sent from the reception building, and who are expected to recover within six months to a year. Most of these patients will have the same classification as those in the reception area. Small complete nursing units, separate for each sex, should be provided. Special treatment, such as mechanical fever, electric shock, special electro and hydro therapy, and insulin, etc., can be given in the reception building.

These patients will also use the dining room facilities of the reception area.

In general, while most of these patients are continuing to receive intensive treatment, they are well enough and manageable enough to go freely or be escorted to their activities.

The same security and safety measures are required as those for the reception area.

Location: Grouped by sexes near reception area.

General:
Entrance lobby.
Visitors' room with alcoves.
Visitors' toilets (male and female).
Attendants' locker and toilet room.
Mechanical room.
Nursing units (to contain not more than 50 beds).
Suggested bed distribution of each nursing unit:

	Patients
One 8-bed ward	8
Four 4-bed wards	16
Eleven 1-bed wards	11
Total	35

Facilities in each nursing unit:
Doctors' consultation room (for each two units).
Examination room.
Nurses' station.
Utility room.
Bed pan facilities.
Pantry (one for each two nursing units).
Patients' locker.
Patients' toilet room.
Patients' shower or bath room.
Day room (40 to 50 square feet per patient—preferably divided into one large and one small room).
Storage closet (occupational and recreational therapy equipment).
Linen closet.
Janitors' closet.
Patients' wash room.
One-third of the nursing units, for both men and women should have one continuous tub room.[1]

Chronic disturbed. This area should be separate from the main group of mental hospital facilities and set apart from the Nursing Areas of other patient classifications because of possible noise or other disturbance. It will be used to treat restless, noisy, assaultive or suicidal patients and must be designed to provide the greatest security and observation. Since these patients are very active it is necessary to have an outdoor area or exercise yard, and due to the amount of equipment and care these patients require, and the resulting necessary space for treatment, not less than two Nursing Units to a building are recommended.

Location: These buildings to be located away from the other Nursing buildings.

General:
Entrance lobby.
Visitors' room.
Visitors' toilets (male and female).
Beauty shop (female buildings).
Barber shop (male buildings).
Attendants' locker and toilet room.
Pantry (for two nursing units).
Mechanical room.
Enclosed exercise yard (100 square feet per patient).

Treatment facilities:
Hydrotherapist's office and toilet.
Continuous tub room.
Linen closet.
Patients' dressing room.
Janitors' closet.
Exercise room (near outdoor exercise yard).

Storage closet (for small gymnasium equipment).
Nursing units (to contain not more than 30 beds):
Suggested bed distribution of each unit:

	Patients
One 8-bed ward	8
Two 4-bed wards	8
Ten 1-bed rooms	10
Total	26

Facilities in each nursing unit:
Doctors' office with toilet (for each two units).
Examination room.
Nurses' station.
Utility room.
Patients' locker room.
Patients' toilet room.
Patients' wash room.
Patients' shower and dressing room.
Day room (40 to 50 square feet per patient). Preferably divided into (1) small room and (1) large room.
Storage closet (recreational equipment).
Occupational therapy room (one for each two units).
Linen closet.
Janitors' closet.
Dietary:
Dining room—cafeteria service.
Serving kitchen.
Dishwashing room.
Employees' toilet.
Janitors' closet.

Infirm. This area will house patients who are in need of considerable medical care and who may be infirm. The very sick will be transferred to the medical and surgical or chronic disease building, but these infirm patients will need constant and careful nursing. Minimum security and all safety measures will be required, and the nursing units should be complete with all facilities available and readily accessible to an out-door yard or area.

Location: Close to medical and surgical building.
General:
Entrance lobby.
Visitors' room.
Visitor's toilets (male and female).
Barber shop (male buildings).[1]
Beauty shop (female buildings).[1]
Attendants' locker and toilet room (male and female).
Mechanical room.
Enclosed yard (40 square feet per patient).[1]
Nursing units (to contain not more than 60 beds). Suggested bed distribution for each unit:

	Patients
Two 10-bed wards	20
Four 4-bed wards	16
Four 1-bed rooms	4
Total	40

Facilities in each nursing unit:
Doctors' office (for each 3 units).
Examination room.
Nurses' station.
Utility room.
Bed pan facilities.
Pantry and dining room (one for each two units).
Patients' locker room.
Patients' wash room.
Patients' toilet room.
Patients' dressing room.
Patients' shower or bath room.
Day room (30 square feet per patient).
Storage closet (for recreational and occupational therapy equipment).
Linen closet.
Wheel chair and stretcher closet.
Janitors' closet.

[1] Desirable but not mandatory.

Dietary:
Serving kitchen.
Dishwashing room.
Employees' toilet.
Janitors' closet.

Inactive. This area will house patients who are lethargic. They need a considerable amount of attention, most of which will be furnished by the physical therapist and occupational therapist. They will be urged into activities furnished in the occupational and recreational therapy buildings, but some of the lighter occupational and physical therapy should be provided in this area. All security and safety measures will be required.

Location: In main group of nursing buildings and near gymnasium and recreation buildings.
General:
Entrance lobby.
Visitors' room.
Visitors' toilets (male and female).
Occupational therapy room.
Attendants' locker and toilet room.
Mechanical room.
Enclosed yard (100 square feet per patient).[1]
Nursing units (to contain not more than 50 beds) suggested bed distribution (of each unit):

	Patients
Three 10-bed wards	30
Two 4-bed wards	8
Four 1-bed rooms	4
Total	42

Facilities in each nursing unit:
Doctors' office (for each 3 units).
Examination room.
Nurses' station.
Utility room.
Bedpan facilities.
Pantry (for each 2 units).
Patients' locker room.
Patients' wash room.
Patients' toilet room.
Patients' shower or bath room.
Patients' dressing room.
Day room (40 to 50 square feet per patient and preferably divided into one small and one large room).
Storage closet (for recreational and occupational therapy equipment).
Linen closet.
Janitors' closet.
Dietary:
Dining room.
Serving kitchen.
Dishwashing room.
Employees' toilet.
Janitors' closet.

Industrial. This area will house patients who are well enough to be occupied on the grounds, farm, industrial buildings, shops, kitchens, laundry, etc. Less supervision and care is necessary than in the other groups, and these patients can go to the out-patient department of the medical and surgical building for examination and treatment.

Location: In main group of nursing buildings near service buildings.
General:
Entrance lobby.
Visitors' room.
Visitors' toilets (male and female).
Attendants' locker and toilet room.
Mechanical room.
Nursing units (to contain not more than 60 beds) suggested bed distribution:

	Patients
Two 16-bed wards	32
Two 8-bed wards	16
Four 1-bed rooms	4
Total	52

Facilities in each nursing unit:
Doctors' office and examination room—one for each 3 units.
Nurses' station.
Patients' toilet.
Patients' dressing room.
Patients' shower room.
Patients' locker room.
Patients' wash room.
Day room (40 to 50 square feet per patient) preferably divided into one small and one large room.
Storage closet (for recreation equipment).
Linen closet.
Janitors' closet.

Medical and surgical. This area will house patients who have been hospitalized from Nursing Units of other classifications for short periods of illnesses, and should be housed in a modern general hospital complete with all facilities to serve the entire mental hospital community. Nursing Units should be arranged for easy segregation of patients and the Adjunct Diagnostic and Treatment facilities are recommended to be on the first or ground floor for easy access to the out-patient department. All security and safety measures should be incorporated in this building. The number of beds shall be approximately 4 percent of the total patients which this building serves.

Location: Between main group of nursing area and reception area.
General:
Entrance lobby.
Information counter.
Visitors' toilets (male and female).
Mechanical room.
Administration:
Chief physician's office.
Medical record room.
Head nurse's office.
Secretaries' offices.
Personnel toilets (male and female).
Staff facilities:
Doctors' locker and shower room.
Nurses' locker and shower room.
Adjunct diagnostic and treatment facilities:
Laboratory: Separate spaces for office, clinical pathology, bacteriology and serology, washing and sterilizing.
Basal metabolism and electrocardiography: Near laboratory and convenient to out-patient department.
Morgue and autopsy room:[1] Combination morgue and autopsy with mortuary refrigerator.
Radiology:
Radiographic room with an adjoining dark room and office.
X-ray therapy suite.[1]
Physical therapy: Suite for electro-therapy, hydro-therapy, and exercise room with adjoining office.
Pharmacy: Drug room with minimum facilities for mixing. (May be in service area).
Nursing units (to contain not more than 30 beds) suggested bed distributions:
Medical wards (25 beds each):

	Patients
Two 4-bed wards	8
Three 2-bed rooms	6
Nine 1-bed rooms	9
Isolation suite[1]	2
Total	25

Surgical wards (25 beds each) same as medical wards.
Employees' wards:[1] Maximum size, 25 to 30 beds.

NOTE: Where isolation suite or contagious disease nursing unit is available the small units in each nursing unit are not required.

Facilities in each nursing unit:
Doctors' examination room (one for each two nursing units).
Nurses' station.
Utility room.
Bed pan facilities.
Pantry (one for each two nursing units).
Patients' bath and shower room.

Supply closet.
Patients' toilet room (male and female).
Day room (approximately 25 square feet per patient). Omit for employees' wards.
Storage closet (recreational and occupational therapy equipment).
Stretcher and wheel chair closet.
Linen closet.
Janitors' closet.

Surgical department: Should be located to prevent traffic through it to any other part of hospital.

Operating rooms:
Major: One for each 50 beds up to and including 200 beds. Above 200 beds the number of operating rooms will be based on the expected average of daily operations.
Minor: One in each hospital over 50 beds.
Cystoscopy: [1] One in each hospital over 100 beds. Shall have an adjoining toilet room.
Fracture room: One in each hospital over 100 beds. Shall have an adjoining splint room.

Auxiliary rooms:
Substerilizing facilities.
Scrub-up facilities.
Nurses' locker room with toilet and shower.
Instrument room beginning at 100 beds.
Clean-up room.
Anesthesia equipment storage.
Surgical supervisor's station.
Doctors' locker room with toilet and shower.
Storage closet.
Stretcher closet.
Storage room for sterile supplies beginning at 100 beds.
Janitors' closet.
Dark room beginning at 100 beds.

Central sterilizing and supply room:
Divided into work space, sterilizing space, and sterile storage space.
Adjacent room for storage of unsterile supplies.

Emergency department:
Ambulance entrance.
Receiving bath and toilet.
Utility room.
Supply and stretcher storage.
Emergency operating room, near outpatient department.

Service department:
Kitchen (serving).
Dishwashing room.
Refrigerated garbage room.
Can washing room.
Dining rooms (for ⅓ of patients).
Storage.
General storage (20 square feet per bed).
Housekeepers' office.
Linen storage room.
Sewing room.
Linen sorting room.
Personnel facilities:
Locker and toilet rooms (male and female).
Attendants' locker and toilet rooms (male and female).

Out-patient department:
Waiting room.
Examination and treatment rooms (including eye, ear, nose and throat rooms and gynecology room [1]).
Record room.
Dental facilities (2 chairs desirable).
Electroencephalographic unit.

NOTE: Out-patient department should be convenient to radiology, laboratory, therapy, emergency, etc.

Chronic disease. This area will house patients who have chronic illness, or who are in need of intensive treatment and nursing care or those who, because of infectious diseases, need to be isolated.

Nursing Units of this classification should be attached to the Medical and Surgical building for easy access to the Diagnostic and Treatment facilities.

Not all of these Nursing Units need have maximum safety and security measures.

The number of beds shall be approximately 7.5 percent of the total number of patients which these buildings serve.

Location: Attached to medical and surgical building.
General: Corridors to service department and adjunct facilities.
Nursing units (to contain not more than 30 beds) suggested bed distribution (of each nursing unit):

	Patients
Two 4-bed wards	8
Three 2-bed wards	6
Eight 1-bed rooms	8
Total	22

Facilities in each nursing unit:
Doctors' office (for each 2 units).
Examination room.
Nurses' station.
Utility room.
Bed pan facilities.
Pantry (for each 2 nursing units).
Dining room (for ½ of patients in nursing unit).
Patients' locker room.
Patients' wash room.
Patients' toilet.
Patients' dressing room.
Patients' shower or bath room.
Day room (30 square feet per patient).
Closet (recreational and occupational therapy equipment).
Stretcher and wheel chair closet.
Linen closet.
Janitors' closet.

Tuberculosis. For patients of this classification, it is recommended to use the requirements of the tuberculosis hospital. In addition, patients will be grouped according to behavior as Quiet or Disturbed. Security and safety measures comparable to those of the Reception Area are required.

The number of beds shall be determined as approximately 5 percent of the total patients which this building serves.

Gymnasium, Theater, Recreation, Library and Chapel

(Combination or separate buildings acceptable)

Location: Adjacent to main group of nursing and reception areas.
General:
Entrance lobby.
Coat rooms and toilets (male and female).
Personnel toilets (male and female).
Mechanical room.
Theater facilities:
Office.
Hall (seating capacity based on 7 square feet per person with 40 percent attendance of patients and personnel).
Projection booth.
Stage.
Dressing rooms with toilets (two for each sex).
Work shop.
Chapel facilities:
Three offices for ecclesiastics.
Toilets.
Three small prayer rooms.
Portable altars (where chapel is not separate).
Storage rooms.
Gymnasium facilities:
Recreational therapists' office.
Personnel locker and toilet rooms (male and female).
Patients' locker and toilet rooms (male and female).
Basketball court (standard college size plus space for collapsible seating).
Small gymnasium (for exercise equipment).
Storage rooms.
Recreation facilities:
Chief recreational therapist's office.
Bowling alleys (with space for spectators).
Billiard room.
Ping pong room.
Patients' barber shop.
Patients' beauty shop.
Canteen (for light lunch, drinks, etc.):
Office and table areas.
Cooking and fountain areas.
Dishwashing and sterilizing.
Storage.
Garbage refrigeration.[1]
Can washing facilities.
Sales rooms.
Storage room.
Library:
Librarians' office.
Reading room (current and request matter).
Stock room.
Work room and storage space.
Music rooms:
Music therapists' office.
Music room (approximately 500 square feet with portable stage).
Store rooms.
Music rooms (approximately 250 square feet).

Occupational Therapy

Location: Adjacent to main group of nursing areas and reception area.
General:
Entrance lobby.
Patient coat room and toilets (male and female).
Personnel coat room and toilets (male and female).
Mechanical room.
Administration: Office for occupational therapist.
Facilities:
Open floor space (for occupational equipment).
One or more special purpose rooms.
Storage rooms (for materials and equipment).
Industrial therapy occupations should be located near the service group of buildings.

Central Kitchen and Dining Rooms

Location: In main group of nursing buildings.
General: Load on dining rooms, kitchens and preparation will vary; see requirements of each.
Men patients' coat room and toilet.[1]
Women patients' coat room and toilet.[1]
Men attendants' coat room and toilet.
Women's attendants' coat room and toilet.
Dining rooms: Patients' and personnel (capacity 15 square feet per person).
Kitchen:
Dietitians' office and toilet.
Diet kitchen.
Complete cooking and baking facilities.
Dishwashing room.
Preparation (meat and vegetables).
Adequate refrigeration.
Day storage.
Garbage refrigeration.[1]
Can washing facilities.
Janitors' closet.
Personnel lockers and toilets.

Storage Buildings

Location: In service groups of buildings.
General: Area (20 square feet per patient).

Laundry

Adequate to process seven full days of laundry per work week.
Location: In service group of buildings.
Facilities:
Manager's office and toilet.
Receiving room.
Sorting area.
Contaminated receiving room.
Sterilizing room.
Processing room.

[1] Desirable but not mandatory.

Clean linen storage.
Sewing room.
Personnel locker and toilet room.

Heating Plant

Location: In service group of buildings.
General:
Heating plant (to be determined by engineering studies).
Emergency generating facility.
Office.
Personnel toilets.
General repair shop.
Carpenter shop.
Electrical shop.
Plumbing shop.
Paint shop.

Incinerator

As required. See Mechanical Section.

§ 53.137 *Psychiatric hospital.*

General. The principles of psychiatric safety shall be followed throughout. Materials and details of construction shall be such that patients will not be afforded opportunity for escape, suicide, etc. Care must be taken to avoid sharp projections of corners of structure, exposed piping, heating elements, fixtures, hardware, etc.

For requirements of sizes of doors, widths of corridors, sizes of elevators, provisions for ventilation, fire protection, etc., see sections on Details, Finishes, etc.

Administration Department

Up to and including 100 beds:
Business office with information counter.
Chief psychiatrist's office.
Chief psychologist's office (if there is no out-patient department).
Record office.
Director of nurses' office.[1]
Social service offices (if there is no out-patient department to be near receiving).
Staff lounge.
Lobby.
Public toilets.
From 100 to 500 beds:
Business office.
Chief psychiatrist's office.
Chief psychologist's office (if there is no out-patient department).
Social service offices (if there is no out-patient department).
Director of nursing.
Record room.
Staff lounge.
Library and conference room.
Lobby.
Public toilets.
Toilets for administrative personnel.

Receiving Department

Facilities for male and female receiving:
Entrance hall.
Dressing room.
Bath and toilet room.
Medical examination room.
Waiting room.
Stretcher closet.
Clerks' offices.
Doctors' office.

Adjunct Diagnostic and Treatment Facilities

Laboratory:
Up to and including 100 beds:
Office.
Laboratory.
Over 100 beds: Separate spaces for office, clinical pathology, bacteriology, washing and sterilizing.
Basal metabolism and electrocardiography:
Up to and including 100 beds: No special provision necessary.
Over 100 beds: Room near laboratory and convenient to out-patient department.
Morgue and autopsy: Combination morgue and autopsy with mortuary refrigerator.
(Is not required in hospital of less than 100 beds if similar facilities are available nearby.)
Dental facilities (2 chairs desirable).
Eye, ear, nose and throat suite.
Electro-encephalographic suite.
Radiology:
Up to and including 100 beds: One radiographic room and dark room and convenient to out-patient department.
Over 100 beds: At least one additional radiographic room.
Physical therapy:
Electro-therapy.
Hydro-therapy with exercise space.
Continuous tub and pack room.
Small gymnasium, convenient to outdoor area, and to disturbed patients.
Pharmacy: One room with minimum facilities for compounding.
Occupational therapy:
Space for small woodworking tools and benches for carpentry, metal work, leatherwork, printing, weaving, rug making, etc.
Office.
Storage room.

Surgical Department

Operating rooms:
Major: One.
Minor: One, with adjoining splint room.
Auxiliary rooms:
Sub-sterilizing facilities.
Scrub-up facilities.
Clean-up room.
Anesthesia room.[1]
Anesthesia storage.
Doctors' locker room with toilet.
Nurses' locker room with toilet.
Storage closet.
Stretcher closet.
Janitors' closet.
Storage room for sterile supplies and instruments.
Surgical department to be located to prevent traffic through it from other parts of the hospital.
Central sterilizing and supply room—divided into work space, sterilizing space, and sterile storage—adjacent room for storage of unsterile supplies.

Nursing Department

General: The layout and the design of details to be such that the patient will be under close observation and will not be afforded opportunity for escape, suicide, hiding, etc. No patients' bedrooms shall be located on any floor which is below grade. Provision shall be made for the following classifications:
New admissions (male).
New admissions (female).
Quiet ambulant (male).
Quiet ambulant (female).
Medical and surgical.
Disturbed (male).
Disturbed (female).
Alcoholic (male).
Alcoholic (female).
Criminalistic (male).
Criminalistic (female).
Children.
Minimum room areas:
80 square feet per bed in alcoves and four-bed rooms.
100 square feet in single rooms.
40 to 50 square feet per patient in day rooms and preferably divided into one large and one small room.
Facilities for each nursing unit:
Doctors' office and examination room.
Nurses' station and toilet.
Day rooms.
Utility room.
Pantry.
Dining room.
Wash room and toilets.
Patients' locker.
Shower and bath room.
Storage closet (for recreational and occupational therapy).
Supply closet.
Linen closet.
Janitors' closet.
Stretcher closet (medical and surgical unit).
Bedpan facilities (medical and surgical unit).
Isolation suite: In medical and surgical unit.

Service Department

Dietary facilities:
Main kitchen and bakery.
Special diet kitchen.
Dietitians' office.
Dishwashing room.
Adequate refrigerators.
Garbage refrigerator.[1]
Can washing room.
Day storage room.
Staff dining room (12 square feet per person).
Housekeeping facilities:
Laundry (if provided): Capacity shall be adequate to process full 7 days laundry in work week.
Sorting area.
Processing room.
Clean linen and sewing room separate from laundry.
Housekeeper's office: Near linen storage.
Mechanical facilities:
Boiler room and pump room (if provided).
Engineers' office.
Shower and locker room.
Maintenance shops—carpentry, painting, mechanical repair rooms.
Employees' facilities:
Nurses' locker rooms. If no nurses residence:
Locker room.
Rest room.
Toilet and shower room.
Attendants' locker rooms. If no attendants residence (male and female):
Locker room.
Toilet and shower rooms.
Other female help lockers:
Locker room.
Rest room.
Toilet and shower room.
Other male help lockers:
Locker room.
Toilet and shower room.
Storage:
Record space.
General storage: 20 square feet per bed and to be concentrated in one area.

Out-Patient Department (if provided)

General:
Located on the ground floor. Entrance separate from main entrance of hospital.[1] It must be convenient to radiology, laboratory and physical therapy.
The patient load must be estimated in order to determine the number of consultation and examining rooms.
Facilities required:
Administrative:
Waiting room with public toilets.
Cashiers' and appointment office.
Social service offices.
Psychological examination rooms.
Medical examination rooms.
Utility rooms.
Children's rooms.

§ 53.138 *Chronic disease hospital.*

The facilities listed below need not be provided if functionally available in an adjoining hospital.

Administration Department

Business office with information counter, telephone switchboard, and cashier's window.
Administrator's office.
Director of nurses' office.
Medical Director's office.
Medical record room.

[1] Desirable but not mandatory.

Medical social service office.
Combination conference room, doctors' lounge, and staff library.
Lobby and waiting room.
Public telephone.
Public toilets.
Personnel toilets.[1]

Adjunct Diagnostic and Treatment Facilities

Except for the morgue and autopsy room, these facilities should be located convenient to both inpatients and outpatients.
Laboratory:
Adequate facilities for chemical, bacteriological, pathological and hematological services.
Basal metabolism and electrocardiography facilities.
Morgue and autopsy room: In Chronic Disease Hospitals of 100 beds or more. Desirable but not mandatory in Chronic Disease Hospitals of under 100 beds if such services are available locally.
Radiology:
Each Chronic Disease Hospital to have at least one radiographic room with toilet, adjoining dark room, film filing space and dressing facilities.
Pharmacy:
Drug room with minimum facilities for compounding and dispensing. Complete pharmacy may include facilities for bulk compounding and solution preparation depending on policy of hospital.
Physical therapy:
Examination room.
Office and work space for physical therapy staff.
Rehabilitation gymnasium for adults.[2]
Rehabilitation gymnasium for children if children are included in program.[2]
Hydrotherapy area.[2]
Thermotherapy and massage area.[2]
Storage for supplies and equipment.
Outdoor exercise area.[2]
Occupational therapy:
Office and work space for occupational therapy staff.
Therapy area:
In large units space should be divided for diversified work. (Separate room for children is desirable.)
Storage for supplies and equipment.
Toilet facilities for physical therapy and occupational therapy departments.
Facilities for teaching activities of daily living.
Speech and hearing facilities:[2]
Offices for therapists and space for examination and treatment.
Artificial appliance facilities:[2]
Space for fitting and adjustment service.

Out-patient Department

Should be provided only if survey indicates that an Out-patient Department is needed.
Should be located on the most easily accessible floor and have convenient access to radiology, pharmacy, laboratory and rehabilitation facilities.
The size will vary in different locations and is not necessarily proportional to the size of the hospital. The patient load must be estimated to determine the number and type of rooms required.
Administration:
Waiting space with public toilets.
Appointment and cashier's desk.
Medical social service office.
Clinical:
Examination and treatment rooms: Number and specialties to be determined by the character of the patient load.
Utility room.

[1] Desirable but not mandatory.
[2] If required by program.

Nursing Department

General: No patients' room shall have more than 4 beds. Six beds, not more than 3 beds deep from outside wall, will be permitted in Chronic Disease Hospitals of 100 beds or more. Not more than 2 beds per patients' room is desirable. Each patients' room shall have a lavatory. A toilet room with lavatory accessible from adjoining patients' room is recommended. Each nursing unit shall have a separation room. No patients' rooms shall be located on any floor which is below grade.
Size of nursing unit:
Should not be more than 40 beds. Larger units will be permitted if additional service facilities are provided as required.
Minimum patients' room areas:
80 square feet per bed (100 square feet desirable) in multi-bed patients' rooms; 100 square feet per bed (125 square feet desirable) in one-bed patients' rooms.
Service facilities in each nursing unit:
Nurses' station.
Nurses' toilet.
Utility room.
Treatment room.
Floor pantry.
Solarium:
Provide 25 square feet per bed for 75 percent of beds on nursing unit.
Dining room:
Provide 25 square feet per bed for 75 percent of beds on nursing unit.
The percentage of the beds for which solarium and dining area must be provided may be reduced depending on the type of patient to be cared for.
It is recommended that the dining and solarium areas be adjacent so that they can be combined into one room for recreational and other group activity purposes.
Toilet facilities:
If centralized toilets are provided, a toilet room for each sex at a ratio of 1 water closet to each 8 beds will be required. One of the water closet enclosures in each toilet room should be at least 5 feet by 6 feet to permit toilet training.
If toilets provided adjacent to patients' rooms are not large enough, a separate training toilet, at least 5 feet by 6 feet, should be provided.
Bedpan facilities.
Bathing facilities:
1 bathtub.
1 shower. (A separate bath room for each sex, containing at least one bathtub and one shower, is recommended. A ratio of one bathtub or one shower for each 10 beds is desirable.)
Stretcher and wheelchair parking space.
Clean linen storage.
Equipment and supply storage.
Janitor's closet.
Patient's laundry.[1]

NOTE:[2] It is recommended that a specially designed nursing unit, similar to that required in the section on Rehabilitation Facilities in a Hospital, be provided for rehabilitation patients in the Chronic Disease Hospital.

Surgical Department[2]

Shall be located to prevent traffic through it to any other part of the hospital.

Major operating room.
Scrub-up facilities.
Anesthesia equipment storage.
Clean-up room.
Storage closet.
Janitor's closet.
Central sterilizing and supply room.

If a surgical department is not included the central sterilizing and supply room must be provided elsewhere in the hospital.

Doctors' locker room with toilet. (Shower desirable but not mandatory.)
Nurses' locker room with toilet. (Shower desirable but not mandatory.)

Dental Department

Facilities for dental diagnosis, treatment and laboratory procedures.

Service Department

Dietary facilities:
Main kitchen and dieto-therapy facilities.
Dietitians' space.
Appropriate food service facilities.
Dishwashing room.
Adequate refrigeration.
Garbage disposal facilities.
Day storage room.
Personnel dining room: Provide 12 square feet per person. May be designed for multiple seating.
Janitor's closet.
Housekeeping facilities:
Laundry; unless commercial or other laundry facilities are available, each Chronic Disease Hospital shall have a laundry of sufficient capacity to process full 7 days laundry in work week and contain the following areas:
Sorting area.
Processing area.
Clean linen and sewing room separate from laundry.
Where no laundry is provided in the hospital, a soiled linen room and a clean linen and sewing room shall be provided.
Housekeeper's office.
Mechanical facilities:
Boiler and pump room.
Desk space for engineer.
Shower and locker facilities.[1]
Maintenance shops: In hospitals up to and including 100 beds at least one room shall be provided. In larger hospitals separation of carpentry, painting, and plumbing should be provided.
Employees' facilities:
Nurses' lockers:[3]
Locker room: one locker for each 2 hospital beds.
Rest room.
Toilet room (Shower desirable but not mandatory.)
Female help lockers:[3]
Locker room.
Rest room.
Toilet room. (Shower desirable but not mandatory.)
Male help lockers:
Locker room.
Toilet room. (Shower desirable but not mandatory.)
Ratio of male and female help will vary and size of locker rooms must be adjusted accordingly.
Storage:
Inactive record storage.
Patients' clothes storage room.
General storage: 20 square feet per bed and to be concentrated in one area.
Storage of outdoor equipment.[1]

§ 53.139 *Nurses' residence.*

Rooms:
One nurse per room:[1]
100 square feet in single rooms.
150 square feet in double rooms.
Lavatory in each room.
Closet or wardrobe for each nurse.
No nurses' rooms shall be located on any floor which is below grade.
Common floor facilities:
Lounge with kitchenette to serve 30 to 60 nurses.
Laundry room with 2 trays and 2 ironing boards to serve 30 to 60 nurses.
Bath room: One shower or tub for each 6 beds.
Toilet room: One water closet for each 6 beds and 1 lavatory for each 3 water closets.

[3] May be combined.

Linen closet.
Janitors' closet.
Telephone facilities.[1]
General facilities:
Lobby.
Office.
Main lounge (with alcoves [1]).
Men's toilet (off lobby).
Storage room for trunks.
Laundry distribution room.[1]
Employees' toilet room.[1]
Boiler room (if facilities not available elsewhere).

§ 53.140 *School of nursing.*

Teaching facilities:
One science laboratory room.
One dietetics laboratory room.
One nursing arts laboratory with adequate facilities.
One classroom to accommodate approximately twice the number of students as the nursing arts laboratory.
One lecture room to accommodate total student body.
One library.
Offices: Offices for instructors.
General:
Storage room convenient to class rooms.
Toilet room.
Janitors' closet.

§ 53.141 *Public health centers.*

Administration:
Where health department administration personnel has no offices in health center:
Waiting room.
Public toilets.
Office for public health nurses.
Staff toilets.
Assembly space: Waiting room may be used for this purpose where health centers serve under 30,000 population.
Where health department administration offices are provided in health centers add:
Health officer's office.
Office for sanitary engineers.
Health education office.
Staff room and library: In health center for over 30,000 population.
Clinical: The clinical services, and extent of such services, provided in the health center will depend on the program contemplated by the health department to take care adequately of the particular needs of the population served by the health center.
For populations up to 30,000:
Two examination rooms for maternal and child health, V. D. and TB clinics.
Consultation room.
Utility room.
Dental room.[1]
For population over 30,000, if the following services are provided, they shall include areas noted as follows:
Maternal and child health:
Demonstration room.
Examining room.
Toilet.
Tuberculosis and X-ray:
X-ray room with dressing booths.
Dark room.
Consultation and viewing room.
Venereal disease:
Examination room.
Treatment room.
Consultation room.
Toilet.
Dental:
Dental facilities (2 chairs desirable).
Small dental laboratory.
Pharmacy: Dispensing room.

[1] Desirable but not mandatory.

Laboratory:
The volume and type of laboratory tests in the health center will vary with local conditions and will determine the size of the laboratory. Such factors as density of population, area to be served, type of center (municipal, county, or rural), its use as a branch of the State Laboratory and availability of other laboratory facilities must be considered.
One room is required for urinalysis, hematology, and dark field examinations for syphilis and storage of biologicals furnished by the State Health Department.
Where food control, sanitation and communicable disease work is contemplated another room shall be furnished for this purpose.
Service:
General storage areas:
Bulk office and janitors' supplies.
Bulk clinical supplies.
Educational material.
Storage closets:
Office supplies.
Medical supplies.
Educational material.
Janitors' closet: Centrally located.
Heating plant.

§ 53.142 *State public health laboratory.*

Administration department:
Director's office.
Secretary's office.
Assistant Director's office.
Information desk and switchboard.
Clerical office.
Office supply room.
Library.
Staff meeting room.
Records and filing room.
Mailing and receiving room for incoming specimens, distribution of containers and of biologicals.
Specimen and emergency treatment room.
Bacteriology department:
Office.
Water, food and milk laboratory.
Enteric disease and agglutination laboratory.
Tuberculosis laboratory.
Diagnostic laboratory.
Incubator room.
Sterile room.
Rabies room.
Adequate refrigeration.
Syphilis serology department.
Office.
Laboratory: Section of room separated by partitions for centrifuges and preparation of specimens.
Chemistry department:
Office.
Laboratory: Facilities for water, food, drug, toxicology, and/or industrial hygiene analyses.
Instrument room: Facilities for darkening.
Research and investigation:
Laboratory: Complete laboratory facilities within unit.
Biologicals department:
Adequate refrigeration.
Deep freeze unit.
Room temperature storage.
Central services:
Culture media and reagent preparation room.
Glassware cleaning room.
Acid cleaning unit.
Sterilizing room for culture media and clean glassware only.
Supply room for storage and issue of sterile supplies, general supplies, chemicals, and glassware. Adjacent to sterilizing and glassware cleaning room.
Bulk storage room.
Janitor service room.
Maintenance and utilities unit: Provisions for metal and woodwork, and glassblowing.
Incinerator (animal).
Animal quarters:
Animal rooms.
Room for cleaning and sterilizing cages.
Preparation room for food and bedding.
Operating and animal inoculation room.
Facilities for personnel:
Men's locker room with washroom and shower.
Women's locker room with washroom and shower.
Rest room.
Lunch room.
Staff toilets.

Additional facilities. If the following activities are included, minimum requirements will be as follows:

Consultation and evaluation service to local laboratories:
Office.
Laboratory.
Manufacture of biologicals: This department, including Blood and Blood Products, shall be adequately isolated from the other laboratories. In the case of smallpox and tetanus vaccine preparation separation may be satisfactory in the same building if a separate entrance is provided and no interior connection exists to this department. A separate mechanical ventilating system must be provided.
Office.
Laboratory: Cubicles for isolation work.
Culture media room.
Sterile room.
Sterilizing room.
Glasswashing room.
Adequate refrigeration.
Deep freeze unit.
Storage room, controlled temperature.
Packaging room.
Blood and blood products:
Laboratory: Space and equipment for processing.
Sterile room.
Office (may be shared with biologicals department).
Adequate refrigeration (may be shared with biologicals department).
Storage room (may be shared with biologicals department).
Pathology department: Laboratory.
Clinical laboratory department: Laboratory.
Virology department: This department shall be efficiently isolated from other laboratories including a separate mechanical ventilating system:
Office.
Laboratory: Cubicles for isolation work.
Sterile room.
Sterilizing room.
Inoculation and operating room.
Animal quarters:
Facilities for storage of food and bedding.
Cleaning and sterilizing of cages.
Locker room with washroom and shower.

§ 53.143 *Diagnostic or treatment centers.*

The extent of the diagnostic, treatment, and ancillary facilities will be determined by the services contemplated and the estimated patient load.

Where the facility is to be an integral part of a hospital, the requirements of Adjunct Diagnostic and Treatment Facilities and Outpatient Department of General Hospital section B–1 shall apply.

Where a diagnostic or treatment center is not to be an integral part of a hospital, then the facilities listed below must be provided unless available for convenient use in an associated health facility.

The planning of diagnostic or treatment centers should provide for the privacy of the patient during interview, examination, and treatment.

Administration facilities:
- Administrative, business, and receptionist space.
- Medical records space.
- Waiting space.
- Public telephone.

Diagnostic facilities. (In certain types of specialized projects, such as mental health clinics, the need for radiological and laboratory facilities will be determined by the services contemplated.):
- Radiographic room with adjoining dark room.
- Utility and sterilizing facilities.
- Laboratory.

Diagnostic and treatment facilities: If medical examination and/or treatment are to be included the following shall be added:
- Consultation, examination and treatment space is required by the services contemplated.

Service facilities:
- Storage.
- Janitor's closet.
- Employees' locker facilities.
- Toilet facilities.
- Boiler room.
- Incinerator.
- Accessible parking space.[1]

§ 53.144 *Rehabilitation facilities (general).*

Wherever possible rehabilitation facilities should be located on the ground floor. The evaluation and treatment facilities should be grouped to facilitate integration of the program and located for convenient access by inpatients and outpatients.

In determining the size of facilities for in and outpatient services, it should be considered that the outpatient load is usually much larger than the inpatient load.

§ 53.145 *Rehabilitation facilities (multiple disability) in a hospital.*

The facilities listed below which are in an existing hospital and which are conveniently located and available for use need not be provided.

Administration

- Appointment and cashier's space.
- Office for volunteer services coordinator.[1]
- Lobby and waiting room.
- Public telephone booth.
- Public toilets.
- Personnel toilets.[1]

Evaluation and Treatment Facilities

- Conference and library room.
- Medical facilities:
  - Offices, examination rooms and work space for medical personnel such as physicians and nurses.
  - Dental facilities:[2]
    - Office and work space for provision of appropriate dental treatment.
  - Physical therapy:
    - Office and work space for physical therapy staff.
    - Rehabilitation gymnasium for adults.
    - Rehabilitation gymnasium for children if children are included in program.[1]
    - Hydrotherapy area.
    - Thermotherapy and massage area.
    - Storage for supplies and equipment.
    - Outdoor exercise area.[1]
  - Occupational therapy:
    - Office and work space for occupational therapy staff.
  - Therapy area:
    - In large units space should be divided for diversified work (separate room for children is desirable).
  - Storage space for supplies and equipment.
  - Facilities for teaching activities of daily living.
  - Speech and hearing facilities:[2]
    - Offices for therapists and space for examination and treatment.
  - Artificial appliance facilities:
    - Space for fitting and adjustment service.
- Psychological facilities:
  - Office and work space for psychological testing evaluation and counseling.
- Social service facilities:
  - Office space for private interview and counselling.
- Vocational facilities:
  - Office and work space for counseling, evaluation, prevocational programs and placement. A prevocational area is not required for facilities exclusively serving children under the age of 12.
  - Special education:
    - Schoolroom for children if children are included in program.
- General facilities:
  - Locker, toilet and shower facilities for patients.
  - Clean and soiled linen facilities.
  - Locker and toilet facilities for female volunteers.[1]
  - Locker and toilet facilities for male volunteers.[1]

Nursing Unit for Adults[1]

General: It is recommended that this unit be located on the ground floor near the treatment area. Approximately one-fifth of the beds should be in two-bed rooms, the remainder in four-bed rooms. Each patients' room shall have a lavatory. Generous wardrobe space for each patient should be provided in the patients' rooms. A toilet room, with lavatory, accessible from adjoining patients' rooms, is recommended. No patients' room shall be located on any floor which is below grade.

Size of nursing unit:
- Not more than 50 beds, 35 to 40 beds recommended.

Minimum patients' room areas:
- 100 square feet per bed in multi-bed patients' rooms.

Service facilities in each nursing unit for adults:
- Nurses' station.
- Nurses' toilet.
- Utility room.
- Examination and treatment room.
- Floor pantry.
- Solarium: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
- Dining room: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
- It is recommended that the dining and solarium area be adjacent so that they can be combined into one room for recreational and other group activity purposes.
- Toilet facilities.
  - If centrallized toilets are provided, a toilet room for each sex at a ratio of 1 water closet to each 5 beds will be required. One of the water closet enclosures in each toilet room should be at least 5 feet by 6 feet to permit toilet training.
  - If toilets provided adjacent to patients' rooms are not large enough, a separate training toilet, at least 5 feet by 6 feet, should be provided.
- Bedpan facilities.
- Bathing facilities.
  - 1 bathroom for each sex.
  - 1 shower to each 8 beds.
  - 1 bathtub.
- Stretcher and wheelchair parking space.
- Clean linen storage.
- Equipment and supply storage.
- Janitor's closet.
- Telephone alcove (one per floor).
- Patients' laundry.[1]

Nursing Unit for Children[1]

General: It is recommended that this unit be located on the ground floor near the treatment area. No patients room should have more than 4 beds. Provide 2 two-bed rooms in each nursing unit. Each patients' room shall have a lavatory. Generous wardrobe space for each patient should be provided in the patients' room. A toilet room, with lavatory, accessible from adjoining patient's room is recommended. No patients' room shall be located on any floor which is below grade.

Size of nursing unit:
- Not more than 30 beds.

Minimum room areas:
- 100 square feet per bed in two-bed and four-bed rooms. 80 square feet per bed recommended for crib room if provided.

Service facilities in each nursing unit for children:
- Nurses' station.
- Nurses' toilet.
- Utility room.
- Examination and treatment room.
- Floor pantry.
- Solarium: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
- Dining room: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
- It is recommended that the dining and solarium area be adjacent so that they can be combined into one room for recreational and other group activity purposes.
- Toilet facilities.
  - If centralized toilets are provided, a toilet room for each sex at a ratio of 1 water closet to each 5 beds will be required. One of the water closet enclosures in each toilet room should be at least 5 feet by 6 feet to permit toilet training.
  - If toilets provided adjacent to patients' rooms are not large enough a separate training toilet, at least 5 feet by 6 feet should be provided.
- Bedpan facilities:
- Bathing facilities:
  - 1 bathroom for each sex.
  - 1 shower to each 8 beds.
  - 1 bathtub.
- Stretcher and wheelchair parking space.
- Clean linen storage.
- Equipment and supply storage.
- Janitor's closet.
- Telephone alcove (one per floor).

Service Department

In general the same service facilities will be required as those noted under separate Rehabilitation Facility (Multiple Disability) for Inpatients and Outpatients except that those service facilities which are available in the adjoining hospital need not be duplicated.

§ 53.146 *Separate rehabilitation facility (multiple disability) for inpatients and outpatients.*

Administration

- Business office with information counter, telephone switchboard and cashier's window.
- Administrator's office.

[1] Desirable but not mandatory.
[2] If required by program.

Director of nurses' office.
Office for volunteer services coordinator.[1]
Case records room.
Library for staff and patients.
Lobby and waiting room.
Public telephone booth.
Public toilets.
Personnel toilets.

Evaluation and Treatment Facilities

Clinical laboratory.[1]
Radiology: [2] Radiographic room with adjoining dark room, toilet and office.
Pharmacy: [2] Drug room with minimum facilities for compounding.
[1] If required by program.
Conference and library room.
Medical facilities:
Offices, examination rooms and work space for medical personnel such as physicians and nurses.
Dental facilities: [2] Office and work space for provision of appropriate dental treatment.
Physical therapy:
Office and work space for physical therapy staff.
Rehabilitation gymnasium for adults.
Rehabilitation gymnasium for children if children are included in program.[1]
Hydrotherapy area.
Thermotherapy and massage area.
Storage for supplies and equipment.
Outdoor exercise area.[1]
Occupational therapy:
Office and work space for occupational therapy staff.
Therapy area.
In large units space should be divided for diversified work (separate room for children is desirable).
Storage space for supplies and equipment.
Facilities for teaching activities of daily living.
Speech and hearing facilities: [2] Offices for therapists and space for examination and treatment.
Artificial appliance facilities: Space for fitting and adjustment service.
Psychological facilities: Office and work space for psychological testing evaluation and counseling.
Social service facilities: Office space for private interview and counseling.
Vocational facilities:
Office and work space for counseling, evaluation, prevocational programs and placement. A prevocational area is not required for facilities serving children under the age of 12.
Special education: Schoolroom for children are included in program.
General facilities:
Locker, toilet and shower facilities for patients.
Clean and soiled linen facilities.

Nursing Unit for Adults

General: It is recommended that this unit be located on the ground floor near the treatment area. Approximately one-fifth of the beds should be in two-bed rooms, the remainder in four-bed rooms. Each patients' room shall have a lavatory. Generous wardrobe space for each patient should be provided in the patients' rooms. A toilet room, with lavatory, accessible from adjoining patients' rooms, is recommended. No patients' room shall be located on any floor which is below grade.
Size of nursing unit: Not more than 50 beds, 35 to 40 beds recommended.
Minimum patients' room areas: 100 square feet per bed in multi-bed patients' rooms.
Service facilities in each nursing unit for adults:
Nurses' station.
Nurses' toilet.
Utility room.
Examination and treatment room.
Floor pantry.
Solarium: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
Dining room: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
It is recommended that the dining and solarium area be adjacent so that they can be combined into one room for recreational and other group activity purposes.
Toilet facilities.
If centralized toilets are provided, a toilet room for each sex at a ratio of 1 water closet to each 5 beds will be required. One of the water closet enclosures in each toilet room should be at least 5 feet by 6 feet to permit toilet training.
If toilets provided adjacent to patients' rooms are not large enough, a separate training toilet, at least 5 feet by 6 feet, should be provided.
Bedpan facilities.
Bathing facilities:
1 bathroom for each sex.
1 shower to each 8 beds.
1 bathtub.
Stretcher and wheelchair parking space.
Clean linen storage.
Equipment and supply storage.
Janitor's closet.
Telephone alcove (one per floor).
Patients' laundry.[1]
General: It is recommended that this unit be located on the ground floor near the treatment area. No patients' room should have more than 4 beds. Provide 2 two-bed rooms in each nursing unit. Each patients' room shall have a lavatory. Generous wardrobe space for each patient should be provided in the patients' rooms. A toilet room, with lavatory, accessible from adjoining patients' room is recommended. No patients' room shall be located on any floor which is below grade.

Nursing Unit for Children [2]

Size of nursing unit: Not more than 30 beds.
Minimum patients' room areas: 100 square feet per bed in 2-bed and 4-bed rooms. 80 square feet per bed recommended for crib room if provided.
Service facilities in each nursing unit for children:
Nurses' station.
Nurses' toilet.
Utility room.
Examination and treatment room.
Floor pantry.
Solarium: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
Dining room: Provide 25 square feet per bed for 75 percent of beds on nursing unit.
It is recommended that the dining and solarium area be adjacent so that they can be combined into one room for recreational and other group activity purposes.
Toilet facilities.
If centralized toilets are provided, a toilet room for each sex at a ratio of 1 water closet to each 5 beds will be required. One of the water closet enclosures in each toilet room should be at least 5 feet by 6 feet to permit toilet training.
If toilets provided adjacent to patients' rooms are not large enough, a separate training toilet, at least 5 feet by 6 feet, should be provided.
Bedpan facilities.
Bathing facilities:
1 bathroom for each sex.
1 shower to each 8 beds.
1 bathtub.
Stretcher and wheelchair parking space.
Clean linen storage.
Equipment and supply storage.
Janitor's closet.
Telephone alcove (one per floor).

Service Department

Central sterilizing and supply room.
Dietary facilities:
Main kitchen.
Dietitians' space.
Dishwashing room.
Adequate refrigeration.
Garbage disposal facilities.
Day storage room.
Personnel dining space. Provide 12 square feet per person; may be designed for multiple seatings.
Outpatients' dining facilities as required.
Janitor's closet.
Housekeeping facilities:
Laundry; unless commercial or other laundry facilities are available, each Rehabilitation Facility shall have a laundry of sufficient capacity to process full 7 days laundry in work week and contain the following areas:
Sorting area.
Processing area.
Clean linen and sewing room separate from laundry.
Where no laundry is provided in the hospital, a soiled linen room and a clean linen and sewing room shall be provided.
Housekeeper's office.
Mechanical facilities:
Boiler and pump room.
Shower and locker facilities.[1]
Engineers' space.
Maintenance shops: At least one room shall be provided. In large rehabilitation facilities, separation of carpentry, painting and plumbing is recommended.
Employees' facilities:
Female staff and volunteers lockers:
Locker room.
Rest room.
Toilet and shower room.
Female help lockers:
Locker room.
Rest room.
Toilet and shower room.
Male staff and volunteers lockers:
Locker room.
Toilet and shower room.
Male help lockers:
Locker room.
Toilet and shower room.
Storage:
General storage. 20 square feet per bed and to be concentrated in one area.
Storage of out-door equipment.[1]

§ 53.147 *Separate rehabilitation facility (multiple disability) for outpatients only.*

Administration

Business office with information counter, telephone switchboard and cashier's window.
Administrator's office.
Director of nurses' office.
Office for volunteer services coordinator.[1]
Case records room.
Library for staff and patients.
Lobby and waiting room.
Public telephone booth.
Public toilets.
Personnel toilets.[1]

Evaluation and Treatment Facilities

Conference and library room.

[1] Desirable but not mandatory.
[2] If required by program.

Medical facilities:
- Offices, examination rooms and work space for medical personnel such as physicians and nurses.
- Dental facilities:[2] Office and work space for provision of appropriate dental treatment.
- Physical therapy:
  - Office and work space for physical therapy staff.
  - Rehabilitation gymnasium for adults.
  - Rehabilitation gymnasium for children if children are included in program.[1]
  - Hydrotherapy area.
  - Thermotherapy and massage area.
  - Storage for supplies and equipment.
  - Outdoor exercise area.[1]
- Occupational therapy:
  - Office and work space for occupational therapy staff.
  - Therapy area: In large units space should be divided for diversified work (separate room for children is desirable).
- Storage space for supplies and equipment.
- Facilities for teaching activities of daily living.
- Speech and hearing facilities:[2] Offices for therapists and space for examination and treatment.
- Artificial appliance facilities: Space for fitting and adjustment service.

Psychological facilities: Office and work space for psychological testing evaluation and counseling.

Social service facilities: Office space for private interview and counseling.

Vocational facilities:
- Office and work space for counseling, evaluation, prevocational programs and placement. A prevocational area is not required for facilities exclusively serving children under the age of 12.
- Special Education:
  - Schoolroom for children if children are included in program.

General facilities:
- Locker, toilet and shower facilities for patients.
- Clean and soiled linen facilities.

Nursing Units

Does not apply.

Service Facilities

Dietary facilities.[2]

Housekeeping facilities: Clean and soiled linen storage.

Janitors' closet(s).

Mechanical facilities:
- Boiler room.
- Maintenance shop.

Employees' facilities:
- Female staff and volunteers lockers:
  - Locker room.
  - Rest room.
  - Toilet and shower room.
- Female help lockers:
  - Locker room.
  - Rest room.
  - Toilet and shower room.
- Male staff and volunteers lockers:
  - Locker room.
  - Toilet and shower room.
- Male help lockers:
  - Locker room.
  - Toilet and shower room.

Storage:
- General storage.

§ 53.148 *Single disability rehabilitation facility.*

The requirements for a single disability rehabilitation facility will be dependent upon the specific project program, which shall include, however, services in the four basic areas—medical, psychological, social and vocational. In general the single disability rehabilitation facility will follow the pattern established for the multiple disability rehabilitation facility. In other respects the general standards set forth herein shall apply.

§ 53.149 *Nursing homes.*

General: The facilities listed below need not be provided if functionally available in an adjoining hospital.

Nursing homes should be planned to approximate the home atmosphere as closely as possible. It is desirable that larger bedrooms be provided than are generally provided in General Hospitals, that each bed be equitably placed in relation to the windows, that wardrobe and closet space in patients' rooms be more generous. The use of more open, informal planning, the provision of inviting recreational spaces both indoors and out, the use of decoration, color, furnishings, etc., to minimize institutional effect is recommended.

Administration Department

Business office.[3]

Administrator's office.[3]

Consultation room.[1]

Lobby and waiting room.

Public toilet facilities.

Public telephone.

Ancillary Facilities

Recreation room.

Occupational activities room.

Patients' dining room.

Provide at least 50 square feet per bed for 75 percent of the total beds in the Nursing Home for recreation, occupational activities and patients' dining.

It is recommended that the recreation, occupational activities and patients' dining areas be adjacent so that they can be combined into one room for recreational and other group activity purposes.

Physical therapy services as required.

Patients' laundry.[1]

Storage for occupational and recreational equipment.

Outdoor recreation area.[2]

Nursing Department

General: No patients' room shall have more than 4 beds. Six beds, not more than three beds deep from outside wall, will be permitted in Nursing Homes of over 100 beds. Not more than 2 beds per patients' room is desirable. Each patients' room shall have a lavatory. A toilet room, with lavatory, accessible from adjoining patients' room is recommended. At least one single room with private toilet shall be provided in each nursing unit for each sex for purposes of medical isolation, incompatability, personality conflict, etc. No patients' room shall be located on any floor which is below grade.

Size of nursing unit: Should not have more than 40 beds. Larger units will be permitted if additional service facilities are provided as required.

Minimum patients' room areas: 80 square feet per bed (100 square feet desirable) in multiple bed patients' rooms; 100 square feet per bed (125 square feet desirable) in one-bed patients' rooms.

Service facilities for each nursing unit:
- Nurses' station.
- Nurses' toilet.
- Utility room.
- Treatment room.
- Floor pantry: one for each nursing floor in multi-story buildings.
- Toilet facilities:
  - If centralized toilets are provided, a toilet room for each sex at a ratio of 1 water closet to each 8 beds will be required. One of the water closet enclosures in each toilet room should be at least 5 feet by 6 feet to permit toilet training.
  - If toilets provided adjacent to patients' rooms are not large enough, a separate training toilet, at least 5 feet by 6 feet, should be provided.
- Bedpan facilities.
- Bathing facilities:
  - 1 bathtub.
  - 1 shower. (A separate bath room for each sex, containing at least one bathtub and one shower, is recommended. A ratio of one bathtub or one shower for each 10 beds is desirable.)
- Stretcher and wheelchair parking area.
- Clean linen storage.
- Equipment and supply storage.
- Janitor's closet.

Service Department

Dietary facilities:
- Kitchen.
- Dishwashing room.
- Adequate refrigeration.
- Garbage disposal facilities.
- Personnel dining facilities.

Janitors' closet.

Housekeeping facilities:
- Clean linen facilities.
- Soiled linen facilities.
- If commercial laundry is not available, laundry facilities shall be provided.

Mechanical facilities:
- Boiler room.
- Maintenance facilities—at least a bench in boiler room. In larger Nursing Homes, separate maintenance facilities should be provided.
- Incinerator.[1]

Employees' facilities:
- Male locker room and toilet.
- Female locker room and toilet.

Storage:
- General storage—15 square feet per bed and to be concentrated in one area.
- Patients' clothes storage room.
- Storage for outdoor equipment.[1]

§ 53.150 *Details.*

The following general requirements apply to all hospitals. Conditions in special hospitals, not covered in the general requirements, are specifically noted.

General Requirements for Hospitals

Door widths: 3 feet 8 inches (3 feet 10 inches preferable) at all:
- Bedrooms.
- Treatment rooms.
- Operating rooms.
- X-ray therapy rooms.
- Delivery rooms.
- Solariums.
- X-ray rooms.
- Physical therapy rooms.
- Labor rooms.

No doors shall swing into the corridor except closet doors. (Does not apply to mental and psychiatric hospitals and mental units in general hospitals.)

Corridor widths: 7 feet, (8 feet preferred). A greater width should be provided at elevator entrances.

Stair Widths: The width of stairways shall be not less than 3 feet, 8 inches. The width shall be measured between handrails where handrails project more than 3½ inches.

Elevators: Platform size—5 feet 4 inches x 8 feet. Door opening—3 feet 10 inches. See also mechanical section.

Laundry chutes: Use optional. Where used 2' 0'' minimum diameter.

Nurses' call system: (Does not apply to mental and psychiatric hospitals and mental units in general hospitals.) Call station between each two beds in two-bed rooms and four-bed rooms and one in each one-bed room.

[1] Desirable but not mandatory.
[2] If required by program.
[3] May be combined.

Corridor dome light over each nursing room.
Dome light and buzzer at nurses' station, utility room and floor pantry.

Fire safety: Fire alarm systems, sprinklers and chemical extinguishing systems, fire doors, and portable fire extinguishers shall conform to the requirements of the local and State codes. Where no local or State codes are applicable, the standards of the National Board of Fire Underwriters shall govern. Exit facilities shall follow the recommendations of the Building Exits Code of the National Fire Protection Association.

Ray protection: Rooms or areas containing X-ray equipment shall have ray protection as recommended in National Bureau of Standard's Handbook 41.

Radioisotopes: Where radioisotopes are used or stored, protection against ionizing radiations shall conform with the recommendations established by the National Committee on Radiation Protection which are published in the Handbooks of the National Bureau of Standards.

X-ray equipment: X-ray equipment shall comply with the applicable recommendations contained in the National Electrical Code, and in Handbook 41 as prepared by the National Bureau of Standards.

Ceiling heights: With the following exceptions shall not be less than 9 feet clear:
Ceiling heights for corridors, storage closets and other minor auxiliary rooms may be lower.
Ceiling heights in diagnostic or treatment centers, rehabilitation facilities and nursing homes shall not be less than 8 feet clear, except in rooms containing equipment which requires a greater height.
Ceiling height for laundry shall not be less than 11 feet clear.
Ceiling height for kitchen shall not be less than 10 feet clear.
(Higher ceiling heights for kitchen and laundry are desirable.)

Insulation in ceilings: Ceilings of boiler rooms, kitchens and laundries shall be insulated where the floor directly above them is to be used for hospital purposes.

Parking space: Adequate parking space should be available for all health facilities.

Chronic Disease Hospitals, Rehabilitation Facilities and Nursing Homes

Space allowances: Space allowances shall be consistent with the need in areas used by patients using crutches, wheelchairs or wheel stretchers.

Doors: All doors through which patients will pass shall be at least 3 feet 8 inches wide. Doors at least 3 feet wide will be permitted at individual toilets adjacent to patients' bedrooms.

Corridors: Corridors used by patients shall be at least 8 feet wide. A greater width should be provided at elevator entrances.

Handrails: Handrails will be required on both sides of corridors used by patients in Chronic Disease Hospitals and Nursing Homes. Handrails are not required in corridors of Rehabilitation Facilities.

Thresholds: Thresholds at doorways shall be flush.

Telephone alcoves: Telephone alcoves shall be a minimum of 4 feet square. Phone shall be located on a shelf convenient for patients in wheelchairs. Doors to telephone booths are not recommended.

Drinking fountains: Drinking fountains shall be located in corridors of nursing units and treatment areas and lobby. The fountain shall be accessible to patients in wheelchairs.

Brackets: In rehabilitation facilities brackets should be provided adjacent to patients' beds for braces and crutches.

Water closet stalls: Water closet stalls for patient use shall have handrails on both sides. Curtains are recommended in lieu of doors to stalls.

Toilet rooms: Toilet rooms adjacent to patients' rooms shall permit movement of wheelchairs and shall have handrails on both sides.

Hardware: Hardware on water closet enclosures shall be operable from outside.

Lavatories: Lavatories for patient use shall be supported on brackets to allow wheelchairs to slide under.

Mirrors: Mirrors shall be arranged for the convenience of patients in wheelchairs as well as patients in a standing position.

Bathtubs: Bathtubs shall not be elevated in rehabilitation facilities. It is recommended that bathtubs shall not be elevated in Chronic Disease Hospitals and Nursing Homes. Handrails shall be provided at all bathtubs.

Showers: Showers should be approximately 4 feet square and should have handrails and curtains. Curbs shall be omitted.

Mental Hospitals, Psychiatric Hospitals and Psychiatric Units in General Hospitals

The principles of psychiatric security and safety shall be followed throughout. Materials and details of construction shall be such that patients will not be afforded opportunity for escape, suicide, hiding, etc. Care must be taken to avoid projecting sharp corners, exposed piping, heating elements, fixtures, hardware, etc.

Public Health Centers and Diagnostic or Treatment Centers

Width of corridors shall be not less than 5' 0". Greater width preferred. Windows of examination and treatment rooms shall be glazed with obscure glass to insure privacy.[1]

State Public Health Laboratories

Provide separate air conditioning or ventilation system for bacteriological and virus laboratories with ample supply and exhaust to function properly with closed windows. Emergency showers shall be provided in chemical laboratories. Each chemical laboratory room shall have a minimum of two exits. All windows must be screened.

§ 53.151 *Finishes.*

Floors:
The floors of the following areas shall have smooth, waterproof surfaces which are wear resistant:
Toilets.
Baths.
Bedpan rooms.
Floor pantries.
Utility rooms.
Treatment rooms.
Sterilizing rooms.
Janitors' closets.
The floors of the following areas shall be smooth and easily cleaned:
Pharmacies.
Laboratories.
Patient rooms.
The floors of the following areas shall be waterproof, greaseproof, smooth and resistant to heavy wear:
Kitchens.
Butcher shops.
Food preparation.
Formula rooms.
The floors of the following areas shall have conductive flooring as recommended by the National Fire Protection Association:
Operating rooms.
Delivery rooms.
Anesthesia rooms.
Adjoining spaces.

Walls:
The walls of the following areas shall have a smooth surface with painted or equal washable finish in light color. At the base, they shall be waterproof and free from spaces which may harbor ants and roaches:
All rooms where food and drink are prepared, served or stored.
The walls of the following areas shall have waterproof painted, glazed or similar finishes to a point above the splash or spray line:
Kitchens.
Sculleries.
Utility rooms.
Baths.
Showers.
Dishwashing rooms.
Janitors' closets.
Sterilizing rooms.
Spaces with sinks.
The walls of the following areas shall have waterproof glazed, painted or similar surface which will withstand washing to a distance of not less than 5' 0":
Operating rooms.
Delivery rooms.

Ceilings:
The ceilings of the following areas shall be painted with waterproof paint:
Operating rooms.
Delivery rooms.
All sculleries, kitchens and other rooms where food and drink are prepared.
The ceilings of the following areas shall be acoustically treated:
Corridors in patient areas.
Nurses' stations.
Labor rooms.
Utility rooms.[1]
Floor pantries.
Kitchens.[1]

State Public Health Laboratory

Floors:
Resilient, smooth and stain resistant: All laboratories other than chemistry laboratories.
Resilient, smooth and acid resistant: Chemistry laboratories.
Smooth, waterproof, grease-proof, easily cleaned, non-slip, resistant to heavy traffic:
Culture media rooms.
Glasswashing rooms.
Sterilization rooms.
Acid cleaning rooms.
Animal rooms.

Walls:
Waterproof, painted, glazed or similar finishes to a point above the splash or spray line. They shall be without cracks, and in conjunction with floors shall be waterproof and free of cracks and spaces which may harbor ants and roaches:
Laboratories.
Incubator rooms.
Sterilizing rooms.
Culture media rooms.
Glasswashing rooms.
Acid cleaning rooms.
Inoculation and operating rooms.
Animal rooms.
Same as above, but finish to reach to ceiling: Sterile rooms.

Ceilings: Waterproof painted: Sterile rooms.

Shelves and cabinets: Shelves and cabinets which are used for the storage of food, dishes, and cooking utensils shall be so constructed and mounted that there shall be no openings or spaces which cannot be cleaned and which might harbor vermin or insects. Cabinets which are used for the storage of open food containers and dishes shall be dust tight.

Chronic Disease Hospitals, Rehabilitation Facilities and Nursing Homes

Wainscot: A wainscot of durable material should be provided in all rooms used by patients for protection of walls against damage caused by wheelchairs, stretchers and carts. Such a wainscot is desirable but not mandatory in Chronic Disease Hospitals and Nursing Homes.

[1] Desirable but not mandatory.

§ 53.152 *Structural.*

A. *Codes.* All construction shall be in accordance with the applicable local and State building codes and regulations. In areas which are not subject to local or State building codes, the recommendations of the following nationally recognized technical and engineering authorities shall be adopted insofar as such recommendations are not in conflict with the minimum general standards as set forth herein.

1. *American Concrete Institute.* (a) For good engineering practice in the design, erection, allowable working stresses, and for the mixing and placing of concrete on structures built of reinforced concrete.

(b) For standard specifications for cast stone.

2. *American Standards Association.* (a) For standard practice in masonry construction.

(b) For the design and erection of structural steel for buildings (the American Institute of Steel Construction Code).

(c) For good practice in gypsum plastering, including requirements for lathing and furring.

(d) For good practice in the design and erection of reinforced gypsum concrete.

(e) For safe practice in the design and construction of elevators and dumbwaiters.

3. *American Society of Testing Materials.* (a) For the specifications on, and the methods of testing, for metals and the materials of masonry construction.

(b) For the methods of standard fire tests of building construction and materials and for the methods of fire tests of door assemblies.

4. *National Lumber Manufacturers' Association.* (a) For good practice in the use of wood in type of construction of which it is a part, and for the working stresses of stress-grade lumber and its fastenings.

5. *National Board of Fire Underwriters.* (a) For estimated and tested fire-resistance ratings of materials and constructions.

(b) For safe practice in the design and construction of chimneys and metal smoke stacks.

6. *National Bureau of Standards.* (a) Publication BMS 92 and other data for tested fire-resistive ratings of materials and constructions.

B. *Design data—General.* The buildings and all parts thereof shall be of sufficient strength to support all dead, live, and lateral loads without exceeding the working stresses permitted for the materials of their construction in generally accepted good engineering practice.

Special. Special provisions shall be made for machines or apparatus loads which would cause a greater load than the specified minimum live load.

Consideration shall be given to structural members and connections of structures which may be subject to hurricanes or tornadoes. Floor areas where partition locations are subject to change shall be designed to support, in addition to all other loads, a uniformly distributed load of 25 p. s. f.

Live loads. The following unit live loads shall be taken as the minimum distributed live loads for the occupancies listed:

Hospital wards, bedrooms and all adjoining service rooms which comprise a typical nursing unit (except solariums and corridors), 40 p. s. f.

Solariums, corridors in nursing units and all corridors above first floor, operating suites, examination and treatment rooms, laboratories, toilet and locker room, 60 p. s. f.

Offices, conference room, library, kitchen, radiographic room, corridors, and other public areas on first floor, 80 p. s. f.

Stairways, laundry, large rooms used for dining, recreation or assembly purposes, workshops, 100 p. s. f.

Records File room, storage, supply, 125 p. s. f.

Mechanical equipment room, 150 p. s. f.

Roofs (except use increased value where snow and ice may occur), 20 p. s. f.

Wind (as required by local conditions, but) not less than 15 p. s. f.

Earthquake—for structures located within an area subject to earthquake shocks, refer to "Uniform Building Code" of the Pacific Coast Building Officials Conference.

Reduction of live loads. (a) No reductions shall be applied to the roof live load.

(b) For live loads of 100 pounds or less per square foot, the design live load on any member supporting 150 square feet or more may be reduced at the rate of 0.08 percent per square foot of area supported by the member, except that no reductions shall be made for areas to be occupied as places of public assembly. The reduction shall exceed neither R as determined by the following formula nor 60 percent:

$$R = 100 \times \frac{D+L}{4.33\,L}$$

in which R = reduction in percent.

D = dead load per square foot of area supported by the member.

L = design live load per square foot of area supported by the member.

For live loads exceeding 100 p. s. f., no reduction shall be made, except that the design live loads on columns may be reduced 20 percent.

Supplementary information regarding design loads shall be in accordance with "American Standard Building Code Requirements for Minimum Design Loads in Buildings and Other Structures—Miscellaneous Publication M 179" of the National Bureau of Standards.

C. *Construction.* Foundations shall rest on natural solid ground and shall be carried to a depth of not less than one foot below the estimated frost line or shall rest on leveled rock or load-bearing piles when solid ground is not encountered. Footings, piers, and foundation walls shall be adequately protected against deterioration from the action of ground water. Reasonable care shall be taken to establish proper soil-bearing values for the soil at the building site. If the bearing capacity of a soil is not definitely known or is in question, a recognized load test may be used to determine the safe bearing value.

One-story buildings shall be constructed of not less than one-hour fire-resistive construction throughout except that boiler rooms, heating rooms, and combustible storage rooms shall be of three-hour fire-resistive construction.

Buildings more than one story in height shall be constructed of incombustible materials, using a structural framework of reinforced concrete or structural steel except that masonry walls and piers may be utilized for buildings up to and including three stories in height not accounting for Penthouses. The various elements of such buildings shall meet the following fire-resistive requirements:

Walls:	Hours
Party and firewalls	4
Exterior bearing walls	3
Exterior panel and curtain walls	3
Inner court walls	3
Bearing partitions	3
Non-load bearing partitions	1
Enclosures for stairs, elevators and other vertical openings	2
Columns, girders, beams, trusses	3
Floor panels (including beams and joists in same)	2
Roof panels (including beams and joists in same)	2

Stairs and platforms shall be reinforced concrete or structural steel with hard incombustible materials for the finish of risers and treads.

Rooms housing furnaces, boilers, combustible storage or other facilities which may provide fire hazards shall be constructed of a 3-hour fire-resistive construction.

§ 53.153 *Mechanical and electrical.*

1. *Heating; steam systems and ventilation—Codes.* The heating system, steam, system, boilers and ventilation shall be furnished and installed to meet all requirements of the local and State codes and regulations, and the regulations of the National Board of Fire Underwriters and the minimum general standards as set forth herein. Where there is no local or State boiler code, the recommendations of the A. S. M. E. shall apply. Gas fired equipment shall comply with the regulations of the American Gas Association.

Boilers. Boilers shall have the necessary capacity when operating at normal rating to supply the heating system, hot water, and steam operated equipment, such as sterilizers, laundry and kitchen equipment. Spare boiler capacity shall also be provided in a separate unit to replace any boiler which might break down, except that spare boiler capacity for heating will not be required in design temperature zone +20° F. or higher as shown by the current edition of the A. S. H. & V. E. Guide. Boilers which supply high pressure steam to sterilizers, kitchens, laundry, etc., shall meet the requirements of the city and State boiler codes for 125 pounds working pressure. It is desirable to operate boilers, supplying steam for laundries, at not less than 105 pounds pressure while boilers for sterilizers and kitchen may operate at 50 pounds pressure.

Heating system. The building shall be heated by a hot water, steam, or equal type heating system.

Steam system. A system of Steam and Return Mains and Appurtenances shall be provided to supply all equipment which requires steam heat.

Boiler accessories. Boiler feed pumps, return pumps and circulating pumps shall be furnished in duplicate, each of which has a capacity to carry the full load. Blow off valves, relief valves, non-return valves, injectors and fittings shall be provided to meet the requirements of the City and State Codes. Where no City or State Codes are in force the recommendations of the ASME shall apply.

Radiation. The necessary radiation shall be furnished in each room and occupied space to maintain a temperature of 70° F. except in operating, delivery, and nurseries where a temperature of 75° F. shall be maintained. In spaces where radiant heat is used, the minimum temperatures specified may be reduced to maintain an equivalent comfort level. Each radiator shall be provided with hand control valve except where individual room automatic control is provided.

Piping. Steam and hot water heating piping shall be installed with standard weight steel or iron pipe and cast iron fittings. Pipe used in heating and steam systems shall not be smaller sizes than prescribed by the latest edition of the American Society of Heating and Ventilating Engineers Guide. The ends of all steam mains and low points in steam mains shall be dripped.

Valves. Steam, return and heating risers, steam, return and heating mains shall be controlled separately by a valve. Each steam and return main shall be valved. Each piece of equipment supplied with steam shall be valved on the supply and return ends.

Thermostatic control. The heating system shall be thermostatically controlled in one or more zones.

Auxiliary heat. Radiation or ventilation systems in operating rooms, delivery rooms, recovery rooms and nurseries shall be ar-

ranged so that an auxiliary source of heat is available independent of the building space heating system. It may be desirable to serve such radiation or ventilation systems with steam which is available the year round.

Coverings. Boilers and smoke breeching shall be insulated with covering not less than 1-inch Magnesia blocks and ½-inch plastic asbestos finish. All high pressure steam and high pressure return piping shall be insulated with covering not less than the equivalent of 1-inch four ply asbestos covering. Heating mains in the boiler room, in unheated spaces, unexcavated spaces, and where concealed, shall be insulated with covering not less than 1-inch asbestos air cell.

Ventilation. Rooms which do not have outside windows and which are used by patients or hospital personnel, such as utility rooms, toilets, bed pan rooms, baths, sterilizer rooms, sterilizer equipment chambers and food storage rooms shall be provided with forced or suitable ventilation to change the air at least once every six minutes.

Kitchens, morgues and laundries which are located inside the hospital building shall be ventilated by exhaust systems which will discharge the air above the main roof or 50' 0" from any window. The ventilation of these spaces shall comply with the State or Local Codes but if no code governs, the air in the work spaces shall be exhausted at least once every six minutes with the greater part of the air being taken from the flat work ironer and ranges. Rooms used for the storage of combustible anesthetic agents, paints and other highly flammable materials shall be ventilated to the outside air with intake and discharge ducts. Oxygen storage and oxygen manifold rooms shall comply with the regulations set forth in the latest edition of the NFPA–56.

The operating and delivery rooms shall be provided with a supply ventilating system with heaters and humidifiers which will change the air at least eight times per hour by supplying fresh filtered air humidified to prevent static. No recirculation will be permitted. The air shall be removed from these rooms by forced system of exhaust. The adjoining sterilizing rooms and sterilizing equipment chambers shall be provided with exhaust ventilation.

Incinerators. Incinerators shall be installed in hospitals except where coal fired boilers suitable for waste destruction are available. If provided, the incinerator shall be designed to completely burn 60 percent wet garbage without objectionable smoke or odor. Where garbage is removed from the premises or disposed of by other means, incinerators will be required for the disposal of dressings, contagious and infectious materials, amputations and general rubbish. Rubbish incinerators shall be designed to completely burn 50 percent wet rubbish without objectionable smoke or odor. Gas or oil fired incinerators are desirable. The incinerator shall be designed with drying hearth, grates and combustion chamber lined with 9" fire brick. The gases shall be carried to a point above the roof of the hospital.

Incinerators for Diagnostic or Treatment Facilities need not conform in all respects to the above requirements but shall be of such design, construction and capacity to fulfill the needs of such facilities.

Tests. The systems shall be tested to demonstrate to the satisfaction of the State agencies having jurisdiction that: The boilers will carry the full load with one boiler in reserve, that the steam supply to all steam heated equipment is ample, that the ventilating equipment meets the minimum requirements and that all systems circulate satisfactorily without leaks or noise.

Health centers, nurses' residences, laboratories, diagnostic or treatment centers, rehabilitation facilities and nursing homes. A spare boiler may not be required for Health Centers, Nurses' Residences, Laboratories, Diagnostic or Treatment Centers, Rehabilitation Facilities and Nursing Homes. Incinerators are recommended in Health Centers, Nurses' Residences, Laboratories, Rehabilitation Facilities and Nursing Homes.

Separate special ventilation or air-conditioning systems are required for the bacteriological and virus laboratories.

Mental hospitals. Radiators, grilles, pipes, valves and equipment shall be so located that they are not accessible to patients. Hot air heating may be used for spaces occupied by mental patients.

2. *Plumbing and drainage.* All parts of the plumbing systems shall comply with all applicable local and State codes and the requirements of the State Department of Health and the minimum general standards as set forth herein. Where no State or local codes are in force or where such codes do not cover special hospital equipment, appliances, and water piping, the Report of the Coordinating Committee for a National Plumbing Code shall apply.

Water service. The water supply available for the hospital shall be tested and approved by the State Department of Health.

The water service shall be brought into the building to comply with the requirements of the local water department and shall be free of cross connections.

Hot water heaters and tanks. The hot water heating equipment shall have sufficient capacity to supply 6½ gallons of water at 125° F. per hour per bed for hospital fixtures, 4 gallons of water at 180° F. per hour per bed for kitchen and 4½ gallons of water at 180° F. per hour per bed for laundry.

The hot water storage tank or tanks shall have a capacity equal to 80 percent of the heater capacity.

Where direct fired hot water heaters are used they shall be of an approved high pressure type. Submerged steam heating coils shall be of copper. Storage tanks shall be of non-corrosive metal or be lined with non-corrosive material to comply with the A. S. M. E. Code for pressure vessels. Tanks and heaters shall be fitted with vacuum and relief valves, and where the water is heated by coal or gas they shall have thermostatic relief valves. Heaters shall be thermostatically controlled.

Water supply systems. From the cold water service and hot water tanks, cold water and hot water mains and branches shall be run to supply all plumbing fixtures and equipment which require hot or cold water or both for their operation. Pipes shall be sized to supply water to all fixtures with a minimum pressure of 15 pounds at the top floor fixtures during maximum demand periods. All plumbing fixtures except water closets, urinals, bedpan washers and drinking fountains shall have both hot and cold water supplies. Every supply outlet or connection to a fixture or appliance shall be protected against back flow in accordance with the provisions of standards for air gaps and backflow preventors as provided by plumbing Standards ASA–A40.4 and A40.6. Wherever the usage of fixture or appliance will permit, water supplied to all fixtures, open tanks and equipment, shall be introduced through a suitable air gap between the water supply and the flood level of the fixture. No connections shall be made which will permit backflow.

Hot water circulating mains and risers shall be run from the hot water storage tank to a point directly below the highest fixture at the end of each branch main. Where the building is higher than 3 stories, each riser shall be circulated. Water pipe sizes shall be equal to those prescribed by the Report of the Coordinating Committee for a National Plumbing Code.

Drainage system. All fixtures and equipment shall be connected through traps to soil and waste piping and to the sewer. Indirect waste connections shall be provided for devices or fixtures in which food, drink, water and ice are processed or stored, dishwashing machines, sterilizers, stills and equipment requiring cooling water. All shall conform to the requirements of the Report of the Coordinating Committee for a National Plumbing Code.

Rain water drains. Leaders shall be provided to drain the water from roof areas to a point from which it cannot flow into the basement or areas around the building. Courts, yards, and drives which do not have natural drainage from the building shall have catch basins and drains to low ground, storm water system, or dry wells. Where dry wells are used they shall be located at least 20' 0" from the building.

Gas piping. Gas appliances shall be approved by the American Gas Association and shall be connected in accordance with the requirements of the company furnishing the gas. Gas outlets shall not be provided in patients' bedrooms.

Oxygen systems. Where oxygen systems are installed the oxygen piping, outlets, manifolds, manifold rooms and storage rooms shall be installed in accordance with the requirements of N. F. P. A. Bulletins No. 56 and No. 565.

Pipe. The building drain, to a point 5' 0" from the building, shall be of cast iron. Soil stacks, drains, vents, waste lines, and leaders shall be of cast iron or steel except drain lines in back-fill or soil shall be of cast iron. Oxygen lines shall be of copper tubing not lighter than type "K" or I. P. S. red brass with fittings of brass or copper. Drains from sinks which use chemicals shall be of approved acid resistant material. Gas piping shall be of black iron with malleable fittings or copper tubing.

Valves. Each main, branch main, riser and branch to a group of fixtures of the water systems shall be valved.

Insulation. Tanks and heaters shall be insulated with covering equal to 1" 4-ply air cell.

Hot water and circulating pipes shall be insulated with covering equal to canvas jacketed 3-ply asbestos air cell.

Cold water mains in occupied spaces and in store rooms shall be insulated with canvas jacketed felt covering to prevent condensation. All pipes in outside walls shall also be insulated to prevent freezing.

Stand pipe system. The stand pipe system shall be installed as required by the local and State departments having jurisdiction. Where no local or State Codes are in force, the stand pipe system shall comply with the requirements of the National Board of Fire Underwriters.

Sprinkler system. To reduce the danger from fire, it is desirable to provide automatic sprinkler systems in those areas which are considered hazardous from a fire safety point of view. Such hazardous areas may include the soiled linen rooms, basement corridors, paint shops, wood working shops, trash rooms, storage rooms, accessible attics, laundry and trash chutes, and entire non-fireproofed buildings.

Plumbing fixtures. The material used for plumbing fixtures shall be of an approved non-absorptive acid resisting material.

Water closets in and adjoining patients' areas shall be of a quiet operating type.

Flush valves shall be designed for quiet operation with non-return stops, back flow preventers and silencers.

Faucet spouts shall have the discharge opening above the rim of the fixture. Goose neck spouts shall be used for patients' lavatories, nurses' lavatories and sinks which may be used for filling pitchers. Knee or elbow action controls shall be used for doctors' wash up, utility and clinic sinks and in treatment rooms. Elbow action spade handles shall be used on other lavatories and sinks used by doctors or nurses.

Drinking fountains. Drinking fountains shall comply with the A. S. A. Z4.2–1942.

Tests. All soil, waste, vent and drain lines shall be tested by water or air test before they are built in.

A smoke or chemical test shall be applied after fixtures have been set. Water pipe shall be hydraulically tested to a pressure equal to twice the working pressure. The tests shall demonstrate to the satisfaction of the State Agency that there are no leaks, that hot water is circulating satisfactorily, that all traps are properly vented, that there is ample supply of hot and cold water to all fixtures, that no fixture or equipment can be back syphoned and that there are no backflow connections.

Sterilizers. Sterilizers and autoclaves shall be provided of the required types and necessary capacity to adequately sterilize instruments, utensils, dressings, water, operating room material, such as gloves, sutures, etc., and as required for laboratories. The sterilizers shall be of recognized hospital types with approved controls and safety features.

Mental, Psychiatric, Tuberculosis and Chronic Disease Hospitals, Rehabilitation Facilities and Nursing Homes. Plumbing fixtures which require hot water and which are accessible to patients shall be supplied with water which is thermostatically controlled to provide a maximum water temperature of 110° F. at the fixture.

Special consideration shall be given to piping, controls, and fittings of plumbing fixtures as required by the types of mental patient and the doctor in charge of planning. No pipes or traps shall be exposed and fixtures shall be substantially bolted through walls. Generally, for disturbed patients, prison type water closets without seats shall be used and shower and bath controls shall not be accessible to patients.

The hot water heat and tank capacities for laundries in T. B. and mental hospitals may be reduced to 40 percent of that required for general hospitals.

Laboratories, nurses' residences and health centers. Emergency quick acting cold water showers are required at convenient points in chemical laboratories.

Only one system of hot water will be required in laboratories, nurses' residences and health centers and the elbow or knee action lavatory and sink faucet handles will be required only in clinical rooms of health centers.

3. *Electrical installations—Codes and regulations.* The installation of electrical work and equipment shall comply with all local and State codes and laws applicable to electrical installations and the minimum general standards as set forth herein. Where such codes and laws are not in effect or where they do not cover special installations the National Electrical Code and standards referenced therein which are applicable shall apply. The regulations of the local utility company shall govern service connections. All materials shall be new and shall equal standards established by the Underwriters Laboratories, Inc. Certificates of approval shall be issued by these departments having jurisdiction before the work will be approved for final payment.

Service. Connections from the service mains, with meter connections and service switches shall be installed as required by the Public Service Company.

Feeders and circuits. Separate power and light feeders shall be run from the service to a main switchboard and from there subfeeders shall be provided to the motors and power and light distributing panels. Where there is only one service feeder, separate power and light feeders from the service entrance to the switchboard will not be required. From the power panels feeders shall be provided for large motors, and circuits from the light panels shall be run to the lighting outlets. Large heating elements shall be supplied by separate feeders from the Power or Light Service as directed by the local Public Service Company. Independent feeders shall be furnished for X-ray equipment.

Switchboard and power panels. Circuit breakers or dead front type fused switches shall be installed to protect all feeders and sub-feeders. Motors shall be connected with breakers or fused switches.

Light panels. Light panels shall be provided on each floor for the lighting circuits on that floor. Light panels shall be located near the load centers not more than 100' 0" from the farthest outlet.

Lighting outlets and switches. All occupied areas shall be adequately lighted as required by duties performed in the space. Patients' bedrooms shall have as a minimum general illumination a night light and a patient's reading light. The outlets for general illumination and night lights shall be switched at the door. Switches in patients' rooms shall be of an approved mercury or equal, quiet operating type, or shall be placed in the corridor. Operating and delivery rooms shall have general illumination and special lights for the tables each on an independent circuit.

Explosion-proof equipment. All electrical equipment in operating, delivery and emergency rooms and anesthesia storage and induction rooms less than 5' 0" above the floor shall be explosion-proof.

X-ray film illuminator. Each operating room shall have a film illuminator.

Receptacles (convenience outlets). Receptacles suitable for the service shall be located where plug-in service is required. Each bedroom shall not have less than two duplex receptacles, with at least one receptacle near the head of each bed. Polarized receptacles for use of special equipment such as portable X-ray, shall be installed in all nursing corridors, not more than 50 feet apart and at locations convenient to operating, delivery, and emergency rooms. At least three three-pole grounded receptacles shall be installed in each operating, delivery, and emergency room.

Emergency lighting. Emergency lighting shall be provided for exits, stairs, and patient corridors which shall be supplied by an emergency service, an automatic emergency generator or battery with automatic switch. Operating and delivery room lights shall be connected with an automatic transfer switch which will throw the circuits to the emergency service in case of current failure. Should an emergency service from the street be used it shall be from a generating plant independent of that used for the main electric service.

Nurses call. Each patient shall be furnished with a nurses' call station which will register a call from the patient; at the corridor door, at the nurses' station, and in each pantry and utility room of the nursing unit. A duplex unit may be used for 2 patients. Indicating lights shall be provided at each station where there are more than two beds in a room. Nurses' call stations will not be required for beds which are used only for children. Operating, delivery and recovery rooms, rooms used for children and nurseries shall have one emergency call each for use of the nurse. Wiring for nurses call systems shall be installed in conduit.

Lighting fixtures. Lighting fixtures shall be furnished for all lighting outlets. They shall be of a type suitable for the space. Should ceiling lights be used in patients' rooms, they shall be of a type which does not shine in the patients' eyes.

Fire Alarms. A manually operated fire alarm system shall be installed in each hospital and nursing home. It is recommended that this system be coded and electrically supervised. The alarm system shall comply with applicable local codes, or in the absence of such codes the "Building Exits Code" shall apply.

Clocks. A clock system is desirable but not mandatory. Where provided, it should be complete with master clock and time indicator clocks in administrative offices, main lobby, and work areas as required.

Tests. Lighting fixtures, all wiring and equipment shall be tested to show that it is free from grounds, shorts or open circuits.

Health Centers, Nurses' Residences, Laboratories, Diagnostic or Treatment Facilities, and Separate Rehabilitation Facilities for Outpatients Only. Emergency lighting and call systems will not be required in health centers, Nurses' Residences, Laboratories, Diagnostic or Treatment Facilities and Separate Rehabilitation Facilities for Outpatients only except as provided for by local and State codes.

Mental hospitals. No lighting fixtures, switches, receptacles or electrical equipment shall be accessible to mental patients.

Nurses' call systems will not be required in areas occupied by mental patients.

4. *Elevators and dumbwaiters—Codes.* The elevator installations shall comply with all local and State Codes, American Standard Safety Code for Elevators, the National Board of Fire Underwriters, the National Electric Codes, and the minimum general standards as set forth herein.

Number of cars. Any hospital or nursing home with patients on one or more floors above the first or where the operating or delivery rooms are above the first floor shall have at least one electric motor driven elevator. Hospitals or nursing homes with a bed capacity of from 60 to 200 above the first floor shall have not less than two elevators. Hospitals with a bed capacity of from 200 to 350 above the first floor shall have not less than 3 elevators, two passenger and one service. A larger number may be required by the hospital plan, a large visitors' traffic and food distribution.

Elevators with a rise of more than 6 stories require special consideration.

Cab. Cabs shall be constructed with fireproof material. Passenger cab platforms shall be not less than 5' 4" x 8' 0" with a capacity of 3,500 pounds. Service elevators shall be of sufficient size to receive a stretcher with patient.

Cab and shaft doors shall be not less than 3' 10" clear opening.

Controls. Elevators, for which operators will not be employed, shall have automatic push-button control, signal control or dual control for use with or without operator. Where two push-button elevators are located together and where one such elevator serves more than three floors and basement; they shall have collective or signal control. Where the car has a speed of more than 100' 0" per minute or has a rise of four or more floors, the elevator shall be equipped with automatic self-leveling control which will automatically bring the car platform level with the landing with no load or full load. Multivoltage or variable voltage machines shall be used where speeds are greater than 150' 0" per minute. For speeds above 350' 0" per minute, the elevators shall be of the gearless type.

Dumbwaiters. Dumbwaiter cabs shall be not less than 24" x 24" x 36" of steel with one shelf to operate at speed of 50' to 100' per minute when carrying a load of 100 pounds. Dumbwaiters serving basement and four floors shall have a minimum speed of 100' 0".

Tests. Elevator machines shall be tested for speed and load with and without loads in both directions and shall be given overspeed tests as covered by the "Safety Code for Elevators."

5. *Refrigeration—Codes.* The refrigerators and refrigerating systems shall be furnished and installed to meet all requirements of the local and State Codes and regulations, the National Board of Fire Underwriters, and the minimum general standards as set forth herein.

This section shall include portable refrigerators, built-in refrigerators, garbage

refrigeration, ice-making and refrigerator equipment, morgue boxes.

Box construction. Boxes shall be insulated with waterproof, nonabsorbent, verminproof insulation. For the portable boxes, the insulation in the doors and walls shall be equal to 2-inch cork. Outer walls and doors of the walk-in boxes shall have insulation equal to 4-inch cork. Boxes shall be lined with nonabsorbent sanitary material which will withstand the heavy use to which it will be subjected and constructed so as to be easily cleaned.

Refrigerators of adequate capacity shall be provided in all kitchens and other preparation centers, where perishable foods will be stored.

In the main kitchen, a minimum of two separate sections or boxes shall be provided, one for meats and dairy products, and one for general storage.

Refrigerator machines. Toxic, "irritant", or inflammable refrigerants shall not be used in refrigerator machines located in buildings occupied by patients.

The compressors and evaporators shall have sufficient capacity to maintain temperatures of 35° F. in the meat and dairy boxes, and 40° F. in the general storage boxes when the boxes are being used normally. Compressors shall be automatically controlled.

Tests. Compressors, piping, and evaporators shall be tested for leaks and capacity.

6. *Kitchen equipment—Codes.* The kitchen equipment shall be so constructed and installed as to comply with the applicable local and State laws, codes, regulations and requirements, and with the applicable sanitation standards of Public Health Bulletin No. 280, entitled "Ordinance and Code Regulating Eating and Drinking Establishments, recommended by the U. S. Public Health Service," and with the minimum general standards set forth herein.

Equipment. The equipment shall be adequate and so arranged as to enable the storage, preparation, cooking, and serving of food and drink to patients, staff and employees to be done in an efficient and sanitary manner. The equipment shall be selected and arranged in accordance with the types of food service adopted for the hospital.

Adequate cabinets or other facilities shall be provided for the storage or display of food, drink, and utensils, and shall be designed as to protect them from contamination by insects, rodents, other vermin, splash, dust, and overhead leakage.

Adequate facilities shall be provided for the washing and bactericidal treatment of utensils used for eating, drinking, and food preparation. Where utensils are to be washed by hand, there shall be provided an adequate sink equipped with heating facilities to maintain a water temperature of at least 170° F. in the bactericidal treatment compartment throughout the dishwashing period. Where utensils are to be washed by machine, there shall be provided facilities for supplying to the dishwashing machine an adequate supply of rinse water at 170° F., measured at the rinse sprays, throughout the dishwashing period. All tables, shelves, counters, display cases, stoves, hoods, and similar equipment shall be so constructed as to be easily cleaned and shall be free of inaccessible spaces providing harborage for vermin. Where there is not sufficient space between equipment and the walls or floor to permit easy cleaning, the equipment shall be set tight against the walls or floor and the joint properly sealed. All utensils and equipment surfaces with which food or drink comes in contact shall be of smooth, not readily corrodible material free of breaks, corrosion, open seams or cracks, chipped places, and V-type threads. All surfaces with which food or drink comes in contact shall be easily accessible for inspection and cleaning and shall be self-draining, and shall not contain or be plated with cadmium or lead. All water supply and waste line connections to kitchen equipment shall be installed in compliance with the plumbing requirements of these standards.

7. *Laundry—Codes.* The laundry equipment shall be designed and installed to comply with all local and State codes and laws, and the requirements of the State Department of Health and the minimum general standards as set forth herein.

Where laundries are provided they shall be complete with washers, extractors, tumblers, ironer and presses which shall be provided with all safety appliances and sanitary requirements.

Washers. There shall be at least two washers which shall have a combined rated capacity of not less than 12 pounds of dry laundry per day per patient bed, when operating not more than 40 hours per week.

Ironer. Provide one flat work ironer with a capacity equal to 70 percent of the washer capacity when operating 40 hours per week.

Extractor. There shall be not less than one extractor with a daily capacity equal to that given above for the washers and for hospitals with more than 100 beds there shall be two extractors.

Tumbler. Provide a minimum of one tumbler with a rated capacity equal to 25 percent of the washers, when operating 40 hours per week.

Presses. For finished work provide not less than 1 nurses uniform unit consisting of 3 presses or one utility unit with 2 presses which shall be increased for the larger hospitals.

Wash tubs. Provide 2 wash tubs.

Mental and T. B. hospitals. The capacity per bed of laundry equipment for T. B. and mental hospitals shall be 40 percent of that required for general hospitals.

§ 53.154 *Preparation of plans, specifications and estimates.*

The requirements contained herein have been established for the guidance of the Applicant and the Architect to provide a standard method of preparation of drawings, specifications and estimates.

It is expected that the applicant will find it advantageous to submit the material through the State Agency in three stages for its recommendation and approval. However, the applicant may, if he so elects, combine the first two stages.

If the data required under stage 3 is available, it may be submitted without the drawings required under stages one and two.

Copies of the final working drawings and specifications previously submitted under stage three will be submitted for approval with the formal application for the project. The requirements for the material submitted at each of the three stages are as follows.

Drawings and specifications—1. (*First stage*) *program and schematic plans*—(a) *Program.* List in outline form the rooms or spaces to be included in each department, explaining the functions or services to be provided in each, indicating the approximate size, the number of personnel and the kind of equipment or furniture it will contain. Note any special or unusual services or equipment to be included in the facility.

If a hospital project, submit a schedule showing the total number of beds, their distribution in room and in the services, such as medicine, surgery, obstetrics, etc.

(b) *Schematic plans.* Single line drawings of each floor showing the relationship of the various departments or services to each other and the room arrangement in each department. The name of each room should be noted. The proposed roads and walks, service and entrance courts, parking and orientation may be shown on either a small plot plan or the 1st floor plan. Simple vertical space diagram should be submitted at this stage.

(c) *Construction outline.* A brief description of the type of construction.

(d) *Description of site.* If a survey has been made, a plat shall be submitted at this time, if not it should be submitted with the Preliminary Plans (Second Stage). In lieu of a plat of the survey, a description of the site may be submitted at this time. This shall note the general characteristics of the site, easement, availability of electricity, water and sewer lines, main roadway approaches, direction of prevailing breezes, orientation, etc. A map indicating location of the hospital in its geographic area with particular reference to recommendation given under Site III A, should be submitted.

(e) *Preliminary cost estimates.*

2. (*Second stage*) *preliminary plans, elevations, and outline specifications.* (A) Development of the preliminary sketch plans indicating in more detail the assignment of all spaces, size of areas and rooms, indicating in outline, the fixed and movable equipment and furniture.

The plans shall be drawn at a scale sufficiently large to clearly present the proposed design.

The total floor area shall be computed and shown on the drawings.

The drawings shall include (1) a plan of each floor including the basement or ground floor, (2) Roof plan, (3) Approach plan showing roads, parking areas, sidewalks, etc., (4) elevations of all facades, (5) sections through the building.

A print of the "Site Survey and Soil Information" which is described under another section of this manual shall be included unless it has already been submitted in Stage I.

(B) Outline specifications shall provide a general description of the construction including interior finishes; acoustical material, its extent and type; extent of the conductive floor covering; heating and ventilating systems; and the type of elevators.

(C) Revised cost estimates.

3. (*Third stage*) *working drawings and specifications.* (A) All working drawings shall be well prepared so that clear and distinct prints may be obtained; accurately dimensioned and include all necessary explanatory notes, schedules and legends. Working drawings shall be complete and adequate for contract purposes. Separate drawings shall be prepared for each of the following branches of work: Architectural, Structural, Mechanical, Electrical. They shall include or contain the following:

1. *Architectural drawings.* (a) Approach plan showing all new topography, newly established levels and grades, existing structures on the site (if any), new buildings and structures, roadways, walks, and the extent of the areas to be seeded. All structures and improvements which are to be removed under the construction contract shall be shown. A print of the survey shall be included with the working drawings for the information of bidders only. The survey shall not be made a contract drawing.

(b) Plan of each floor and roof.

(c) Elevations of each facade.

(d) Sections through building.

(e) Scale and full size details as necessary; scale details at one and one-half (1½) inches to the foot may be necessary to properly indicate portions of the work. Full size details may be prepared after award of construction contract.

(f) Schedule of finishes.

2. *Equipment drawings.* (a) Large scale drawings of typical and special rooms indicating all fixed equipment and major items of furniture and movable equipment. The furniture and movable equipment will not be included in the construction contract but should be indicated by dotted lines.

3. *Structural drawings.* (a) Plans of foundations, floors, roofs and all intermediate levels shall show a complete design with sizes, sections, and the relative location

of the various members. Schedule of beams, girders and columns.

(b) Floor levels, column centers, and offsets shall be dimensioned.

(c) Special openings and pipe sleeves shall be dimensioned or otherwise noted for easy reference.

(d) Details of all special connections, assemblies and expansion joints shall be given.

(e) Notes on design data shall include the name of the governing building code, values of allowable unit stresses, assumed live loads, wind loads, earthquake load, and soil-bearing pressures.

(f) For special structures, a stress sheet shall be incorporated in the drawings showing:

(1) Outline of the structure.

(2) All load assumptions used.

(3) Stresses and bending moments separately for each kind of loading.

(4) Maximum stress and/or bending moment for which each member is designed, when not readily apparent from (3).

(5) Horizontal and vertical reactions at column bases.

4. *Mechanical drawings.* These drawings with specifications shall show the complete heating, steam piping and ventilation systems; plumbing, drainage and stand pipe systems; and laundry.

(a) *Heating, steam piping and ventilation.* (1) Radiators and steam heated equipment, such as sterilizers, warmers and steam tables.

(2) Heating and steam mains and branches with pipe sizes.

(3) Diagram of heating and steam risers with pipe sizes.

(4) Sizes, types and heating surfaces of boilers, furnaces, with stokers and oil burners, if any.

(5) Pumps, tanks, boiler breeching and piping and boiler room accessories.

(6) Air conditioning systems with refrigerators, water and refrigerant piping, and ducts.

(7) Exhaust and supply ventilating systems with steam connections and piping.

(b) *Plumbing, drainage and stand pipe systems.* (1) Size and elevation of: Street sewer, house sewer, house drains, street water main and water service into the building.

(2) Location and size of soil, waste, and vent stacks with connections to house drains, fixtures and equipment.

(3) Size and location of hot, cold and circulating mains, branches and risers from the service entrance and tanks.

(4) Riser diagram to show all plumbing stacks with vents, water risers and fixture connections.

(5) Gas, oxygen and special connections.

(6) Standpipe system.

(7) Plumbing fixtures and fixtures which require water and drain connections.

(c) *Elevators and dumbwaiters.* Shaft details and dimensions, size car platform and doors; travel, pit and machine room.

(d) Kitchens, Laundry Refrigeration and Laboratories shall be detailed at a satisfactory scale to show the location, size and connection of all fixed and movable equipment.

5. *Electrical drawings.* Drawings shall show all electrical wiring, outlets, and equipment which require electrical connections.

(a) Electrical service entrance with service switches, service feeders to the public service feeders and characteristics of the light and power current. Transformers and their connections if located in the building, shall be shown.

(b) Plan and diagram showing main switchboard, power panels, light panels and equipment. Feeder and conduit sizes shall be shown with schedule of feeder breakers or switches.

(c) Light outlets, receptacles, switches, power outlets and circuits.

(d) Telephone layout showing service entrance, telephone switchboard, strip boxes, telephone outlets and branch conduits as approved by the Telephone Co. Where public telephones are used for inter-communication, provide separate room and conduits for racks and automatic switching equipment as required by the Telephone Company.

(e) Nurses' call systems with outlets for beds, duty stations, door signal lights, annunciators and wiring diagrams.

(f) Doctors' call and doctors' in-and-out systems with all equipment wiring, if provided.

(g) Fire alarm system with stations, gongs, control board and wiring diagrams.

(h) Emergency lighting system with outlets, transfer switch, source of supply, feeders and circuits.

6. *Additions to existing projects.* (a) Procedures and requirements for working drawings and specifications to be followed and in addition the following information shall be submitted:

(1) Type of activities within the existing building and distribution of existing beds, etc.

(2) Type of construction of existing building and number of stories high.

(3) Plans and details showing attachment of new construction to the existing structure and mechanical systems.

(B) Specifications shall supplement the drawings and shall comply with the following:

1. The specifications shall fully describe, except where fully indicated and described on the drawings, the materials, workmanship, the kind, sizes, capacities, finishes and other characteristics of all materials, products, articles and devices.

2. The specifications shall include:

(a) Cover or title sheet.

(b) Index.

(c) Invitation for bids.

(d) General conditions.

(e) Wage schedule, section 2, Labor Standards and Kickback Regulations.

(f) General requirements.

(g) Sections describing material and workmanship in detail for each class of work.

(h) Form of bid bond.

(i) Bid form.

(j) Form of agreement.

(k) Performance and payment bond forms.

3. In order to obtain a standard procedure Standard Specification Forms will be furnished to the State Agency as a guide to the Architect.

(C) Estimates shall show in convenient form and detail the probable total cost of the work to be performed under the contract for construction of new buildings, expansion, remodeling and alteration of existing buildings including provision of fixed equipment contemplated by plans and specifications.

EQUIPMENT

§ 53.155 *Equipment.*

General. Equipment necessary for the functioning of the facility as planned shall be provided in the kind and to the extent required to perform the desired service. The necessary equipment shall be included in the cost of the project and is considered an essential part of the project.

Definition of equipment. The term "equipment" as used herein means all items necessary for the functioning of all services of the facility, including such services as accounting and records, maintenance of buildings and grounds, laundry service, public waiting rooms, public health, and related services. The term "equipment" does not include items of current operating expense such as food, fuel, drugs, dressings, paper, printed forms, soap, and the like.

Classification of equipment. All equipment shall be classified in three groups as indicated below; the basis of classification being the usual methods of purchasing the equipment and suggested accounting practices in regard to depreciation.

Group I. Built-in equipment included in construction contracts. 1. Hospital cabinets and counters, laboratory and pharmacy cabinets, X-ray darkroom equipment, cubicle curtain equipment, shades and venetian blinds and any other built-in equipment, including items which have been included previously under Sections II and III of the General Standards such as: Kitchen equipment, laundry chutes, elevators, dumbwaiters, boilers, incinerators, refrigerating equipment, sterilizing equipment, surgical lighting and the like.

Group II. Depreciable equipment of five years' life or more normally purchased through other than construction contracts. 1. Large items of furniture and equipment having a reasonably fixed location in the building but capable of being moved.

2. Example: Furniture, surgical apparatus, diagnostic and therapeutic equipment, office machines, dental equipment, laboratory and pharmacy equipment (except cabinets) wheeled equipment and the like.

Group III. Non-depreciable equipment of less than five years' life normally purchased through other than construction contract. 1. Small items of low unit cost and suited to storeroom control.

2. *Examples.* Chinaware, silverware, kitchen utensils, bedside lamps, waste baskets, bed pans, dressing jars, catheters, surgical instruments, linens, sheets, blankets, mattresses and the like.

It shall be the responsibility of the applicant to select and purchase all necessary equipment for the complete functioning of all services included in the project in accordance with these standards and any further standards prescribed by the State Agency.

It is essential that the equipment shall be properly apportioned and budgeted to the various services of the facility so that unduly expensive or elaborate equipment is not provided for some services of the project, necessitating the use of cheap and inadequate equipment for other services.

As soon as possible after the award of the construction contract, the applicant shall submit to the Surgeon General through the State Agency for approval a complete list in triplicate of all proposed Groups II and III equipment, including itemized estimate of cost.

SUBPART N—APPENDIX B; MERIT SYSTEM POLICIES OF THE PUBLIC HEALTH SERVICE

§ 53.158 *Introduction.*

The Public Health Service is in accord with other Federal agencies and leaders in the field of public administration who recognize the principle that a system of personnel administration on a merit basis is the most effective method of securing and retaining qualified personnel. The employment of qualified personnel is considered a prerequisite of efficient administration, without which the purposes of sections 314, 623, and 653, of the Public Health Service Act as amended may not effectively be achieved.

Accordingly, the regulations of the Public Health Service contain provisions relative to the establishment of merit systems of personnel administration in State and local health departments and other State agencies administering programs assisted by grants-in-aid from the Public Health Service. Under these regulations the Public Health Service reviews merit systems to determine their conformity with accepted standards of personnel administration.

The application of these policies is required as evidence that minimum standards of efficient personnel administration have been met. They are adopted by the Public Health Service as standards for evaluating compliance with § 51.12 of the regulations

governing grants to States and § 53.123 of the regulations governing the administration of the Hospital and Medical Facilities Survey and Construction program.

§ 53.159 *Jurisdiction.*

These standards are applicable to all personnel, both State and local, engaged in the administration of programs under Titles I, III, IV, V, and X of the Social Security Act, under the Public Health Service Act, and under the Wagner-Peyser Act, as amended, except those hereinafter exempted. The agencies administering these programs are referred to as State agencies.

At the option of the State agencies, the following positions in the several programs may be exempted from application of these standards: members of State and local boards or commissions; members of advisory councils or committees or similar boards paid only for attendance at meetings; State and local officials serving ex officio and performing incidental administrative duties; the executive head of each State agency; one confidential secretary to any of the foregoing exempted officials; janitors; part-time professional personnel who are paid for any form of medical, nursing or other professional service, and who are not engaged in the performance of administrative duties; attorneys serving as legal counsel; members of unemployment compensation appeals tribunals and boards of review representing employer and employee interests. Upon request of the State health authority to the Public Health Service or Children's Bureau, as applicable, exemption of hospital and sanatoria and local health department personnel from application of these standards will be considered on the basis of State and local administration.

§ 53.160 *Merit system organization.*

If a State has a State-wide civil service system operating under standards substantially equivalent to those herein provided, such State civil-service system should be applicable to the State agencies as defined above.

In the absence of a State civil service system with substantially equivalent standards, there will be established a merit system administered by an impartial body herein referred to as the Merit System Council, the members of which are appointed by the administrative agencies or by the Governor on recommendation of the administrative agencies, for stated overlapping terms, and no member of which is otherwise employed as an official or employee of any of the State agencies affected.

In the interests of economy and of efficient administration a joint merit system should serve all the State agencies as defined above unless, because of special circumstances, it is not feasible to establish such a joint system.

§ 53.161 *Prohibition of discrimination.*

Disqualification of any person from taking an examination, from appointment to a position, from promotion, or from holding a position because of political or religious opinions or affiliations will be prohibited.

§ 53.162 *Limitation of political activity.*

Participation of any employee of the State agencies, except those hereinbefore exempted, in political activity will be prohibited except that an employee should have the right freely to express his views as a citizen and to cast his vote. Such prohibited political activity will include in substance the activities prohibited in the rules of the United States Civil Service Commission.

§ 53.163 *Classification plan.*

A classification plan for all positions in the agency, based upon investigation and analysis of the duties and responsibilities of each position, will be established and maintained. The classification plan will include an appropriate title for each class of position, a description of the duties and responsibilities of positions in the class, and requirements of minimum training, experience, and other qualifications suitable for the performance of the duties of the position.

§ 53.164 *Compensation plan.*

A plan of compensation for all classes of positions in the agency will be established and maintained. Such plan will include salary schedules for the various classes in which the salary of a class is adjusted to the responsibility and difficulty of the work. The salary range for each class will consist of minimum, intervening, and maximum rates of pay to provide for salary adjustments within the range. In arriving at such salary schedules, consideration will be given to the prevailing rates for comparable positions in other departments of the State and to other relevant factors. The State administrative agencies will adopt plans for salary increases based upon quality and length of service. Salary laws and rules and regulations uniformly applicable to departments of the State government will be given consideration in the formulation of the compensation plan.

§ 53.165 *Recruitment and appointment of personnel.*

All positions in the State agencies, except those hereinbefore exempted, will be filled by personnel selected on the basis of merit, and in accordance with standards and procedures set forth in rules and regulations for the merit system adopted by the State agency or the State civil-service authority.

Regulations governing the administration of examinations will include the following provisions:

Examinations will be administered by a Merit System Supervisor, appointed under the merit system. Qualifications for the supervisor will include training and experience in a field related to merit system administration, and known sympathy with the principles of the merit system.

Applicants admitted to examinations will meet the minimum requirements for the positions for which they apply as set forth in the specifications for the positions.

Examinations for entrance to the service will be conducted on an open competitive basis, with adequate publicity, and with a reasonable period for filing applications.

Examinations will be practical in nature, constructed to reveal the capacity of the applicant for the position for which he is competing and his general background and related knowledge, and will be rated objectively. A practical written test will be included, except that where exceptional qualifications of a scientific or professional character are required, and competition through an assembled examination is impracticable, an unassembled examination may be held.

Examinations will also include: A rating of training and experience for the more responsible positions; an oral examination for positions requiring frequent contact with the public, or which involve important supervisory or administrative duties; and a performance test for positions involving the operation of office machines.

The Merit System Supervisor will prepare and establish registers of eligibles in the order of their final scores and will maintain the registers, make certification of eligibility, and keep all examination records.

All positions, not specifically exempted herein, are to be filled from registers of eligibles, except for emergency and provisional appointments for limited periods. Appointments will be made by selection from a limited number of the highest available eligibles on the appropriate register.

In the absence of an appropriate register, provisional appointments may be made pending competitive examination, provided each provisional appointee is certified by the Merit System Supervisor as meeting at least the minimum qualifications established for the class of position, and further provided that no individual may receive successive provisional or emergency appointments.

Personnel selected from registers to fill permanent positions will serve a fixed probationary period. Permanent appointment will be based upon an evaluation in writing of the performance of the employee during the probationary period.

An employee of an agency who has received appointment under a merit system with standards substantially comparable to these will retain the status held by him under such merit system in the event the State agency is placed under the jurisdiction of another merit system.

An employee of an agency in which no comparable merit system has been in operation may, upon the extension of the merits system to such agency, obtain status either through open competitive or qualifying examination as specified in the merit system rules and regulations. Such rules and regulations may permit an employee in the service of the agency to be automatically admitted to the examination covering the position held by him, and may permit him to be retained at the discretion of the State agency, providing he attains a passing grade in such examination.

§ 53.166 *Promotions.*

Whenever practicable a vacancy will be filled by promotion of a qualified permanent employee of the agency upon the basis of capacity, and quality and length of service.

Eligibility of an employee for promotion will be determined on recommendation of the agency and certification by the Merit System Supervisor that the employee meets the minimum requirements and is qualified for promotion to the class of position in question.

§ 53.167 *Furloughs and separations.*

Regulations will be established by the agencies governing furloughs, suspensions, and separations, and governing leaves and the conditions for payment of salary at termination of services. Such regulations will include provisions for adequate competition among employees in classes affected by reduction in force, and for retention of employees based upon systematic consideration of type of appointment, length of service and efficiency.

Employees who have completed the required probationary period of appointment and acquire permanent status will not be subject to separation except for cause, or for reasons of curtailment of work or lack of funds. In the event of separation, permanent employees will have the right of appeal to an impartial body through an established procedure provided for in the merit system rules.

§ 53.168 *Service ratings.*

A system of periodic service ratings for the evaluation of performance will be maintained. The manner in which such ratings are to be used in promotions, salary increases, and separations will be provided for by agency regulation.

§ 53.169 *Personnel records and reports.*

Such personnel records as are necessary for the proper maintenance of a merit system and effective personnel administration will be maintained by the State administrative agency. Periodic reports will be published by the Merit System Council.

PART 55—GRANTS FOR WATER POLLUTION CONTROL

Subpart A—Grants for Water Pollution Control Programs

Sec.
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55.2 Basis of allotments to States and interstate water pollution control agencies.
55.3 Allotments; estimates; time of making and duration.
55.4 Plans; content; mode of submittal; time of submittal.
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55.6 Payments to states and interstate agencies.
55.7 Audit.
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Subpart B—Grants for Construction of Treatment Works

55.21 Definitions.
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SUBPART A—GRANTS FOR WATER POLLUTION CONTROL PROGRAMS

AUTHORITY: §§ 55.1 to 55.8 issued under sec. 10, 70 Stat. 506; 33 U. S. C. 466i. Interpret or apply sec. 5, 70 Stat. 500; 33 U. S. C. 466d.

§ 55.1 *Definitions.* All terms used in this subpart which are defined in the Federal Water Pollution Control Act and are not defined in this section shall have the meaning given to them in such act. As used in this subpart, the following terms shall have the meaning indicated herein below:

(a) "Federal Act" means the Federal Water Pollution Control Act (70 Stat. 498, et seq.).

(b) "Public Health Service" means the Public Health Service in the Department of Health, Education, and Welfare.

(c) "Surgeon General" means the Surgeon General of the Public Health Service.

(d) "State water pollution control agency" means the State health authority, except that in the case of any State in which there is a single State agency, other than the State health authority, charged with the responsibility for enforcing State laws relating to the abatement of water pollution, it means such other State agency.

(e) "Interstate agency" means an agency of two or more States established by or pursuant to an agreement or compact approved by the Congress, or any other agency of two or more States, having substantial powers or duties pertaining to the control of pollution of waters.

(f) "State" means a State, the District of Columbia, Hawaii, Alaska, Puerto Rico and the Virgin Islands.

(g) "Fiscal year" means a twelve-month period beginning on July 1.

(h) "Population" means, with respect to any State, the most recent official estimates of the Department of Commerce available on January 1 preceding the fiscal year for which funds are appropriated pursuant to section 5 of the Federal Act.

(i) "Population density" means the population of the State divided by the area of the State in square miles, except that each of the thirteen States having the greatest population density shall be deemed to have a population density equal to the State having the least population density of such thirteen States.

(j) "Per capita income" means, with respect to any State, the average of the per capita income of such State for the three most recent consecutive years for which satisfactory data are available from the Department of Commerce; except that, in the absence of such satisfactory data, the per capita income of Alaska shall be deemed to equal the average per capita income of all the States in the continental United States and the per capita incomes of (1) Puerto Rico and (2) the Virgin Islands shall be deemed to equal the per capita income of the State having the lowest per capita income of the continental United States.

§ 55.2 *Basis of allotments to States and interstate water pollution control agencies.* (a) The funds appropriated pursuant to section 5 of the Federal Act for any fiscal year for expenditures for grants to States to assist them in meeting the cost of establishing and maintaining adequate measures for the prevention and control of water pollution shall be allotted among the several States on the basis of $12,000 for each State, in recognition of the fact that a water pollution control problem exists in every State caused by the discharge of untreated or inadequately treated sewage or other wastes into the waters of such State, and the balance on the basis of the following factors:

(1) ⅔ in the ratio that the product of the population of each State and the reciprocal of its per capita income bears to the sum of the corresponding products for all States.

(2) ⅙ on the basis of the ratio of the population density of a State to the population density of all the States.

(3) ⅙ on the basis of the ratio of the number of industrial establishments discharging industrial wastes in each State to the number of such establishments in all the States. The number of such establishments shall be determined on the basis of the latest available data provided by the Department of Commerce.

(b) The funds appropriated pursuant to section 5 of the Federal Act for any fiscal year for expenditures for grants to interstate agencies to assist them in meeting the cost of establishing and maintaining adequate measures for the prevention and control of water pollution shall be allotted among the several interstate agencies on the basis of the following factors:

(1) ⅔ in the ratio that the product of the population of the area served by the interstate agency and the reciprocal of the average per capita income of the interstate agency for the three most recent consecutive years bears to the sum of the corresponding products for all the interstate agencies. For this purpose, per capita income of an interstate agency shall mean the total gross income of all the States comprising such interstate agency divided by the total population of all the States comprising such interstate agency.

(2) ⅙ on the basis of the ratio of the average of the population densities of the States comprising each interstate agency area to the sums of the average of the population densities of each interstate agency area.

(3) ⅙ on the basis of the ratio of the number of industrial establishments discharging industrial wastes in the States comprising the interstate agency to the number of such establishments in all the interstate agency areas. The number of such establishments shall be determined on the basis of the latest available data provided by the Department of Commerce.

§ 55.3 *Allotments; estimates; time of making and duration.* (a) Prior to the beginning of each fiscal year the Surgeon General shall prepare and make available to States and interstate agencies an estimated schedule of the amounts which it is expected will be allotted to each during the fiscal year from estimated appropriations.

(b) Allotments to States and interstate agencies for the first six months shall be made prior to the beginning of the fiscal year or as soon thereafter as practicable and shall equal not less than 60 per centum nor more than 70 per centum of the total sum determined to be available for allotment during the fiscal year.

(c) At the end of the second quarter, or as soon thereafter as practicable, the amounts of allotments for the first six-month period which have not been certified for payment to the respective States and interstate agencies pursuant to § 55.5 shall become available for reallotment among the States and interstate agencies in the same manner as monies which have not previously been allotted.

(d) Allotments to States and interstate agencies for the remaining six months shall be made prior to the beginning of the third quarter or as soon thereafter as practicable, and shall equal the total sum remaining unpaid and unallotted from the amount available for allotment during the fiscal year.

(e) The respective State water pollution control agencies and interstate agencies shall be notified of the amounts of allotments and reallotments and of the period for which they are made.

§ 55.4 *Plans; content; mode of submittal; time of submittal.* (a) For each fiscal year each State and interstate agency making application for grants under section 5 of the Federal Act shall submit a plan to the Surgeon General in accordance with procedures and on forms prescribed by the Surgeon General. Such plan shall:

(1) Designate the State water pollution control agency or interstate agency responsible for the administration or supervision of administration of the plan;

(2) Contain a statement that such agency will make such reports in such form and containing such information as the Surgeon General or his designee

may from time to time reasonably require to carry out his functions under this Act;

(3) Set forth the policies and methods to be followed in carrying out the plan and its administration, describe the organization and proposals for conducting and extending or improving the State or interstate water pollution control and prevention program and any proposals for training personnel in water pollution control work. State plans shall contain criteria for determining whether the construction of proposed treatment works is in conformity with the plan.

(4) Provide such accounting, budgeting, and other fiscal methods and procedures as are necessary for the proper and efficient administration of the plan. Such methods will include a description of the procedures which the State will use in determining on the basis of objective criteria the expenditures attributable to water pollution control activities conducted in carrying out the approved plan.

(b) A plan shall be submitted by each State or interstate agency making application for grants under section 5 of the Federal Act prior to the period to which it relates: *Provided*, That exceptions to this provision may be made by the Surgeon General or his designee in the case of plans submitted for the fiscal year 1957 and when necessary to meet emergencies.

§ 55.5 *Amount of Federal grant funds payable.* (a) From the allotment available therefor for each fiscal year, each State and each interstate agency for which a plan has been approved by the Surgeon General, shall be entitled to receive an amount equal to its Federal share of the cost of carrying out its approved plan, including the cost of training personnel for State and local water pollution control work and administering the plan.

(b) For any State the Federal share shall be 100 per centum less that percentage which bears the same ratio to 50 per centum as the per capita income of such State bears to the per capita income of the continental United States (excluding Alaska), except that the Federal share shall in no case be more than 66⅔ per centum or less than 33⅓ per centum, and the Federal share for Hawaii and Alaska shall be 50 per centum, and for Puerto Rico and the Virgin Islands shall be 66⅔ per centum.

(c) For any interstate agency the "Federal share" shall be 100 per centum less that percentage which bears the same ratio to 50 per centum as the average per capita income of the States comprising such interstate agencies bears to the per capita income of the continental United States (excluding Alaska), except that the Federal share in no case shall be more than 66⅔ per centum or less than 33⅓ per centum and shall be promulgated on the basis of the same data used for determining the "Federal share" for any State.

§ 55.6 *Payments to States and interstate agencies.* (a) Payments from allotments to States and interstate agencies shall be certified to the Secretary of the Treasury only after a plan has been approved. Payments from such allotments shall not exceed the allotment to a State or interstate agency or the total Federal share of the estimated expenditures necessary for carrying out the plan, whichever is less.

(b) Subject to the foregoing limitations, payments to States and interstate agencies shall be made as follows:

(1) Payment shall be made for each quarter based upon an application for funds showing the estimated requirements for such quarter. Such payment shall be decreased or increased by the amount that prior payments exceed or are less than the Federal share of the total expenditures for the program.

(2) Payments shall not be certified unless an application for payment and all plans, reports, and documents required by this part have been received.

(3) Supplemental payment in any quarter may be certified upon submission of an application therefor accompanied by satisfactory justification.

§ 55.7 *Audit.* Audit of the expenditures for the activities described in the plans may be made after prior consultation with the States or interstate agencies. Records, documents and information available to the State water pollution control agencies and interstate agencies pertinent to the audit shall be accessible for purposes of the audit.

§ 55.8 *Change in status of State water pollution control agency or interstate agency; disposal of balances.* In the event that a State water pollution control agency shall cease to qualify as such, the unobligated balance of any amounts paid to the State shall be transferred to such other agency of the State which qualifies and is designated in the approved State plan as the State water pollution control agency, and if an interstate agency ceases to qualify as such the unobligated balance of any amount paid to such interstate agency shall be transferred as determined by the Surgeon General to the successor, if any, of such interstate agency or shall be returned to the Treasury of the United States.

SUBPART B—GRANTS FOR CONSTRUCTION OF TREATMENT WORKS

AUTHORITY: §§ 55.21 to 55.30, issued under sec. 10, 70 Stat. 506; 33 U. S. C. 466i. Interpret or apply sec. 6, 70 Stat. 502; 33 U. S. C. 466e.

§ 55.21 *Definitions.* All terms used in this subpart which are defined in the Federal Water Pollution Control Act and are not defined in this section shall have the meaning given to them in such act. As used in this subpart, the following terms shall have the meaning indicated herein below:

(a) "Federal act" means the Federal Water Pollution Control Act (33 U. S. C. 466 et seq.).

(b) "Public Health Service" means the Public Health Service in the Department of Health, Education, and Welfare.

(c) "Surgeon General" means the Surgeon General of the Public Health Service.

(d) "State Water Pollution Control Agency" means the State health authority, except that in the case of any State in which there is a single State agency, other than the State health authority, charged with the responsibility for enforcing State laws relating to the abatement of water pollution, it means such other State agency.

(e) "Interstate agency" means an agency of two or more states established by or pursuant to an agreement or compact approved by the Congress, or any agency of two or more States, having substantial powers or duties pertaining to the control of pollution of waters.

(f) "State" means a State, the District of Columbia, Hawaii, Alaska, Puerto Rico and the Virgin Islands.

(g) "Fiscal year" means a twelve-month period beginning on July 1.

(h) "Population" means the official population figures of the latest decennial census for which figures are available as certified by the Secretary of Commerce.

(i) "Per capita income" means the average of the per capita income of the States and of the continental United States for the three most recent consecutive years for which satisfactory data are available from the Department of Commerce; except that in the absence of such satisfactory data, the per capita income of Alaska shall be deemed to equal the average per capita income of all the States in the continental United States and the per capita incomes of (1) Puerto Rico and (2) the Virgin Islands shall be deemed to equal the per capita income of the State having the lowest per capita income in the continental United States.

(j) "Municipality" means a city, town, borough, county, parish, district, or other public body created by or pursuant to State law and having jurisdiction over disposal of sewage, industrial wastes, or other wastes.

(k) "Intermunicipal agency" means an agency of two or more municipalities having jurisdiction over disposal of sewage, industrial wastes, or other wastes.

(l) "Treatment works" means the various devices used in the treatment of sewage or industrial wastes of a liquid nature, including the necessary intercepting sewers, outfall sewers, pumping, power, and other equipment and their appurtenances, and includes any extensions, improvements, remodeling, additions, and alterations thereof.

(m) "Applicant" means any State, municipality, intermunicipal or interstate agency which files an application for a grant of Federal funds under section 6 of the Federal act.

§ 55.22 *Allotments to States.* The funds appropriated for any fiscal year for expenditures for grants for construction of treatment works shall be allotted as soon as practicable as follows:

(a) 50 per centum of such sums in the ratio that the population of each State bears to the population of all the States, and

(b) 50 per centum of such sums in the ratio that the quotient obtained by dividing the per capita income of the United States by the per capita income of each State bears to the sums of such quotients for all the States.

§ 55.23 *Availability of allotments.* The allotment of a State shall be available, in accordance with the provisions of this

subpart, only for payments to meet the cost of construction of treatment works in such State for which Federal grants have been approved by the Surgeon General.

§ 55.24 *Applications for grants.* Applications for grants for the construction of treatment works shall be submitted on such forms and in such manner as the Surgeon General may prescribe.

§ 55.25 *Grant limitations.* (a) Grants under this subpart shall be subject to the following limitations:

(1) No grant shall be made for any work for which a contract was let prior to July 31, 1956.

(2) To be eligible for a grant, a project must result in an operable treatment works which treats or stabilizes sewage or industrial wastes of a liquid nature in order to abate, control, or prevent water pollution.

(3) No grant shall be made for any project unless such project shall have been approved by the appropriate State water pollution control agency or agencies and by the Surgeon General and unless such project is included in a comprehensive program developed pursuant to the Federal act.

(4) No grant shall be made for any project in an amount exceeding 30 per centum of the estimated reasonable cost thereof as determined by the Surgeon General or in an amount exceeding $250,000, whichever is the smaller: *Provided,* That the grantee agrees to pay the remaining cost.

(5) No grant shall be made until the Applicant has made provision satisfactory to the Surgeon General for assuring proper and efficient operation and maintenance of the treatment works after completion of the construction thereof.

(6) No grant shall be made unless such project is in conformity with the State water pollution control plan submitted pursuant to the provisions of section 5 of the Federal act and has been certified by the State water pollution control agency as entitled to priority over other eligible projects on the basis of financial as well as water pollution control needs.

(b) At least 50 per centum of the funds appropriated for such grants for each fiscal year shall be used for grants for the construction of treatment works servicing municipalities of 125,000 population or under.

§ 55.26 *Assurances from applicant.* No grant shall be made until the Surgeon General has received assurances from the Applicant:

(a) That actual construction work will be performed by the lump sum (fixed price) or unit price contract method, that adequate methods of obtaining competitive bidding will be employed prior to awarding the construction contract, and that the award of the contract will be made to the responsible bidder submitting the lowest acceptable bid;

(b) That the project will not be advertised or placed on the market for bidding until the final plans and specifications have been approved by the Surgeon General and the appropriate State agency, and the Applicant has been so notified;

(c) That the construction contract will require the contractor to furnish performance and payment bonds, the amount of which shall each be in an amount not less than fifty percentum (50 percent) of the contract price, and to maintain during the life of the contract adequate fire, workmen's compensation, public liability and property damage insurance;

(d) That any change or changes in the contract which make any major alteration in the work required by the plans and specifications, or which raise the cost of the project above the latest estimate approved by the Surgeon General, will be submitted to the Surgeon General for prior approval;

(e) That the construction of the project, including the letting of contracts in connection therewith, shall conform to the applicable requirements of State, Territorial and local laws and ordinances;

(f) That the construction contract will provide that the representatives of the Public Health Service and the State will have access to the work wherever it is in preparation or progress and that the contractor will provide proper facilities for such access and inspection;

(g) That the Applicant will provide and maintain competent and adequate engineering supervision and inspection at the project to insure that the construction conforms with the approved plans and specifications;

(h) That adequate accounting and fiscal records shall be maintained to reflect the receipt and expenditure of funds for the purpose of this project and all funds, however provided for the payment of the cost of the project, shall be deposited, promptly upon receipt thereof, in a separate construction account or accounts and these funds shall be expended only for costs of the project;

(i) That the declarations, assurances, representations and statements made by the Applicant in the application, and all documents, amendments and communications filed with the Public Health Service by the Applicant in support of its request for a grant, will be fulfilled;

(j) That the Applicant will submit to the Surgeon General such documents and information as he may require;

(k) That the construction contract will require the contractor to comply with the regulations of the Secretary of Labor made pursuant to the Anti-Kickback Act of June 13, 1934, 40 U. S. C. 276 (c), and any amendments or modifications thereto, to cause appropriate provisions to be inserted in subcontracts to insure compliance therewith by all subcontractors subject thereto, and to be responsible for the submission of affidavits required of subcontractors thereunder, except as the Secretary of Labor may specifically provide for reasonable limitations, variations, tolerances and exemptions from the requirements thereof;

(l) That the Applicant will demonstrate to the satisfaction of the Surgeon General his ability to pay the remaining cost of the project;

(m) That the Applicant has or will have prior to awarding of the construction contract, a fee simple or such other estate or interest in the site of the project, including necessary easements and rights-of-way, as the Surgeon General finds sufficient to assure for a period of not less than fifty years undisturbed use and possession for the purposes of construction and operation of the project; and

(n) The Applicant agrees to construct the project or cause it to be constructed to final completion in accordance with the application and plans and specifications approved by the Surgeon General.

Provided, That none of these Assurances except paragraphs (a) through (d) required under this section may be waived by the Surgeon General. Paragraphs (a) through (d) may be waived in whole or in part (and subject to such conditions as he deems necessary) if the Surgeon General finds that the purpose of such Assurance is fulfilled.

§ 55.27 *Determining the desirability of projects.* In determining the desirability of projects for treatment works and of approving Federal financial aid in connection therewith, the Surgeon General shall give consideration to the following:

(a) The relation of the estimated cost of the project, including operation and maintenance, to the public interest and to the necessity for the project;

(b) The propriety of Federal aid in construction of the project;

(c) The public benefits to be derived by the construction of the project;

(d) The related projects requiring completion before full benefit can be derived from the project for which the application is made and the degree to which the completion of the related projects in the near future is reasonably assured;

(e) The feasibility of utilizing available facilities; and

(f) The probability that the project will be constructed and put into operation within a reasonable time.

§ 55.28 *Criteria for considering propriety of Federal aid.* The propriety of Federal aid pursuant to section 6 (c) of the act will be determined by the Surgeon General on the basis of one or more of the following criteria:

(a) *Interstate, coastal and Great Lakes waters.* Whether the project is required to control pollution of interstate waters, coastal waters or waters of the Great Lakes (including tributaries of such waters contributing materially to the pollution of such waters), and such pollution is inimical to public water supplies propagation of fish and aquatic life and wildlife, recreational purposes, or agricultural, industrial, or other legitimate water uses.

(b) *International treaty obligations.* Whether the project is required to control pollution in meeting international treaty obligations or agreements.

(c) *Federal impact.* Whether the project involves a pollution problem substantially and adversely affected by (1) Federal installations contributing to the total municipal waste loadings; (2) a water use requirement involving national

defense; (3) a Federal water resource development; or (4) an influx of population to carry out Federal activities.

(d) *Public health necessity.* Whether the project involves treatment works required to abate a serious public health hazard.

(e) *Financial burden.* Whether the municipality can demonstrate that the construction of needed sewage treatment works involves an extraordinary and excessive financial burden in relation to its economic resources.

§ 55.29 *Payments.* (a) Installment payments of the grant shall be made at the request of the Applicant, shall be based on the cost of the work performed, materials and equipment furnished, and services rendered in connection with an approved project, and shall be made as follows:

(1) A first installment when not less than 25 percent of the construction of the project is completed;

(2) A second installment when not less than 50 percent of the construction of the project is completed;

(3) A third installment when not less than 75 percent of the construction of the project is completed; and

(4) A fourth installment when the project is completed and final inspection by a representative of the Public Health Service is made.

(b) Upon written request and a showing of necessity by the Applicant, the Surgeon General may adopt a different schedule of payments.

(c) The total grant payments for any project shall not exceed the amount of the approved grant or 30 per centum of the actual reasonable cost thereof as determined by the Surgeon General at completion of construction of the treatment works, whichever is the smaller.

§ 55.30 *Expenditure of funds.* Amounts paid to an Applicant shall be expended solely for the carrying out of the purposes for which the grant was approved.

PART 56—GRANTS AND CONTRACTS FOR AIR POLLUTION CONTROL

SUBPART A—GRANTS AND CONTRACTS FOR AIR POLLUTION RESEARCH, TRAINING, AND DEMONSTRATIONS

Sec.

56.1 Allotments.
56.2 Grants for research projects.
56.3 Grants for training and demonstration projects.
56.4 Contracts for research, training and demonstration projects.

AUTHORITY: §§ 56.1 to 56.4, issued under sec. 5, 69 Stat. 322; 42 U. S. C. 1857d.

§ 56.1 *Allotments.* The Surgeon General shall, from time to time, from amounts available therefor, allot and reallot funds for grants and for contracts for air pollution research, training, and demonstration projects.

§ 56.2 *Grants for research projects.* Within the amount of funds allotted therefor, grants for air pollution research projects shall be made by the Surgeon General or his designee after applications therefor have been submitted by State and local government air pollution control agencies, other public and private agencies and institutions, and individuals, and have been recommended by the National Advisory Health Council.

§ 56.3 *Grants for training and demonstration projects.* Within the amount of funds allotted therefor, grants for air pollution training and demonstration projects shall be made by the Surgeon General or his designee upon the basis of applications therefor submitted by State and local government air pollution control agencies, other public and private agencies and institutions, and individuals.

§ 56.4 *Contracts for research, training and demonstration projects.* Within the amount of funds allotted therefor, contracts shall be entered into by the Surgeon General or his designee with public and private agencies and institutions, and individuals, for air pollution research, training, and demonstration projects.

PART 57—GRANTS FOR CONSTRUCTION OF RESEARCH FACILITIES

Sec.

57.1 Definitions.
57.2 Eligible institutions.
57.3 Applications for construction grants.
57.4 Required assurances.
57.5 Approval of grants.
57.6 Amount of grant; limitation.
57.7 Necessary costs of construction.
57.8 Conditions to grant.
57.9 Payments.
57.10 Good cause for other use of completed facility.

AUTHORITY: §§ 57.1 to 57.10 issued under sec. 709, 70 Stat. 720; 42 U. S. C. 292h. Interpret or apply secs. 701–708, 70 Stat. 717–720; 42 U. S. C. 292–292g.

§ 57.1 *Definitions.* When used in this part:

(a) All terms which are defined in sections 2 and 702 of the Public Health Service Act, as amended, shall have the same meaning as given them in such sections.

(b) "Act" means the Public Health Service Act, as amended.

(c) "Construction grant" means a grant of funds for the construction of health research facilities as authorized by title VII of the act.

(d) "Equipment" means those items that are considered depreciable and as having an estimated life of not less than five years. Not included are such items as glassware, chemicals, storage batteries, and books.

§ 57.2 *Eligible institutions.* A public or nonprofit institution shall be eligible to apply for a construction grant upon a determination by the Surgeon General:

(a) That such institution is either controlled and operated by one or more State, county, municipal or other non-Federal, governmental agencies or is owned and operated by one or more nonprofit corporations or associations.

(b) That such institution is authorized to conduct research in the sciences related to health; and

(c) Upon a further determination, after consultation with the Council, that the institution is competent to engage in the type of research for which the facility is to be constructed, taking into consideration among other pertinent factors:

(1) The scientific or professional standing or reputation of the institution and of its existing or proposed officers and research staff;

(2) The availability, by affiliation or other association, of other scientific or health personnel and facilities to the extent necessary to provide effective opportunities for the type of research proposed.

§ 57.3 *Applications for construction grants.* No construction grant shall be made unless an application is filed therefor in the form and manner prescribed by the Surgeon General and is executed by an official or officials legally authorized by the applying agencies, corporations or associations to make on their behalf such application and to provide the required assurances. In addition to any other pertinent information which the Surgeon General may require, each applicant shall:

(a) Furnish in sufficient detail plans and specifications of the facility to be constructed so as to indicate the nature and purpose of all portions of the facility and the type and quality of any features bearing on the costs of construction;

(b) Set forth the estimated total costs of construction of the facility and the basis on which such estimate was made, stating separately the estimated cost of excavation, structures, equipment, and architectural or other special services; and

(c) Furnish information on the extent and manner in which the proposed construction will expand the applicant's capacity for research in the sciences related to health or is necessary to improve or maintain the quality of such research by the applicant.

§ 57.4 *Required assurances.* No construction grant shall be made unless the application therefor contains or is supported by assurances, found by the Surgeon General to be reasonable:

(a) That for not less than 10 years after completion of construction, the facility will be used for the purposes of research in the sciences related to health for which it is to be constructed. Such an assurance shall be supported by evidence indicating that applicant's ownership of, or right otherwise to occupy, the site and to control the use of the facility for such 10-year period;

(b) That sufficient funds will be available to meet the non-Federal share of the cost of constructing the facility. Such assurance shall be supported by evidence of the amount of funds in escrow or firmly pledged or of funds or fund sources specifically earmarked for such purpose, or other such evidence indicating that funds for the non-Federal share are available: *Provided, however,* That if the applicant is unable to give the assurances as required by this paragraph, the grant may be made notwithstanding on such terms and conditions as prescribed by the Surgeon General after consultation with the Council and on the specific condition that such assurances, together with supporting evidence, will be furnished by the applicant within six months

after such conditional grant or within such other period as determined by the Surgeon General after such consultation; and

(c) That sufficient funds will be available when construction is completed for effective use of the facility for the research for which it is being constructed. Such an assurance shall be supported as to new facilities by a proposed operating budget indicating the amount and source of operating funds for a 2-year period immediately following completion of construction or, as to existing facilities, by a statement of the amount and source of funds that are or will be available for such 2-year period to meet any difference between proposed expenditures and anticipated income.

§ 57.5 *Approval of grants.* The Council shall recommend, and the Surgeon General approve, construction grants only for those proposed facilities which in their judgment will be the more effective in expanding capacity for research in the sciences related to health, in improving the quality of such research, and in promoting an equitable geographical distribution of such research. In so recommending or approving, particular consideration shall be given to facilities that: (a) Will be used for research in disciplines or diseases which have the most urgent need; (b) are adaptable to various methods by which research is organized or advanced; (c) will be in institutions or localities with broad research programs and potentials; (d) will promote a better geographic distribution of research through assistance to established or promising new facilities in various areas of the Nation having at present relatively few such research facilities.

§ 57.6 *Amount of grant; limitation.* (a) The amount of any grant shall be that recommended by the Council or such lesser amount as the Surgeon General deems to be appropriate. Such an amount shall be reserved from any available appropriation, but the amount so reserved may be amended from time to time either upon a revision by the Surgeon General of his estimate of the necessary cost of construction or upon the Surgeon General's approval of an amendment to the application upon recommendation by the Council.

(b) In no event shall the amount payable under a construction grant exceed whichever is the least of the following:

(1) The amount reserved for such grant as determined or redetermined under paragraph (a) of this section;

(2) Fifty percent of the necessary cost of construction as determined by the Surgeon General; or,

(3) Such other percentage of such cost so determined as may be recommended by the Council and approved by the Surgeon General upon making the grant.

§ 57.7 *Necessary costs of construction.* In determining the necessary costs of construction of any facility, the Surgeon General, in addition to other relevant considerations, shall exclude:

(a) The cost of any necessary services, materials or equipment in excess of the lowest, responsible, competitive bid or, where there has been no such bidding, in excess of reasonable costs as the Surgeon General may determine;

(b) The value of any donation or gift of services, materials, or equipment;

(c) The cost of any services, materials, or equipment not reasonably required by the plans and specifications furnished under § 57.3, or approved amendments thereto, and any costs occasioned by special architectural or designed features or the use of special materials not necessary for the conduct of the proposed research program;

(d) The cost of any portion of the facility that is not completed to a sufficient extent that it can be used for the proposed research program, and any architectural or other services specifically related thereto;

(e) The cost of any space or equipment to the extent it is related to purposes other than research in the sciences related to health;

(f) Costs for legal services, for damages whether or not arising out of construction, and for any bonus or any other extra payments not related to furnishing additional services, materials or equipment;

(g) Any costs incurred prior to July 31, 1956.

(h) Any other costs with respect to services performed (except architectural services) or materials or equipment delivered, at any time, pursuant to a contract or agreement entered into by the applicant prior to the filing of application for a construction grant unless (1) such contract or agreement as initially entered into is expressly contingent upon the making of the grant, and (2) Federal participation in all or part of the costs under such a contingent contract or agreement, whether incurred before or after the date of application, is specifically approved in the making of the grant.

§ 57.8 *Conditions to grant.* In addition to any other conditions imposed by law or determined by the Surgeon General to be reasonably necessary to fulfill the purpose of the grant, each construction grant shall be subject to the condition that the grantee institution shall:

(a) Use grant funds solely for the purposes of the construction for which the grant was made.

(b) Use no part of the grant funds for any cost with respect to services performed or material or equipment delivered, at any time, pursuant to a contract or agreement entered into by the applicant prior to the effective date of the construction grant unless such contract or agreement as initially entered into is expressly contingent upon such grant being made.

(c) Secure through performance bonds, insurance, or other equivalent undertakings, protection against contingencies or hazards that reasonably may prevent completion of the construction;

(d) Maintain such fiscal or other records and furnish such progress or other reports relating to the construction as may be directed by the Surgeon General, and permit audit of records and inspection of the site and of the construction in progress at any reasonable time by representatives of the Surgeon General;

(e) Repay to the United States the amount of any grant funds found by the Surgeon General to have been used contrary to law, to these regulations or to the conditions to the grant, and any amount paid in excess of the maximum prescribed in paragraph (b) of § 57.6.

§ 57.9 *Payments.* Upon approval of any grant, the Surgeon General shall reserve from any appropriation available therefor, the amount of the grant, and in the absence of special circumstances shall pay such amount in installments consistent with construction progress as he determines. Such payments shall be governed by the following procedures:

(a) At least 60 days prior to the time a payment is needed by the grantee, he shall submit to the Surgeon General a request for an amount to cover the Federal portion of his necessary expenditures at such time.

(b) Each such request for payment shall be supported by a certification by the grantee institution that the construction with respect to which the payment is requested has substantially complied with the plans and specifications submitted with the grant application, or with amendments thereto approved by the Surgeon General.

§ 57.10 *Good cause for other use of completed facility.* If within 10 years after completion of any construction for which a construction grant has been made the facility shall cease to be used for the research purposes for which it was constructed, the Surgeon General in determining whether there is good cause for releasing the applicant or other public or nonprofit owner from the obligation so to use the facility, shall take into consideration, among other factors, the extent to which:

(a) The facility will be devoted by the applicant or other public or nonprofit owner to other research in the sciences related to health or to other health purposes;

(b) The circumstances calling for a change in the use of the facility were not known, or with reasonable diligence could not have been known to the applicant, at the time of the application, and are circumstances reasonably beyond the control of the applicant or other owner; and

(c) There are reasonable assurances that for the remainder of the 10-year period other facilities not previously utilized for such research will be so utilized and are substantially the equivalent in nature and extent for such purposes.

Subchapter E—Fellowships, Internships, Training

PART 61—FELLOWSHIPS

Sec.

61.1 Applicability.
61.2 Purpose of fellowships.
61.3 Establishment.
61.4 Types of fellowships.
61.5 Qualifications.
61.6 Application for fellowships.
61.7 Review of applications for fellowships.
61.8 Awards.
61.9 Benefits.
61.10 Tuition and other expenses.
61.11 Publications.
61.12 Duration of fellowships.
61.13 Termination of fellowships.

AUTHORITY: §§ 61.1 to 61.13 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply secs. 208 (d), 301 (c), 402 (d), 58 Stat. 686, as amended, 692, as amended, 707, secs. 412, 422, 62 Stat. 465, 598, sec. 433, 64 Stat. 444; 42 U. S. C. 209 (f) 241 (c), 282 (d), 287a, 288a, 289c.

§ 61.1 *Applicability.* The regulations in this part apply to the establishment and award of all fellowships in the Public Health Service, except those financed under programs of the Department of State. (See 22 CFR Part 65.)

§ 61.2 *Purpose of fellowships.* Fellowships in the Public Health Service are for the purpose of encouraging and promoting studies or investigations relating to the physical and mental diseases and impairments of man. Fellowships may be established (a) to provide assistance to individuals for advanced training in research, or for carrying out independent research, or (b) to obtain the assistance and services of individuals for research work of the Public Health Service where the nature of the work or the character of the individual's services render customary employing relationships impracticable or less effective.

§ 61.3 *Establishment.* All fellowships in the Public Health Service shall be established by the Surgeon General. In establishing a fellowship or series of fellowships, the Surgeon General shall in writing prescribe the conditions, in addition to those provided in the regulations in this part, under which the fellowships shall be awarded and held.

§ 61.4 *Types of fellowships.* Fellowships shall be of two general types: (a) Fellowships, hereafter referred to in this part as "regular fellowships", which do not require the performance of services for the Public Health Service and (b) fellowships, hereafter referred to in this part as "service fellowships", which require the performance of services, either full or part time, for the Public Health Service. At the time a fellowship, or series of fellowships, is established, the Surgeon General shall specify whether the fellowship requires the performance of services.

§ 61.5 *Qualifications.* Scholastic and other qualifications shall be prescribed by the Surgeon General for each fellowship, or series of fellowships. Each individual selected for appointment to a fellowship shall (a) possess the qualifications prescribed therefor; (b) be free from any disease or disability that would interfere with his carrying out the purposes of the fellowship; and (c) present satisfactory evidence of general suitability including professional and personal fitness.

§ 61.6 *Applications for fellowships.* Candidates for fellowships shall make application therefor on forms prescribed by the Surgeon General for such purpose. In addition to the information supplied by a candidate in his application, such additional information may be required as may be necessary to determine his qualifications and fitness.

§ 61.7 *Review of applications for fellowships.* The Surgeon General shall appoint one or more Fellowship Boards to examine the qualifications of applicants for fellowships. A Fellowship Board shall report to the Surgeon General each candidate who it finds meets required qualifications, and shall include in such report its recommendations concerning his appointment.

§ 61.8 *Awards.* Awards of regular and service fellowships shall be made by the Surgeon General. Individuals designated to receive the service fellowship shall become employees of the Public Health Service.

§ 61.9 *Benefits.* Individuals awarded fellowships shall be entitled to:

(a) A stipend as fixed by the Surgeon General for the fellowship.

(b) Vacation and other leave as follows:

(1) Individuals appointed to service fellowships shall be entitled to leave as provided by law and regulations for other civilian employees of the Public Health Service.

(2) Individuals awarded regular fellowships may take vacations in accordance with the custom of the institution at which they are working, but not in excess of one month per year. If they are located at a laboratory or other facility of the Federal Government, vacations may be taken as authorized by the Public Health Service. Stipends will not be increased, or be paid beyond the term of a fellowship, on account of vacation an individual might be entitled to but does not take.

(c) Traveling expenses; service fellowships. Individuals awarded service fellowships shall be entitled to transportation and subsistence expenses while traveling on official business on the same basis as other civilian employees of the Public Health Service.

(d) Travel expenses; regular fellowships. Any individual awarded a regular fellowship may, when authorized in advance by the Public Health Service, be granted separate allowances for transportation and subsistence expenses, not exceeding such amounts as may be prescribed by the Surgeon General, on account of (1) travel to the place at which he is to be located during the term of the fellowship; (2) travel required in carrying out the purposes of the fellowship, including attendance at meetings; and (3) travel to return him at the end of the fellowship term to his home or other place he left to carry out the fellowship, provided such return travel is to or from a place outside the continental United States. Allowance will not be made for transportation expenses of dependents or for shipping charges for personal effects or household goods.

(e) *Condition to payments; regular fellowships.* In addition to any requirements imposed under the authority of the Atomic Energy Act of 1946, as amended, or under the authority of the Department of Defense and applicable to any individual receiving a regular fellowship under the regulations in this part, no payments either for stipends, expenses or other benefits shall be made to any individual receiving a regular fellowship unless such individual has subscribed to and filed with the Public Health Service a statement that he does not advocate, and is not a member of and does not support any organization that advocates or teaches, the overthrow of the United States Government by force or violence or by any illegal or unconstitutional methods, and, except when an alien owing allegiance to other than the United States, that he will bear true faith and allegiance to the United States of America and will support and defend the Constitution and laws of the United States against all its enemies, foreign and domestic.

§ 61.10 *Tuition and other expenses.* Separate allowances may be granted for actual tuition costs and related fees, as authorized by the Public Health Service. Payment of such costs and fees may be made by the Service directly to the institution or facility concerned.

§ 61.11 *Publications.* All publications resulting from work carried on under a Public Health Service fellowship are to carry appropriate acknowledgment thereof. The holder of the fellowship shall furnish two copies of each such publication to the Public Health Service.

§ 61.12 *Duration of fellowships.* Appointments to fellowships may be for varying periods, such as for a school year, but shall not exceed sixteen months. Upon the recommendations of a Fellowship Board, the Surgeon General may extend or renew an appointment.

§ 61.13 *Termination of fellowships.* The Surgeon General or his delegate may terminate a fellowship at any time upon the request of the fellow, and shall terminate any fellowship prior to the date it would otherwise expire upon a determination by a Fellowship Board, if approved by the Surgeon General, either that the fellow's performance is unsatisfactory or that he is unfit or unable to carry out the purpose of the fellowship.

PART 63—NATIONAL INSTITUTES OF HEALTH TRAINEESHIPS

Sec.
63.1 Nature and purpose of traineeships.
63.2 Minimum qualifications.
63.3 Award of traineeships.
63.4 Benefits.
63.5 Terms and conditions of award.
63.6 Termination of traineeships.
63.7 Appropriate Institute.

AUTHORITY: §§ 63.1 to 63.7 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply secs. 301, 402, 403, 58 Stat. 691, as amended, 707, as amended, sec. 303, 60 Stat. 423, secs. 412, 422, 62 Stat. 464, 598, sec. 433, 64 Stat. 444; 42 U. S. C. 241, 282, 283, 242a, 287a, 288a, 289c.

§ 63.1 *Nature and purpose of traineeships.* A National Institutes of Health traineeship is an award of funds to an individual for his subsistence during a period in which he is acquiring advanced training in the diagnosis, prevention or treatment of diseases of public health significance. The purpose of such traineeships is to make available in the United States for the community effort against such diseases an increased number of persons having special competence in such diagnosis, prevention or treatment.

§ 63.2 *Minimum qualifications.* Minimum qualifications for any traineeship

shall be established by the Director of the appropriate Institute with the approval of the Surgeon General, and shall be uniformly applicable to all applicants in each traineeship program of such Institute. Such minimum qualifications may include requirements as to age, physical or mental condition, academic degrees, professional or other training or experience, and such other factors as may be necessary to the fulfillment of the purpose of the traineeship. To the extent the Surgeon General finds it not inconsistent with such fulfillment, however, he may in individual cases waive compliance with any minimum qualification so established if he determines that the applicant has substantially equivalent qualifications or has such special training, experience or opportunity for service as make an award particularly appropriate.

§ 63.3 *Award of traineeships.* Subject to the regulations of this part, the Surgeon General or his delegate may award traineeships to these qualified applicants who are best able in his judgment to carry out the purpose of the traineeships. Such awards may be made in the name of the appropriate Institute.

§ 63.4 *Benefits.* Each individual awarded a traineeship shall be entitled to the following benefits:

(a) A stipend fixed in amount by the Surgeon General and payable with respect to a period of one year or such other period, including extensions or renewals, as may be specified by the Surgeon General or his delegate in making awards.

(b) An additional allowance, if requested by the trainee and approved in advance by the Surgeon General or his delegate, for travel, per diem and transportation not exceeding such amounts as may be prescribed by the Surgeon General.

§ 63.5 *Terms and conditions of award.* All traineeship awards shall be subject to the following terms and conditions:

(a) Training must be carried out at an institution found by the Director of the appropriate Institute to provide a well-rounded course of instruction in the particular field in which the traineeship is awarded. A change in the training institution may be made only with the approval of such Director.

(b) No traineeship may be utilized to compensate, nor awarded as consideration, for personal services or employment of the trainee for the United States or for any other person.

(c) In addition to any requirements imposed under the authority of the Atomic Energy Act of 1946, as amended, or under the authority of the Department of Defense and applicable to any individual receiving an award under the regulations in this part, no payments shall be made to any individual receiving such an award, unless such individual has subscribed to and filed with the Public Health Service a statement that he does not advocate, and is not a member of and does not support any organization that advocates or teaches, the overthrow of the United States Government by force or violence or by any illegal or unconstitutional methods, and, except when an alien owing allegiance to other than the United States, that he will bear true faith and allegiance to the United States of America and will support and defend the Constitution and laws of the United States against all its enemies, foreign and domestic.

(d) Additional conditions consistent with the regulations in this part may be established by the Surgeon General or his delegate to the extent he finds them necessary to fulfill the purpose of the traineeship.

§ 63.6 *Termination of traineeships.* The Surgeon General or his delegate may terminate a traineeship at any time upon request of the trainee, and shall terminate any traineeship prior to the date it would otherwise expire upon a determination, made or approved by the Surgeon General, either that the trainee's performance is unsatisfactory or that he is unfit or unable to carry out the purpose of the traineeship.

§ 63.7 *Appropriate Institute.* As used in this part "appropriate Institute" shall mean the National Cancer Institute for traineeships in the field of cancer, the National Institute of Mental Health for traineeships in the field of mental disorders, the National Heart Institute for traineeships in the field of cardiovascular diseases, the National Institute of Dental Research for traineeships in the field of dental diseases and conditions, the National Institute for Allergy and Infectious Diseases for traineeships in the field of allergy and infectious diseases, the National Institute of Arthritis and Metabolic Diseases for traineeship in the field of arthritis, rheumatism and metabolic disease, the National Institute of Neurological Diseases and Blindness for traineeships in the field of epilepsy, cerebral palsy, multiple sclerosis, other neurological and sensory disorders, and any other institute hereafter established by the Surgeon General under section 431 of the Public Health Service Act, as amended, for traineeships in the field of those diseases constituting the responsibility of such institute.

PART 64—NATIONAL INSTITUTES OF HEALTH TRAINING GRANTS

Sec.
64.1 Nature and purpose of training grants.
64.2 Application requirements.
64.3 Award of training grants.
64.4 Conditions to awards; general.
64.5 Additional conditions; institutional expenses.
64.6 Additional conditions; stipends.
64.7 Payments; repayment of unexpended balances; unauthorized expenditures.
64.8 Appropriate institute.

AUTHORITY: §§ 64.1 to 64.8 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 433, 64 Stat. 444; 42 U. S. C. 289c.

§ 64.1 *Nature and purpose of training grants.* A National Institutes of Health training grant is an award of funds to a qualified educational or training institution, the objective of such grants being to make available for the community effort against diseases of public health significance an increased number of facilities providing adequate training and instruction, and an increased number of persons having special competence, in matters relating to the diagnosis, prevention and treatment of such diseases. Such a grant may have one or both of the following purposes:

(a) To defray the expenses of the institution in providing training and instruction in matters relating to the diagnosis, prevention or treatment of diseases within the responsibility of the appropriate Institute.

(b) To enable the institution to pay stipends and allowances to individuals with respect to a period in which they receive under the direction of such institution training and instruction in matters relating to such diagnosis, prevention or treatment.

§ 64.2 *Application requirements.* Training grants shall be awarded only to those public or other nonprofit institutions which file applications in such form and manner as may be prescribed by the Surgeon General. Such applications shall set forth, in addition to any other pertinent information that may be required, the name and qualifications of the program director who will be responsible for the training and instruction and the following information depending upon the purposes for which the grant is requested:

(a) *Institutional expenses.* Applications which include a request for funds to meet institutional expenses shall set forth the nature and duration of the training and instruction program with respect to which the application is filed, the total amount requested and the purposes for which the funds will be used, stating separately the amounts requested for personal services and the amounts requested for equipment, supplies or other non-personal expenses.

(b) *Stipends.* Applications which include a request for funds to enable the institution to make payments to individuals receiving training shall state the nature and duration of the training and instruction to be provided, and the applicant shall also furnish information concerning the minimum qualifications required of the individuals to be trained or instructed, the rate of stipend and allowances to be paid, and the total amount requested for these purposes.

§ 64.3 *Award of training grants.* Subject to the regulations in this part, the Surgeon General may award training grants to such eligible public or other nonprofit institutions as are best able in his judgment to carry out the purpose of such grants. Such grants may be made in the name of the appropriate Institute, but no such grant may be made unless it has been recommended by the national advisory council for such Institute.

§ 64.4 *Conditions to awards; general.* All training grants awarded under the authority of this part shall be subject to the following conditions:

(a) No essential or significant reduction in the quality or duration of the training and instruction shall be made by the grantee institution unless approved by the Director of the appropriate Institute upon recommendation by the

national advisory council for such Institute.

(b) No substitution may be made for the program director named in the application as responsible for the training and instruction unless the substitute director is found by the Director of the appropriate Institute to have substantially equivalent qualifications with respect to providing the training and instruction for which the grant was awarded.

(c) The fiscal and other records of the institution that relate to the training and instruction for which the grant was awarded shall be available for audit or other reasonable inspection by representatives of the Public Health Service.

(d) Additional conditions consistent with the regulations in this part may be imposed by the Director of the appropriate Institute prior to the award of any training grant if he determines that such conditions are necessary to carry out the purposes of such grant.

§ 64.5 *Additional conditions; institutional expenses.* Amounts awarded to enable institutions to defray the expenses of providing training and instruction shall be subject to the following conditions in addition to those set forth in § 64.4:

(a) The funds awarded may be expended solely for the training and instruction program set forth in the application for the grant and for such other related purposes as are determined by the Director of the appropriate Institute to be necessary to such program.

(b) No part of the funds awarded may be used for the purchase of land or for the construction of buildings.

(c) No funds may be used for indirect costs or overhead in excess of the rate generally applicable to training grants at the time of the award.

§ 64.6 *Additional conditions; stipends.* Amounts awarded to enable institutions to pay stipends and allowances to individuals receiving advanced training shall be subject to the following conditions in addition to those set forth in § 64.4:

(a) No part of the funds requested for stipend payments may be used for any other purpose unless approved by the Director of the appropriate Institute.

(b) No part of the amount awarded may be used as remuneration for employment or for the performance of personal services by the individuals receiving the training and instruction.

(c) No amount may be paid by the institution to any individual who, by reason of age, physical or mental condition, or other relevant factor would not, in the reasonable judgment of the institution, be able to make use of the training and instruction.

(d) No amount may be paid by the institution to an individual who does not meet the minimum qualifications for the training and instruction as established by the institution, nor shall any amount be paid to any individual who has failed to demonstrate satisfactory participation in the training in accordance with the usual standards and procedures of the institution.

§ 64.7 *Payments; repayment of unexpected balances; unauthorized expenditures.* (a) Payments to an institution of amounts awarded under the regulations of this part may be made in advance and shall be in such amounts as are necessary in the judgment of the Director of the appropriate Institute to carry out the training program as set forth in the approved application of the institution or in any extension or renewal thereof. Any funds paid and found in the judgment of such Director to be not necessary for such purposes shall be returned to the United States.

(b) In the event any part of the amount paid an institution is found by the Director of the appropriate Institute to have been expended by the institution for purposes or by any methods contrary to the regulations of this part or contrary to any condition to the award, then such institution, upon being notified of such finding and in addition to any other requirement, shall pay an equal amount to the United States.

(c) Whenever the Director of the appropriate Institute shall find that the application or other documents on the basis of which a grant was awarded under the regulations of this part contain a material misrepresentation by or on behalf of the institution, or whenever he shall find that the institution has not, after a reasonable opportunity, corrected a substantial failure to comply with these regulations or with any condition to the award, he shall promptly notify the institution of such finding. Upon receipt of such notice, such institution, in addition to any other action required by law or these regulations, shall return to the United States immediately all funds not actually expended at the time of its receipt of such notice. If requested by the institution, any such findings may be reviewed by the Surgeon General whose decision shall be final.

§ 64.8 *Appropriate institute.* As used in this part "appropriate Institute" shall mean the National Cancer Institute for training grants in the field of cancer; the National Institute of Mental Health for training grants in the field of mental disorders; the National Heart Institute for training grants in the cardiovascular and related fields; the National Institute of Dental Research for training grants in the field of dental diseases and conditions; the National Institute of Allergy and Infectious Diseases for training grants in the field of allergy and infectious diseases; the National Institute of Arthritis and Metabolic Diseases for training grants in the field of arthritis and metabolic diseases; the National Institute of Neurological Diseases and Blindness for training grants in the field of neurological diseases, blindness, and other sensory disorders; and any other Institute established by the Surgeon General under section 431 of the Public Health Service Act, as amended, for training grants in the field of those diseases constituting the responsibility of such Institute.

Subchapter F—Quarantine, Inspection, Licensing

PART 71—FOREIGN QUARANTINE

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AUTHORITY: §§ 71.1 to 71.700 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply secs. 361–369, 58 Stat. 703–706; 42 U. S. C. 264–272, E. O. 9708, 11 F. R. 3241, 3 CFR, 1946 Supp., E. O. 10399, 17 F. R. 8648, 3 CFR, 1952 Supp., E. O. 10532, 19 F. R. 3209, 3 CFR, 1954 Supp.

NOTE: Information concerning forms called for in this part may be obtained from medical officers in charge of quarantine stations of the Public Health Service or from the Division of Foreign Quarantine, Washington 25, D. C. Pertinent provisions of the International Sanitary Regulations (World Health Organization Regulations No. 2) which are referred to in this part are contained in § 71.700.

SUBPART A—DEFINITIONS AND GENERAL PROVISIONS

§ 71.1 *Definitions.* As used in this part, terms shall have the following meaning:

(a) *Certificate of vaccination.* Certificate of vaccination or revaccination against cholera, smallpox or yellow fever conforming with the rules and models prescribed by the International Sanitary Regulations.

(b) *Communicable disease.* An illness due to an infectious agent or its toxic products which is transmitted directly or indirectly to a well person from an affected person, animal, or arthropod (including insecta and arachnida) or through the agency of an intermediate host, vector or the inanimate environment.

(c) *Contamination.* The presence of undesirable substance or material which may contain pathogenic microorganisms.

(d) *Day.* A period of 24 hours.

(e) *Deratting Certificate.* A certificate issued with respect to a vessel by the competent health authority for a port, in the form prescribed by the International Sanitary Regulations, recording the inspection and deratting of the vessel.

(f) *Deratting Exemption Certificate.* A certificate issued with respect to a vessel by the competent health authority for a port, in the form prescribed by the International Sanitary Regulations, recording the inspection and exemption from deratting of the vessel which has a negligible number of rodents on board.

(g) *Disinfection.* The act of rendering anything free from the causal agents of disease.

(h) *Disinfestation.* The act of destroying the vectors of a communicable disease.

(i) *Disinsecting.* The act of destroying insects or other arthropod vectors of a communicable disease.

(j) *Immunity.* The condition of being protected against a particular disease, either as a result of artificial immunization or through a previous attack of the disease in question.

(k) *Incubation period.* The period between the implanting of disease organisms in a susceptible person and the appearance of clinical manifestations of the disease.

(l) *Infected local area.* A local area (as defined in the International Sanitary Regulations):

(1) Where there is more than one case of plague, cholera, yellow fever, or smallpox, or where there is one case of human yellow fever transmitted by Aedes aegypti or other domiciliary vector of yellow fever; or

(2) Where there is an epidemic of typhus or relapsing fever, or

(3) Where there is plague infection among rodents; or

(4) Which constitutes or is part of a yellow fever endemic zone.

(m) *Infected person.* Any person who is suffering from a quarantinable disease or who is considered by the medical officer in charge to be infected with such a disease.

(n) *Infestation.* The condition of harboring vectors.

(o) *International Sanitary Regulations.* The International Sanitary Regulations (World Health Organization Regulations No. 2) adopted by the Fourth World Health Assembly on May 25, 1951.

(p) *Infected vessel or aircraft.* See under particular quarantinable diseases in Subpart F of this part.

(q) *Isolation.* (1) When applied to a person or group of persons, the separation of that person or group of persons from other persons, except the health staff on duty, in such a manner as to prevent the spread of infection.

(2) When applied to animals, the separation of an animal or group of animals from other animals or vectors of disease in such manner as to prevent the spread of infection.

(r) *Medical officer in charge.* The medical officer of the Public Health Service responsible for the application of these regulations at a designated place or in a designated area.

(s) *Port under the control of the United States.* Any seaport or airport in the United States, its territories or possessions other than the Canal Zone.

(t) *Pratique.* A certificate issued by a quarantine officer releasing or provisionally releasing a vessel or aircraft from quarantine.

(u) *Quarantine.* The detention of a person, vessel, aircraft or other conveyance, animal or thing, in such place and for such period of time as may be specified in the regulations in this part.

(v) *Quarantine officer.* A medical officer or other specially trained employee assigned to quarantine duty by the Surgeon General.

(w) *Quarantinable diseases.* The specific communicable diseases: Cholera, plague, relapsing fever, smallpox, typhus, and yellow fever.

(x) *Relapsing fever.* Louse-borne relapsing fever.

(y) *Rodents.* Gnawing mammals capable of transmitting or harboring quarantinable diseases.

(z) *Surgeon General.* The Surgeon General of the Public Health Service.

(aa) *Surveillance.* The temporary supervision of a person who has been released from quarantine by the medical officer in charge upon the condition that he will submit himself to further medical examination or inquiry as required.

(bb) *Suspect.* A person who is considered by the medical officer in charge as having been exposed to infection by a quarantinable disease and to be capable of spreading that disease.

(cc) *Suspected vessel or aircraft.* See under particular quarantinable diseases in Subpart F of this part.

(dd) *Typhus.* Louse-borne typhus.

(ee) *Valid.* (1) With respect to a Deratting Certificate or Deratting Exemption Certificate issued for a vessel, a certificate issued by the competent health authority for a port not more than 6 months before presentation of the Cer-

tificate to the quarantine officer, or if the vessel is proceeding to a port designated or approved for the issuance of such Certificates, not more than 7 months before such presentation.

(2) With respect to a certificate of vaccination, a certificate presented within the applicable period of immunity prescribed in § 71.3.

(ff) *Vector.* An animal (including insects), plant, or thing which conveys or is capable of conveying pathogenic organisms from a person or animal to another person or animal.

(gg) *Yellow fever endemic zone.* An area delineated by the World Health Organization in which Aedes aegypti or any other domiciliary vector of yellow fever is present but is not obviously responsible for the maintenance of the virus which persists among jungle animals over long periods of time.

(hh) *Yellow fever receptive area.* An area delineated by the World Health Organization in which yellow fever does not exist but where conditions would permit its development if introduced.

§ 71.2 *Periods of isolation and surveillance.* Except as otherwise provided with respect to infected persons, where isolation or surveillance is authorized in this part the period of such isolation or surveillance shall be reckoned as hereinafter provided and shall not exceed the following appropriate incubation period of the quarantinable diseases:

(a) Plague: 6 days.
(b) Cholera: 5 days.
(c) Yellow fever: 6 days.
(d) Smallpox: 14 days.
(e) Typhus: 14 days.
(f) Relapsing fever: 8 days.

§ 71.3 *Periods of immunity.* The following shall be the recognized period of immunity after successful immunization; in the case of yellow fever, the vaccine must be approved by the World Health Organization:

Cholera: 6 months, beginning 6 days after the first injection of the vaccine and on date of a revaccination during such period of 6 months.

Smallpox: 3 years, beginning 8 days after successful primary vaccination and immediately on revaccination.

Yellow fever: 6 years beginning 10 days after date of original vaccination and from date of a revaccination within such period of 6 years.

§ 71.4 *Compliance with conditions of surveillance.* (a) Every person who is placed under surveillance in accordance with the provisions of this part shall, during the period of surveillance:

(1) Give such information relative to his health and his intended destination and report to designated physicians or medical officers at such times for such medical examinations as may be required;

(2) Upon arrival at any address other than that stated as his intended destination when placed under surveillance, report his address to the medical officer in charge at the port or place of his entry.

(b) A person under surveillance shall, prior to departure from the United States, inform the medical officer in charge at the port or place of his entry, or departure, and such officer shall immediately notify the health authority of the place to which the person is proceeding.

§ 71.5 *Departing persons, things, vessels or aircraft.* (a) If the medical officer in charge has reason to believe that a person proposing to depart from the United States by any means is infected with or has been exposed to infection by a quarantinable disease, he shall so advise the person and notify the local health authorities and the master or commander or person in charge of the vessel, aircraft or other conveyance on which the person proposes to depart.

(b) If the medical officer in charge has reason to believe that a departing vessel, aircraft or land conveyance has or may have on board possible agents of infection or vectors of a quarantinable disease, he shall notify the master, commander, or person in charge and offer to have performed such disinsecting, disinfection, or other measures as are necessary. He shall, if he considers that a risk of infection exists on board at the time of departure, notify all persons proposing to embark upon such ship, aircraft or conveyance and the health authorities at the next port of call or destination of the conditions aboard such vessel, aircraft or conveyance.

§ 71.6 *Sanitary measures previously applied.* Any sanitary measure, other than medical examination, which has been applied prior to the arrival of a vessel or aircraft with respect to the quarantinable diseases shall not be repeated unless:

(a) After the departure of a vessel or aircraft from the port or airport where the measures were applied there is or has been on board an infected person or suspect, or there has occurred any other incident of epidemiological significance either in that port or airport or on board the vessel or aircraft which, in the judgment of the medical officer in charge, requires further application of any such measure, or

(b) The medical officer in charge has ascertained on the basis of definite evidence that the individual measure so applied was not substantially effective.

§ 71.7 *Certificate of measures applied.* (a) The medical officer in charge shall, upon request, issue free of charge to a carrier a certificate specifying the sanitary measures applied to a vessel, an aircraft or a land conveyance, the parts thereof treated, the methods employed, and the reasons why the measures were applied. In the case of an aircraft this information shall on request be entered instead in the General Declaration.

(b) The medical officer in charge shall, upon request, issue free of charge:

(1) To any traveler a certificate specifying the date of his arrival or departure and the sanitary measures applied to him and his baggage;

(2) To the consignor, the consignee, or the carrier, or their respective agents, a certificate specifying the sanitary measures applied to any goods.

§ 71.8 *Designation of vaccinating centers; authenticating stamps.* (a) Yellow fever vaccinating centers, authorized to issue certificates of vaccination against yellow fever, are designated by the Surgeon General. Such designation is made upon application therefor and the presentation of evidence satisfactory to the Surgeon General that a substantial need for the designation exists in the area to be served by the applicant and that the applicant has adequate facilities and professionally trained personnel for the handling, storage, and administration of a safe, potent and pure yellow fever vaccine.

(b) A designated yellow fever vaccinating center shall comply with instructions issued by the Surgeon General or by a delegated officer or employee of the Service for the handling, storage and administration of yellow fever vaccine. If a designated center fails to comply with such instructions, the Surgeon General may, after notice to the center, revoke such designation.

(c) International certificates of vaccination against yellow fever issued by Public Health Service facilities or Department of Defense medical facilities shall be authenticated by the official stamp or seal of such vaccinating centers. All other designated centers shall authenticate such certificates with a stamp of a design and size approved by the Surgeon General.

(d) International certificates of vaccination against smallpox and cholera issued for vaccinations performed in the United States shall be authenticated by:

(1) The stamp or seal of the Public Health Service, of the Department of Defense, or of the State or local health department of the area in which the vaccinating physician practices; or

(2) The stamp approved under paragraph (c) of this section for a yellow fever vaccinating center; or

(3) A stamp issued by the Public Health Service for such purpose.

§ 71.9 *Listing of infected and receptive areas.* Each medical officer in charge shall maintain an accurate listing of (a) ports and other areas infected with quarantinable or other communicable diseases, including yellow fever endemic zones, and (b) yellow fever receptive areas.

SUBPART B—MEASURES AT FOREIGN PORTS

§ 71.11 *Bills of health.* A vessel or aircraft at any foreign port clearing or departing for any port under the control of the United States shall not be required to obtain or deliver a bill of health.

§ 71.12 *Measures prescribed by local health authority: Vessels and aircraft.* A vessel or aircraft at any foreign port or airport clearing or departing for any port under the control of the United States shall comply with sanitary measures prescribed by the health authority for such foreign port or airport in accordance with responsibility imposed by the International Sanitary Regulations to prevent the departure of infected persons or the introduction on board the vessel or aircraft of possible agents of infection or vectors of a quarantinable disease.

SUBPART C—NOTICE OF COMMUNICABLE DISEASE PRIOR TO ARRIVAL

§ 71.31 *Radio report of disease on board.* The master of a vessel destined

for a port under the control of the United States shall report promptly by radio to the medical officer in charge at the port of entry and wherever practicable not less than four hours before the expected arrival of the ship, the occurrence or suspected occurrence of any of the following communicable diseases: Anthrax, chancroid, chickenpox, cholera, dengue, diphtheria, favus, gonorrhea, granuloma inguinale, impetigo contagiosa, infectious encephalitis, leprosy, lymphogranuloma venereum, measles, meningococcus meningitis, plague, poliomyelitis, psittacosis, relapsing fever, ringworm of the scalp, scarlet fever, smallpox, streptococcic sore throat, syphilis, trachoma, tuberculosis, typhoid fever, typhus, yellow fever, or other diseases characterized by fever or skin rash.

(b) The commander of an aircraft destined for a port under the control of the United States shall report promptly by radio (if the aircraft has radio equipment) to the medical officer in charge at or nearest the intended place of first landing in the United States the occurrence or suspected occurrence on board of any of the communicable diseases listed or described in paragraph (a) of this section.

SUBPART D—VESSELS AND AIRCRAFT SUBJECT TO QUARANTINE INSPECTION

§ 71.46 *General provisions.* (a) A vessel or aircraft arriving at a port under the control of the United States shall undergo quarantine inspection prior to entry unless:

(1) In the current voyage the vessel or aircraft has not touched at any port other than ports under the control of the United States or ports in Canada, the Islands of St. Pierre and Miquelon, Iceland, Greenland, the West Coast of Lower California, Cuba, the Bahama Islands, the Canal Zone, the Bermuda Islands, the British Virgin Islands, or the Islands of Aruba and Curacao; or

(2) In the current voyage the vessel or aircraft has received pratique at a port under the control of the United States, and since receiving such pratique has not touched at a port other than those listed in subparagraph (1) of this paragraph; or

(3) The vessel or aircraft possesses a duplicate of a pratique issued at a port in Canada or the Canal Zone, provided that since receiving such pratique the vessel or aircraft has not touched at ports other than those listed in subparagraph (1) of this paragraph.

(b) A vessel or aircraft otherwise exempt from inspection under the provisions of paragraph (a) (1), (2) or (3) of this section shall undergo quarantine inspection prior to entering a port under the control of the United States if the vessel or aircraft:

(1) Has aboard, or during the current voyage has had aboard, a person infected or suspected of being infected with anthrax, chickenpox, cholera, dengue, diphtheria, infectious encephalitis, measles, meningococcus meningitis, plague, poliomyelitis, psittacosis, relapsing fever, scarlet fever, smallpox, streptococcic sore throat, typhoid fever, typhus, or yellow fever, or

(2) Arrives directly from a port where at the time of departure there was present or suspected of being present cholera, plague, relapsing fever, smallpox, typhus, or yellow fever, or

(3) Being exempt from inspection under the provisions of paragraph (a) (1) of this section, on arrival at its first port under the control of the United States has on board a person who has been in a port or area other than those listed in paragraph (a) (1) within 14 days prior to such arrival, or

(4) Being exempt from inspection under the provisions of paragraph (a) (1) or (3) of this section, on arrival at its first port under the control of the United States has on board (i) a psittacine bird (see § 71.152), (ii) an animal or article that does not comply with admission requirements contained in § 71.154, § 71.156, or § 71.157.

(c) Notwithstanding the provisions of paragraph (a) (2) and (3) of this section, a vessel or aircraft having received pratique at a port under the control of the United States, or possessing a duplicate pratique from Canada or the Canal Zone:

(1) Shall comply with any conditions and carry out any additional measures specified in the pratique; and

(2) May be required to undergo quarantine inspection if the medical officer in charge has reason to believe that the entry of the vessel or aircraft would be likely to cause the introduction of communicable disease.

§ 71.47 *Vessels and aircraft of armed services.* (a) Vessels and aircraft belonging to or operated by the armed services of the United States may be exempted from quarantine inspection if the medical officer in charge is satisfied that they have complied with regulations of such armed services meeting the requirements of the regulations in this part. (For applicable regulations of the Armed Forces see Army Regulations No. 42–40; Navy Department General Order No. 20; Air Force Regulation No. 160–26.)

(b) Vessels belonging to or operated by the armed services of any foreign nation may, in the discretion of the medical officer in charge, be exempted from quarantine inspection if a commissioned medical officer of such service certifies that:

(1) Any person on board who is infected or suspected of being infected with a communicable disease will be isolated until it is determined whether or not he is infected with a quarantinable disease, and that

(2) The vessel is from a port where at the time of departure there was not present or suspected of being present cholera, plague, relapsing fever, smallpox, typhus, or yellow fever. When it is determined that any person on board such vessel is infected with a quarantinable disease, the vessel and its entire personnel shall be subject to the provisions of Subpart F of this part.

(c) Notwithstanding the exemption from quarantine inspection of a vessel or aircraft under this section, animals or articles aboard shall be required to comply with the applicable requirements of Subpart J of this part.

§ 71.48 *Exempt vessels and aircraft subject to sanitary regulations.* A vessel or aircraft which has been exempted from quarantine inspection under § 71.46 or § 71.47 shall nevertheless be subject to the provisions of Subpart G of this part.

§ 71.49 *Report of disease or rodent mortality on vessel during stay in port.* The master of any vessel calling at a port under the control of the United States shall promptly report to the medical officer in charge the occurrence of the following on the vessel during its stay in port:

(a) A known or suspected case of communicable disease included in the list or description in § 71.31.

(b) Unusual mortality or evidence of disease among rodents.

SUBPART E—GENERAL REQUIREMENTS UPON ARRIVAL AT PORTS UNDER CONTROL OF UNITED STATES

§ 71.61 *Applicability.* The measures prescribed in this subpart shall be taken with respect to vessels or aircraft which are subject to quarantine inspection pursuant to Subpart D of this part, and with respect to persons and things arriving on such vessels or aircraft.

§ 71.62 *General provisions: Vessels and aircraft; permission for aircraft to discharge persons and cargo*—(a) *Vessels.* (1) The vessel shall fly a yellow flag. It shall anchor in the quarantine anchorage and await inspection, except as provided in subparagraph (2) of this paragraph.

(2) If the medical officer in charge is of the opinion that proceeding to a designated point would not be likely to cause the introduction of communicable disease, he may direct the vessel to proceed to such a point to await inspection. He shall prescribe necessary measures to ensure that there is no movement of any person or thing onto or from the vessel without his permission, pending quarantine inspection.

(b) *Aircraft.* When an aircraft subject to quarantine inspection in accordance with this part arrives at the place of first landing (see § 71.502) the aircraft commander shall be responsible for the detention of the aircraft, its crew and passengers until they are released by the quarantine officer at the place of first landing. Any baggage, cargo, or other contents on board the aircraft shall be held at such place until released by the quarantine officer. (For procedure in case of emergency or forced landing, see § 71.504.)

§ 71.63 *Persons: Restrictions on boarding and leaving vessels or aircraft, or having contact with persons aboard*—(a) *Vessels.* Except with the permission of the quarantine officer, no person other than the pilot shall board or be permitted to board any vessel subject to quarantine inspection until after it has been inspected by the quarantine officer and granted pratique. A person boarding such vessel shall be subject to the same restrictions as those imposed on the persons on the vessel. No person shall leave or be permitted to leave any vessel subject to quarantine inspection until after it has been inspected by the quarantine

officer and granted pratique, except with the permission of the quarantine officer.

(b) *Aircraft.* Except with the permission of the quarantine officer, no person shall board or be permitted to board any aircraft subject to quarantine inspection or have contact with the crew or passengers of such aircraft until quarantine inspection of the aircraft, crew, and passengers has been completed. The same restrictions as those imposed on the crew and passengers shall be imposed on a person boarding such aircraft and on a person having contact with a passenger or member of the crew when the quarantine officer considers such contact a possible means of spreading a quarantinable disease.

§ 71.64 *Maritime quarantine declaration.* (a) On arrival of a vessel, the master shall complete a maritime quarantine declaration on the Public Health Service Quarantine Declaration form. The completed form shall be delivered to the medical officer in charge or to the quarantine officer at the time quarantine inspection is begun. The declaration shall also be signed by the ship's surgeon if one is carried.

(b) The master of a vessel and the ship's surgeon, if one is carried, shall furnish all information as to health conditions on board during the voyage which may be required by the quarantine officer or medical officer in charge and shall comply with the regulations in this part and with any directions or requirements of the medical officer in charge pursuant to the regulations in this part.

§ 71.65 *Aircraft declaration and manifest.* (a) When an aircraft is carrying passengers for hire or commercial cargo, the aircraft commander or any other authorized agent of the owner or operator of the aircraft shall deliver a general declaration to the quarantine officer immediately upon the first landing in the United States. Such declaration shall be on a form approved by the Surgeon General and the Commissioner of Customs, and shall include a report showing:

(1) Details of any illness suspected of being of an infectious nature that has occurred aboard the aircraft during the flight;

(2) Details of any other condition on board the aircraft during its flight which may lead to the spread of disease;

(3) Details of each disinsecting or sanitary treatment (place, date, time, method) during the flight (if no disinsecting has been carried out during the flight give details of most recent disinsecting);

(4) Any animals (including birds and insects), and cultures of bacteria, fungi, and viruses, and other infectious agents on board;

(5) Such other information and statements as are indicated on the general declaration form.

(b) Unless the aircraft is arriving directly on a trip that originated in Canada, there shall be delivered with the general declaration a passenger manifest showing the surname, given name, and middle initial of each arriving passenger.

§ 71.66 *Quarantine inspection and controls.* (a) Quarantine inspection of a vessel or aircraft shall include:

(1) Inspection of the vessel or aircraft, its cargo, manifests, and other papers to ascertain the sanitary history and condition of the vessel or aircraft;

(2) Examination of the persons aboard the vessel or aircraft, their personal effects and records to determine the presence, or risk of introduction, of quarantinable and other communicable diseases.

(b) The medical officer in charge may require a vessel or aircraft to remain under quarantine controls until the completion of the measures authorized in this part which in his judgment are necessary to prevent the introduction or spread of a quarantinable or other communicable disease.

§ 71.67 *Persons: Examination.* All persons on board shall be examined, except that on an approved regular line vessel or aircraft which carries a ship or flight surgeon, such examination may be limited to persons designated by the medical officer in charge.

§ 71.68 *Vessels and aircraft: Persons and things; communicable diseases other than quarantinable diseases.* (a) Whenever the medical officer in charge has reason to believe that any arriving vessel or aircraft, or article or thing aboard, is or may be infected or contaminated with any of the communicable diseases listed in paragraph (c) of this section, he may disinsect, disinfect, disinfest, fumigate and take such other related measures respecting such vessel, aircraft, or article or thing aboard, or any part thereof, as he considers necessary to prevent the introduction, transmission, or spread of such communicable diseases.

(b) Whenever the medical officer in charge has reason to believe that any arriving person is suffering or has been exposed to infection from any of the communicable diseases listed in paragraph (c) of this section, he may place such person in isolation or under surveillance and may disinfect or disinfest his person, clothing or baggage as he considers necessary to prevent the introduction, transmission or spread of such communicable diseases.

(c) The communicable diseases authorizing the application of sanitary and quarantine measures under paragraphs (a) and (b) of this section are: Anthrax, chancroid, dengue, diphtheria, favus, gonorrhea, granuloma inguinale, infectious encephalitis, leprosy, lymphogranuloma venereum, meningococcus meningitis, poliomyelitis, psittacosis, ringworm of the scalp, scarlet fever, streptococcic sore throat, syphilis, trachoma, tuberculosis, typhoid fever.

§ 71.69 *Persons: Isolation.* Persons held under isolation pursuant to the provisions of this subpart and Subpart F of this part may be so held at facilities of the Public Health Service or, if such facilities are not available, on ships in quarantine pending other suitable arrangements for isolation and treatment. Such arrangements shall be made as soon as practicable.

§ 71.70 *Persons: Isolation substituted for surveillance.* The medical officer in charge may require isolation where surveillance is authorized in this part whenever he considers the risk of transmission of infection by a suspect to be exceptionally serious.

§ 71.71 *Restriction on movement of articles.* Articles from a vessel or aircraft shall not be carried into the place of detention except by permission of the medical officer in charge.

§ 71.72 *Disinfection of imports.* When the freight manifest of a vessel or aircraft lists articles which may require disinfection under the provisions of this part, the medical officer in charge shall disinfect them on board or request the collector of customs to keep the articles separated from the other freight pending appropriate disposition.

§ 71.73 *Exemption for mails.* Except to the extent that mail contains any of the foods or beverages referred to in § 71.82 (d) which the medical officer in charge has reason to believe comes from a cholera infected local area, or any article or thing subject to quarantine restrictions under Subpart J of this part, nothing in the regulations in this part shall render liable to detention, disinfection or destruction any mail conveyed under the authority of the postal administration of the United States or of any other Government.

SUBPART F—PARTICULAR REQUIREMENTS UPON ARRIVAL AT PORTS UNDER CONTROL OF UNITED STATES

§ 71.81 *Applicability.* In addition to the requirements of Subpart E of this part, the particular requirements prescribed in this subpart (affecting persons, vessels or aircraft, animals, and other imports) shall be observed with respect to vessels or aircraft which are subject to quarantine inspection under Subpart D of this part.

§ 71.82 *Cholera: Vessels and aircraft; things.* (a) For the purpose of applying sanitary and quarantine measures against the spread of cholera:

(1) An infected vessel means a vessel which has on board on arrival a case of cholera or on which a case of cholera has occurred within 5 days prior to arrival.

(2) An infected aircraft means an aircraft which has a case of cholera aboard on arrival.

(3) A suspected vessel means a vessel which has had on board during the voyage a case of cholera more than 5 days prior to arrival.

(4) A suspected aircraft means an aircraft which has had on board during the voyage a case of cholera which has previously disembarked.

(b) An infected or suspected vessel or aircraft shall be detained in quarantine as may be necessary for the effective accomplishment of the applicable sanitary measures prescribed in this subpart.

(c) Personal effects and baggage of any infected person or suspect and any part of the infected or suspected vessel or aircraft considered to be contaminated shall be disinfected. Bedding or linen, human dejecta, bilge water, waste

matter or water, and any matter considered to be contaminated shall not be unloaded or discharged until it has been disinfected.

(d) On arrival of an infected or suspected vessel or aircraft, or a vessel or aircraft arriving from an infected local area, the medical officer in charge may prohibit the unloading of, or may remove all fish, shellfish, fruit or vegetables to be consumed uncooked, or beverages, unless such food or beverages are in sealed containers and the medical officer in charge has no reason to believe that they are contaminated. If any such food or beverage is removed it shall be safely disposed of. If any of said food or beverage forms part of the cargo in a hold of a vessel or freight compartment of an aircraft, the medical officer in charge at the port or airport at which such cargo is to be unloaded shall arrange for its safe disposal. Such other special precautions shall be taken as may be necessary to prevent contamination of food or water supplies of the vessel or aircraft.

(e) If the medical officer in charge considers the water supply of a cholera infected or suspected vessel or aircraft to be contaminated, he shall require the disinfection and removal of any water carried on board and if necessary the disinfection of the water system and of the water containers.

§ 71.83 *Cholera: Vessels and aircraft; persons.* (a) Persons ill from cholera shall be removed and isolated until no longer infectious.

(b) On arrival of an infected vessel or aircraft the medical officer in charge may place under surveillance any person disembarking who produces a valid certificate of vaccination against cholera and may isolate all others disembarking. Such surveillance or isolation shall be reckoned from the date of disembarkation.

(c) On arrival of a suspected vessel or aircraft the medical officer in charge may place under surveillance any person disembarking. Such surveillance shall be reckoned from the date of arrival.

(d) Any person who, within 5 days prior to arrival, has departed from a cholera infected local area or arrives on a healthy vessel or aircraft which has departed from such an area within such time may be placed under surveillance if he has a valid certificate of vaccination against cholera or may be placed in isolation if he does not have such a certificate. The period of isolation or surveillance shall be reckoned from the date of departure of the person, or the vessel or aircraft, from the infected area.

(e) Any person who has departed from an infected local area within 5 days prior to arrival and who has symptoms indicative of cholera may be required to submit to a stool examination.

§ 71.84 *Plague: Vessels and aircraft.* (a) For the purpose of applying sanitary and quarantine measures against the spread of plague:

(1) An infected vessel or aircraft means a vessel or aircraft which has on board on arrival a case of human plague, or a plague infected rodent. A vessel shall also be regarded as infected if a case of plague develops on board in a person more than 6 days after his embarkation.

(2) A suspected vessel means (i) a vessel which, not having a case of human plague on board on arrival, has had on board such a case developed by the person within 6 days of his embarkation or (ii) a vessel on which there is evidence of abnormal mortality of rodents on board, the cause of which is not known on arrival.

(b) An infected or suspected vessel or an infected aircraft shall be detained in quarantine as may be necessary for the effective accomplishment of the applicable sanitary measures prescribed in this part.

(c) On arrival of a vessel which has rodent plague on board the medical officer in charge shall require the deratting of the vessel. The following provisions shall apply to such deratting:

(1) The deratting shall be carried out as soon as the holds have been emptied;

(2) One or more preliminary derattings of a vessel with the cargo in situ, or during its unloading, may be carried out to prevent the escape of infected rodents;

(3) If the complete destruction of rodents cannot be secured because only part of the cargo is due to be unloaded, a vessel shall not be prevented from unloading that part, but the medical officer in charge may apply any measures which he considers necessary to prevent the escape of infected rodents.

(d) If a rodent dead of plague is found on board an aircraft, it shall be deratted.

§ 71.85 *Plague: Vessels and aircraft; persons; things.* (a) Persons ill from plague shall be removed and isolated until no longer infectious.

(b) On arrival of an infected or suspected vessel or infected aircraft the medical officer in charge may:

(1) Require any suspect on board to be disinsected and may place him under surveillance, the period of surveillance being reckoned from the date of arrival of the vessel or aircraft;

(2) Require the disinsecting and, if necessary, disinfection of the baggage of any infected person or suspect and of any other article such as used bedding or linen, and any part of the vessel or aircraft, which the medical officer in charge considers to be contaminated.

(c) On the arrival of a healthy vessel or aircraft which has come from a plague infected local area the medical officer in charge may:

(1) Place under surveillance any suspect who disembarks, the period of surveillance being reckoned from the date of departure of the vessel or aircraft from the infected area;

(2) Require the deratting of the vessel in exceptional circumstances. In such case, the master shall be informed in writing of the reasons for the action.

(d) In exceptional circumstances of an epidemiological nature, when the presence of rodents is suspected on board, an aircraft may be deratted.

§ 71.86 *Smallpox: Persons, general.* (a) All arriving persons shall be subject to vaccination against smallpox unless they present evidence satisfactory to the medical officer in charge of successful vaccination, or of a revaccination, within 3 years prior to arrival or of a previous attack of smallpox.

(b) Any person subject to vaccination under this section shall be offered vaccination; if he is not vaccinated, he may be placed under surveillance, the period of surveillance being reckoned from the date of his departure from the last territory visited prior to his arrival.

(c) Any person subject to vaccination under this section who has visited a smallpox infected local area within 14 days prior to arrival may be required to be vaccinated, or may be placed under surveillance, or may be vaccinated and then placed under surveillance; if he refuses vaccination, he may be isolated. The period of surveillance or isolation shall be reckoned from the date of departure from the infected local area.

§ 71.87 *Smallpox: Infected vessels and aircraft; persons.* (a) For the purpose of applying sanitary and quarantine measures against the spread of smallpox, an infected vessel or aircraft means a vessel or aircraft which on arrival has a case of smallpox aboard or has had a case of smallpox on board during the voyage.

(b) On arrival of an infected vessel or aircraft the medical officer in charge shall detain the vessel or aircraft in quarantine as may be necessary for the effective accomplishment of the following measures:

(1) Persons ill from smallpox shall be removed and isolated until no longer infectious.

(2) Vaccination shall be offered to any person on board who the medical officer in charge considers is not sufficiently protected against smallpox.

(3) The medical officer in charge, taking into consideration the danger of infection, may place under surveillance or in isolation any person disembarking. The period of surveillance or isolation shall be reckoned from the last exposure to infection.

(4) The baggage of any infected person shall be disinfected.

(5) Any other baggage or article, or any part of the ship or aircraft, which the medical officer in charge considers to be contaminated shall be disinfected.

§ 71.88 *Smallpox: Persons; suspects.* The medical officer in charge may apply the provisions of paragraph (b) of § 71.87 to any suspect who disembarks from a vessel or aircraft which is not an infected vessel or aircraft.

§ 71.89 *Typhus and relapsing fever: Vessels and aircraft; persons; things.* (a) A vessel or aircraft on which a case of typhus or relapsing fever has occurred during the voyage shall be detained in quarantine as may be necessary for the effective accomplishment of the following measures:

(1) Removal and isolation of any infected person on board until he is no longer infectious.

(2) Disinsecting of any suspect on board.

(3) Disinsecting and, if necessary, disinfection of the accommodations occupied by any infected person or suspect,

his clothing, baggage, and any other article which the quarantine officer considers is likely to spread typhus or relapsing fever.

(b) The medical officer in charge may:

(1) Require the disinsecting of any person who has left an infected local area within 14 days prior to arrival, in the case of typhus, and within 8 days prior to arrival, in the case of relapsing fever, and the disinsecting and, if necessary, disinfection of his clothing, baggage, and any other article which the quarantine officer considers is likely to spread typhus or relapsing fever.

(2) Place any person so disinsected under surveillance for a period of not more than 14 days in the case of typhus and not more than 8 days in the case of relapsing fever, such period of surveillance being reckoned from the date of the disinsecting.

§ 71.90 *Yellow fever: Vessels and aircraft; disinsecting.*[1] (a) For the purpose of applying sanitary and quarantine measures against the spread of yellow fever:

(1) An infected vessel means a vessel which has on board on arrival or which during its voyage had on board a case of yellow fever.

(2) An infected aircraft means an aircraft which has on board on arrival a case of yellow fever.

(3) A suspected vessel means a vessel which has left a yellow fever infected local area within 6 days prior to arrival or which arriving within 30 days after leaving such area has Aedes aegypti aboard.

(4) An aircraft shall be regarded as suspected if it has left an airport situated in a yellow fever infected local area bound for a yellow fever receptive area in the United States and on arrival the quarantine officer is not satisfied with a disinsecting carried out prior to departure from such area or in flight and finds live mosquitoes on board.

(b) An infected or suspected vessel or aircraft, or a healthy vessel or aircraft arriving from an infected local area, shall be detained in quarantine until all vectors of yellow fever on board have been destroyed. In yellow fever receptive areas, such vessels shall be moored not less than 400 meters from the land until disinsecting is completed.

(c) On arrival, an infected or suspected aircraft shall be kept tightly closed and disinsecting completed before discharge of passengers, crew, mail, baggage, cargo or other material. No person other than quarantine officials shall be allowed on board until disinsecting is completed.

(d) Every aircraft which has left a local area where Aedes aegypti or any other domiciliary vector of yellow fever exists and arrives in a yellow fever receptive area in the United States free of Aedes aegypti shall be similarly disinsected on arrival if it has not been disinsected prior to departure.

(e) Every aircraft which has left an airport situated in an infected local area and arrives in a yellow fever receptive area in the United States shall be similarly disinsected on arrival in the United States if it has not been disinsected prior to departure.

(f) The medical officer in charge may accept disinsecting in flight as equivalent to disinsecting on arrival (where required by paragraphs (d) and (e) of this section) with respect to compartments accessible in flight if after inspection he determines that such disinsecting has been effective, was accomplished not less than 30 minutes prior to first landing at a United States port and the insecticide and disinsecting methods meet the following requirements.

(1) The insecticide shall be either Insecticidal Aerosol G–382, the formula of which is given below, or an insecticide found by the Surgeon General of the Public Health Service, upon application by an interested person, to be substantially as effective as Insecticidal Aerosol G–382;

FORMULA FOR INSECTICIDAL AEROSOL G–382

	Percent by weight
Pyrethrum extract, purified (20% pyrethrins)	5
DDT (aerosol grade)	3
Cyclohexanone	5
Lubricating oil (SAE 30)	2
Freon "12"	85

(2) The insecticide shall be dispensed in the amount of not less than 5 grams for each 1000 cu. ft. of enclosed space in the aircraft, and shall be released or sprayed throughout all accessible compartments.

(3) The ventilation system shall be stopped and all openings to the exterior kept closed while the insecticide is being released or sprayed, and for a period of not less than three minutes thereafter.

§ 71.91 *Yellow fever: Vessels and aircraft; persons.* (a) On arrival of an infected vessel or aircraft the quarantine officer shall remove and isolate all persons ill with yellow fever until no longer infectious.

(b) In a yellow fever receptive area the medical officer in charge may place in isolation or under surveillance any person arriving from an infected area or disembarking from an infected or suspected vessel or aircraft who does not produce a valid certificate of vaccination against yellow fever, until his certificate becomes valid or for not more than 6 days from the date of last possible exposure, whichever is earlier.

(c) At a port outside the yellow fever receptive area the medical officer in charge, taking into consideration the risk of introduction of yellow fever, may place in isolation or under surveillance any person arriving from an infected area or disembarking from an infected or suspected vessel or aircraft who does not produce a valid certificate of vaccination against yellow fever if such person is bound for a yellow fever receptive area and expects to arrive in such area before his certificate becomes valid or within 6 days from the date of last possible exposure, whichever is earlier. The period of surveillance or isolation authorized by this paragraph shall not extend beyond the earlier of the dates specified herein.

SUBPART G—SANITARY INSPECTION: RODENT AND VERMIN CONTROL

§ 71.101 *General provisions.* Vessels or aircraft arriving at a port under the control of the United States from a foreign port shall be subject to sanitary inspection to ascertain whether there exists rodent, vermin, or insect infestation, contaminated food or water, or other unsanitary condition requiring measures for the prevention of the introduction, transmission, or spread of communicable disease.

§ 71.102 *Disinsecting and disinfection: Vessels, aircraft and persons.* Except as otherwise provided in this part:

(a) Such aircraft which have left an area infected with insect borne communicable disease may be disinsected on arrival if the medical officer in charge has reason to suspect the presence on board of insect vectors of communicable disease.

(b) Such vessels may be disinfested on arrival if the medical officer in charge considers disinfestation necessary to prevent the spread of infection or for the destruction of insects and vermin capable of transmitting communicable disease.

(c) The person, effects and baggage of any vermin infested person arriving aboard a vessel or aircraft shall be disinsected and, if necessary in the judgment of the medical officer in charge, disinfected.

§ 71.103 *Deratting Certificates: Deratting Exemption Certificates; vessels only.* If a valid Deratting Certificate or Deratting Exemption Certificate is not produced with respect to any arriving vessel the medical officer in charge shall:

(a) If he is satisfied that the vessel is free of rodents or is kept in such a condition that the number of rodents on board is negligible, issue a Deratting Exemption Certificate.

(b) If he is satisfied that a Deratting Exemption Certificate should not be issued with respect to such vessel, require the deratting of the vessel. When deratting has been completed to the satisfaction of the medical officer in charge, he shall issue a Deratting Certificate.

§ 71.104 *Deratting: Aircraft only.* An aircraft may be deratted in exceptional circumstances of an epidemiological nature when the medical officer in charge suspects the presence of rodents on board.

§ 71.105 *Issuance of Deratting Certificates and Deratting Exemption Certificates: Approved and designated stations.* In accordance with Article 17 of the International Sanitary Regulations, all quarantine stations of the Public Health Service are approved and designated for the issuance of Deratting Cer-

[1] At airports where the hazard of introducing disease carrying insects exists, it is the policy of the United States Public Health Service to conduct "entomological surveillance" of the airport area. This surveillance consists of periodic entomological surveys carried on by entomologists or trained representatives for the purpose of the early detection and prompt eradication of any insect which may unknowingly have been introduced by aircraft.

tificates and Deratting Exemption Certificates.

§ 71.106 *Vessels and aircraft in intercoastal and interstate traffic.* Vessels and aircraft in traffic between ports under the control of the United States shall be subject to sanitary inspection as described in § 71.101, when arriving from a port infected or suspected of being infected with quarantinable disease or when illness on board indicates unsatisfactory sanitary conditions.

§ 71.107 *Application of sanitary measures.* The sanitary measures prescribed by § 71.68 and Subpart F of this part shall be applicable after sanitary inspections made pursuant to this subpart.

SUBPART H—PRATIQUE: VESSELS AND AIRCRAFT

§ 71.121 *General requirement: Vessels only.* Vessels subject to quarantine inspection pursuant to Subpart D of this part shall not enter a port under the control of the United States to discharge cargo or land passengers unless a certificate of free or provisional pratique has been issued to the master.

§ 71.122 *Free pratique: Vessels only.* A certificate of free pratique shall signify that the vessel and its master may enter, discharge cargo, and land passengers.

§ 71.123 *Provisional pratique and remand: Vessels only.* (a) A certificate of provisional pratique shall signify that the vessel may enter, but that additional measures as specified in such certificate must be taken in connection with the discharge of cargo, or the landing of passengers, or the sanitary condition of the vessel. A certificate of free pratique shall be issued after such additional measures have been completed.

(b) The medical officer in charge may remand the vessel to the next port for such additional measures as may be necessary. Vessels arriving at quarantine stations at succeeding ports of call under provisional pratique may, in the discretion of the medical officer in charge at such stations, be directed to proceed under provisional pratique to the next succeeding port for completion of quarantine measures.

(c) Failure to comply with additional measures specified in a certificate of provisional pratique shall constitute a violation of the regulations in this part, and the vessel shall become subject to all measures applicable to vessels first arriving at a port under the control of the United States from a foreign port.

§ 71.124 *Radio pratique: Vessels only.* The medical officer in charge may grant pratique by radio to a vessel upon the basis of information regarding the vessel, its cargo and persons aboard, received prior to arrival of the vessel, when in his judgment, and in accordance with instructions by the Surgeon General, the entry of the vessel will not result in the introduction, transmission or spread of communicable diseases.

§ 71.125 *Presentation of pratique: Vessels only.* Vessels which have undergone quarantine inspection shall present to the Collector of Customs at the port of entry the certificate of pratique, or evidence of radio pratique, issued pursuant to the provisions of this subpart.

§ 71.126 *Pratique and remand: Aircraft only.* When all necessary quarantine and sanitary measures have been applied to the aircraft and persons and things on board, pursuant to the regulations of this part, the quarantine officer shall issue a certificate of free pratique, which may be stamped on a copy or copies of the general declaration, including the traveling general declaration, for presentation to the customs officer in charge. Pending compliance with quarantine requirements the quarantine officer may issue a certificate of provisional pratique for the aircraft, stating the measures to be carried out. When quarantine measures cannot be completed at the place of first landing, the medical officer in charge may remand the aircraft under provisional pratique to the next airport for such additional measures as may be necessary. Aircraft arriving under provisional pratique at succeeding airports may, when quarantine measures cannot be completed there, be directed to proceed under provisional pratique to the next succeeding airport for completion of quarantine measures.

§ 71.127 *Notification of remands: Vessels and aircraft.* The quarantine officer remanding a vessel or aircraft to another port in accordance with this subpart shall give advance notification to the medical officer in charge and customs officer at the port to which the vessel or aircraft is remanded. The notification should be timed to arrive ahead of the vessel or aircraft, and should be made by telephone in the case of aircraft. The notification shall give complete information regarding measures carried out at the port effecting the remand and measures required at the port to which the vessel or aircraft is remanded.

§ 71.128 *Vessels and aircraft not submitting to prescribed measures.* When it is desired not to comply with the requirements for a certificate of free or provisional pratique, a vessel or aircraft shall be allowed to depart forthwith, but shall not call at any other place in the United States in connection with the current voyage or flight. The vessel or aircraft shall, however, be permitted to take on fuel, water, and stores in quarantine subject to measures prescribed by the quarantine officer pursuant to the regulations in this part.

SUBPART I—BORDER QUARANTINE

§ 71.136 *Applicability.* The special provisions of this subpart apply to the entry of persons and things (including conveyances) into the United States by land transit. The Surgeon General may exempt certain areas from these provisions. (See the provisions of Subpart J, regarding the importation of certain things which are applicable at all ports of entry, including border ports.)

§ 71.137 *Ports of entry: Inspection.* A person shall not enter except at established ports of entry, and after such inspection by a quarantine officer as the officer deems necessary to carry out the provisions of the regulations in this part.

§ 71.138 *Infected persons: General rule.* All infected persons shall be removed and isolated until no longer infectious.

§ 71.139 *Persons, conveyances, things: Specific diseases.* For the purpose of preventing the introduction, transmission, or spread of quarantinable disease, the following measures are prescribed:

(a) *Cholera.* (1) Any person who, within 5 days prior to arrival, has departed from a local area infected with cholera may be placed under surveillance if he has a valid certificate of vaccination against cholera or may be placed in isolation if he does not have such a certificate. The period of isolation or surveillance shall be reckoned from the date of departure of the person from the infected area.

(2) If a case of cholera is discovered aboard an arriving train or road vehicle the medical officer in charge may place any suspect under surveillance, the period of surveillance being reckoned from the date of arrival. He may require the disinfection of personal effects and baggage of the infected person or any suspect, and of any other article, such as used bedding or linen, and any part of the train or road vehicle considered to be contaminated.

(3) On arrival of a train or a road vehicle coming from a cholera infected local area or on which a case of cholera has been discovered, the medical officer in charge may prohibit the unloading of, or may remove, all fish, shellfish, fruit or vegetables to be consumed uncooked, or beverages, unless such food or beverages are in sealed containers and the medical officer in charge has no reason to believe that they are contaminated. If any such food or beverage is so removed it shall be safely disposed of.

(b) *Yellow fever.* On arrival in a yellow fever receptive area, any person coming from a yellow fever infected local area who is unable to produce a valid certificate of vaccination against yellow fever may be isolated or placed under surveillance until his certificate becomes valid or for not more than 6 days from the date of last possible exposure, whichever is earlier. Any such person arriving outside a yellow fever receptive area and bound for such an area shall be subject to the applicable measures provided in § 71.91 (c).

(c) *Smallpox.* (1) All arriving persons shall be subject to vaccination, surveillance and isolation as provided in § 71.86.

(2) If a case of smallpox is discovered on an arriving train or road vehicle, all persons and articles aboard such train or road vehicle shall be subject to the measures provided for in subparagraph (2), (3), (4) and (5) of § 71.87 (b) and any part of the train or road vehicle considered by the medical officer in charge to be contaminated shall be disinfected. Any period of isolation or surveillance shall be reckoned from the date of arrival.

(3) The medical officer in charge may apply the measures provided for in subparagraphs (2), (3), (4) and (5) of § 71.87 (b) to any suspect who arrives in the United States by any means of land transit.

(d) *Plague.* (1) If a case of human plague is discovered on an arriving train or road vehicle, all persons and articles aboard such train or road vehicle shall be subject to the measures provided for in subparagraphs (1) and (2) of § 71.85 (b) and any part of the train or road vehicle considered by the medical officer in charge to be contaminated shall be disinsected and if necessary disinfected.

(2) Any arriving suspect, his baggage and effects, may be disinsected and, if necessary, disinfected, and he may be placed under surveillance, the period of surveillance being reckoned from the date of his last possible exposure.

(e) *Typhus and relapsing fever.* (1) Any person arriving from an area infected with typhus or relapsing fever shall be subject to the measures provided for in § 71.89 (b).

(2) If a case of typhus or relapsing fever is discovered on an arriving train or road vehicle, all persons, their accommodations and articles on board shall be subject to the measures provided for in subparagraphs (2) and (3) of § 71.89 (a).

§ 71.140 *Disinsecting and disinfestation of persons, things, and conveyances.* (a) All vermin infested persons, their wearing apparel, baggage and personal effects shall be disinsected when deemed necessary by the medical officer in charge.

(b) Trains, road vehicles, merchandise, and baggage or other effects may be disinsected or disinfested on arrival if the medical officer in charge considers disinsecting or disinfestation necessary to prevent the spread of infection or for the destruction of insects and vermin capable of transmitting communicable disease.

§ 71.141 *Communicable diseases other than quarantinable diseases.* The provisions of § 71.68 shall be applicable to persons and things (including conveyances) arriving in the United States by land transit.

SUBPART J—IMPORTATION OF CERTAIN THINGS

§ 71.151 *Lather brushes.* (a) Lather brushes made from animal hair or bristles shall not be permitted entry into any port or place under the control of the United States unless (1) such brushes are permanently marked with the name of the manufacturer or other identifying mark, registered with the Surgeon General, (2) and have been determined by the medical officer in charge, in accordance with the following quarantine procedures, to be free from anthrax spores.

(b) The medical officer in charge shall select samples from each shipment of lather brushes and shall subject such samples to laboratory examinations to determine the presence or absence of anthrax spores. If such examinations indicate that the shipment is free from anthrax spores, the medical officer in charge shall furnish the Collector of Customs a certificate to that effect. If such examinations demonstrate that the shipment is not free from anthrax spores, the medical officer in charge shall notify the Collector of Customs that the shipment shall not be permitted entry.

§ 71.152 *Psittacine birds: Definitions; restrictions on entry*—(a) *Definitions.* As used in this section and § 71.153, the term:

(1) "Psittacine birds" includes birds commonly known as parrots, Amazons, African grays, cockatoos, macaws, parakeets, lovebirds, lories, lorikeets, and all other birds of the order Psittaciformes.

(2) "United States" means the continental United States, its territories and possessions (other than the Canal Zone).

(3) "Zoological park" means a place, premises, or an establishment maintained for the exhibition of live animals for recreational or educational purposes. It does not include any place, premises, or establishment that is used for, or whose owner or operator engages directly or indirectly in, selling or trading, or offering for sale or trade, psittacine birds to the public or to dealers in birds.

(b) *Import restrictions.* Psittacine birds shall not be brought into the United States for the purpose of sale or trade. Psittacine birds may be brought in only for the purposes and under the conditions prescribed in subparagraphs (1) to (4), inclusive, of this paragraph, and subject to the provisions of § 71.153.

(1) *Medical research.* Psittacine birds may be brought in for purposes of medical research under conditions prescribed by the Surgeon General to minimize risk of psittacosis infection, if the birds are accompanied by a permit issued by the Surgeon General and if they appear to the quarantine officer to be in good health unless otherwise specified in the permit.

(2) *Zoological parks.* (i) Psittacine birds may be brought in for a zoological park if the birds appear to the quarantine officer to be in good health and they are accompanied by a permit issued by the Surgeon General. On arrival at the Zoological park or at detention facilities approved by the Surgeon General, the birds shall be immediately isolated for at least thirty days where they will not have contact with other birds or with the public. When any bird in isolation displays symptoms suggestive of psittacosis, the owner or operator of the park or detention facility shall have the bird killed promptly and shall immediately notify the nearest quarantine station of the Public Health Service or the Surgeon General. Such owner or operator shall comply with such measures, including preservation of the carcass for examination, as are determined by the Surgeon General to be necessary to prevent the spread of psittacosis.

(ii) Application for a permit under this subparagraph shall be submitted by the owner or operator of the zoological park and shall furnish such information as the Surgeon General may require, including the number and species of birds to be imported, their place of origin, the probable port and date of arrival, a description of the detention facilities to be used for isolation of the birds, and the precautions to be taken to prevent transmission of psittacosis.

(iii) The application shall include a certification that: The birds are not intended for sale or trade; the zoological park is not used for the sale or trade of psittacine birds to the public or to dealers in birds, or for offering psittacine birds for such sale or trade; and neither the owner nor operator of the zoological park engages directly or indirectly in such sale or trade of psittacine birds or in offering them for such sale or trade. Upon receipt of such certification and of such other evidence as he may require, the Surgeon General may designate a place, premises, or an establishment as a zoological park for the purposes of this section; he may then waive the requirement for submission of the certification with subsequent applications for permits in the case of that park. Such designation and waiver shall be subject to revocation at any time in the discretion of the Surgeon General.

(3) *Pets.* A maximum of two psittacine birds may be imported by the owner thereof provided (i) the birds appear to the quarantine officer to be in good health; (ii) not more than two birds are brought in by members of a family comprising a single household; and (iii) the owner submits at the port of arrival of the birds a sworn statement that they are not intended for sale or trade in the United States, that neither he nor any member of his family within his household has imported any other birds under this paragraph in the preceding twelve months, and that the birds have been in the owner's possession for the four months preceding arrival except for any period occasioned by the arrival of the owner and birds on separate conveyances.

(4) *Return to United States.* Psittacine birds taken out of the United States may be admitted if, upon their return:

(i) The requirements of subparagraph (3) of this paragraph are complied with; or

(ii) they are accompanied by a permit for return issued by the Surgeon General, the owner submits a sworn statement as to compliance with the terms of the permit and such other information as the Surgeon General may require, and the birds appear to the quarantine officer to be in good health. Application for such a permit should be made by the owner of the birds prior to their departure from the United States and shall include a sworn statement as to the itinerary, the number and description of the birds, and such other information as the Surgeon General may require.

(c) *Cancellation of permit.* Any permit issued under this section shall be subject to cancellation if procured or used in a manner inconsistent with this part, or if cancellation is otherwise found necessary by the Surgeon General in the interest of the public health.

(d) *Delegation of authority by Surgeon General.* The Surgeon General may delegate his powers and duties under this section to any officer or employee of the Service.

§ 71.153 *Psittacine birds: Exclusion of exposed birds; disposition of excluded birds*—(a) *Exclusion of exposed birds.* Notwithstanding any provision of § 71.152, psittacine birds may not be brought into the United States if, during

shipment, they have been exposed to psittacosis, or have been in contact with birds showing symptoms suggestive of psittacosis or with birds dying from unconfirmed causes.

(b) *Disposal of excluded birds.* (1) Birds appearing healthy which have been exposed to infection as described in paragraph (a) of this section or which are excluded from admission by § 71.152 shall be either exported or destroyed. Exportation shall be permitted only if the owner exports the birds within a reasonable time, as determined by the medical officer in charge; pending exportation, the birds shall be detained at the port of entry at the owner's expense. While so detained, birds that have been exposed as described in paragraph (a) of this section shall be isolated.

(2) Psittacine birds that show, either upon arrival or while held in detention, symptoms suggestive of psittacosis shall be destroyed immediately.

§ 71.154 *Cats, dogs and monkeys*—(a) *Cats: Physical inspection.* No cat shall be brought into a port under the control of the United States from any foreign country other than Bermuda, Denmark, Eire, Norway, Sweden, or the United Kingdom of Great Britain and Northern Ireland unless:

(1) The owner submits a sworn statement that the animal was physically inspected within ten days prior to departure for the United States and was found apparently free of demonstrable diseases involving emaciation, lesions of the skin, nervous system disturbances, jaundice, or diarrhea, or

(2) The animal is examined by a quarantine officer following arrival at a port under control of the United States and found apparently free of demonstrable diseases involving emaciation, lesions of the skin, nervous system disturbances, jaundice, or diarrhea.

(b) *Dogs: Physical inspection; rabies immunization; importation for scientific purposes.* (1) No dog shall be brought into a port under the control of the United States from any foreign country other than Bermuda, Denmark, Eire, Norway, Sweden, or the United Kingdom of Great Britain and Northern Ireland unless:

(i) The owner submits a sworn statement that the animal was physically inspected within ten days prior to departure for the United States and was found apparently free of demonstrable diseases involving emaciation, lesions of the skin, nervous system disturbances, jaundice, or diarrhea, or

(ii) The animal is examined by a quarantine officer following arrival at a port under control of the United States and found apparently free of demonstrable diseases involving emaciation, lesions of the skin, nervous system disturbances, jaundice, or diarrhea.

(2) No dog shall be brought into a port under the control of the United States from any foreign port other than Australia, Bermuda, Denmark, Eire, New Zealand, Norway, Sweden, or the United Kingdom of Great Britain and Northern Ireland unless:

(i) The owner submits a sworn statement that the animal has been immunized with an approved rabies vaccine not more than six months prior to the date of entry, or

(ii) The animal is immunized with an approved rabies vaccine following arrival at a port under control of the United States and prior to release from quarantine, or

(iii) The owner submits a sworn statement to the effect that the animal is destined for a research institution, that it is intended by such institution to be used for scientific purposes, and that immunization will seriously interfere with its use for such purposes.

(c) *Monkeys: Physical inspection; importation from yellow fever areas.* (1) No monkey shall be brought into a port under the control of the United States from any foreign country other than Bermuda, Canada, Denmark, Eire, Norway, Sweden, or the United Kingdom of Great Britain and Northern Ireland unless:

(i) The owner submits a sworn statement that the animal was physically inspected within ten days prior to departure for the United States and was found apparently free of demonstrable diseases involving emaciation, lesions of the skin, nervous system disturbances, jaundice, or diarrhea, or

(ii) The animal is examined by a quarantine officer following arrival at a port under control of the United States and found apparently free of demonstrable diseases involving emaciation, lesions of the skin, nervous system disturbances, jaundice, or diarrhea.

(2) Notwithstanding any other provision of this section, a monkey put on board at a port in an endemic yellow fever area, or a monkey coming from such an area, shall not be brought in unless it is free of evidence of yellow fever infection and its owner submits evidence satisfactory to the quarantine officer that, immediately prior either to being put aboard or its arrival, the monkey had been detained in a mosquito-proof structure for not less than nine days.

§ 71.155 *Cats, dogs, and monkeys: Disposition of excluded animals.* A cat, dog, or monkey excluded from entry under the regulations in this part shall be destroyed or deported. Pending deportation it shall be detained under Customs' custody at the owner's expense:

(a) Aboard the vessel on which it arrived, the vessel to be held under provisional pratique; or

(b) At the international airport.

§ 71.156 *Etiological agents and vectors.* (a) A person shall not import into any place under the control of the United States, nor distribute after importation, any etiological agent or insect, animal or plant vector of human disease or any exotic living insect, animal or plant capable of being a vector of human disease unless accompanied by a permit issued by the Surgeon General.

(b) An article or thing coming within the provisions of this section shall not be released from Customs' custody prior to the receipt by the Collector of Customs of a permit therefor issued by the Surgeon General.

§ 71.157 *Dead bodies.* The remains of a person dead from a quarantinable disease shall not be brought into a port under the control of the United States unless it is (a) properly embalmed and placed in a hermetically sealed casket, or (b) cremated.

SUBPART K—SPECIAL PROVISIONS RELATING TO AIRCRAFT

§ 71.501 *Scope.* (a) The term "aircraft", as used in this subpart, means civil aircraft, that is, aircraft not Government-owned and used exclusively in the governmental service of the United States or a foreign country, and includes any Government-owned aircraft engaged in carrying persons or property for commercial purposes.

(b) The term "international airport", as used in this subpart and in Subpart L of this part, means any airport designated by the Secretary of the Treasury or the Commissioner of Customs as a port of entry for aircraft arriving in the United States from any place outside thereof and for the merchandise carried on such aircraft, by the Attorney General as a port of entry for aliens arriving on such aircraft, and by the Secretary of Health, Education, and Welfare as a place for quarantine inspection.

(c) The term "United States", as used in this subpart, means the mainland, Alaska, the Hawaiian Islands, Puerto Rico and the Virgin Islands.

§ 71.502 *Place of landing.* (a) Every aircraft on an international flight and subject to quarantine inspection under Subpart D of this part shall make its first landing in the United States at an international airport, unless permission to land elsewhere has been granted by the Commissioner of Customs or other authorized customs officer with concurrence of the Public Health Service: *Provided,* That in cases in which such permission is not required by customs regulations, application for permission shall be made to the Surgeon General, for aircraft operated by scheduled airlines, and to the medical officer in charge at or nearest the intended place of first landing, for all other aircraft.

(b) Unless such permission has been granted, the first landing shall also be made at an international airport when conditions at the place of departure cause an aircraft to be subject to quarantine inspection on a flight between ports under control of the United States.

§ 71.503 *Advance notice of arrival.* (a) Notice of intended flight shall be furnished either by or at the request of the aircraft commander to the medical officer in charge at or nearest the intended place of first landing in the case of aircraft coming to a port under the control of the United States from any place outside the United States, and in the case of an aircraft flying between ports under the control of the United States when the aircraft is subject to quarantine inspection. Such notice may be forwarded through the collector or other customs officer in charge in cases in which the customs regulations also require advance notice of arrival. The notice shall be furnished direct to the medical officer in charge in cases in

which advance notice of arrival is not required by customs regulations.

(b) The notice shall specify the type of aircraft, the registration marks on it, the name of the aircraft commander, the place of last departure, the international airport or other place at which landing has been authorized, the number of aliens and citizens on board, and the estimated time of arrival. The notice shall be sent in time to enable the inspecting officers to reach the airport prior to arrival of the aircraft.

(c) Such notice is not required for aircraft of a scheduled airline arriving in accordance with a regular schedule filed with the Collector of Customs for the district in which the place of first landing is situated or with the medical officer in charge or immigration officer in charge at the place of landing.

§ 71.504 *Emergency or forced landing.* When an emergency or forced landing in the United States is made by an aircraft coming from any port not under the control of the United States, or by any aircraft subject to quarantine inspection under Subpart D of this part, the aircraft commander shall not allow any things on board to be removed from the landing place, or allow any person on board to depart from the landing place, without permission of a quarantine officer, unless such removal or departure is necessary for purposes of safety, communication with governmental authorities, or the preservation of life, health, or property. As soon as practicable the aircraft commander, a member of the crew in charge, or the owner of the aircraft shall communicate with the nearest quarantine officer and report in full the circumstances of the flight and of the emergency or forced landing. Mail carried as such may be removed from the aircraft upon landing, but if removed shall be delivered at once to a responsible officer or employee of the Postal Service.

§ 71.505 *Special sanitary treatment.* Any aircraft arriving from any foreign port or place which the quarantine officer declares to be of such menace that it cannot be adequately or safely handled at the airport of first or intended landing shall be required to proceed with all passengers and persons employed on board and all mail, baggage, cargo, or other contents on board, as may be designated by such officer, to an airport indicated by such officer to have adequate facilities for such treatment as shall be prescribed by him.

§ 71.506 *Applicability of regulations: Penalties.* (a) The regulations appearing in this part are applicable to aircraft and to passengers, merchandise, and baggage carried thereon, in the absence of express provision to the contrary.

(b) Any person violating any regulation in this part relating to aircraft or any provision of the regulations made applicable to aircraft by this section shall be subject to punishment by fine or imprisonment as provided for in section 368 (a) of the Public Health Service Act (42 U. S. C. 271 (a)). Any aircraft which violates any regulation in this part relating to aircraft or any provision of the regulations in this part made applicable to aircraft by this section shall be subject to forfeiture as provided for in section 368 (b) of the Public Health Service Act (42 U. S. C. 271 (b)). Such forfeiture may be remitted or mitigated by the Surgeon General with the approval of the Secretary of Health, Education, and Welfare.

SUBPART L—SPECIAL PROVISIONS RELATING TO PORTS AND AIRPORTS

§ 71.601 *Applicability.* The special provisions of this subpart apply to ports and airports under the control of the United States receiving international traffic.

§ 71.602 *Food and drinking water: Ports and airports.* (a) Every port and airport shall be provided with a supply of pure drinking water from a watering point approved by the Surgeon General in accordance with standards established in § 72.102 of this chapter.

(b) All food and water taken aboard a vessel or aircraft at any port or airport intended for consumption thereon shall be obtained from sources approved by the Surgeon General pursuant to Part 72 of this chapter.

§ 71.603 *Disposal of waste matter: Airports and aircraft.* (a) Every airport shall be provided with an effective system for the removal and safe disposal of excrement, refuse, waste water, condemned food, and other matter dangerous to health.

(b) Aircraft inbound or outbound on an international flight shall not discharge over the United States, its territories, or possessions any excrement, garbage, waste or waste water. Arriving aircraft shall discharge such matter only at a servicing area of an airport equipped with a system for safe disposal of said matter.

§ 71.604 *Designation of sanitary airports.* An airport may be designated by the Surgeon General as a sanitary airport after due investigation to establish:

(a) That a sufficient need exists for such designation;

(b) That the airport has at its disposal:

(1) An organized medical service with adequate staff, equipment, and premises;

(2) Facilities for the transport, isolation, and care of infected persons or suspects;

(3) Facilities for efficient disinfection and disinsecting, for the destruction of rodents, and for any other appropriate measure provided for by the regulations in this part;

(4) A bacteriological laboratory, or facilities for dispatching suspected material to such a laboratory;

(5) Facilities for vaccination against cholera, yellow fever, and smallpox.

§ 71.605 *Yellow fever areas: Sanitary requirements: Ports and airports.* (a) Every port situated in a yellow fever receptive area, and the area within the perimeter of every airport so situated, shall be kept free from Aedes aegypti in their larval and adult stages.

(b) Any building within a direct transit area provided at any airport situated in a yellow fever receptive area shall be mosquito proof.

(c) Every person employed at an airport situated in a local area infected with yellow fever and every member of the crew of an aircraft using any such airport shall be in possession of a valid certificate of vaccination against yellow fever.

(d) Every sanitary airport situated in a yellow fever receptive area shall:

(1) Be provided with mosquito-proof dwellings and have at its disposal mosquito-proof sick quarters for passengers, crews and airport personnel; and

(2) Be freed from mosquitoes by systematically destroying them in their larval and adult stages within the perimeter of the airport, and within a protective area extending for a distance of four hundred meters around that perimeter.

§ 71.606 *Perimeter: Airports only.* As used in this subpart, the perimeter of an airport means a line enclosing the airport buildings and any land or water used or intended to be used for the parking of aircraft.

§ 71.607 *Withdrawal of designation.* The designation of an airport as a sanitary airport may be withdrawn by the Surgeon General after reasonable notice to the airport whenever he finds that the airport fails to comply with any applicable sanitary requirement prescribed in this subpart or fails to meet the conditions prescribed in §§ 71.602 and 71.603.

§ 71.608 *Cholera and plague: Persons unloading vessels or aircraft*—(a) *Cholera.* Persons who unload a cholera infected vessel or aircraft, and in the judgment of the medical officer in charge have been exposed to risk of infection, shall be placed under surveillance for a period not to exceed five days from the time they cease unloading.

(b) *Plague.* Persons who unload a vessel or aircraft may be disinsected and placed under surveillance or in isolation for a period not to exceed six days from the time they cease unloading, if the vessel or aircraft is infected or during the voyage has been infected with human or rodent plague, or if inspection of the vessel or aircraft has revealed rodent mortality of undetermined cause, and in the judgment of the medical officer in charge such persons have been exposed to risk of infection.

§ 71.609 *Designation of international airports.* (a) International airports (see § 71.501 (b)) will be designated after due investigation to establish the fact that a sufficient need exists in any particular district or area to justify such designation and to determine the airport best suited for such purpose.

(b) A specific airport will be designated in each case, rather than a general area or district which may include several airports.

(c) The designation as an international airport may be withdrawn if it is found that the volume of business clearing through the port does not justify maintenance of inspection equipment and personnel, if proper facilities are not provided and maintained by the airport,

if the rules and regulations of the Federal Government are not complied with, or if it be found that some other location would be more advantageous.

(d) International airports shall be municipal airports, unless particular conditions which prevail warrant a departure from this requirement.

(e) Each international airport shall provide without cost to the Government suitable office and other space for the exclusive use of Federal officials connected with the port. A suitable surfaced loading area shall be provided by each airport at a convenient location with respect to such office space. Such loading area shall be reserved for the use of aircraft entering or clearing through the airport.

(f) International airports shall be open to all aircraft for entry and clearance purposes and no charge shall be made for the use of said airports for such purposes. However, in any case where an international airport authorizes any such aircraft to use such airport for the taking on or discharging of passengers or cargo, or as a base for other commercial operations or for private operations, this paragraph shall not be interpreted to mean that charges may not be made for such commercial or private use of such airport.

(g) All aircraft entering or clearing through an international airport shall receive the required servicing by airport personnel promptly and in the order of arrival or preparation for departure without discrimination. The charges made for such servicing shall in no case exceed the schedule of charges prevailing at the airport in question. A copy of said schedule of charges shall be posted in a conspicuous place at the office space provided for the use of Federal officials connected with the port.

(h) International airports shall adopt and enforce observance of such requirements for the operation of airports, including airport rules, as may be prescribed or recommended by the Civil Aeronautics Administration.

(i) Requirements in addition to all the foregoing may be imposed at a particular airport as the needs of the district or area to be served by the airport may demand.

§ 71.700 *Appendix—Excerpts from International Sanitary Regulations (World Health Organization Regulations No. 2).*

PART I—DEFINITIONS

Article 1

For the purposes of these Regulations—

* * * * *

"direct transit area" means a special area established in connexion with an airport, approved by the health authority concerned and under its direct supervision, for accommodating direct transit traffic and, in particular, for accommodating, in segregation, passengers and crews breaking their air voyage without leaving the airport;

* * * * *

"local area" means—

(a) The smallest area within a territory, which may be a port or an airport, having a defined boundary and possessing a health organization which is able to apply the appropriate sanitary measures permitted or prescribed by these Regulations; the situation of such an area within a larger area which also possesses such a health organization shall not preclude the smaller area from being a local area for the purposes of these Regulations; or (b) an airport in connexion with which a direct transit area has been established;

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PART IV—SANITARY MEASURES AND PROCEDURES

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CHAPTER II—SANITARY MEASURES ON DEPARTURE

Article 30

1. The health authority for a port or an airport or for the local area in which a frontier post is situated may, when it considers it necessary, medically examine any person before his departure on an international voyage. The time and place of this examination shall be arranged to take into account the customs examination and other formalities, so as to facilitate his departure and to avoid delay.

2. The health authority referred to in paragraph 1 of this Article shall take all practicable measures—

(a) To prevent the departure of any infected person or suspect;

(b) To prevent the introduction on board a ship, an aircraft, a train, or a road vehicle of possible agents of infection or vectors of a quarantinable disease.

3. Notwithstanding the provisions of subparagraph (a) of paragraph 2 of this Article, a person on an international voyage who on arrival is placed under surveillance may be allowed to continue his voyage. If he is doing so by air, the health authority for the airport shall record the fact on the General Declaration.

* * * * *

PART VI—SANITARY DOCUMENTS

Article 98

1. The certificates specified in Appendices 1, 2, 3, and 4 shall be printed in English and in French. An official language of the territory of issue may be added.

2. The certificates referred to in paragraph 1 of this Article shall be completed in English or in French.

Article 99

A vaccination document issued by the Armed Forces to an active member of those Forces shall be accepted in lieu of an international certificate in the form shown in Appendix 2, 3, or 4 if—

(a) It embodies medical information substantially the same as that required by such form; and

(b) It contains a statement in English or in French recording the nature and date of the vaccination and to the effect that it is issued in accordance with this Article.

* * * * *

PART X—TRANSITIONAL PROVISIONS

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Article 115

1. A certificate of vaccination issued in accordance with the Convention of 21 June 1926, as amended by the Convention of 15 December 1944, or in accordance with the Convention of 12 April 1933, as amended by the Convention of 15 December 1944, before the entry-into-force of these Regulations shall continue to be valid for the period for which it was previously valid. Moreover, the validity of a certificate of vaccination against yellow fever so issued shall be extended for two years after the date on which it would otherwise have ceased to be valid.

* * * * *

NOTE: Forms relating to International Sanitary Regulations filed as part of the original document.

PART 72—INTERSTATE QUARANTINE

Subpart A—Definitions and General Provisions

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72.1 General definitions.
72.2 List of communicable diseases.
72.3 Measures in the event of inadequate local control.
72.4 Effective bactericidal treatment.

Subpart B—Restrictions on Travel of Persons

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72.12 Certain communicable diseases; special requirements.
72.13 Responsibility with respect to minors, wards, and patients.
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Subpart C—Shipment of Certain Things

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Subpart D—Potable Water: Source and Use

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72.151 Railroad conveyances; food handling facilities.
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72.154 Railroad conveyances; discharge of wastes.
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Subpart H—Land and Air Conveyances, and Vessels: Food

72.161 Applicability.
72.162 Inspection.

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72.163 General requirements.
72.164 Source of food and drink; identification and inspection.
72.165 Special food requirements.
72.166 Storage of perishables.
72.167 Ice, source and handling.
72.168 Places where food is prepared, served, or stored; construction, maintenance, and use.
72.169 Utensils and equipment.
72.170 Refrigeration equipment.
72.171 Garbage equipment and disposition.
72.172 Toilet and lavatory facilities for use of food-handling employees.
72.173 Food-handling operations.
72.174 Health of persons handling food.

Subpart I—Certification Following Inspections

72.181 Issuance and posting of certificates.

Subpart J—Drinking Water Standards

72.201 Definitions of terms.
72.202 As to source and protection.
72.203 As to bacteriological quality.
72.204 As to physical and chemical characteristics.

AUTHORITY: §§ 72.1 to 72.204 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 361, 58 Stat. 703; 42 U. S. C. 264.

SUBPART A—DEFINITIONS AND GENERAL PROVISIONS

§ 72.1 *General definitions.* As used in this part, terms shall have the following meaning:

(a) *Bactericidal treatment.* The application of a method or substance for the destruction of pathogens and other organisms. (See § 72.4).

(b) *Communicable diseases.* Any of the diseases enumerated in § 72.2 unless otherwise specified.

(c) *Communicable period.* The period or periods during which the etiologic agent may be transferred directly or indirectly from the body of the infected person or animal to the body of another.

(d) *Contamination.* The presence of a certain amount of undesirable substance or material, which may contain pathogenic micro-organisms.

(e) *Conveyance.* Conveyance means any land or air carrier, or any vessel as defined in paragraph (o) of this section.

(f) *Existing vessel.* Any vessel the construction of which was started prior to the effective date of the regulations in this part.

(g) *Garbage.* (1) The solid animal and vegetable waste, together with the natural moisture content, resulting from the handling, preparation, or consumption of foods in houses, restaurants, hotels, kitchens, and similar establishments, or (2) any other food waste containing pork.

(h) *Incubation period.* The period between the implanting of disease organisms in a susceptible person and the appearance of clinical manifestation of the disease.

(i) *Interstate traffic.* (1) The movement of any conveyance or the transportation of persons or property, including any portion of such movement or transportation which is entirely within a State or possession, (i) from a point of origin in any State or possession to a point of destination in any other State or possession, or (ii) between a point of origin and a point of destination in the same State or possession but through any other State, possession, or contiguous foreign country.

(2) Interstate traffic does not include the following:

(i) The movement of any conveyance which is solely for the purpose of unloading persons or property transported from a foreign country, or loading persons or property for transportation to a foreign country.

(ii) The movement of any conveyance which is solely for the purpose of effecting its repair, reconstruction, rehabilitation, or storage.

(j) *Minimum heat treatment.* The causing of all particles in garbage to be heated to a boiling temperature and held at that temperature for a period of not less than 30 minutes.

(k) *Possession.* Any of the possessions of the United States, including Puerto Rico and the Virgin Islands.

(l) *Potable water.* Water which meets the standards prescribed in the Public Health Service Drinking Water Standards (See Subpart J, §§ 72.201 to 72.204, inclusive).

(m) *State.* Any State, the District of Columbia, Hawaii, Alaska, Puerto Rico, and the Virgin Islands.

(n) *Utensil.* Includes any kitchenware, tableware, glassware, cutlery, containers, or equipment with which food or drink comes in contact during storage, preparation, or serving.

(o) *Vessel.* Any passenger-carrying, cargo, or towing vessel exclusive of:

(1) Fishing boats including those used for shell-fishing;

(2) Tugs which operate only locally in specific harbors and adjacent waters;

(3) Barges without means of self-propulsion;

(4) Construction-equipment boats and dredges; and

(5) Sand and gravel dredging and handling boats.

(p) *Wash water.* (See § 72.118 (a).)

(q) *Watering point.* The specific place or water boat from which potable water is loaded on a conveyance.

(r) *Shellfish.* Any fresh, frozen, or incompletely cooked oysters, clams, or mussels, either shucked or in the shell, and any fresh, frozen, or incompletely cooked edible products thereof.

§ 72.2 *List of communicable diseases.* For the purposes of this part, the following shall be considered as communicable diseases: Anthrax, chancroid, cholera, dengue, diphtheria, granuloma inguinale, infectious encephalitis, favus, gonorrhea, lymphogranuloma venereum, meningococcus meningitis, plague, poliomyelitis, psittacosis, ringworm of the scalp, scarlet fever, streptococcic sore throat, smallpox, syphilis, trachoma, tuberculosis, typhoid fever, typhus, and yellow fever. (See Executive Order No. 9708, March 26, 1946, 3 CFR, 1946 Supp., as amended by Executive Order 10532, May 28, 1954, 3 CFR, 1954 Supp.)

§ 72.3 *Measures in the event of inadequate local control.* Whenever the Surgeon General determines that the measures taken by health authorities of any State or possession (including political subdivisions thereof) are insufficient to prevent the spread of any of the communicable diseases from such State or possession to any other State or possession, he may take such measures to prevent such spread of the diseases as he deems reasonably necessary, including inspection, fumigation, disinfection, sanitation, pest extermination, and destruction of animals or articles believed to be sources of infection.

§ 72.4 *Effective bactericidal treatment.* Whenever, under the provisions of this part, bactericidal treatment is required, it shall be accomplished by one or more of the following methods:

(a) By immersion of the utensil or equipment for at least 2 minutes in clean hot water at a temperature of at least 170° F. or for one-half minute in boiling water;

(b) By immersion of the utensil or equipment for at least 2 minutes in a lukewarm chlorine bath containing at least 50 ppm of available chlorine if hypochlorites are used or a concentration of equal bactericidal strength if chloramines are used;

(c) By exposure of the utensil or equipment in a steam cabinet at a temperature of at least 170° F. for at least 15 minutes or at a temperature of 200° F. for at least 5 minutes;

(d) By exposure of the utensil or equipment in an oven or hot air cabinet at a temperature of at least 180° F. for at least 20 minutes;

(e) In the case of utensils or equipment so designed or installed as to make immersion or exposure impractical, the equipment may be treated for the prescribed periods of time either at the temperatures or with chlorine solutions as specified above, (1) with live steam from a hose if the steam can be confined, (2) with boiling rinse water, or (3) by spraying or swabbing with chlorine solution;

(f) Any other method determined by the Surgeon General, upon application of an owner or operator of a conveyance, to be effective to prevent the spread of communicable disease.

SUBPART B—RESTRICTIONS ON TRAVEL OF PERSONS

§ 72.11 *All communicable diseases.* A person who has a communicable disease in the communicable period shall not travel from one State or possession to another without a permit from the health officer of the State, possession, or locality of destination, if such permit is required under the law applicable to the place of destination. Stop-overs other than those necessary for transportation conections shall be considered as places of destination.

§ 72.12 *Certain communicable diseases; special requirements.* The following provisions are applicable with respect to any person who is in the communicable period of cholera, plague, smallpox, typhus or yellow fever, or who, having been exposed to any such disease, is in the incubation period thereof:

(a) *Requirements relating to travelers.* (1) No such person shall travel from one State or possession to another, or on a conveyance engaged in interstate traf-

fic, without a written permit of the Surgeon General or his authorized representative.

(2) Application for a permit may be made directly to the Surgeon General or to his representative authorized to issue permits.

(3) Upon receipt of an application, the Surgeon General or his authorized representative shall, taking into consideration the risk of introduction, transmission, or spread of the disease from one State or possession to another, reject it, or issue a permit which may be conditioned upon compliance with such precautionary measures as he shall prescribe.

(4) A person to whom a permit has been issued shall retain it in his possession throughout the course of his authorized travel and comply with all conditions prescribed therein, including presentation of the permit to the operators of conveyances as required by its terms.

(b) *Requirements relating to operation of conveyances.* (1) The operator of any conveyance engaged in interstate traffic shall not knowingly (i) accept for transportation any person who fails to present a permit as required by paragraph (a) of this section, or (ii) transport any person in violation of conditions prescribed in his permit.

(2) Whenever a person subject to the provisions of this section is transported on a conveyance engaged in interstate traffic, the operator thereof shall take such measures to prevent the spread of the disease, including submission of the conveyance to inspection, disinfection and the like, as an officer of the Public Health Service designated by the Surgeon General for such purposes deems reasonably necessary and directs.

§ 72.13 *Responsibility with respect to minors, wards, and patients.* A parent, guardian, physician, nurse, or other such person shall not transport, or procure or furnish transportation for, any minor child or ward, patient or other such person who is in the communicable period of a communicable disease, except in accordance with provisions of this subpart.

§ 72.14 *Members of military and naval forces.* The provisions of this subpart shall not apply to members of the military or naval forces, and medical care or hospital beneficiaries of the Army, Navy, Veterans' Administration, or Public Health Service, when traveling under competent orders, provided that in the case of persons otherwise subject to the provisions of § 72.12 the authority authorizing the travel requires precautions to prevent the possible transmission of infection to others during the travel period.

§ 72.15 *Report of disease.* The master of any vessel or person in charge of any conveyance engaged in interstate traffic, on which a case or suspected case of a communicable disease develops shall, as soon as practicable, notify the local health authority at the next port of call, station, or stop, and shall take such measures to prevent the spread of the disease as the local health authority directs.

SUBPART C—SHIPMENT OF CERTAIN THINGS

§ 72.21 *Lather brushes*—(a) *General requirements.* A person shall not transport, or offer for transportation by the owner or operator of a conveyance, nor shall the owner or operator of a conveyance knowingly transport for another person, in interstate traffic lather brushes made from animal hair or bristles unless:

(1) Such brushes have been imported in compliance with the provisions of § 71.151 of this chapter; or

(2) Such brushes have been manufactured in the United States, its territories, or possessions in compliance with the provisions of paragraphs (b), (c), (d), (e), and (f) of this section.

(b) *Treatment.* The hair or bristles used in such brushes, if other than badger hair, shall be subjected to sterilization or to a treatment found by the Surgeon General, upon application of an interested person and the submission by such person of supporting data, to be effective to destroy anthrax spores in the hair or bristles to be treated. Badger hair shall be subject to the requirement of sterilization or other treatment only if the Surgeon General finds, and so notifies the manufacturer, that the hair was secured from areas, or has been stored or handled under circumstances, likely to render it an agent in the spread of communicable diseases from one State or possession to another.

(c) *Sterilization.* Sterilization shall consist of:

(1) Exposure to steam under pressure in an autoclave at a minimum temperature of 120° C. (248° F.) for 15 minutes for bristles and 20 minutes for hair; or

(2) Exposure to streaming steam in an autoclave (not under pressure) at 100° C. (212° F.) for 30 minutes for bristles and 40 minutes for hair.

In either case, the steam temperature shall be measured in the exhaust line at its exit from the autoclave by an indicating thermometer found by the Surgeon General to give reasonable assurance of accuracy, and by a recording thermometer adjusted to read no higher at any time than the indicating thermometer. The time of exposure shall be measured from the moment at which the indicating thermometer reaches the specified sterilization temperature. Recording thermometer charts for each sterilization shall be kept readily available. The hair or bristles shall be sterilized in tied or wrapped bundles not exceeding 2½ inches in diameter and 5 inches in length, or in untied and unwrapped lots not exceeding 2½ inches in depth. The bundle or lots shall be placed on racks or trays in single layers, with the racks or trays separated from each other sufficiently to assure free circulation of the steam and the exposure of all the hair or bristles to such steam. If the hair or bristles are placed in the autoclave in wrapped bundles, the ends of the bundles shall be left open.

(d) *Handling and storage.* Hair or bristles which have been treated, by sterilization or otherwise, shall be marked with the date of treatment, the method used, and name and location of the establishment at which treatment occurred, and shall be so handled and stored as to prevent their contamination or recontamination with anthrax spores.

(e) *Identifying marks.* Lather brushes shall be marked permanently with the name of the manufacturer or with an identifying mark of the manufacturer registered with the Surgeon General.

(f) *Inspection.* Persons engaged in processing or other handling of hair or bristles for use in lather brushes manufactured for transportation in interstate traffic and persons engaged in manufacturing such lather brushes from hair or bristles shall permit authorized representatives of the Surgeon General to make at any reasonable time such inspection of the plants or other places, including the equipment, operations, and products thereof, at which such manufacturing, processing or handling is carried on as may be necessary in the judgment of such representatives to determine compliance with the provisions of this section.

§ 72.22 *Psittacine birds.* (a) The term psittacine birds shall include all birds commonly known as parrots, Amazons, Mexican double heads, African grays, cockatoos, macaws, parakeets, love birds, lories, lorikeets, and all other birds of the psittacine family.

(b) No person shall transport, or offer for transportation, in interstate traffic any psittacine bird unless the shipment is accompanied by a permit from the State health department of the State of destination where required by such department.

(c) Whenever the Surgeon General finds that psittacine birds or human beings in any area are infected with psittacosis and there is such danger of transmission of psittacosis from such area as to endanger the public health, he may declare it an area of infection. No person shall thereafter transport, or offer for transportation, in interstate traffic any psittacine bird from such area, except shipments authorized by the Surgeon General for purposes of medical research and accompanied by a permit issued by him, until the Surgeon General finds that there is no longer any danger of transmission of psittacosis from such area. As used in this paragraph, the term "area" includes, but is not limited to, specific premises or buildings.

§ 72.23 *Garbage.* (a) A person shall not transport, receive, or cause to be transported or received, garbage in interstate traffic and feed such garbage to swine unless, prior to the feeding, such garbage has received minimum heat treatment.

(b) A person transporting garbage in interstate traffic shall not make, or agree to make, delivery thereof to any person with knowledge of the intent or customary practice of such person to feed to swine garbage which has not been subjected to minimum heat treatment.

§ 72.24 *Shellfish.* A person shall not offer for transportation, or transport, in interstate traffic any shellfish handled or stored in such an insanitary manner, or grown in an area so contaminated, as to render such shellfish likely to become agents in, and their transportation likely

to contribute to, the spread of communicable disease from one State or possession to another.

SUBPART D—POTABLE WATER: SOURCE AND USE

§ 72.101 *Water for drinking and culinary purposes; general requirement.* Only potable water shall be provided for drinking and culinary purposes by any operator of a conveyance engaged in interstate traffic, except as provided in § 72.115 (b). Such water shall either have been obtained from watering points approved by the Surgeon General, or, if treated aboard a conveyance, shall have been subjected to treatment approved by the Surgeon General.

§ 72.102 *Approval of watering points.* (a) The Surgeon General shall approve any watering point if (1) the water supply thereat meets the standards prescribed in the Drinking Water Standards (see Subpart J of this part), and (2) the methods of and facilities for delivery of such water to the conveyance and the sanitary conditions surrounding such delivery prevent the introduction, transmission, or spread of communicable diseases.

(b) The Surgeon General may base his approval or disapproval of a watering point upon investigations made by representatives of State departments of health or of the health authorities of contiguous foreign nations.

(c) If a watering point has not been approved, the Surgeon General may permit its temporary use under such conditions as, in his judgment, are necessary to prevent the introduction, transmission, or spread of communicable diseases.

(d) Upon request of the Surgeon General, operators of conveyances shall provide information as to watering points used by them.

§ 72.103 *Approval of treatment aboard conveyances.* (a) The treatment of water aboard conveyances shall be approved by the Surgeon General if the apparatus used is of such design and is so operated as to be capable of producing and in fact does produce, potable water.

(b) The Surgeon General may base his approval or disapproval of the treatment of water upon investigations made by representatives of State departments of health or of the health authorities of contiguous foreign nations.

(c) Overboard water treated on vessels shall be from areas relatively free of contamination and pollution.

§ 72.104 *Sanitation of water boats.* No vessel engaged in interstate traffic shall obtain water for drinking and cultinary purposes from any water boat unless the tanks, piping, and other appurtenances used by the water boat in the loading, transportation, and delivery of such drinking and culinary water, have been approved by the Surgeon General.

§ 72.105 *Protection of pier water system.* No vessel engaged in interstate traffic shall make a connection between its non-potable water system and any pier potable water system unless provisions are made to prevent backflow from the vessel to the pier.

SUBPART E—VESSELS: SANITATION FACILITIES AND CONDITIONS

§ 72.111 *Applicability.* The sanitation facilities and the sanitary conditions on vessels engaged in interstate traffic shall comply with the requirements prescribed in this subpart, provided that no major structural change will be required on existing vessels.

§ 72.112 *Inspection.* The Surgeon General may inspect such vessels to determine compliance with the requirements of this subpart.

§ 72.113 *Potable water systems.* The following conditions must be met by vessel water systems used for the storage and distribution of water which has met the requirements of § 72.101:

(a) The potable water system, including filling hose and lines, pumps, tanks, and distributing pipes, shall be separate and distinct from other water systems and shall be used for no other purposes.

(b) All potable water tanks shall be independent of any tanks holding non-potable water or other liquid. All potable water tanks shall be independent of the shell of the ship unless (1) the bottom of the tank is at least 2 feet above the maximum load water line, (2) the seams in the shell are continuously welded, and (3) there are no rivets in that part of the shell which forms a side of a tank. A deck may be used as the top of a tank provided there are no access or inspection openings or rivets therein, and the seams are continuously welded. No toilet or urinal shall be installed immediately above that part of the deck which forms the top of a tank. All potable water tanks shall be located at a sufficient height above the bilge to allow for draining and to prevent submergence in bilge water.

(c) Each potable water tank shall be provided with a means of drainage and, if it is equipped with a manhole, overflow, vent, or a device for measuring depth of water, provision shall be made to prevent entrance into the tank of any contaminating substance. No deck or sanitary drain or pipe carrying any non-potable water or liquid shall be permitted to pass through the tank.

(d) Tanks and piping shall bear clear marks of identification.

(e) There shall be no backflow or cross connection between potable water systems and any other systems. Pipes and fittings conveying potable water to any fixture, apparatus, or equipment shall be installed in such way that backflow will be prevented. Waste pipes from any part of the potable water system, including treatment devices, discharging to a drain, shall be suitably protected against backflow.

(f) Water systems shall be cleaned, disinfected, and flushed whenever the Surgeon General shall find such treatment necessary to prevent the introduction, transmission, or spread of communicable diseases.

§ 72.114 *Storage of water prior to treatment.* The following requirements with respect to the storage of water on vessels prior to treatment must be met in order to obtain approval of treatment facilities under § 72.103:

(a) The tank, whether independent or formed by the skin of the ship, deck, tank top, or partitions common with other tanks, shall be free of apparent leakage.

(b) No sanitary drain shall pass through the tank.

(c) The tank shall be adequately protected against both the backflow and discharge into it of bilge or highly contaminated water.

§ 72.115 *Water in galleys and medical care spaces.* (a) Potable water, hot and cold, shall, be available in the galley and pantry except that, when potable water storage is inadequate, non-potable water may be piped to the galley for deck washing and in connection with garbage disposal. Any tap discharging non-potable water which is installed for deck washing purposes shall not be more than 18 inches above the deck and shall be distinctly marked "For deck washing only".

(b) In the case of existing vessels on which heat treated wash water has been used for the washing of utensils prior to the effective date of the regulations in this part, such water may continue to be so used provided controls are employed to insure the heating of all water to at least 170° F. before discharge from the heater.

(c) Potable water, hot and cold, shall be available in medical care spaces for hand-washing and for medical care purposes excluding hydrotherapy.

§ 72.116 *Water for making ice.* Only potable water shall be piped into a freezer for making ice for drinking and culinary purposes.

§ 72.117 *Drinking fountains and coolers; ice; constant temperature bottles.* (a) Drinking fountains and coolers shall be constructed of impervious, nonoxidizing material, and shall be so designed and constructed as to be easily cleaned. The jet of a drinking fountain shall be slanting and the orifice of the jet shall be protected by a guard in such a manner as to prevent contamination thereof by droppings from the mouth. The orifice of such a jet shall be located a sufficient distance above the rim of the basin to prevent backflow.

(b) Ice shall not be permitted to come in contact with water in coolers or constant temperature bottles.

(c) Constant temperature bottles and other containers used for storing or dispensing potable water shall be kept clean at all times and shall be subjected to effective bactericidal treatment after each occupancy of the space served and at intervals not exceeding one week.

§ 72.118 *Wash water.* (a) Wash water means water suitable for domestic uses other than for drinking and culinary purposes, and medical care purposes excluding hydrotherapy.

(b) Where wash water sytsems installed on vessels do not comply with the requirements of a potable water system, prescribed in § 72.113, they shall be constructed so as to minimize the possibility of the water therein being contaminated. The storage tanks shall comply with the requirements of § 72.114, and the distribution system shall not be cross connected to a system carrying water of a

lower sanitary quality. All faucets shall be labeled "Unfit for drinking."

§ 72.119 *Swimming pools.* (a) Fill and draw swimming pools shall not be installed or used.

(b) Swimming pools of the recirculation type shall be equipped so as to provide complete circulation, replacement, and filtration of the water in the pool every six hours or less. Suitable means of chlorination and, if necessary, other treatment of the water shall be provided to maintain the residual chlorine in the pool water at not less than 0.4 part per million and the pH (a measure of the hydrogen ion concentration) not less than 7.0.

(c) Flowing-through type of salt water pools shall be so operated that complete circulation and replacement of the water in the pool will be effected every six hours or less. The water delivery pipe to the pool shall be independent of all other pipes and shall originate at a point where maximum flushing of the pump and pipe line is effected after leaving polluted waters.

§ 72.120 *Toilets and lavatories.* Toilet and lavatory equipment and spaces shall be maintained in a clean condition.

§ 72.121 *Discharge of wastes.* Vessels operating on fresh water lakes or rivers shall not discharge sewage, or ballast or bilge water, within such areas adjacent to domestic water intakes as are designated by the Surgeon General.

§ 72.122 *Insect control.* Vessels shall be maintained free of infestation by flies, mosquitoes, fleas, lice, and other insects known to be vectors in the transmission of communicable diseases, through the use of screening, insecticides, and other generally accepted methods of insect control.

§ 72.123 *Rodent control.* Vessels shall be maintained free of rodent infestation through the use of traps, poisons, and other generally accepted methods of rodent control.

SUBPART F—LAND AND AIR CONVEYANCES: SERVICING AREAS

§ 72.131 *Applicability.* Land and air conveyances engaged in interstate traffic shall use only such servicing areas within the United States as have been approved by the Surgeon General as being in compliance with the requirements prescribed in this subpart.

§ 72.132 *Inspection and approval.* The Surgeon General may inspect any such areas to determine whether they shall be approved. He may base his approval or disapproval on investigations made by representatives of State departments of health.

§ 72.133 *Submittal of construction plans.* Plans for construction or major reconstruction of sanitation facilities at servicing areas shall be submitted to the Surgeon General for review of the conformity of the proposed facilities with the requirements of this subpart.

§ 72.134 *General requirements.* Servicing areas shall be provided with all necessary sanitary facilities so operated and maintained as to prevent the spread of communicable diseases.

§ 72.135 *Drainage.* All platforms and other places at which water or food supplies are loaded onto or removed from conveyances shall be adequately drained so as to prevent pooling.

§ 72.136 *Watering equipment; general requirements.* All servicing area piping systems, hydrants, taps, faucets, hoses, buckets, and other appurtenances necessary for delivery of drinking and culinary water to a conveyance shall be designed, constructed, maintained and operated in such a manner as to prevent contamination of the water.

§ 72.137 *Water equipment; outlets for nonpotable water.* Outlets for nonpotable water shall be provided with fittings different from those provided for outlets for potable water and each nonpotable water outlet shall be posted with permanent signs warning that the water is unfit for drinking.

§ 72.139 *Watering equipment; ice.* If bulk ice is used for the cooling of drinking water or other beverages, or for food preservation purposes, equipment constructed so as not to become a factor in the transmission of communicable diseases shall be provided for the storage, washing, handling, and delivery to conveyances of such bulk ice, and such equipment shall be used for no other purposes.

§ 72.140 *Employee conveniences.* (a) There shall be adequate toilet, washroom, locker, and other essential sanitary facilities readily accessible for use of employees adjacent to places or areas where land and air conveyances are serviced, maintained, and cleared. These facilities shall be maintained in a clean and sanitary condition at all times.

(b) In the case of diners not in a train but with a crew on board, adequate toilet facilities shall be available to the crew within a reasonable distance but not exceeding 500 feet of such diners.

(c) Drinking fountains and coolers shall be constructed of impervious, nonoxidizing material, and shall be so designed and constructed as to be easily cleaned. The jet of a drinking fountain shall be slanting and the orifice of the jet shall be protected by a guard in such a manner as to prevent contamination thereof by droppings from the mouth. The orifice of such a jet shall be located a sufficient distance above the rim of the basin to prevent backflow.

§ 72.141 *Disposal of human wastes.* (a) At servicing areas and at stations where land and air conveyances are occupied by passengers the operations shall be so conducted as to avoid contamination of such areas and stations by human wastes.

(b) Toilet wastes shall be disposed of through sanitary sewers or by other methods assuring sanitary disposal of such wastes. All soil cans and removable containers shall be thoroughly cleaned before being returned to use. Equipment for cleaning such containers and for flushing nonremovable containers and waste carts shall be so designed as to prevent backflow into the water line, and such equipment shall be used for no purpose connected with the handling of food, water or ice.

(c) All persons who have handled soil cans or other containers which have come in contact with human wastes shall be required to wash their hands thoroughly with soap and warm water and to remove any garments which have become soiled with such wastes before engaging in any work connected with the loading, unloading, transporting or other handling of food, water or ice.

§ 72.142 *Garbage disposal.* (a) Water-tight, readily cleanable, non-absorbent containers with close-fitting covers shall be used to receive and store garbage.

(b) Can washing and draining facilities shall be provided.

(c) Garbage cans shall be emptied daily and shall be thoroughly washed before being returned for use.

SUBPART G—LAND AND AIR CONVEYANCES: EQUIPMENT AND OPERATION

§ 72.146 *Applicability.* The sanitary equipment and facilities on land and air conveyances engaged in interstate traffic and the use of such equipment and facilities shall comply with the requirements prescribed in this subpart.

§ 72.147 *Submittal of construction plans.* Plans for the construction or major reconstruction of sanitary equipment or facilities for such conveyances shall be submitted to the Surgeon General for review of the conformity of such plans with the requirements of this subpart, except that submittal of plans shall not be required for any conveyance under reconstruction if the owner or operator thereof has made arrangements satisfactory to the Surgeon General for inspections of such conveyances while under reconstruction for the purpose of determining conformity with those requirements.

§ 72.148 *Water systems; constant temperature bottles.* (a) The water system, whether of the pressure or gravity type, shall be complete and closed from the filling ends to the discharge taps, except for protected vent openings. The water system shall be protected against backflow.

(b) Filling pipes or connections through which water tanks are supplied shall be provided on both sides of all new railway conveyances and on existing conveyances when they undergo heavy repairs. All filling connections shall be easily cleanable and so located and protected as to minimize the hazard of contamination of the water supply.

(c) On all new or reconstructed conveyances, water coolers shall be an integral part of the closed system.

(d) Water filters if used on dining cars and other conveyances will be permitted only if they are so operated and maintained at all times as to prevent contamination of the water.

(e) Constant temperature bottles and other containers used for storing or dispensing potable water shall be kept clean at all times and shall be subjected to effective bactericidal treatment as often

as may be necessary to prevent the contamination of water so stored and dispensed.

§ 72.149 *Drinking utensils and toilet articles.* (a) No cup, glass, or other drinking utensil which may be used by more than one person shall be provided on any conveyance unless such cup, glass, or drinking utensil shall have been thoroughly cleaned and subjected to effective bactericidal treatment after each individual use.

(b) Towels, combs, or brushes for common use shall not be provided.

§ 72.150 *Toilet and lavatory facilities.* (a) Where toilet and lavatory facilities are provided on conveyances they shall be so designed as to permit ready cleaning. On conveyances not equipped with retention facilities, toilet hoppers shall be of such design and so located as to prevent spattering of water filling pipes or hydrants.

(b) Separate facilities for brushing teeth shall be provided in washrooms of all conveyances having sleeping accommodations.

§ 72.151 *Railroad conveyances; food handling facilities.* (a) Both kitchens and pantries of cars hereafter constructed or reconstructed shall be equipped with double sinks, one of which shall be of sufficient size and depth to permit complete immersion of a basket of dishes during bactericidal treatment; in the pantry a dishwashing machine may be substituted for the double sinks. If chemicals are used for bactericidal treatment, 3-compartment sinks shall be provided.

(b) A sink shall be provided for washing and handling cracked ice used in food or drink and shall be used for no other purpose.

(c) Lavatory facilities for the use of the dining car crew shall be provided on each dining car. Such facilities shall be conveniently located and used for hand and face washing only: *Provided, however,* That where the kitchen and pantry on a dining car hereafter constructed or reconstructed are so partitioned or separated as to impede free passage between them lavatory facilities shall be provided in both the kitchen and the pantry.

(d) Wherever toilet and lavatory facilities required by paragraph (c) of this section are not on the dining car, a lavatory shall be provided on the dining car for the use of employees. The lavatory shall be conveniently located and used only for the purpose for which it is installed.

§ 72.152 *Cleanliness of conveyances.* Conveyances while in transit shall be kept clean and free of flies and mosquitoes. A conveyance which becomes infected with vermin shall be placed out of service until such time as it shall have been effectively treated for the destruction of the vermin.

§ 72.153 *Ice.* Ice shall not be permitted to come in contact with water in coolers or constant temperature bottles.

§ 72.154 *Railroad conveyances; discharge of wastes.* (a) There shall be no discharge of excrement, garbage, waste water or other polluting material from any land conveyance while such conveyance is passing over areas designated by the Surgeon General.

(b) Toilets shall be kept locked when conveyances, occupied or open to occupancy by travelers, are at a station or servicing area unless means are provided to prevent contamination of the area or station.

§ 72.155 *Air conveyances; discharge of wastes.* There shall be no discharge of excrement or garbage from any air conveyance except at servicing areas approved by the Surgeon General.

§ 72.156 *Highway conveyances; discharge of wastes.* There shall be no discharge of excrement, garbage or waste water from a highway conveyance except at servicing areas approved by the Surgeon General.

SUBPART H—LAND AND AIR CONVEYANCES, AND VESSELS: FOOD

§ 72.161 *Applicability.* All conveyances engaged in interstate traffic shall comply with the requirements prescribed in this subpart.

§ 72.162 *Inspection.* The Surgeon General may inspect such conveyances to determine compliance with the requirements of this subpart.

§ 72.163 *General requirements.* All food and drink served on conveyances shall be clean, wholesome, and free from spoilage, and shall be prepared, stored, handled, and served in accordance with the requirements prescribed in this subpart.

§ 72.164 *Source of food and drink; identification and inspection.* (a) Operators of conveyances shall identify, when requested by the Surgeon General, the vendors, distributors or dealers from whom they have acquired or are acquiring their food supply, including milk, fluid milk products, ice cream and other frozen desserts, butter, cheese, bottled water, sandwiches and box lunches.

(b) The Surgeon General may inspect any source of such food supply in order to determine whether the requirements of the regulations in this subpart are being met, and may utilize the results of inspections of such sources made by representatives of State health departments or of the health authorities of contiguous foreign nations.

§ 72.165 *Special food requirements.* Milk, fluid milk products, ice cream and other frozen desserts, butter, cheese, and shellfish served or sold on conveyances shall conform to the following requirements:

(a) Milk and fluid milk products, including cream, buttermilk, skim milk, milk beverages, and reconstituted milk, shall be pasteurized and obtained from a source of supply approved by the Surgeon General. The Surgeon General shall approve any source of supply at or from which milk or fluid milk products are produced, processed, and distributed so as to prevent the introduction, transmission, or spread of communicable diseases. If a source of supply of milk or fluid milk products has not been approved, the Surgeon General may permit its temporary use under such conditions as, in his judgment, are necessary to prevent the introduction, transmission, or spread of communicable diseases. Containers of milk and fluid milk products shall be plainly labeled to show the contents, the word "pasteurized", and the identity of the plant at which the contents were packaged by name and address, provided that a code may be used in lieu of address.

(b) Ice cream, other frozen desserts, and butter shall be manufactured from milk or milk products that have been pasteurized or subjected to equivalent heat treatment.

(c) Cheese shall be (1) pasteurized or subjected to equivalent heat treatment, (2) made from pasteurized milk products or from milk products which have been subjected to equivalent heat treatment, or (3) cured for not less than 60 days at a temperature not less than 35° F.

(d) Milk, buttermilk, and milk beverages shall be served in or from the original individual containers in which received from the distributor, or from a bulk container equipped with a dispensing device so designed, constructed, installed, and maintained as to prevent the transmission of communicable diseases.

(e) Shellfish purchased for consumption on any conveyance shall originate from a dealer currently listed by the Public Health Service as holding an unexpired and unrevoked certificate issued by a State authority.

(f) Shucked shellfish shall be purchased in the containers in which they are placed at the shucking plant and shall be kept therein until used. The State abbreviation and the certificate number of the packers shall be permanently recorded on the container.

§ 72.166 *Storage of perishables.* All perishable food or drink shall be kept at or below 50° F., except when being prepared or kept hot for serving.

§ 72.167 *Ice; source and handling.* Ice coming in contact with food or drink and not manufactured on the conveyance shall be obtained from sources approved by competent health authorities. All ice coming in contact with food or drink shall be stored and handled in such manner as to avoid contamination.

§ 72.168 *Places where food is prepared, served, or stored; construction, maintenance, and use.* (a) All kitchens, galleys, pantries, and other places where food is prepared, served, or stored shall be adequately lighted and ventilated: *Provided, however,* That ventilation of cold storage rooms shall not be required. All such places where food is prepared, served, or stored shall be so constructed and maintained as to be clean and free from flies, rodents, and other vermin.

(b) Such places shall not be used for sleeping or living quarters.

(c) Water of satisfactory sanitary quality, under head or pressure, and adequate in amount and temperature, shall be easily accessible to all rooms in which food is prepared and utensils are cleaned.

(d) All plumbing shall be so designed, installed, and maintained as to prevent

contamination of the water supply, food, and food utensils.

§ 72.169 *Utensils and equipment.* (a) All utensils and working surfaces used in connection with the preparation, storage, and serving of food or beverages, and the cleaning of food utensils, shall be so constructed as to be easily cleaned and self-draining and shall be maintained in good repair. Adequate facilities shall be provided for the cleaning and bactericidal treatment of all multi-use eating and drinking utensils and equipment used in the preparation of food and beverages. An indicating thermometer, suitably located, shall be provided to permit the determination of the hot water temperature when and where hot water is used as the bactericidal agent.

(b) All multi-use eating and drinking utensils shall be thoroughly cleaned in warm water and subjected to an effective bactericidal treatment after each use. All other utensils that come in contact with food and drink shall be similarly treated immediately following the day's operation. All equipment shall be kept clean.

(c) After bactericidal treatment, utensils shall be stored and handled in such manner as to prevent contamination before reuse.

§ 72.170 *Refrigeration equipment.* Each refrigerator shall be equipped with a thermometer located in the warmest portion thereof. Waste water drains from ice boxes, refrigerating equipment, and refrigerated spaces shall be so installed as to prevent backflow of contaminating liquids.

§ 72.171 *Garbage equipment and disposition.* Watertight, readily cleanable non-absorbent containers with close-fitting covers shall be used to receive and store garbage. Garbage and refuse shall be disposed of as frequently as is necessary and practicable.

§ 72.172 *Toilet and lavatory facilities for use of food-handling employees.* (a) Toilet and lavatory facilities of suitable design and construction shall be provided for use of food-handling employees. (Regarding railroad dining car crew lavatory facilities, see § 72.151.)

(b) Signs directing food-handling employees to wash their hands after each use of toilet facilities shall be posted so as to be readily observable by such employees. Hand washing facilities shall include soap, sanitary towels and hot and cold running water or warm running water in lieu of hot and cold running water.

(c) All toilet rooms shall be maintained in a clean condition.

§ 72.173 *Food-handling operations.* (a) All food-handling operations shall be accomplished so as to minimize the possibility of contaminating food, drink, or utensils.

(b) The hands of all persons shall be kept clean while engaged in handling food, drink, utensils, or equipment.

§ 72.174 *Health of persons handling food.* (a) Any person who is known or suspected to be in a communicable period or a carrier of any communicable disease shall not be permitted to engage in the preparation, handling, or serving of water, other beverages, or food.

(b) Any person known or suspected to be suffering from gastrointestinal disturbance or who has on the exposed portion of the body an open lesion or an infected wound shall not be permitted to engage in the preparation, handling, or serving of food or beverages.

SUBPART I—CERTIFICATION FOLLOWING INSPECTIONS

§ 72.181 *Issuance and posting of certificates.* The Surgeon General may issue certificates based upon inspections provided for in Subparts A to H of this part. Such certificates shall be prominently posted on conveyances.

SUBPART J—DRINKING WATER STANDARDS

§ 72.201 *Definitions of terms.* For the purpose of this subpart the terms designated in this section shall be defined as follows:

(a) "Adequate protection by natural agencies" implies various relative degrees of protection against the effects of polution in surface waters; dilution, storage, sedimentation, the effects of sunlight and aeration, and the associated physical and biological processes which tend to produce natural purification; and, in the case of ground waters, storage in and percolation through the water-bearing material.

(b) "Artificial treatment" includes the various processes commonly used in water treatment, both separately and in combination, such as storage, aeration, sedimentation, coagulation, rapid or slow sand filtration, chlorination, and other accepted forms of disinfection. Rapid sand filtration treatment is commonly understood to include those auxiliary measures, notably coagulation and sedimentation, which are essential to its proper operation.

(c) "Adequate protection by artificial treatment" implies that the method and degree of elaboration of treatment are appropriate to the source of supply; that the works are of adequate capacity to support maximum demands, are well located, designed, and constructed, are carefully and skillfully operated and supervised by properly trained and qualified personnel, and are adequately protected against floods and other sources of pollution. The evidence that the protection thus afforded is adequate must be furnished by frequent bacteriological examinations and other appropriate analyses showing that the purified water is of good and reasonably uniform quality, a recognized principle being that irregularity in quality is an indication of potential danger. A minimum specification of good quality would be conformance to the bacteriological and chemical requirements of this subpart, as indicated in §§ 72.203 and 72.204.

(d) "Sanitary defect" means any faulty structural condition, whether of location, design, or construction of collection, treatment, or distribution works which may regularly or occasionally prevent satisfactory purification of the water supply or cause it to be contaminated from extraneous sources. Among the extraneous sources of contamination of water supply are dual supplies, bypasses, cross connections, interconnections, and back-flow connections.

(e) "Health hazard" means any faulty operating condition including any device or water treatment practice, which, when introduced into the water suply system, creates or may create a danger to the well-being of the consumer.

(f) "Water supply system" includes the works and auxiliaries for collection, treatment, and distribution of the water from the source of supply to the free-flowing outlet of the ultimate consumer.

(g) "The coliform group of bacteria" is defined, for the purpose of this subpart, as including all organisms considered in the coli-aerogenes group as set forth in the Standard Methods for the Examination of Water and Sewage, current edition, prepared, approved, and published jointly by the American Public Health Association and the American Water Works Association, New York City. The procedures[3] for the demonstration of bacteria of this group shall be those specified herein, for:

(1) The completed test, or

(2) The confirmed test when the liquid confirmatory medium brilliant green bile lactose broth, 2 percent, is used, providing the formation of gas in any amount in this medium during 48 hours of incubation at 37° C. is considered to constitute a positive confirmed test, or

(3) The confirmed test when one of the following liquid confirmatory media is used: crystal violet lactose broth, fuchsin lactose broth, or formate ricinoleate broth. For the purpose of this test, all are equivalent, but it is recommended that the laboratory worker base his selection of any one of those confirmatory media upon correlation of the confirmed results thus obtained with a series of completed tests, and that he select for use the liquid confirmatory medium yielding results most nearly agreeing with the results of the completed test. The incubation period for the selected liquid confirmatory medium shall be 48 hours at 37° C. and the formation of gas in any amount during this time shall be considered to constitute a positive confirmed test.

(h) "The standard portion of water" for the application of the bacteriological test may be either:

(1) Ten milliliters (10 ml.) or

(2) One hundred milliliters (100 ml.)

(i) "The standard sample" for the bacteriological test shall consist of five (5) standard portions of either:

(1) Ten milliliters (10 ml.) or

(2) One hundred milliliters (100 ml.) each.

In any disinfected supply the sample must be freed of any disinfecting agent

[3] This reference shall apply to all details of technique in the bacteriological examination, including the selection and preparation of apparatus and media, the collection and handling of samples, and the intervals and conditions of storage allowable between collection and examination of the water sample.

within twenty (20) minutes of the time of its collection.[4]

(j) "The certifying authority" is the Surgeon General of the United States Public Health Service or his duly authorized and designated representatives. Reference to the certifying authority shall be applicable only in the cases of those water supplies to be certified for use on carriers subject to the Federal quarantine regulations. "The reporting agency" shall be understood to mean the respective official State health agencies or their designated representatives.

§ 72.202 *As to source and protection.* (a) The water supply shall be:

(1) Obtained from a sourse free from pollution; or

(2) Obtained from a source adequately purified by natural agencies; or

(3) Adequately protected by artificial treatment.

(b) The water supply system in all its parts should be free from sanitary defects and health hazards, and all known sanitary defects and health hazards shall be systematically removed at a rate satisfactory to the reporting agency and to the certifying authority. Approval of public water supplies by the reporting agency and the certifying authority will be conditioned by the existence of:

(1) Rules and regulations prohibiting connections or arrangements by which liquids or chemicals of unsafe, unknown, or questionable quality may be discharged or drawn into the public water supply;

(2) Provisions to enforce such rules and regulations effectively on all new installations; and

(3) A continuous program to detect health hazards and sanitary defects within the water distribution system.

(c) *Applications.* For the purposes of this subpart, responsibility for conditions in the water supply systems shall be considered to be held by:

(1) The water purveyor from the source of supply to the connection to the customer's service piping, and

(2) The owner of the property served and the municipal, county, or other authority having legal jurisdiction from the point of connection to the customer's service piping to the free-flowing outlet of the ultimate consumer.

§ 72.203 *As to bacteriological quality*—(a) *Sampling.* (1) The bacteriological examination of water considered under this section shall be of samples collected at representative points throughout the distribution system.

(2) The frequency of sampling and the location of sampling points on the distribution system should be such as to determine properly the bacteriological quality of the water supply. The frequency of sampling and the distribution of sampling points shall be regulated jointly by the reporting agency and the certifying authority after investigation by either agency, or both, of the source, method of treatment, and protection of the water concerned.

(3) The minimum number of samples to be collected from the distribution system and examined by the reporting agency or its designated representatives each month should be in accordance with the number as determined from the graph presented in Figure 1 of this subpart[5] which is based upon the relationship of population served and minimum number of samples per month:

Population served:	*Minimum number of samples per month*
2,500 and under	1
10,000	7
25,000	25
100,000	100
1,000,000	300
2,000,000	390
5,000,000	500

(4) In determining the number of samples examined monthly, the following samples may be included, provided all results are assembled and available for inspection and the laboratory methods and technical competence of the personnel are approved by the reporting and certifying agencies:

(i) Samples examined by the reporting agency.

(ii) Samples examined by local health department laboratories.

(iii) Samples examined by the water works authority.

(iv) Samples examined by commercial laboratories.

(5) Daily samples collected following an unsatisfactory sample as provided in

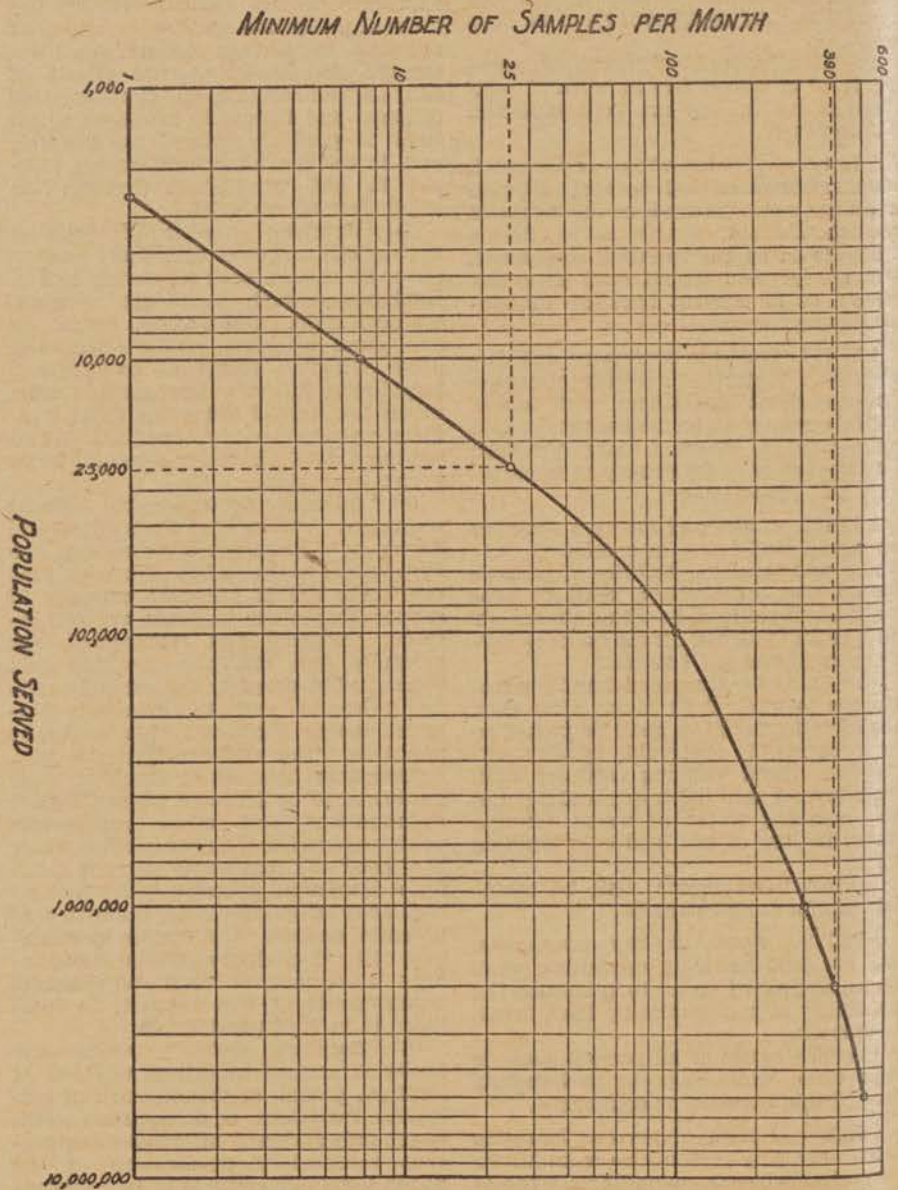


FIGURE 1—Relation between minimum number of samples to be collected per month and population served.

[4] In freeing samples of chlorine or chloramines, the procedure given in the Standard Methods for the Examination of Water and Sewage, current edition, shall be followed.

[5] For the purpose of uniformity and simplicity in application, the number of samples to be examined each month for any given population served shall be determined from the graph in accordance with the following:

For populations of 25,000 and under to the nearest 1.

For populations of 25,001 to 100,000 to the nearest 5.

For populations of 100,001 to 2,000,000 to the nearest 10.

For populations of over 2,000,000 to the nearest 25.

paragraph (b) (2) and (4) of this section, shall be considered as special samples and shall not be included in the determination of the number of samples examined monthly. Neither shall subsequent unsatisfactory samples in this daily series be used as a basis for prohibiting the supply: *Provided*, That (i) immediate and active efforts are made to locate the cause of such contamination, (ii) immediate action is taken to eliminate such cause, and (iii) samples taken following such remedial action are satisfactory.

(6) The laboratories in which these examinations are made and the methods used in making them shall be subject to inspection at any time by the designated representatives of the certifying authority and reporting agency. Compliance with the specified procedures and the results obtained shall be used as a basis for certification, in accordance with the application given in paragraph (b) of this section:

(b) *Application.* Subparagraphs (1) and (2) of this paragraph shall govern when ten milliliter (10 ml.) portions are used and subparagraphs (3) and (4) of this paragraph shall govern when one hundred milliliter (100 ml.) portions are used.[6]

(1) Of all the standard ten milliliter (10 ml.) portions examined per month in accordance with the specified procedure, not more than ten (10) percent shall show the presence of organisms of the coliform group.

(2) Occasionally three (3) or more of the five (5) equal ten milliliter (10 ml.) portions constituting a single standard sample may show the presence of organisms of the coliform group: *Provided*, That this shall not be allowable if it occurs in consecutive samples or in more than:

(i) Five (5) percent of the standard samples when twenty (20) or more samples have been examined per month.

(ii) One (1) standard sample when less than twenty (20) samples have been examined per month.

Provided further, That when three or more of the five equal ten milliliter (10 ml.) portions constituting a single standard sample show the presence of organisms of the coliform group, daily samples from the same sampling point shall be collected promptly and examined until the results obtained from at least two consecutive samples show the water to be of satisfactory quality.[7]

(3) Of all the standard one hundred milliliter (100 ml.) portions examined per month in accordance with the specified procedure, not more than sixty (60) percent shall show the presence of organisms of the coliform group.

(4) Occasionally all of the five (5) equal one hundred milliliter (100 ml.) portions constituting a single standard sample may show the presence of organisms of the coliform group: *Provided*, That this shall not be allowable if it occurs in consecutive samples or in more than:

(i) Twenty (20) percent of the standard samples when five (5) or more samples have been examined per month.

(ii) One (1) standard sample when less than five (5) samples have been examined per month.

Provided further, That when all five of the standard one hundred milliliter (100 ml.) portions constituting a single standards sample show the presence of organisms of the coliform group, daily samples from the same sampling point shall be collected promptly and examined until the results obtained from at least two consecutive samples show the water to be of satisfactory quality.[7]

(5) The procedure given, using a standard sample composed of five standard portions, provides for an estimation of the most probable number of coliform bacteria present in the sample as set forth in the following tabulation:

Number of portions		Most probable number of coliform bacteria per 100 ml.	
Negative	Positive	When 5-10 ml. portions are examined	When 5-100 ml. portions are examined
		Less than—	Less than—
5	0	2.2	0.22
4	1	2.2	.22
3	2	5.1	.51
2	3	9.2	.92
1	4	16.0	1.60
		More than—	More than—
0	5	16.0	1.60

§ 72.204 *As to physical and chemical characteristics*—(a) *Physical characteristics.*[8] The turbidity of the water shall not exceed 10 p. p. m. (silica scale), nor shall the color exceed 20 (platinum-cobalt seals.). The water shall have no objectionable taste or odor.

(b) *Chemical characteristics.* The water shall not contain an excessive amount of soluble mineral substance, nor excessive amount of any chemicals employed in treatment. Under ordinary circumstances, the analytical evidence that the water satisfies the physical and chemical standards given in paragraph (a) of this section and subparagraph (1) of this paragraph and simple evidence that it is acceptable for taste and odor will be sufficient for certification with respect to physical and chemical characteristics.

(1) The presence of lead (Pb) in excess of 0.1 p. p. m., of fluoride in excess of 1.5 p. p. m., of arsenic in excess of 0.05 p. p. m., of selenium in excess of 0.05 p. p. m., of hexavalent chrominum in excess of 0.05 p. p. m., shall constitute grounds for rejection of the supply.

These limits are given in parts per million by weight and a reference to the method of analysis recommended for each determination is given in paragraph (c) (1) of this section. Salts of barium, hexavalent chromium, heavy metal glucosides, or other substances with deleterious physiological effects shall not be added to the system for water treatment purposes.

Ordinarily analysis for these substances need be made only semiannually. If, however, there is some presumption of unfitness because of these elements, periodic determination for the element in question should be made more frequently.

Where experience, examination, and available evidence indicate that such substances are not present or likely to be present in the water supplies involved, semiannual examinations are not necessary, provided such omission is acceptable to the reporting agency and the certifying authority.

(2) The following chemical substances which may be present in natural or treated waters should preferably not occur in excess of the following concentrations where other more suitable supplies are available in the judgment of the certifying authority. Recommended methods of analysis are given in paragraph (c) of this section:

Copper (Cu) should not exceed 3.0 p. p. m.

Iron (FE) and manganese (Mn) together should not exceed 0.3 p. p. m.

Magnesium (Mg) should not exceed 125 p. p. m.

Zinc (Zn) should not exceed 15 p. p. m.

Chloride (Cl) should not exceed 250 p. p. m.

Sulfate (SO_4) should not exceed 250 p. p. m.

Phenolic compounds should not exceed 0.001 p. p. m. in terms of phenol.

Total solids should not exceed 500 p. p. m. for a water of good chemical quality. However, if such water is not available, a total solids content of 1,000 p. p. m. may be permitted.

For chemically treated water, i. e., lime softened, zeolite or other ion exchange treated waters, or any other chemical treatments, the following three requirements should be met:

(i) The phenolphthalein alkalinity (calculated as $CaCO_3$) should not be greater than 15 p. p. m. plus 0.4 times the total alkalinity. This requirement limits the permissible pH to about 10.6 at 25° C.

(ii) The normal carbonate alkalinity should not exceed 120 p. p. m. Since the normal alkalinity is a function of the hydrogen ion concentration and the total alkalinity, this requirement may be met by keeping the total alkalinity within the limits suggested below when the pH of the water is within the range given. These values apply to water at 25° C.

pH range	*Limit of total alkalinity (p. p. m. as $CaCO_3$)*
8.0 to 9.6	400
9.7	340
9.8	300
9.9	260
10.0	230
10.1	210
10.2	190
10.3	180
10.4	170
10.5 to 10.6	160

[6] It is to be understood that in the examination of any water supply the series of samples for any month must conform to both of the requirements of either paragraph (1) and (2) or (3) and (4), respectively.

[7] When this occurs, and when waters of unknown quality are being examined, simultaneous tests should be made on multiple portions of a geometric series ranging from 10 ml. to 0.1 ml. or less.

[8] The requirements in this paragraph relating to turbidity and color shall be met by all filtered water supplies. Turbidity and color limits for unfiltered waters and the requirements of freedom from taste or odor for either filtered or unfiltered waters should be based on reasonable judgment and discretion, giving due consideration to all the local factors involved.

(iii) If excess alkalinity is produced by chemical treatment, the total alkalinity should not exceed the hardness by more than 35 p. p. m. (calculated as $CaCO_3$).

(c) *Recommended methods of analysis.*[9] (1) Ions with required limits of concentration.

Arsenic (As): Official and Tentative Methods of Analysis. Association of Official Agricultural Chemists, 1940, p. 390; also "Colorimetric Microdetermination of Arsenic," Morris B. Jacobs and Jack Nagler. Industrial and Engineering Chemistry, Anal. Ed., 14: 442 (1942).

Fluoride (F): Standard Methods for the Examination of Water and Sewage, current edition; also Methods of Determining Fluorides, Committee Report, A. P. Black, Chairman. Journal American Water Works Association, 33: 1965–2017 (1941).

Lead (Pb): Standard Methods for the Examination of Water and Sewage, current edition.

Selenium (Se): Official and Tentative Methods of Analysis. Association of Official Agricultural Chemists, 1940, pp. 11 and 417; also Robinson, W. O. Dudley, H. C., Williams, K. T., and Byers, Horace G.; The Determination of Selenium and Arsenic by Distillation. Industrial and Engineering Chemistry, Anal. Ed., 6: 274 (1934).

Hexavalent Chromium: Standard Methods for the Examination of Water and Sewage, current edition.

(2) Ions and substances with suggested limits of concentration.

Copper (Cu): Standard Methods for the Examination of Water and Sewage, current edition.

Iron (Fe) and Manganese (Mn): Ibid.

Magnesium (Mg): Ibid.

Zinc (Zn): Ibid.

Chloride (Cl): Ibid.

Sulfate (SO_4): Ibid.

Phenolic compounds: Ibid.

With dibromquinonechlorimide as an indicator.

Total solids: Ibid.

Alkalinity: Ibid.

PART 73—BIOLOGIC PRODUCTS

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73.102 Tests for safety.
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AUTHORITY: §§ 73.1 to 73.105 issued under sec. 215, 58 Stat. 690, as amended; 42 U. S. C. 216. Interpret or apply sec. 351, 58 Stat. 702; 42 U. S. C. 262. Other statutory provisions interpreted or applied are cited to text in parentheses.

CROSS REFERENCES: For Department of Health, Education and Welfare regulations relating to drugs as defined in the Federal Food, Drug, and Cosmetic Act (21 U. S. C. 301 et seq.), see 21 CFR, Subchapter C. For exemption from section 505 of the Federal Food, Drug, and Cosmetic Act (21 U. S. C. 355) of new drugs licensed under the Public Health Service Act, see 21 CFR 1.109a. For drugs intended solely for investigational use, see 21 CFR 1.114. For Bureau of Customs regulations relating to viruses, serums and toxins, see 19 CFR 12.21–12.23. For Post Office regulations relating to the admissibility to the United States mails see 39 CFR Parts 14 and 15, esp. § 15. (b) (2).

DEFINITIONS

§ 73.1 *Definitions.* As used in this part:

(a) "Act" means the Public Health Service Act (58 Stat. 682), approved July 1, 1944.

(b) "Secretary" means the Secretary of Health, Education and Welfare.

(c) "Surgeon General" means the Surgeon General of the United States Public Health Service.

(d) "Institutes" means the National Institutes of Health in the Public Health Service.

(e) "State" means a State or the District of Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin Islands.

(f) "Possession" includes, among other possessions, Puerto Rico and the Virgin Islands.

(g) "Biologic product" means any virus, therapeutic serum, toxin, antitoxin, or analogous product applicable to the prevention, treatment or cure of diseases or injuries of man:

(1) A virus is a product containing the minute living cause of an infectious disease.

(2) A therapeutic serum is the product obtained from the blood of an animal by removing the clot or clot components and the blood cells and intended for administration by a route other than ingestion.

(3) A toxin is a product containing a soluble substance poisonous to laboratory animals or to man in doses of 1 milliliter or less (or equivalent in weight) of the product, and having the property, following the injection of non-fatal doses into an animal, of causing to be produced therein another soluble substance which specifically neutralizes the poisonous substance and which is demonstrable in the serum of the animal thus immunized.

(4) An antitoxin is a product containing the soluble substance in serum or other body fluid of an immunized animal which specifically neutralizes the toxin against which the animal is immune.

(5) A product is analogous:

(i) To a virus if prepared from or with a virus or agent actually or potentially infectious, without regard to the degree of virulence or toxicogenicity of the specific strain used.

(ii) To a therapeutic serum, if composed of whole blood or plasma or containing some organic constituent or product other than a hormone or an amino acid, derived from whole blood, plasma, or serum and intended for administration by a route other than ingestion.

(iii) To a toxin or antitoxin, if intended, irrespective of its source of origin, for the prevention, treatment, or cure of diseases or injuries of man through specific immunization.

(h) "Trivalent organic arsenicals" means arsphenamine and its derivatives (or any other trivalent organic arsenic compound) applicable to the prevention, treatment, or cure of diseases or injuries of man.

(i) "Products" includes biologic products and trivalent organic arsenicals. A product is deemed "applicable to the pre-

[9] For the chemical determinations referred to in this report, when given, the methods of analysis recommended by the Association of Official Agricultural Chemists are satisfactory and may be substituted for those recommended in the Standard Methods for the Examination of Water and Sewage, current edition, which are specifically cited.

vention, treatment or cure of diseases or injuries of man" irrespective of the mode of administration or application recommended, including use when intended, through administration or application to a person, as an aid in diagnosis or in evaluating the degree of susceptibility or immunity possessed by a person, and including also any other use for purposes of diagnosis if the diagnostic substance so used is prepared from or with the aid of a biologic product.

(j) "Proper name", as applied to a product, means the name designated in the license for use upon each container of the product.

(k) "Dating period" means the period beyond which the product cannot be expected beyond reasonable doubt to yield its specific results.

(l) "Expiration date" means the date of termination of the dating period.

(m) The word "standards" means specifications and procedures applicable to an establishment or to the production, content, testing, labeling, or release of products prepared therein, which are prescribed in this part and which are designed to insure the continued safety, purity and potency of such products.

(n) The word "continued" as applied to the safety, purity and potency of products is interpreted to apply to the dating period.

(o) The word "safety" is interpreted to apply to the relative freedom from harmful effect to the recipient when a product is prudently administered taking into consideration the character of the product in relation to the condition of the patient at the time.

(p) The word "purity" is interpreted to mean the degree of freedom from extraneous matter, whether harmful to the recipient, deleterious to the product or otherwise, in the finished product.

(q) The word "potency" is interpreted to mean the specific ability or capacity of the product, as indicated by appropriate laboratory tests or by adequately controlled clinical data obtained through the administration of the product in the manner intended, to effect a given result.

(r) "Manufacturer" includes any individual, trust or estate, association, partnership or corporation engaged in the manufacture of a product subject to license under the act.

(s) "Establishment" means that portion of the properties of any manufacturer which is given over to the manufacture of a product subject to license, including equipment and animals used, and the personnel engaged in such manufacture.

(t) "Selling agent" or "distributor" means any person engaged in the unrestricted distribution, other than by sale at retail, of products subject to license.

LICENSES: PROCEDURE

§ 73.2 *Applications.* To obtain a license for any establishment, biologic product or trivalent organic arsenical, the manufacturer shall make application to the Surgeon General on forms prescribed for such purpose, and in the case of an application for a product license, shall submit a description of the production methods, samples of the product and specimens of the labels, enclosures, and containers proposed to be used for such product. No product shall be licensed if any production method relating to such product would, in the judgment of the Surgeon General, impair the assurances of continued safety, purity and potency as provided by the regulations of this part.

§ 73.3 *Inspection of establishments and examination of products prior to licensing.* Licenses shall be issued only after inspection of the establishment and examination of the product for which a product license is desired and upon a determination that the establishment and the product meet the standards prescribed in the regulations in this part. Additional product licenses shall be issued only upon examination of the product and a determination that the product meets the standards prescribed in the regulations in this part.

§ 73.4 *Form of license: domestic establishments.* The following form of license is prescribed for establishments located in any State or possession of the United States:

Establishment License No. ---------

This is to certify that ----------
of ----------, through the establishment identified as ----------, located at ---------- is hereby licensed, pursuant to section 351 of the Public Health Service Act, approved July 1, 1944 (58 Stat. 682), and regulations thereunder, to propagate or manufacture, and to prepare for sale in the District of Columbia, or for sending, bringing or carrying from any State or possession into any other State or possession or into any foreign country any virus, serum, toxin, antitoxin, or analogous product, or arsphenamine or its derivatives (or any other trivalent organic arsenic compound) for the propagation and manufacture of which the establishment holds an unsuspended and unrevoked license issued by the Secretary of Health, Education, and Welfare pursuant to said act and regulations.

Secretary of Health, Education, and Welfare.

Date ----------

§ 73.5 *Product licenses.* Each product license shall designate:

(a) The manufacturer.

(b) The establishment.

(c) The license number of the establishment.

(d) The proper name of the product, with additional specifications, if any, which may be approved or required for additional labeling purposes.

§ 73.6 *Changes to be reported.* Important changes in location, equipment, management and responsible personnel, or in production methods and labeling of any licensed product or of any product for which an application for a license is pending shall be immediately reported to the Institute by any establishment holding a license, and, unless in case of an emergency, not less than 30 days in advance of the time such changes are made; failure to make such report shall constitute a ground for summary suspension of a license pending reinspection of the establishment or re-examination of the product.

§ 73.7 *Products under development.* A biologic product or trivalent organic arsenical undergoing development, but not yet ready for a product license, may be shipped or otherwise delivered from one State or possession into another State or possession provided such shipment or delivery is not for sale, barter or exchange and is in accordance with section 505 of the Federal Food, Drug, and Cosmetic Act, as amended, and the regulations thereunder.

§ 73.8 *Issuance, revocation or suspension.* A license shall be issued by the Secretary upon the recommendation of the Surgeon General and upon the finding by the Surgeon General that the establishment or the product, as the case may be, meets the standards established by the regulations in this part as herein prescribed or hereafter amended. Licenses shall be valid until suspended or revoked. An establishment or product license shall be revoked upon application of the manufacturer giving notice of intention to discontinue the manufacture of all products or of intention to discontinue the manufacture of a particular product for which a license is held. The Surgeon General shall recommend to the Secretary that a license be suspended or revoked whenever he finds, after notice and opportunity for hearing, that the establishment or the product for which the license has been issued fails to conform to the standards in the regulations in this part as herein prescribed or hereafter amended to insure the continued safety, purity and potency of the manufactured product. In case of suspension, if the faulty condition is not corrected within 60 days or within such other period as may be specified in the notice of suspension, he shall recommend that the license be revoked. Except as provided in § 73.10, prior to the institution of proceedings looking to the suspension or revocation of a license the licensee shall be advised in writing of the facts or conduct which may warrant such action and shall be accorded opportunity within a reasonable period prescribed by the Surgeon General to demonstrate or achieve compliance with the regulations in this part.

§ 73.9 *Licenses heretofore issued.* Any license heretofore issued and in effect upon the effective date of the regulations in this part shall remain in effect unless and until superseded by a new license, or suspended or revoked, pursuant to the regulations in this part.

§ 73.10 *Summary suspension.* Whenever the Surgeon General has reasonable ground to believe that an establishment or product for which a license has been issued fails to conform to the standards prescribed in the regulations in this part, and that by reason of such failure and of failure of the manufacturer to take prompt corrective measures on notice thereof, the distribution or sale of a licensed product would constitute a danger to health, or that the establishment and production methods have been so changed as to require in order to protect the public health a new showing that the establishment or product meets the standards prescribed in the regulations

in this part, he may recommend to the Secretary that the license for the establishment or the product be summarily suspended and the manufacturer be required (a) to notify the selling agents and distributors to whom such product or products have been delivered of such suspension, (b) to furnish complete records of such deliveries and notice of suspension, and (c) to show cause within 60 days or such other period as may be specified in the order why the license should not be revoked.

§ 73.11 *Review Board.* When deemed advisable by the Surgeon General, in matters involving the safety, purity and potency of licensed products or products for which an application for license is pending, the reports of inspection and laboratory examinations, together with any pertinent data the establishment may submit, shall be passed upon by a special board of three officers appointed by the Surgeon General for that purpose. The board shall report its findings to the Surgeon General who will forward its report, together with his findings and recommendations, to the Secretary.

§ 73.12 *Opportunity for hearing.* Any manufacturer whose application for a license has been denied, or whose establishment or product license has been summarily suspended, without prior opportunity for hearing, may appeal from such denial or suspension and shall be entitled to a hearing thereon before a review body constituted as provided in § 73.11. The Surgeon General, upon review of the record, may affirm, reverse, or modify the findings of the review board, or may direct the taking of further testimony, and shall forward his determinations and recommendations to the Secretary.

§ 73.13 *Suspension and revocation: publication.* Notice of suspensoin or revocation of license, with statement of cause therefor, may be published by the Secretary.

§ 73.14 *Reissuance.* An establishment license, previously revoked or suspended may be reissued or reinstated upon inspection of the establishment, or upon examination of the product showing that the reasons for revocation or suspension have been corrected, except that in case of a product license revoked upon application or because of failure to meet changes in standards prescribed by amendment to the regulations in this part after the issuance of such license, only such inspection and examination as may be considered advisable by the Institutes shall be required.

§ 73.15 *Products in short supply; initial processing at other than licensed establishment.* Licenses issued to a manufacturer for an establishment shall authorize persons other than such manufacturer to conduct at places other than such establishment the initial and partial processing of a product for shipment solely to such manufacturer only to the extent that the names of such persons and places are registered with the Surgeon General and he finds, upon application of such manufacturer, that (a) the product is in short supply due either to the peculiar growth requirements of the organism involved or to the scarcity of the animal required for production purposes, and (b) such manufacturer has established with respect to such persons and places such procedures, inspections, tests or other arrangements as will assure full compliance with the applicable regulations of this part related to continued safety, purity and potency. Such persons and places shall be subject to all regulations of this part except §§ 73.2 to 73.14, 73.20 to 73.24, and 73.50 to 73.55. Failure of such manufacturer to maintain such procedures, inspections, tests or other arrangements, or failure of any person conducting such processing to comply with applicable regulations shall constitute a ground for summary suspension or revocation of the authority conferred pursuant to this section on the same basis as provided in §§ 73.10, 73.12 and 73.13 with respect to the summary suspension and the revocation of licenses.

FOREIGN ESTABLISHMENTS AND PRODUCTS

§ 73.20 *Licenses required; products for controlled investigation only.* Any biologic or trivalent organic arsenical propagated or manufactured and prepared in any foreign country and intended for sale, barter or exchange shall be refused entry by collectors of customs unless produced in an establishment holding an unsuspended and unrevoked establishment license and license for the product. Unlicensed products which are not imported for sale, barter or exchange and which are intended solely for purposes of controlled investigation are admissible only if in accord with section 505 of the Federal Food, Drug, and Cosmetic Act, as amended, and the regulations thereunder.

§ 73.21 *Procedure.* Except as otherwise provided in this part, licenses for foreign establishments and products shall be issued, suspended or revoked in the same manner as licenses for domestic establishments and products. Each foreign establishment holding a license and consigning any licensed biologic product or trivalent organic arsenical into any State or possession shall be required to file with the Surgeon General the name and address of any representative or representatives authorized by the establishment to distribute the product, and such representative or representatives shall keep such records of such distribution as are required of domestic licensed establishments, and failure to maintain such records shall constitute ground for revocation of license.

§ 73.22 *Form of license.* Licenses for establishments located in foreign countries shall be in form similar to that for domestic establishments except that they shall authorize preparation for sending, carrying, or bringing for sale barter or exchange from the foreign country designated in the license into any State or possession of the United States and shall specify that it is issued upon the condition that the licensee will permit the inspection during all reasonable hours of the establishment by any officer, agent, or employee of the Department of Health, Education, and Welfare authorized by the Secretary of the Department of Health, Education, and Welfare for such purpose.

§ 73.23 *Smallpox vaccine; importation prohibited.* The importation of smallpox vaccine into any State or possession from any foreign country is prohibited except that smallpox vaccine may be sent from any foreign country, on containers indicating plainly the limited purpose intended, to the Institutes for test or research purposes or for vaccine production.

§ 73.24 *Samples to accompany each importation.* Each foreign importation of a biologic product or trivalent organic arsenical from a licensed establishment, whether or not intended for investigational use only, shall be accompanied by at least two final containers of each lot of any biologic product and by at least 15 final containers of each lot of any trivalent organic arsenical contained in the shipment. Such samples shall be forwarded by the collector of customs at the port of entry to the Institutes for examination. If separate samples are not found accompanying the shipment, samples shall be obtained from the shipment by the collector of customs and forwarded to the Institute.

(Sec. 801, 52 Stat. 1058, as amended; 21 U. S. C. 381)

ESTABLISHMENT INSPECTION

§ 73.30 *Inspectors.* Inspections shall be made by an officer of the Public Health Service having special knowledge of the methods used in the production and control of biologic products and designated for such purpose by the Surgeon General or by any officer, agent, or employee of the Department of Health, Education, and Welfare specifically designated for such purpose by the Secretary.

§ 73.31 *Time of inspection.* The inspection of an establishment for which a license is pending need not be made until the establishment is in operation and is manufacturing the complete product for which a product license is desired. In case the license is denied following inspection for the original license, no reinspection need be made until assurance has been received that the faulty conditions which were the basis of the denial have been corrected. An inspection of each licensed establishment shall be made at least once each year. Inspections may be made with or without notice, and shall be made during regular business hours unless otherwise directed.

§ 73.32 *Duties of inspector.* The inspector shall:

(a) Call upon the active head of the establishment, stating the object of his visit,

(b) Interrogate the proprietor or other personnel of the establishment as he may deem necessary.

(c) Examine the details of location, construction, equipment and maintenance, including stables, barns, warehouses, production laboratories, bleeding clinics maintained for the collection of human blood, shipping rooms, record rooms, and any other structure or appli-

ance used in any part of the propagation, manufacture, and preparation of a product,

(d) Investigate as fully as he deems necessary the methods of propagation, processing, testing, storing, dispensing, recording, or other details of manufacture and distribution of each licensed product, or product for which a license has been requested, including observation of these processes in actual operation,

(e) Obtain and cause to be sent to the Institutes adequate samples for the examination of any product or ingredient used in its preparation,

(f) Bring to the attention of the manufacturer any fault observed in the course of inspection in location, construction, production methods, or administration of a licensed establishment which might lead to impairment of a product,

(g) Inspect and copy, as circumstances may require, any records required to be kept pursuant to § 73.36,

(h) Certify as to the condition of the establishment and of the production methods followed and makes recommendations as to action deemed appropriate with respect to any application for license or any license previously issued.

ESTABLISHMENT STANDARDS

§ 73.35 *Responsible head.* A responsible person shall be in permanent and full control of the establishment in all matters relating to the manufacture of products. A reasonable person is one who has been trained in the manufacturing techniques employed and the fundamental scientific facts upon which the manufacture of products rests, who is capable of enforcing discipline among the employees under his supervision, and to whom sufficient authority has been delegated for such purpose.

§ 73.36 *Records, samples, cultures*—(a) *Production and distribution records.* Records shall be kept, with dates, of the various steps in the manufacture, testing, dispositon, and distribution of each lot, so that at any time these steps as regards any lot number may be traced by an inspector. The records shall be retained, for such interval beyond the expiration date as is considered necessary for the individual product to permit the return of any clinical report of unfavorable reactions. This interval will vary with the type of product and its geographic distribution. A minimum of 6 months after the expiration date with 5 years as the extreme interval under all circumstances is considered adequate. Records of distribution of each lot shall in any event be kept as long as the lot remains the property of the licensed manufacturer.

(b) *Records of recall.* Complete records shall be maintained pertaining to the recall from distribution of any product upon notification from the Institutes of failure to conform with the standards prescribed in the regulations in this part, deterioration of the product or any other factor by reason of which the distribution of the product would constitute a danger to health.

(c) *Sterilization records.* Records including the date, duration, and temperature of each sterilization shall be made by means of automatic registering devices or under a system of recording which gives reasonable assurance of the accuracy and reliability of the record.

(d) *Animal necropsy records.* A necropsy record shall be kep on each animal from which a biologic product has been obtained and which dies or is killed because of disease while employed in production of a product.

(e) *Retention of reference samples.* Reference samples from each lot shall be retained by the manufacturer until the entire lot has become outdated and for 6 months thereafter. Exceptions may be authorized by the Institutes when the lot yields relatively few final containers and when such lots are prepared by the same method in large numbers and in close succession.

(f) *Cultures.* Cultures and other materials while used in the production of licensed products shall be labeled and preserved in a safe and orderly manner.

(g) *Records in case of divided manufacturing responsibility.* If two or more establishments participate in the manufacture of a product, the records of both establishments must show plainly the degree of responsibility of each in the manufacturing process.

§ 73.37 *Physical establishment; construction, equipment and care*—(a) *Work with spore-bearing organisms.* All work with spore-bearing micro-organisms shall be carried out in (1) an entirely separate building with its own entrance, or (2) a portion of a building used for the manufacture of other products constructed in such a manner as to be completely walled-off so that admission to the special unit may be gained only through an entrance independent of the remainder of the building. All containers used shall be permanently marked so as to avoid the possibility of contamination of products.

(b) *Work of a diagnostic nature.* Laboratory procedures of a clinical diagnostic nature involving possibly contaminated materials shall be in space set apart from that used for the production of licensed products, except that production space which is used only occasionally may be used for diagnostic work provided spore-bearing pathogenic micro-organisms are not involved and provided the space is thoroughly cleaned before production is resumed.

(c) *Laboratory and bleeding rooms.* Laboratory rooms for the production of licensed products, including the bleeding rooms and other places where cleanliness is essential, shall be efficiently screened and kept free of flies and other insects or vermin. Building construction shall be such as to insure freedom from dust, smoke and deleterious or obnoxious odors in the laboratory and bleeding rooms and such as to permit thorough cleaning and, when necessary, chemical disinfection of bleeding rooms and rooms for smallpox vaccine animals.

(d) *Stables.* Stables shall be well lighted and well ventilated, and the floors shall be so constructed and cared for as to insure cleanliness.

(e) *Sterilization.* Sterilization equipment and methods used shall be such as to insure the complete destruction of contaminating, living organisms, including living spores. The containers, filling apparatus, and other pieces of apparatus or materials which may come in contact with biologic products during manufacture shall be scrupulously clean. Such equipment shall be absolutely sterile unless the product is protected by subsequent sterilizing treatment.

(f) *Containers used in production.* All containers used in preparation of biologic products shall be of such construction as will readily permit inspection for cleanliness.

(g) *Hot water available.* Hot water shall be provided in bleeding rooms and stables for smallpox vaccine animals.

(h) *Disposal of manure.* No manure shall be stored as to permit the breeding of flies on the premises nor shall the establishment be located in close proximity to off-property manure storage capable of engendering fly breeding.

(i) *Isolation of hog cholera production.* All personnel, animals and equipment used in the production of hog cholera serum shall be kept entirely separate from personnel, animals, and materials used in the production of biologic products for human use.

§ 73.38 *Animals used in production*—(a) *Quarantine and care.* Animals used in production of biologic products shall be kept under competent daily inspection and preliminary quarantine for a period of at least 7 days before use. Only healthy animals free from communicable disease shall be used for production purposes and at all times shall be adequately housed, fed, and humanely treated. Particular care shall be taken during the quarantine period to eliminate those animals of the equine genus which may be infected with glanders, and those of the bovine genus which may be infected with tuberculosis.

(b) *Immunization against tetanus.* All horses used in the production of biologic products, except those which are under active immunization for the production of tetanus antitoxin, shall receive injections of tetanus toxoid in such amounts and at such intervals as experience has shown adequate to insure immunity to tetanus.

(c) *Disposal of used animals.* No animal used for production or testing of products shall be removed from the premises while it is capable of transmitting disease. An animal which is unsuitable because of its physical condition for the production or testing of a product shall not be removed from the premises alive except for the purpose of being utilized for animal by-products. No animal shall be allowed to continue to live unnecessarily when to do so would be an inhumane act.

(d) *Reporting of certain diseases required.* In case of actual or suspected infection with foot and mouth disease, glanders, tetanus, anthrax, gas gangrene, equine infectious anemia, or equine encephalomyelitis among animals intended for use or used for the production of biologic products, the manufacturer shall immediately notify the Institute.

(e) *Smallpox vaccine production animals.* Animals used for propagation of smallpox vaccine shall be thoroughly

cleaned with soap and water at the beginning of the quarantine and at its conclusion. No area of the animal shall be vaccinated which is liable to be contaminated by feces.

(f) *Treatment of vaccinated animals.* Preliminary to taking smallpox vaccine material from vaccinated animals, such animals shall be killed or rendered insensible to pain.

(g) *Restriction on attendants.* Personnel while caring for smallpox vaccine animals shall be excluded from horse stables and paddocks and from contact with horses.

§ 73.39 *Human blood donors.* Only those persons may serve as a source of the whole blood for use in preparing a licensed product whose physical condition is such that the withdrawal of the desired amount of blood will not endanger their health and who are certified by a qualified doctor of medicine as being free of a disease transmissible by blood transfusion as far as can be determined from the donor's personal history, from physical examination and such clinical tests as appear necessary for each donor on the day upon which the blood is withdrawn from the donor, except that this requirement may be modified by the Institute if the licensed product is processed by a method which insures the destruction or complete removal of the causative agent for such disease.

STANDARDS FOR PRODUCTS: LABELS

§ 73.50 *Container labels.* (a) The following items shall appear on the label affixed to each container of a product capable of bearing a full label:

(1) The proper name of the product;

(2) Name, address, and license number of manufacturer;

(3) Lot number;

(4) The expiration date.

(b) If the final container is capable of bearing only a partial label, the final container shall show as a minimum the name (expressed either as the proper or common name), the lot number, and the name of the manufacturer and, if the final container is incapable of bearing any label, the items shall appear only on the outside label.

(c) If the final container is a multiple dose container, the container label must indicate the recommended dose. When the label has been affixed to the container a sufficient area of the container must remain uncovered for its full length or circumference to permit inspection of the contents.

§ 73.51 *Proper name on outside label.* The proper name in the form designated in the product license for such purpose must appear upon the outside label in legible type and shall be given precedence in position and prominence over any trade-mark or trade name used:

(a) The "outside label" is the label of the carton enclosing one or more final containers, except that if no such carton is used the label of the individual final container is regarded as the outside label.

(b) "Legible type" includes only type of a size and character which can be read with ease when held in a good light and with normal vision.

(c) "Precedence in position" of the proper name will have been observed if it is placed above any trade-mark or trade name and provided it is symmetrically arranged with respect to other printing on the label.

(d) "Precedence in prominence" of the proper name will have been observed if the style of type is of the same or greater point size and of equal face, or heavier, than that used in printing the trade-mark or trade name, and if the contrast in color value between the proper name and the background is not less than that between the trade-mark or trade name and the background.

§ 73.52 *Outside label; additional items.* The label affixed to the outside carton shall include, in addition to the proper name and the items required on the label of the final container, the following:

(a) The preservative used and its concentration,

(b) The volume of the contents, if a liquid, or the weight, if a solid, and the potency or dosage if more than one strength is dispensed,

(c) The recommended storage temperature,

(d) The words "Shake Well," or equivalent, when indicated by the character of the product.

(e) The dose and route of administration recommended or reference to such directions in an enclosed circular,

(f) The source of the product when a factor in safe administration,

(g) Minimum potency of product expressed in terms of official standard of potency or, if potency is a factor and no standard of potency has been prescribed, the words "No U. S. standard of potency."

§ 73.53 *Divided manufacturing responsibility to be shown.* If two or more establishments participate in the manufacturing process, the name, address, and license number of each must appear on the label of the final container, if capable of bearing a full label, and on the outside label.

§ 73.54 *Name of selling agent or distributor.* The name and address of the selling agent or distributor of a product may appear on the label under the designation of "selling agent" or "distributor" provided that the name and address of the manufacturer is given precedence in prominence.

§ 73.55 *Products for export.* Labels on packages or containers of products for export may be adapted to meet specific requirements of the regulations of the country to which the product is to be exported provided that in all such cases the minimum labor requirements prescribed in § 73.50 are observed.

STANDARDS FOR PRODUCTS: GENERAL

§ 73.70 *Tests prior to release*—(a) *Required for each lot.* No lot of any licensed product shall be released by the manufacturer prior to the completion of tests for conformity with the standards applicable to such product.

(b) *Potency.* Tests for potency shall be made on each lot only after completion of those processes of manufacture which may affect the potency of the final product. The tests shall consist of either in vitro or in vivo tests, or both, which have been specifically designed for each product so as to indicate its potency in a manner adequate to satisfy the interpretation of potency given by the definition in § 73.1 (q).

(c) *Identity and safety.* (1) The contents of a final container of each filling of each lot shall be tested for identity and for safety either after the labels have been affixed to the final container or affixed, both outside and inside, to the multiple container storage receptacle just prior to its sealing for storage purposes, except that exceptions to this procedure may be authorized by the Institute to apply when the volume of the final container is very large and when more than one lot is processed each day.

(2) The identity test shall be specific for each product in a manner which will adequately identify it and distinguish it from any other product being processed in the same laboratory. In general, identity may be established either through the physical or chemical characteristics of the product, inspection by macroscopic or microscopic methods, specific cultural tests, or in vitro or in vivo immunological tests.

(3) In general, the safety test shall consist of the parenteral injection of the maximum volume tolerated, but not more than 0.5 ml. into mice weighing approximately 20 grams each and 5.0 ml. into guinea pigs weighing approximately 350 grams each. When the injections are made into at least two animals of each species, there shall result neither significant symptoms nor death during an observation period of not less than 7 days. Variations from this test, either in the volume injected or in the species of test animal used shall be made whenever required because of the human dose level demanded of the product or because of any individual demands of the product itself.

(d) *Sterility.* Samples from final containers selected at random after each filling from each lot of each product shall be tested for sterility. The random sampling shall be made in such a manner that all stages of the filling from the bulk container will have equal chance of being represented. Three final containers shall be selected from each filling from each lot if the total number filled is 100 or less and, if greater, one additional container shall be selected for each additional 50 containers or fraction thereof, but not more than 10 samples need be tested. If the volume of the final container is 1.0 ml. or less, the entire contents of the container shall be cultured. If the volume of the final container is greater than 1.0 ml., the volume cultured shall be not less than 1.0 ml. when each injection is 1.0 ml. or less, and not less than the largest single injection recommended when greater than 1.0 ml., but need not be more than 10 ml. The culture shall be made in one or more tubes of fluid thioglycollate medium, and incubation shall be at 35° to 37° C. with observation for not less than 7 days. The manner of performing the sterility test may vary from the pattern prescribed in this paragraph when

the nature of the product necessitates a change and when this need has been recognized by the Institute.

(e) *Purity.* The purity of a product, as defined in § 73.1 (p), includes the relative freedom from residual moisture and pyrogenic substances whenever these are factors of significance in the safe use of the product. The relative freedom from residual moisture shall be determined by a procedure which will accurately measure the amount of uncombined water or other volatile liquid present in the finished product. The relative freedom from pyrogenic substances shall be determined by the intravenous injection into normal rabbits of not less than 3.0 ml. per kilo of body weight, following which the thermal response shall not exceed 1.1° C. More rigid requirements for the pyrogen test shall be observed when the character of the product and the manner of its prophylactic or therapeutic use make this necessary to meet requirements of safety as defined in § 73.1 (o).

§ 73.71 *Tests: by whom made.* Tests for safety, purity and potency applicable to the product shall be completed for each lot of any licensed product prior to its release by the manufacturer, and samples of any lot of any licensed product, together with the protocols showing the results of applicable tests, may at any time be required to be sent to the Institute for examination.

§ 73.72 *Ingredients, preservatives, diluents.* All ingredients used in a licensed product, and any diluent provided as an aid in the administration of the product shall meet generally accepted standards of purity and quality. Any preservative used shall be sufficiently non-toxic so that the amount present in the recommended dose of the product will not be toxic to the recipient, and in the combination used shall not denature the specific substances in the product below the minimum acceptable potency within the dating period when stored at the recommended temperature.

§ 73.73 *Total solids in serums.* Except as otherwise provided by regulation, no liquid serum or antitoxin shall contain more than 20 percent total solids.

§ 73.74 *Permissible combinations.* Licensed products may not be combined with other licensed products, either therapeutic, prophylactic or diagnostic, except as a license is obtained for the combined product. Licensed products may not be combined with nonlicensable therapeutic, prophylactic, or diagnostic substances except as a license is obtained for such combination.

§ 73.75 *Container and closure.* Glass used in the container of a licensed product intended for administration by injection shall be colorless and fully transparent. The quality of the glass and of the closure used shall be such as will not hasten the deterioration of the licensed product or render it less suitable for the use intended within the dating period.

§ 73.76 *Standard units or samples.* Standard units or samples for comparison made available by the Institute shall be applied in testing for potency all forms of diphtheria antitoxin, tetanus antitoxin, botulism antitoxin Type A, botulism antitoxin Type B, perfringens antitoxin, scarlet fever streptococcus antitoxin, vibrion septique antitoxin, antipneumococcic serum (Types I, II, V, VII, and VIII), dysentery antitoxin (Shiga), staphylococcus antitoxin, histolyticus antitoxin, oedematiens antitoxin, and sordelli antitoxin and other products for which such units are available.

§ 73.77 *Standards of potency; particular products.* Diphtheria antitoxin shall have a potency of not less than 500 units per milliliter. Tetanus antitoxin shall have a potency of not less than 400 units per milliliter. Scarlet fever streptococcus antitoxin shall have a potency of not less than 400 units per milliliter. Antitoxins dispensed in the dried state shall represent liquid antitoxins of not less than these potencies.

§ 73.78 *Dating period; date of manufacture.* The dating period shall be determined with reference to the date of manufacture which shall be:

(a) For products for which an official standard of potency exists or which are subject to official potency tests, the last date of satisfactorily passing a potency test;

(b) For products for which no official standard of potency exists or which are not subject to official potency tests,

(1) The date of removal from the animal in case of animal products;

(2) The date of extraction in the case of products used for specific desensitization;

(3) The date of solution in case of venoms, and

(4) The date of cessation of growth in case of other products;

(c) For products which are submitted to the Institute for approval prior to release, the date of official release notice.

§ 73.79 *Dating period; products in cold storage.* The dating period may be determined with reference to the period of issue from cold storage: *Provided,* That, except as may be otherwise prescribed for individual products, the date of such issue is not more than six months after the date of manufacture and the product is kept constantly at a temperature not exceeding 10° C., or not more than 1 year after the date of manufacture if the product is kept constantly at a temperature not exceeding 5° C., or not more than 2 years if the product is kept constantly at a temperature not exceeding 0° C.

ADDITIONAL STANDARDS: TRIVALENT ORGANIC ARSENICALS

§ 73.90 *Tests prior to release.* Tests required to be made, prior to the release of each lot of a licensed product, shall be supplemented in the case of the trivalent organic arsenicals by tests for:

(a) Stability,
(b) Solubility,
(c) Arsenic content,
(d) Moisture,
(e) Relative non-toxicity.

§ 73.91 *Pre-testing by Institute; sample of each lot.* Prior to the release of any lot of the product, the manufacturer shall forward to the Institute no less than 15 ampoules of the largest single-dose size in such lot, together with protocols showing the results of each test required prior to release.

§ 73.92 *Expiration date.* Notification from the Institute that lot samples forwarded in accordance with § 73.91 have satisfactorily passed prescribed tests shall indicate a date which may be taken as the date of manufacture for the purpose of fixing the expiration date. The date of issue shall be the same as the date of manufacture.

§ 73.93 *Composition of product.* Solutions or solutions of mixtures in the concentrations recommended for clinical administration shall be of such hydrogen ion value and tonicity as to be physiologically compatible with human blood.

§ 73.94 *Container.* The product shall be hermetically sealed under vacuum or under a dry non-oxidizing gas in ampoules prepared from glass of the quality prescribed in § 73.75. The contents of any final container shall not exceed 10 maximum human doses.

§ 73.95 *Final container label.* In addition to the labeling requirements stated in § 73.50 the final container label of the trivalent organic arsenicals shall bear the statements required in § 73.96 (b) and (c) and an additional statement giving the amount of the drug contained in the ampoule.

§ 73.96 *Outside label.* The outside label, in addition to the complete proper name and all other items required for products generally shall show conspicuously: (a) If the product is dispensed as a mixture or solution, the name of all admixed substances,

(b) If the ampoule is a multiple dose container, the fact that it is a multiple dose container,

(c) Specific method of preparation, if any, required prior to administration, as, for example, alkalinization.

ADDITIONAL STANDARDS: POLIOMYELITIS VACCINE

§ 73.100 *The product*—(a) *Proper name and definition.* For the purpose of section 351 (a) (2) of the act and § 73.1 (j), the proper name of this product shall be "Poliomyelitis Vaccine", which shall consist of an aqueous preparation of poliomyelitis viruses types 1, 2, and 3, grown in monkey kidney tissue cultures, inactivated by a suitable method, and combined in equal proportions with a tolerance of five percent of the total volume, applied to one or more of the three components.

(b) *Strains of virus.* Strains of poliomyelitis virus used in the production of vaccine shall be identified by historical records, infectivity tests and immunological methods. Any strain of virus may be used that produces a vaccine meeting the safety and potency requirements of §§ 73.101, 73.102 and 73.103, but the Surgeon General may from time to time prohibit the use of any specific strain whenever he finds that it is practicable to use another strain of the same type that is potentially less pathogenic to

man and that will produce a vaccine of equivalent safety and potency.

(c) *Monkeys.* Only cynomolgus or rhesus monkeys, or other species of equal suitability, in overt good health that have reacted negatively to tuberculin within two weeks prior to use, shall be used as the source of kidney tissue for the production of virus. Each animal shall be examined at necropsy under the supervision of a qualified pathologist for gross signs of disease and, if there is any gross pathological lesion of significance to their use in the preparation of the vaccine, the kidneys shall be discarded. Kidney tissue from monkeys that have been used previously for experimental purposes shall not be used, except that monkeys in overt good health, used for the safety or potency tests with negative clinical findings (§§ 73.102 and 73.103) that have reacted negatively to tuberculin prior to such test, may be used within two weeks of the end of the test period.

§ 73.101 *Production of poliomyelitis vaccine*—(a) *Cultivation of virus.* Virus for preparing vaccine shall be grown with aseptic techniques in monkey kidney cell tissue cultures. Suitable antibiotics in the minimum concentration required may be used. If penicillin is used, not more than 200 units per milliliter may be added.

(b) *Filtration.* Within 72 hours preceding the beginning of inactivation, the virus suspensions shall be filtered or clarified by a method having an efficiency equivalent to that of filtration through an S1 Seitz type filter pad.

(c) *Virus titer.* The 50 percent end-point ($TCID_{50}$) of the virus fluids after filtration shall be 10^{-6} or greater as confirmed by comparison in a simultaneous test (using groups of 10 tubes at 1 log steps or groups of 5 tubes at 0.5 log steps) with a reference virus distributed by the National Institutes of Health. Acceptable titrations of the reference virus shall not vary more than ±10-fold from its labeled titer using 0.5 milliliter inoculum in tissue culture.

(d) *Inactivation of virus.* The virus shall be inactivated, as evidenced by the tests prescribed in § 73.102, through the use of an agent or method which has been demonstrated to the satisfaction of the Surgeon General to be consistently effective in the hands of the manufacturer in inactivating a series of lots of poliomyelitis virus. If formaldehyde is used for inactivation, it shall be added to the virus suspension to a final concentration of U. S. P. solution of formaldehyde of 1:4000, and the inactivation conducted under controlled conditions of pH and time, at a temperature of 36 to 38° C. Three or more virus titers, suitably spaced to indicate rate of inactivation, shall be determined during the inactivation process. Filtration equivalent to that described in paragraph (b) of this section shall be performed after the estimated base-line time (time at which the 50 percent end-point reaches 10°), but prior to sampling for the first single strain tissue culture test required in § 73.102 (b).

(e) *Additional processing.* Single strain or trivalent pools that have failed to pass safety tests prescribed in § 73.102 (b), (c), or (e) may be treated as follows:

(1) Filtration of clarification by a method having an efficiency equivalent to that of filtration through an S1 Seitz type filter pad.

(2) Negative tests performed as described in § 73.102 (b) and (c) must be obtained on each of two successive samples taken so as to be separated by an interval of at least three days while the material is being subjected to treatment with 1:4000 U. S. P. formaldehyde solution and heat at 36°–38° C. The first sample may be taken before incubation is begun and the second sample is to be taken after the incubation of at least 3 days is completed. In the case of single strain pools, the volume tested for each tissue culture safety test shall be at least 500 milliliters and in the case of trivalent pools, at least 1,500 milliliters.

(3) Pools which are positive following such additional processing shall not be used for the preparation of poliomyelitis vaccine.

(f) *Supplemental inactivation.* Supplemental inactivation employing a method capable of reducing the titer of a similarly produced virus suspension by a factor of 10^{-6} may be applied at any point after the filtration step described in paragraph (d) or (e) (1) of this section.

§ 73.102 *Tests for safety.* In the preparation of the product, the following tests relating to safety shall be conducted by the manufacturer.

(a) *The virus pool.* Prior to inactivation each virus pool shall be tested for the presence of B virus and Mycobacterium tuberculosis by suitable animal and culture methods.

(b) *Single strain pool tissue culture tests for poliomyelitis virus.* (1) During inactivation, before pooling to make the final poliomyelitis vaccine, each monovalent bulk strain pool shall be tested for the presence of virus by tissue culture methods. Two samples separated by an interval of at least three days during inactivation at 36°–38° C. shall be tested.

(2) No less than 500 milliliters of each sample shall be subjected to the complete testing process and each test shall be performed on a different monkey kidney tissue culture cell preparation. Each sample shall be inoculated into five or more tissue culture bottles of a suitable capacity, the ratio of the vaccine to the nutrient fluid being approximately 1:1 to 1:3, and the area of the surface growth of cells being at least 3 square centimeters per milliliter of vaccine. The tissue culture bottles shall be observed at least 14 days.

(3) A first subculture shall be made at the end of seven days from date of inoculation by planting at least 2 percent of the volume from each original bottle into suitable tissue culture containers, followed by refeeding.

(4) A second subculture shall be made from each original bottle in the same manner at the end of 14 days from date of inoculation.

(5) The first and second subcultures shall be each observed for at least seven days.

(6) If cytopathogenic effects occur either in the original bottles of the two tests or in the subcultures from them, or if cellular degeneration appears in the original bottles or in the subcultures before degeneration occurs in uninoculated cultures, the pool shall be held until the matter is resolved. If active poliomyelitis virus is indicated, the strain pool shall not be used for inclusion in a final vaccine unless effectively reprocessed as described in § 73.101 (e). If other viruses are present, the pool shall not be used unless it can be demonstrated that such viruses have originated from other than the strain pool being tested.

(c) *Trivalent vaccine pool tissue culture test.* No less than 1,500 milliliters of the trivalent vaccine pool, without final preservative, prepared by pooling the three type pools, each of which has passed all tests described in paragraph (b) of this section, shall be subjected to the complete tissue culture test prescribed in such paragraph in at least two approximately equal tests in separate monkey kidney tissue culture preparations.

(d) *Trivalent vaccine pool lymphocytic choriomeningitis test.* The final vaccine shall be shown to be free of lymphocytic choriomeningitis virus by intracerebral inoculation into 10 or more mice which shall be observed daily for at least 21 days and a negative test shall not be valid unless at least 8 mice survive for this period.

(e) *Final vaccine test for active virus in monkeys.* (1) Vaccine from a sufficient number of final containers selected at random from each filling of each lot shall be pooled to provide a test sample of at least 100 milliliters representing the filling.

(2) Where the number of fillings in a lot is four or more, a test sample from each filling shall be inoculated into a group of five or more monkeys. Where the number of fillings in a lot is less than four, test samples from the several fillings shall be inoculated into a total of not less than twenty monkeys. A preinjection serum sample must contain no neutralizing antibody against the three poliomyelitis virus types in a dilution of 1:4 when tested against not more than 1,000 $TCID_{50}$ doses of virus. At least 80 percent of the test animals representing each filling must survive the test period without significant weight loss, except that if at least 60 percent of the test animals survive the first 48 hours after injection, those animals which do not survive this 48 hour period may be replaced by an equal number of test animals. If less than 60 percent of the test animals survive the first 48 hours, or if less than 80 percent of the animals representing each filling survive the test period without significant weight loss, the test must be repeated.

(3) Vaccine is injected by combined intracerebral, intraspinal, and intramuscular routes into rhesus or cynomolgus monkeys in overt good health, under deep barbiturate anesthesia. The intracerebral injection consists of 0.5 milliliter

into the thalamic region of each hemisphere. The intraspinal injection consists of 0.5 milliliter into the lumbar spinal cord enlargement. The intramuscular injection consists of 1.0 milliliter into the right leg muscles. At the same time, an injection of 200 milligrams of cortisone acetate is given into the left leg muscles, and 1.0 milliliter of procaine penicillin (300,000 units) into the right arm muscles. The monkeys are observed for 17 to 19 days and symptoms suggestive of poliomyelitis are recorded.

(4) At the end of the observation period, samples of nervous tissue are taken for virus recovery and identification. Histological sections are prepared from both spinal cord enlargements and examined.

(5) The monkeys inoculated as described in § 73.103 (a) are sacrificed at the time of collection of the final serum samples described in § 73.103 (b). Histological sections are prepared from both spinal cord enlargements and examined.

(6) Doubtful histopathological findings necessitate (i) examination of a sample of sections from several regions of the brain in question, and (ii) attempts at virus recovery from the nervous tissues previously removed from the animal. The test is considered negative if the histological and other studies leave no doubt that poliomyelitis infection did not occur.

§ 73.103 *Potency test.* Each lot of vaccine shall be subject to a potency test which permits an estimation of the antigenic capacity of the vaccine. This is done by means of a simultaneous comparison of the antibody levels produced in monkeys by the vaccine under test with the antibody levels of reference serums distributed by the National Institutes of Health. The potency test shall be performed on samples taken after final processing of the trivalent pool including addition of preservative, and shall be conducted as follows:

(a) *Inoculation of monkeys.* A group of 12 or more rhesus or cynomolgus monkeys shall be used. Animals shall weigh between 4 and 8 pounds and shall be in overt good health. Animals that become ill and then remain ill during the course of immunization shall be excluded from the group. The test shall not be valid unless at least 8 survive the test period. The test vaccine shall be given intramuscularly to each monkey in 3 doses of 1.0 milliliter each at seven day intervals. Only undiluted vaccine shall be used. The initial intramuscular injection is accompanied by the intracerebral injection of 0.5 milliliter into the thalamic region of each hemisphere.

(b) *Serum samples.* A blood sample shall be taken from each monkey prior to vaccination and then again 7 days after the last injection. Serum shall be separated aseptically, and stored under refrigeration.

(c) *Serum-virus neutralization test.* The titers of individual monkey serums shall be determined in comparison with N. I. H. reference serums in tests designed to include controls for all the variables of significance including the following:

(1) Serum toxicity control;

(2) Cell control and cell titration;

(3) Virus titration control (at least 4 tubes/dilution at 1/2 log steps); and

(4) Serum controls using type-specific serums to identify the type of virus used in the neutralization test.

(d) *Interpretation of the test.* Animals showing preinoculation titers of 1/4 or over when tested against not more than 1,000 $TCID_{50}$ of virus, shall be excluded from the test. The geometric mean titer of antibody induced in the monkeys surviving the course of immunization and bleeding, shall be calculated. A comparison of the value so obtained shall be made with the values for the reference serums that were tested simultaneously and expressed as ratios between the mean titer values of the serums under test and the mean titer value of the reference serums.

(e) *Potency requirements.* A lot of vaccine tested against National Institutes of Health reference serums IIA, IIA 1/4, and IIA 1/16 shall be satisfactory if the geometric mean value of the group of individual monkey serums representing the lot of vaccine tested is at least 0.86 times the geometric mean value of the three reference serums for type 1, at least 0.75 times for type 2, and at least 0.48 times for type 3. In applying the foregoing requirements, a variation of 66⅔ percent is acceptable.

§ 73.104 *General requirements*—(a) *Final container tests.* Tests shall be made on final containers for identity, safety, and sterility in accordance with §73.70. In addition, the lot shall not be released unless the test for the presence of living poliomyelitis virus described in § 73.102 (e) is negative.

(b) *Extraneous protein.* Extraneous protein, capable of producing allergenic effects on injection into human subjects, shall not be added to the final virus production medium. If animal serum is used at any stage, its calculated concentration in the final medium shall not exceed 1:1,000,000.

(c) *Dose.* These additional standards are based on a human dose of 1.0 milliliter for a single injection and a total human immunizing dose of three injections of 1.0 milliliter given at appropriate intervals.

(d) *Labeling.* In addition to compliance with the requirements of §§ 73.50 to 73.55, inclusive, the label or the package enclosure shall include an appropriate statement indicating the type and amounts of antibiotics added, if any. The preservative used shall be stated on the label, as well as allergenic substances added, if any, and the source, composition and method of inactivation of the viruses.

(e) *Dating.* The expiration date shall not be more than six months after the date of manufacture or the date of issue. The date of issue shall not be more than three months after the date of manufacture as defined in § 73.78 (c).

(f) *Requirements for samples and reports.* For each lot of vaccine, the following material shall be submitted to the Division of Biologics Standards, National Institutes of Health, Bethesda 14, Maryland:

(1) A 2,500 milliliter sample, neutralized, not dialyzed, and without final preservative, taken at the latest possible stage of production before the addition of such preservative.

(2) A 200 milliliter bulk sample of the final vaccine containing final preservative.

(3) A total of not less than 200 milliliter sample of the final vaccine in final labeled containers.

(4) Protocols showing the history of the lot and the results of the tests prescribed in these additional standards.

§ 73.105 *Equivalent methods.* Modification of any particular manufacturing method or process or the conditions under which it is conducted as set forth in the additional standards relating to poliomyelitis vaccine (§§ 73.100 to 73.104, inclusive) shall be permitted whenever the manufacturer presents evidence to demonstrate that such modification will provide equal or greater assurances of the safety, purity and potency of the vaccine as the assurances provided by such standards, and the Surgeon General so finds and makes such finding a matter of official record.

4. The additional standards relating to poliomyelitis vaccine (§§ 73.100 to 73.105, inclusive) shall be applicable to all virus pools and vaccine in process on the date of publication of these amendments in the FEDERAL REGISTER and thereafter: *Provided, however,* That compliance with any test, method or procedure otherwise required by such additional standards shall be waived as to such material to the extent the Surgeon General of the Public Health Service determines (i) that the production or processing of such material has proceeded to a stage at which it is impossible to comply with any such requirement, and (ii) that the manufacturer has provided evidence satisfactory to the Surgeon General of the use of tests, methods or procedures equivalent to such requirements in assuring the safety, purity and potency of the vaccine.

Subchapter G—Water Pollution Control; Hearing Procedures

PART 81—PUBLIC HEARINGS UNDER THE WATER POLLUTION CONTROL ACT OF 1948

Sec.

81.1 Applicability.
81.2 Definitions.
81.3 Initiation of proceedings for public hearing; appointment of Board.
81.4 Organization and general procedures of the Board.
81.5 Notice of hearing.
81.6 Service.
81.7 Publication of notice.
81.8 Parties.
81.9 Pre-hearing procedures.
81.10 Presentation of evidence by the Surgeon General.
81.11 Hearing procedure.
81.12 Records of proceedings.
81.13 Oral and written arguments.
81.14 Final findings and recommendations.

AUTHORITY: §§ 81.1 to 81.14 issued under sec. 9, 62 Stat. 1160, as amended, sec. 10, 70 Stat. 506; 33 U. S. C. 466h, 466l. Interpret or apply sec. 5, 70 Stat. 507.

§ 81.1 *Applicability.* The provisions of this part apply only to proceedings arising out of any discharge or discharges causing or contributing to water pollution with respect to which the actions by

the Surgeon General prescribed under paragraph (2) of section 2 (d) of the Water Pollution Control Act as in effect prior to the enactment of the Water Pollution Control Act Amendments of 1956 (70 Stat. 498) on July 9, 1956, have already been completed prior to such enactment. This does not, however, prevent action with respect to any such pollution under and in accordance with the provisions of the Federal Water Pollution Control Act (70 Stat. 498).

§ 81.2 *Definitions.* As used in this part:

(a) "Act" means the Water Pollution Control Act (62 Stat. 1155 et seq., 33 U. S. C. 466–466j) as in effect prior to the enactment of the Water Pollution Control Act Amendments of 1956 (70 Stat. 498).

(b) "Board" means the board appointed by the Secretary pursuant to section 2 (d) (3) of the act (33 U. S. C. 466a (d) (3)).

(c) "Department" means the Department of Health, Education, and Welfare.

(d) "Pollution" means any pollution declared to be subject to abatement by section 2 (d) (1) of the act (33 U. S. C. 466a (d) (1)).

(e) "Secretary" means the Secretary of Health, Education, and Welfare.

(f) "Surgeon General" means the Surgeon General of the Public Health Service.

(g) The definitions of terms contained in section 2d (8) and section 10 of the act (33 U. S. C. 466a (d) (8), 466i) shall be applicable to such terms unless the context otherwise requires.

§ 81.3 *Initiation of proceedings for public hearing; appointment of Board.* (a) In any case where the Surgeon General finds that the conditions precedent to the calling of a public hearing under the act exist, he shall so report to the Secretary together with his recommendation as to further action. If it then appears to the Secretary that a public hearing would contribute to the abatement of the pollution, he will call such a hearing, and may either fix the time and place thereof, or authorize the Surgeon General to do so.

(b) Prior to the hearing, the Secretary will appoint a hearing board of five or more persons, as provided in the act, and may designate one of the members as chairman. The Secretary may thereafter revoke appointments to the Board, or the designation of one of its members as chairman and may fill any vacancy in the membership of the Board, or in the office of chairman.

§ 81.4 *Organization and general procedures of the Board.* (a) The Board shall convene for hearing sessions and for such other meetings as may be necessary.

(b) The chairman designated by the Secretary shall preside at all hearing sessions. In case of the absence or incapacity of the chairman, the Board may elect from its members an acting chairman to preside and perform the duties of the chairman.

(c) The hearing shall be conducted by the Board in an informal but orderly manner in accordance with this part. A quorum of the Board for the purpose of the hearing shall consist of not less than five members and not less than a majority of such members shall be persons other than officers and employees of the Department. Questions of procedure during a hearing shall be determined by majority vote of the members present.

(d) The Board shall have the power to rule upon offers of proof and the admissibility of evidence, to receive relevant evidence, to examine witnesses, to regulate the course of the hearing, to change the time and place of the hearing or any of its sessions upon reasonable notice to the parties, and to hold conferences for the settlement or simplification of issues.

(e) The Board may authorize the chairman on its behalf to execute, issue or serve such notices, reports, communications, and other documents relating to the functions of the Board as it may deem proper.

(f) The Surgeon General shall provide for the Board such clerical and technical assistance as may be necessary.

(g) The Board shall designate a secretary, from personnel provided by the Surgeon General, who shall maintain and have custody of all official records and other documents pertaining to the functions of the Board, and shall perform such other duties as the Board may prescribe.

§ 81.5 *Notice of hearing.* (a) The Surgeon General shall issue and serve notice of hearing as herein provided and, if the time and place of the hearing have not been fixed by the Secretary, shall fix such time and place.

(b) The notice of hearing shall identify the person or persons discharging any matter causing or contributing to the pollution, and briefly describe the nature of the discharge or discharges and the interstate waters affected thereby. The notice shall include the names of the persons constituting the Board before whom the hearing will be held upon a day and at a time and place specified not earlier than thirty (30) days after the service of the notice.

(c) Notice of hearing shall be served on the following:

(1) Each person named in the notice as discharging any matter causing or contributing to pollution and the water pollution agency or interstate agency, to whom notice or advice, as the case may be, of such pollution has previously been given in accordance with the act.

(2) The water pollution agency or the interstate agency of the State or States, other than that in which the discharge originates, adversely affected by such pollution.

§ 81.6 *Service.* Notice of hearing, findings, conclusions and recommendations of the Board, and any other documents relating to the functions of the Board, may be served by mailing a copy thereof addressed to each person or agency to be served at their respective residences, offices or places of business as ascertained by the Surgeon General or the Board, as the case may be.

§ 81.7 *Publication of notice.* Notice of the public hearing shall be published in the FEDERAL REGISTER at least thirty (30) days prior to the hearing.

§ 81.8 *Parties.* (a) The parties to a hearing shall include the persons and agencies specified in § 81.5 (c).

(b) The Surgeon General shall have all the rights of a party to the hearing.

(c) Upon application and good cause shown, the Board may permit any interested person or agency to appear before it and be admitted as a party to such extent and upon such terms as the Board shall determine proper.

(d) Any party may appear in person or by counsel.

(e) The failure of any party to file an appearance or appear at the hearing in response to the notice of hearing shall not delay the hearing and the Board may proceed, hear and receive evidence and take other appropriate action affecting such party.

§ 81.9 *Prehearing procedures.* (a) Upon request made to the Board within fifteen (15) days after the service of the notice of hearing, any party shall be afforded an opportunity for the submission of facts, arguments, or proposals to secure abatement of the pollution where time, the nature of the proceeding, and the public interest permit, and due consideration shall be given the same by the Board. Such submission shall be in writing. The filing of such request shall not operate to delay the hearing.

(b) The Board may, at any time, prior to the conclusion of the hearing, on its own initiative or at the request of any party, call a conference with any or all parties to consider:

(1) The simplification of the issues,

(2) The possibility of obtaining stipulations, admissions of facts, and documents,

(3) The limitation of the number of expert witnesses,

(4) The scheduling of witnesses,

(5) Proposals to abate the pollution by reasonable and equitable measures, and

(6) Such other matters as may aid in the conduct of the hearing or the determination of the issues.

(c) Any prehearing or other conferences may be held with the full Board, with one or more of its members or with one or more other persons, as the Board may direct.

§ 81.10 *Presentation of evidence by the Surgeon General.* The Surgeon General shall arrange for the presentation of evidence concerning the pollution, the person or persons discharging any matter causing or contributing to the pollution and remedial measures, if any, recommended by him.

§ 81.11 *Hearing procedure.* (a) Each witness shall, before testifying, be sworn or make affirmation.

(b) When necessary, in order to prevent undue prolongation of the hearing, the Board may limit the number of times any witness may testify, the repetitious examination or cross-examination of witnesses or the amount of corroborative or cumulative testimony.

(c) The Board shall exclude irrelevant, immaterial or unduly repetitious evidence.

(d) Every party shall have the right to cross-examination, presentation of evidence, objection, argument and other fundamental rights.

(e) Rulings of the chairman on the receipt of evidence and other questions relating to the procedure of the hearing may be appealed to the Board.

§ 81.12 *Record of proceedings.* (a) Testimony given and other proceedings had at a hearing shall be reported verbatim by a reporter. A transcript of such report shall be a part of the record and the sole official transcript of the proceedings.

(b) All written statements, charts, tabulations and similar data offered in evidence at the hearing shall be marked for identification and upon a showing satisfactory to the Board of their authenticity, relevancy and materiality shall be received in evidence and shall constitute a part of the record.

(c) Where the testimony of a witness refers to a statute, or a report or document, the Board shall, after satisfying itself of identification of such statute, report or document, determine whether the same shall be produced at the hearing and physically be made a part of the record or shall be incorporated in the record by reference.

(d) The Board may take official notice of statutes of the United States or of any State and of duly promulgated regulations of any Federal agency.

(e) The Board may take official notice of a material fact not appearing in the evidence in the record, but any party, prior to the conclusion of the hearing, shall be afforded an opportunity to show the contrary.

§ 81.13 *Oral and written arguments.* (a) Oral argument shall be permitted in the discretion of the Board, and shall be reported as part of the record unless otherwise ordered by the Board.

(b) The Board shall announce at the hearing a reasonable period within which parties and other interested persons may submit (1) written arguments, and (2) proposed findings, conclusions and recommendations for the abatement of the pollution together with supporting reasons therefor. Such material shall be submitted in such number of copies as the Board may direct and shall be based solely upon the evidence presented at the hearing, citing the pages of the transcript of the testimony or of properly identified exhibits where such evidence occurs.

§ 81.14 *Final findings and recommendations.* (a) After consideration of the whole record, and all proposed findings, conclusions and recommendations, the Board shall make its final findings, conclusions and recommendations, if any, based on the evidence presented at the hearing, and submit the same to the Secretary.

(b) Upon submission of such findings, conclusions and recommendations, the Board shall be terminated and all records pertaining to its functions transferred to the custody of the Surgeon General.

(c) A copy of the findings, conclusions, and recommendations, if any, of the Board shall be served on all parties to the hearing by the Secretary.

[F. R. Doc. 56-10199; Filed, Dec. 11, 1956; 8:52 a. m.]

TITLE 12—BANKS AND BANKING

Chapter II—Federal Reserve System

Subchapter A—Board of Governors of the Federal Reserve System

[Reg. K]

PART 211—CORPORATIONS DOING FOREIGN BANKING OR OTHER FOREIGN FINANCING UNDER THE FEDERAL RESERVE ACT

1. Effective January 15, 1957, Part 211 is revised to read as follows:

Sec.
211.1 Scope and application of this part.
211.2 Definitions.
211.3 Organization, corporate structure and ownership.
211.4 Banking Corporations and Financing Corporations.
211.5 Operations abroad.
211.6 Limited operations in the United States.
211.7 Acceptances by Banking Corporations.
211.8 Issue of obligations by Financing Corporations.
211.9 Investments in stock of other corporations.
211.10 General limitations and restrictions.
211.11 Corporations with agreements under section 25 of the Federal Reserve Act.

AUTHORITY: §§ 211.1 to 211.11 issued under sec. 11(i), 38 Stat. 262; 12 U. S. C. 248(i). Interpret or apply 39 Stat. 755, as amended, 41 Stat. 378, as amended; 12 U. S. C. 601-603, 611-631.

§ 211.1 *Scope and application of this part.* This part is issued by the Board of Governors of the Federal Reserve System (hereinafter called the "Board of Governors") under authority of the Federal Reserve Act. It applies to corporations organized under section 25 (a) of that act (U. S. C., title 12, secs. 611-631) for the purpose of engaging in international or foreign banking or other international or foreign financial operations, and to the extent specified in § 211.11, to corporations having an agreement or undertaking with the Board of Governors under section 25 of the act (U. S. C., title 12, secs. 601-604).

§ 211.2 *Definitions.* For the purpose of this part, unless the context otherwise requires—

(a) "Corporation" when spelled with a capital "C" means a corporation organized under section 25 (a) of the Federal Reserve Act.

(b) "Banking" means the business of receiving or paying out deposits, or accepting drafts or bills of exchange.

(c) "Banking Corporation" means a Corporation which is engaged in banking.

(d) "Financing Corporation" means a Corporation which is not engaged in banking except to the extent that it is required by the Secretary of the Treasury to act as fiscal agent of the United States. A Corporation in existence on July 1, 1955 is a Banking Corporation if it was engaged in banking on that date, or a Financing Corporation if not so engaged on that date.

(e) "Abroad" means in one or more foreign countries or dependencies or insular possessions of the United States.

(f) "Goods" includes wares, merchandise, commodities and any other tangible personal property (other than money).

(g) "Person" includes any individual, and any corporation, partnership, association or other similar organization.

(h) "Affiliated" when used with respect to two persons means that, directly or indirectly, either one controls, is controlled by, or is under common control with, the other.

(i) "Capital and Surplus" means (1) paid in and unimpaired capital and (2) surplus.

§ 211.3 *Organization, corporate structure and ownership*—(a) *Articles of association and organization certificate.* Any number of natural persons, not less than five, desiring to organize a corporation under section 25 (a) of the Federal Reserve Act shall (1) enter into articles of association (see Form F. R. 151,[1] which is suggested as a satisfactory form of articles of association); (2) make an organization certificate on Form F. R. 152;[1] and (3) forward the articles of association and the organization certificate to the Board of Governors. The articles of association shall specify in general terms the objects for which the Corporation is formed, and may contain any other provisions not inconsistent with law which the Corporation may see fit to adopt for the regulation of its business and the conduct of its affairs. Each person intending to participate in the organization of the Corporation shall sign the articles of association and the organization certificate and shall acknowledge the execution of the latter before a judge of some court of record or notary public, who shall certify thereto under the seal of such court or notary.

(b) *Name.* The name of the Corporation is subject to the approval of the Board of Governors, and a preliminary application for that approval may be filed with the Board of Governors on Form F. R. 150.[1] The name shall in no case resemble the name of any other corporation to the extent that it might result in misleading or deceiving the public as to its identity, purpose, connections or affiliations, and in the case of an application with respect to a Financing Corporation the name shall also comply with § 211.10 (c) (2). The name of any Corporation hereafter organized shall so far as practicable indicate the nature of the business contemplated, and shall include the word "international", "foreign", "overseas", or some similar word. No Financing Corporation hereafter organized will be permitted to have the word "bank" or "banking", or any similar word, as part of its name.

(c) *Authority to commence business.* After the articles of association and organization certificate have been filed with and approved by, and a preliminary

[1] Filed as part of original document. Copies available upon request to Federal Reserve System, Washington 25, D. C.

permit to begin business has been issued by, the Board of Governors, the association shall become and be a body corporate, but none of its powers, except such as are incidental and preliminary to its organization, shall be exercised until the Board of Governors has issued to it a final permit to commence business. Before the Board of Governors will issue its final permit to commence business, the president, cashier or secretary, together with at least three of the directors, must certify (1) that each director is a citizen of the United States; (2) that a majority of the shares of capital stock is held and owned by citizens of the United States, by corporations the controlling interest in which is owned by citizens of the United States, chartered under the laws of the United States or of a State of the United States, or by firms or companies the controlling interest in which is owned by citizens of the United States; and (3) that of the authorized capital stock specified in the articles of association at least 25 per cent has been paid in in cash and that each shareholder has individually paid in in cash at least 25 percent of his stock subscription. Thereafter the cashier or secretary shall certify to the payment of the remaining installments as and when each is paid in, in accordance with law.

(d) *Amendments to articles of association.* The articles of association may contain provisions relative to the procedure whereby amendments thereof may be effected in any manner not inconsistent with section 25 (a) of the Federal Reserve Act, other applicable law, and this part. No amendment of the articles of association shall become effective unless and until it shall have been approved by the Board of Governors.

(e) *General requirements as to capital stock.* No Corporation may be organized under section 25 (a) with capital stock of less than $2,000,000. The par value of each share of stock shall be specified in the articles of association, and no Corporation will be permitted to issue stock of no par value. If there is more than one class of stock, the name and amount of each class and the obligations, rights, and privileges attaching thereto shall be set forth fully in the articles of association. Each class of stock shall be so named, or so described in the stock certificates by which it is represented, as to indicate as clearly as possible its character and any unusual attributes.

(f) *Citizenship of shareholders.* (1) In order to insure compliance at all times with the requirements of section 25 (a) of the Federal Reserve Act relating to the United States citizenship of those who hold, own, or control a majority of the shares of capital stock of a Corporation, such stock shall be issuable and transferable only on the books of the Corporation, and no issue or transfer of stock which would cause a violation of such requirements of law or of related provisions of this part shall be made upon the books of the Corporation. The board of directors of the Corporation, acting directly or through an agent, may, before making any issue or transfer of stock, require such evidence as in their discretion they may think necessary in order to determine whether or not the issue or transfer of the stock would result in such a violation. The decision of the board of directors in each such case shall be final and conclusive as to, and not subject to question by, any person.

(2) If at any time a change in the status of the holder of any shares of a Corporation causes a violation of the requirements of section 25 (a) of the Federal Reserve Act relating to the United States citizenship of those who hold, own, or control a majority of the shares of capital stock of a Corporation, the board of directors shall, when apprised of that fact, forthwith serve on the holder of the shares in question a notice in writing requiring such holder within two months to transfer such shares to a person then eligible to acquire such shares. When such notice has been given by the board of directors, the shares of stock so held shall cease to confer any right to vote or to participate in dividends thereafter declared; and the right to vote and to receive dividends shall resume only after, and only with respect to votes cast and dividends declared after, the shares have been transferred as required above. If on the expiration of two months after such notice the shares shall not have been so transferred, the shares shall promptly be sold at public or private sale by the Corporation, as agent for and for the account of the ineligible holder, to a person then eligible to acquire such shares. In the event such shares cannot be sold for a reasonable price and within a reasonable time at such a public or private sale, the shares will, with the approval of the Board of Governors, be forfeited to the Corporation.

(3) The board of directors shall prescribe in the by-laws of the Corporation appropriate rules for the registration of the shares of stock in accordance with the terms of the law and this part. The certificates of stock issued by the Corporation shall contain provisions sufficient to put the holder on notice of the terms of the law and regulations defining the limitations upon the rights of ownership and transfer.

§ 211.4 *Banking Corporations and Financing Corporations.* A Banking Corporation (a) shall not issue or have outstanding any debentures, bonds, promissory notes or similar obligations except promissory notes due within one year evidencing borrowing from banks or bankers, and (b) shall not engage in the business of issuing, underwriting, selling or distributing securities, except to such limited extent as the Board of Governors may, upon application of the Corporation, exempt activities of the Corporation's branch or agency in a foreign country with respect to obligations of, or obligations unconditionally guaranteed as to principal and interest by, the national government of such country. A Financing Corporation shall not engage in banking except to the extent that it is required by the Secretary of the Treasury to act as fiscal agent of the United States. The Board of Governors may grant permission, subject to such conditions as it may prescribe, for a Banking Corporation to change to a Financing Corporation, or for the reverse.

§ 211.5 *Operations abroad*—(a) *General.* Except as otherwise provided by law or by this part, a Corporation may exercise abroad, through branches or agencies established with the approval of the Board of Governors or through correspondents or other agents, not only the powers specifically set forth in the law or by this part and those incidental thereto, but also such powers as may be usual in the determination of the Board of Governors in connection with the transaction of banking in the case of a Banking Corporation, or other financial operations in the case of a Financing Corporation, in the place in which the Corporation is transacting business. As indicated in § 211.6 (e) (2), the activities of a Financing Corporation abroad are limited by the requirement that it shall not, by its activities abroad, engage or participate, directly or indirectly, in certain activities in the United States.

(b) *Branches.* With the prior approval of the Board of Governors, a Corporation may establish branches or agencies abroad.

§ 211.6 *Limited operations in the United States*—(a) *General.* A Corporation shall not carry on any part of its business in the United States except such as shall be incidental to its international or foreign business. It may not engage in the United States in the business of acting as trustee or in a like fiduciary capacity, or act in the United States as registrar or in any similar capacity with respect to the servicing in the United States of any security issue distributed therein; but it may act as paying agent in the United States with respect to securities issued by a "foreign state" as defined in section 25 (b) of the Federal Reserve Act or by a corporation chartered by such a foreign state and not qualified under the laws of the United States or any State (or the District of Columbia) to do business in the United States. A Corporation may not establish any branch in the United States, but with the prior approval of the Board of Governors may establish agencies in the United States for specific purposes, but not generally to carry on the business of the Corporation. Funds of a Corporation not currently employed in the international or foreign business of the Corporation in accordance with other provisions of this part, if held or invested in the United States, shall be only in the form of (1) cash, (2) deposits with banks, (3) bankers' acceptances or prime open market commercial paper, or (4) direct obligations of the United States or other investment securities of such kinds, and in such amounts, as the Corporation could purchase within the limitations of section 5136 of the Revised Statutes (U. S. C., title 12, sec. 24) if it were a member bank of the Federal Reserve System. Subject to the other provisions of this part, succeeding paragraphs of this section indicate generally the kinds of transactions by a Corporation which may be considered appropriate in the United States.

(b) *Receipt of deposits in United States by Banking Corporations.* (1) A Banking Corporation may receive only such deposits within the United States as may be incidental to or for the purpose of carrying out transactions abroad. Such deposits may be either time or demand, and shall be subject to all the requirements of Part 217 of this chapter (Reg. Q) (which relates to the payment of interest on deposits and related matters) in the same manner as if the Corporation were a member bank of the Federal Reserve System; but no such deposit shall be a "savings deposit" as defined in said Part 217 of this chapter. If a Banking Corporation receives deposits in the United States, it shall maintain reserves against such deposits in the same manner and amount (but in no event less in the aggregate than 10 percent of such deposits) as if it were a member bank of the Federal Reserve System, and shall in like manner submit reports of deposits and be subject to all the requirements of Part 204 of this chapter (Reg. D) (which relates to reserves of member banks).

(2) A deposit received in the United States by a Banking Corporation from a foreign depositor will ordinarily be considered incidental to or for the purpose of carrying out transactions abroad provided the deposit is not to be used to make payments for expenses in the United States of a United States office or representative and in addition the deposit (i) is to be used to make payments for transactions abroad, for goods exported or imported, for other direct costs of export or import, or for carrying out transactions with the Corporation under paragraph (c) or (d) of this section; or (ii) is to be held for reserve or working balance purposes, except that a Banking Corporation shall not receive funds to be held in the United States as time deposits solely for purposes of safekeeping or investment and unrelated to other international or foreign business of the depositor with the Corporation. As used in this paragraph "foreign depositor" means a foreign government, a person conducting business principally at the person's offices or establishment abroad, or a foreign national resident abroad.

(3) A deposit received in the United States by a Banking Corporation from a depositor who is not a foreign depositor will ordinarily be considered incidental to or for the purpose of carrying out transactions abroad provided the deposit is not to be used to make payments for expenses in the United States of a United States office or representative and in addition the deposit (i) is for transmission to a place abroad; or (ii) is to provide collateral or payment for extensions of credit by the Corporation; or (iii) represents proceeds of collections abroad which are to be used to make payments for goods exported or imported or for other direct costs of export or import, or periodically transferred to the depositor's account at another bank; or (iv) represents proceeds of extensions of credit by the Corporation which are to be used for the purposes of the credit extension or to be periodically transferred to the depositor's account at another bank.

(c) *Extensions of credit in United States by Banking Corporations.* It will ordinarily be considered incidental to the international or foreign business of a Banking Corporation for it to engage in any of the following transactions in the United States with respect to extensions of credit—

(1) As principal or as agent for another bank, issue, confirm, or advise letters of credit or other authorizing instrument (or receive and forward to another bank applications therefor) which contemplate the drawing of "qualifying drafts". As used in this paragraph "qualifying drafts" means drafts or bills of exchange drawn, or written receipts given, to cover specific goods in the process of being (i) exported from or imported into the United States, (ii) temporarily stored in the United States as part of such an exportation or importation, (iii) stored abroad, or (iv) shipped within or between places abroad, or to cover (v) performance of specific contracts at places abroad or of specific international or foreign transactions, (vi) cost of operating ships in international or foreign transportation, or (vii) payments in connection with international or foreign transfers of royalties, copyrights or patent rights or with the rendering of services at, or necessary for carrying out projects at, places abroad.

(2) As principal or as agent for another bank, accept, negotiate, present, discount, purchase, or pay "qualifying drafts", if the Corporation or a bank at a place abroad issued, confirmed or advised the authorizing letter of credit or other authorizing instrument or if the office of the Corporation is named in the authorizing instrument as the place of payment or an optional place of payment thereof.

(3) Accept drafts or bills of exchange which are drawn by a bank or banker located in a place abroad for the purpose of furnishing dollar exchange as required by the usages of trade in such place.

(4) Purchase, discount, or lend on, documentary or other drafts which the Corporation is to send to a place abroad for collection.

(5) Make advances to, or acquire the obligations of, foreign governments; or, if the advances or acquisitions are for the purpose of financing activities abroad or payment for goods exported or imported or other direct costs of export or import (but not expenses in the United States of a United States office or representative), make advances to, or acquire the obligations of, a person conducting business principally at the person's offices or establishments abroad or a foreign national resident abroad.

(6) Finance by loan, acceptance, or otherwise—

(i) The shipment (but not production) of specific goods which are being exported, or being accumulated for export as part of an existing export financing arrangement of the Corporation; or

(ii) The storage of specific goods abroad or the shipment of specific goods between places abroad; or

(iii) The importation of specific goods into the United States, which may include lending against the shipping documents pending arrival of the goods from a place abroad; or

(iv) In the case of specific goods whose importation into the United States was financed by the Corporation, the delivery of the goods to the purchaser through domestic transport facilities or the assembly or packaging of the goods for resale without essential change in the nature of the product.

(d) *Other activities in United States by Banking Corporations.* It will ordinarily be considered incidental to the international or foreign business of a Banking Corporation for it to engage in any of the following other activities in the United States—

(1) Buy and sell spot and future foreign exchange.

(2) Receive checks, drafts, bills of exchange, acceptances, notes, bonds, coupons and other securities for collection abroad, and collect such instruments in the United States when received from customers abroad.

(3) Hold securities in safekeeping for, or buy and sell securities upon the order and for the account and risk of, customers abroad with whom other relationships permitted by this part are maintained.

(e) *Activities in United States by Financing Corporations.* (1) It will ordinarily be considered incidental to the international or foreign business of a Financing Corporation for it to engage in any of the following transactions in the United States—

(i) Finance its own authorized activities (e. g., borrow money or issue its own securities) or hold or invest, in accordance with paragraph (a) of this section, funds not currently employed in the international or foreign business of the Corporation.

(ii) Acquire obligations (by purchasing, discounting, or lending thereon) which cover the export of specific goods (including directly related services and other direct costs of the export, but not expenses in the United States of a United States office or representative), have as a primary obligor a foreign government or a person conducting business principally at the person's offices or establishments abroad, and are acquired by the Corporation as part of such export transaction.

(iii) Make advances to, or acquire (by purchasing, discounting, or lending thereon) the obligations of, foreign governments; or, if the advances or acquisitions are for the purpose of financing activities abroad or payment for goods exported (including directly related services and other direct costs of the export, but not expenses in the United States of a United States office or representative), make advances to, or acquire (by purchasing, discounting, or lending thereon) the obligations of, a person conducting business principally at the person's offices or establishments abroad.

(iv) Issue sight letters of credit undertaking to extend credit authorized under other provisions of this paragraph, but in no event contemplating the accepting of any drafts.

(v) Guarantee advances which the Corporation is authorized to make, or

obligations it is authorized to acquire, under other provisions of this paragraph.

(vi) Extend credit, by means of advances, guarantees or otherwise, to a corporation in which the Financing Corporation owns all the voting stock, or all except directors' qualifying shares, to enable such subsidiary to extend credit which the Financing Corporation is itself authorized to extend under other provisions of this paragraph.

(2) A Financing Corporation, in issuing, underwriting, selling or distributing securities abroad, shall not engage or participate in the underwriting, sale or distribution of securities in the United States (except the issuance of its own securities), and may not so engage or participate directly or indirectly or through an agency or on a commission or consignment basis or in any other manner. If a security issue is being sold or distributed partly in and partly outside the United States, a Financing Corporation may not underwrite, even on a standby basis, that portion being sold or distributed in the United States (no matter by whom it is being so sold or distributed).

§ 211.7 *Acceptances by Banking Corporations*—(a) *General.* In accepting drafts or bills of exchange as permitted in §§ 211.5 and 211.6, a Banking Corporation shall comply with the requirements set forth in the succeeding paragraphs of this section.

(b) *Maturity.* No Banking Corporation shall accept any draft or bill of exchange drawn for the purpose of furnishing dollar exchange having at the date of its acceptance more than three months to run, or accept any other draft or bill of exchange having at the date of its acceptance more than six months to run, exclusive in either case of days of grace.

(c) *Limitations.* No acceptances shall be made for the account of any one person in an amount aggregating at any time in excess of 10 percent of the capital and surplus of the Corporation, unless the transaction is fully secured or unless it represents an exportation or importation of goods and there is a primary obligation to reimburse the Corporation which is also guaranteed by a bank or banker. Whenever the aggregate of acceptances outstanding at any time exceeds the amount of the Corporation's capital and surplus, 50 percent of all the acceptances in excess of such amount up to twice the amount of the capital and surplus, and all the acceptances outstanding in excess of such double amount, (1) shall be fully secured, or (2) shall represent exportation or importation of goods and shall have a primary obligation to reimburse the Corporation which is also guaranteed by a bank or banker. In accepting drafts drawn for the purpose of furnishing dollar exchange, a Banking Corporation shall be subject to all the limitations and requirements of Part 203 of this chapter (Reg. C) (which relates to acceptances by member banks of drafts and bills of exchange) that would apply if it were a member bank of the Federal Reserve System.

§ 211.8 *Issue of obligations by Financing Corporations*—(a) *General.* A Financing Corporation is not required to obtain the approval of the Board of Governors before issuing any of its debentures, bonds, promissory notes or other such obligations, but, as specified in § 211.10 (b), it shall in no event have liabilities outstanding at any time exceeding ten times its capital and surplus. Every Financing Corporation shall carry on its business in accordance with sound financial policies, including among other considerations, a proper regard to the relationship between its assets and the maturities of its obligations, so as to give reasonable assurance that the Corporation will be in a position to pay its obligations as they mature. Further requirements are set forth in paragraphs (b), (c) and (d) of this section with respect to secured obligations, unsecured obligations, and information to be made available.

(b) *Secured obligations.* All secured obligations issued by a Financing Corporation (except promissory notes due within one year evidencing borrowing from banks or bankers) shall be secured by collateral which, unless placed under the control of the person or persons owning all the obligations secured thereby, shall be transferred and delivered, free of any prior lien, charge, or encumbrance thereon, to a member bank of the Federal Reserve System as the trustee under a trust indenture executed by the Financing Corporation as security for the obligations of the Corporation issued or to be issued thereunder, which trust indenture shall prescribe the general form of such obligations and shall require that every such obligation shall be authenticated by the certificate of the trustee noted thereon.

(c) *Unsecured obligations.* In the event a Financing Corporation issues or has outstanding any unsecured obligations (except promissory notes due within one year evidencing borrowing from banks or bankers), the Corporation shall comply with the following requirements—

(1) While any such unsecured obligations are outstanding, loans or other credits held by the Corporation, or outstanding with its guarantee, shall not have a maturity of more than ten years.

(2) All unsecured obligations issued by the Corporation (except promissory notes due within one year evidencing borrowing from banks or bankers) shall contain a provision, or shall be issued under an agreement, which shall provide that the Corporation will not, during the time any such obligations remain outstanding—

(i) Issue any obligations, regardless of maturity or payee (except in renewal or retirement of an equivalent amount of indebtedness), if immediately thereafter the fair value of the assets of the Corporation, excluding notes, drafts, bills of exchange and other evidences of indebtedness that are in default as to either principal or interest for a period in excess of six months, would be less than 110 percent of the aggregate principal amount of all borrowings of the Corporation.

(ii) Mortgage, pledge or otherwise subject any of its assets to any lien or charge to secure any indebtedness for borrowed money or to secure any other obligations of the Corporation, unless each person holding any of the Corporation's unsecured obligations (other than obligations specifically subordinated to all other debt of the Corporation), which would remain outstanding after such transaction, either grants his consent or is provided with security substantially equivalent in value (in proportion to obligations held) to that provided by such mortgage, pledge, lien or charge;

(iii) Sell, lease, assign or otherwise dispose of all or substantially all its assets; or

(iv) Declare or pay any dividend (other than a dividend payable in stock of the Corporation) or authorize or make any other distribution (except upon redemption of preferred stock, including payments made for this purpose into a preferred stock sinking fund, in accordance with law and the articles of association of the Corporation) on any stock of the Corporation otherwise than out of the earned surplus of the Corporation as determined in accordance with generally accepted accounting principles.

(d) *Information.* No prospectus, circular, letter, advertisement, or other statement published or issued in any form or manner by a Financing Corporation, or by persons underwriting, selling, or distributing an issue of obligations by the Corporation, shall contain any matter to indicate that any obligations issued by such Corporation or the collateral securing same has in any way received the approval of the Board of Governors or any other agency of the United States or that the collateral securing same has been appraised or approved in any way by the Board of Governors or any other agency of the United States. There shall be set forth on the outside front cover page of every prospectus the following statement in capital letters printed in bold-face roman type at least as large as ten-point modern type and at least two points leaded:

> These securities have not been approved or disapproved by the Board of Governors of the Federal Reserve System or any other agency of the United States nor has the Board or any other agency of the United States passed upon the accuracy or adequacy of this prospectus. These securities are the obligation solely of (Name of Financing Corporation), and no other individual, organization, or group has any direct or indirect responsibility for their payment.

Within forty days after issuing any obligations (except promissory notes due within one year evidencing borrowing from banks or bankers), a Financing Corporation shall file with the Board of Governors copies of all prospectuses and other literature describing or affecting such issue published by the Corporation or its officers or by persons underwriting, selling or distributing the issue, and shall also file with the Board of Governors the information described in subparagraphs (1) through (4) of this paragraph to the extent, if any, that such information is not contained in such prospectuses. The information described in

subparagraphs (1) through (4) of this paragraph is as follows:

(1) The amount of the funded debt outstanding and to be created by the obligations offered, including the net price received and to be received by the Corporation for such obligations, with a brief description of the date, maturity, and character of such debt, rate of interest, character of amortization provisions, and the collateral, if any, provided or to be provided therefor, and a summarized statement of the conditions, if any, under which substitution of collateral is permitted, and if substitution is permissible without notice, a specific statement to that effect.

(2) A balance sheet showing all assets and liabilities, including contingent liabilities, of the Corporation with supporting schedules in the form prescribed by the Board of Governors for reports of condition (Form F. R. 314)[2] and an analysis of surplus showing how and from what sources such surplus was created, all as of the close of business on the date of issuance of the obligations, and giving effect thereto.

(3) A copy of any underlying agreements or indentures affecting the obligations.

(4) A copy of the opinion or opinions of counsel as to the legality of the issue, the validity of any indenture, and the sufficiency of any transfers of collateral executed under any indenture.

§ 211.9 *Investments in stock of other corporations*—(a) *General.* With the prior consent of the Board of Governors and subject to the provisions of section 25 (a) of the Federal Reserve Act and this part, a Corporation may purchase and hold stock in other corporations. The succeeding paragraphs of this section indicate the circumstances in which such consent may be granted upon individual application, those in which such consent is ordinarily not granted, and those in which general consent may be granted upon application as to types of situations. Any consent granted by the Board may be conditional, and the conditions prescribed may apply to activities of the Corporation and also to activities of the corporation in which stock is purchased or held. A Corporation may purchase and hold stock where such purchase is necessary to prevent a loss upon a debt previously contracted in good faith; but stock so acquired shall be disposed of within six months from the date or acquisition unless such time is extended by the Board of Governors. If a Corporation makes a permissible purchase of stock, but a later change in circumstances or in this part causes the holding of the stock to be no longer permissible, the Corporation shall dispose of the stock, or the non-conformity with this part shall otherwise be corrected, as promptly as practicable and in any event within six months unless such time is extended by the Board of Governors. As used in this section, the term "stock" includes all certificates of ownership.

(b) *By Banking Corporations.* Consent of the Board of Governors for a Banking Corporation to purchase and hold stock in other corporations will not be granted except upon individual application setting forth the relevant facts and circumstances. The Board of Governors ordinarily will not grant consent for a Banking Corporation to purchase and hold stock in a corporation not engaged in banking or closely related activities.

(c) *By Financing Corporations.* Subject to applicable requirements of law and of this part and upon application setting forth the proposed program of the Financing Corporation, the Board of Governors may grant its general consent for a Financing Corporation to purchase and hold stock, up to such amounts and in such circumstances as the Board may prescribe, in generally designated types of corporations which are not engaged in banking and also are neither incorporated, nor qualified to do business in the United States, under the laws of the United States or any State (or the District of Columbia), provided such stock is purchased from a foreign seller by negotiations in which no United States office or establishment of the seller participates, and provided further that such purchase or holding does not cause the Financing Corporation to be affiliated with any person engaged in banking or with any person the stock of which the Corporation would be forbidden to purchase or hold under paragraph (d) of this section. In any other instance consent of the Board of Governors for a Financing Corporation to purchase and hold stock will not be granted, except in special cases upon individual application setting forth the relevant facts and circumstances. The Board of Governors ordinarily will not grant consent for a Financing Corporation to purchase and hold stock in a corporation engaged in banking.

(d) *Statutory limitations.* Under section 25 (a) of the Federal Reserve Act, the following limitations apply to the purchase or holding of stock by a Corporation—

(1) The corporation whose stock is purchased or held (i) shall be organized under section 25 (a) of the Federal Reserve Act, the laws of any foreign country or a colony or dependency thereof, or the laws of any State, dependency, or insular possession of the United States; and (ii) shall not be engaged in the general business of buying or selling goods in the United States; and (iii) shall not be transacting any business in the United States except such as in the judgment of the Board of Governors may be incidental to its international or foreign business.

(2) Except with the prior approval of the Board of Governors in addition to any consent of the Board of Governors otherwise required, a Corporation shall not invest an amount in excess of 15 percent of its capital and surplus in the stock of any one corporation engaged in the business of banking, or an amount in excess of 10 percent of its capital and surplus in the stock of any other kind of corporation.

(3) A Corporation shall not purchase, own, or hold any stock in any other corporation organized under section 25 (a) of the Federal Reserve Act or under the laws of any State, which is in substantial competition therewith, or which holds stock in corporations which are in substantial competition with the purchasing Corporation.

§ 211.10 *General limitations and restrictions*—(a) *Liabilities of one borrower.* The total liabilities to a Corporation of any person or government for money borrowed shall at no time exceed in the case of a Banking Corporation 10 percent of its capital and surplus, or in the case of a Financing Corporation 50 percent thereof. For the purposes of this paragraph, the cost to a Corporation of any stock owned by it shall, unless otherwise specified by the Board of Governors in a particular case, be treated as if it were a liability of the issuer of the stock for money borrowed; all bonds, notes or other such obligations, whether or not purchased in the open market, shall be treated as such a liability; the liabilities of a partnership or firm shall include those of the several members thereof; the liabilities of a corporation shall include all liabilities incurred by any subsidiary of the corporation for the benefit of the corporation; and the liabilities of a foreign government shall include those of all its departments or agencies which derive their current funds principally from the general tax revenues of the foreign government. The limitations contained in this paragraph shall not apply (1) to obligations in the form of drafts or bills of exchange drawn in good faith against actually existing values; (2) to obligations arising out of the discount of commercial or business paper actually owned by the person negotiating the same; (3) to the liability of a customer on account of an acceptance made by the Corporation for his account unless the Corporation itself holds the acceptance or the acceptance has matured and the customer has failed to place the Corporation in funds to cover payment of the acceptances; (4) to the extent that liabilities are direct obligations of the United States or are secured or covered by unconditional guarantees, commitments, or agreements to take over or to purchase, made by the United States or by any department or establishment of, or corporation wholly owned by, the United States or by the International Bank for Reconstruction and Development or the International Finance Corporation; (5) to a direct obligation of, or obligation unconditionally guaranteed by, a foreign government or its appropriate financial or central banking authority, and with respect to which an institution described in subdivision (4) has given an unconditional guarantee, commitment or agreement to take over or to purchase (or has accepted a participation) which covers only a portion of the obligation (or a portion of the total credit, in the case of a participation), but covers it to the extent of at least 25 percent and in such manner that any default to the Corporation will necessarily include a default to the governmental agency (any such partial but concurrent guarantee, commitment, agreement or participation by such an institution being hereinafter called a "proportionate governmental guaran-

[2] See § 262.5 of this chapter.

tee"); (6) in the case of a Financing Corporation, to any obligation which is subject to a "proportionate governmental guarantee" and does not exceed 100 percent of the Corporation's capital and surplus; (7) to direct obligations of the national government of a foreign country in which the Corporation has a branch or agency, or obligations fully and unconditionally guaranteed as to principal and interest by such government, provided such branch or agency has outstanding equal or greater liabilities payable in the same currency; or (8) to such other classes of transactions at a branch or agency of a Corporation in a foreign country as the Board of Governors may, upon application of the Corporation, exclude from the limitations of this paragraph due to special circumstances surrounding such transactions in such country.

(b) *Aggregate liabilities of Corporation.* Except with the prior permission of the Board of Governors, the aggregate outstanding liabilities of (1) a Banking Corporation on account of acceptances, monthly average domestic and foreign deposits, borrowings, guaranties, endorsements and any other such obligations, or (2) a Financing Corporation on account of debentures, bonds, notes, guaranties, endorsements and any other such obligations, shall not exceed ten times the amount of the Corporation's capital and surplus. In determining the amount of the liabilities within the meaning of this paragraph, endorsements of bills of exchange having not more than six months to run, drawn and accepted by others, shall not be included.

(c) *Relations of Financing Corporations with affiliated banks.* (1) Whenever a Financing Corporation is affiliated with a bank in the United States, such Corporation shall not incur any liability to such bank that would cause the total liabilities of such Corporation to such bank to exceed 10 per cent of the capital and surplus of such bank, or cause the total liabilities to such bank of all Financing Corporations affiliated with such bank to exceed 20 per cent of such capital and surplus. For the purposes of this paragraph, a Financing Corporation incurs a liability to a bank whenever such bank or any organization affiliated with such bank (other than such Financing Corporation or any organization controlled by it) makes (i) any investment in, or advance on the collateral security of, capital stock or obligations of such Corporation or any organization controlled by it, or (ii) any loan or extension of credit to, or any purchase under repurchase agreement from, such Corporation or any organization controlled by it.

(2) No Financing Corporation hereafter organized shall have a name which is similar to the name of, or identifies the Corporation with, any bank in the United States with which such Financing Corporation is affiliated.

(d) *Sale of securities with guaranty or endorsement.* Whenever a Corporation sells, discounts, or negotiates with its endorsement or guaranty any securities, notes, drafts, bills of exchange, acceptances, bankers' acceptances, or other evidence of indebtedness, it shall enter on its books a proper record thereof, describing in detail each such evidence of indebtedness so sold, discounted, or negotiated, the amounts thereof, the parties thereto, the maturity thereof, and the nature of the Corporation's liability thereon. Every financial statement of the Corporation submitted to the Board of Governors or made public in any way shall show the aggregate amount of all such liabilities outstanding as of the date on which such statement purports to show the financial condition of the Corporation.

(e) *Reports.* Each Corporation shall make at least two reports annually to the Board of Governors at such times and in such form as the Board may require. The Board may, in its discretion, require that statements of condition or such other reports as it may specify be published or made available for public inspection.

(f) *Examinations.* Each Corporation shall be examined at least once a year by examiners appointed by the Board of Governors. Each Corporation shall obtain and make available to such examiners, among other things, such information as to the earnings, finances, management and other aspects of any corporation whose stock is held by the Corporation as may be appropriate for appraising such investment and determining its suitability. When required by the Board of Governors, each Corporation shall cause any organization controlled by it to permit such examiners to examine such organization. The cost of examinations shall be fixed by the Board of Governors and paid by the Corporation.

(g) *Amendments.* This part is subject to amendment by the Board of Governors from time to time.

§ 211.11 *Corporations with agreements under section 25 of the Federal Reserve Act.* In addition to any other requirements to which it may be subject, no corporation having an agreement or undertaking with the Board of Governors under section 25 of the Federal Reserve Act shall purchase or hold any asset, or otherwise exercise any of its powers in the United States or abroad in any manner, which would not be permissible under the provisions of this part if such corporation were a Banking Corporation.

2. The purpose of this revision is to clarify and make more specific the rules applicable to Corporations doing foreign banking or other foreign financing under sections 25 or 25 (a) of the Federal Reserve Act, particularly the rules relating to activities in the United States by such Corporations.

The revision set forth herein was the subject of discussion with interested persons as well as of a notice of proposed rulemaking published in the FEDERAL REGISTER (21 F. R. 1867), and was adopted by the Board after consideration of all relevant matter presented, including the data, views and arguments received from interested persons.

BOARD OF GOVERNORS OF THE FEDERAL RESERVE SYSTEM,
[SEAL] S. R. CARPENTER,
Secretary.

[F. R. Doc. 56-10152; Filed, Dec. 11, 1956; 8:49 a. m.]

TITLE 47—TELECOMMUNICATION

Chapter I—Federal Communications Commission

[Docket No. 11838; FCC 56-1212]

[Rules Amdt. 3-45]

PART 3—RADIO BROADCAST SERVICES

TABLE OF ASSIGNMENTS; TELEVISION BROADCAST STATIONS (BINGHAMTON AND CORTLAND, N. Y.)

1. The Commission has before it for consideration its notice of proposed rule making, issued on October 4, 1956 (FCC 56-954) and published in the FEDERAL REGISTER on October 10, 1956 (21 F. R. 7739), proposing to assign Channel 56+ to Binghamton, New York, by substituting Channel 72 for Channel 56+ in Cortland, New York, in response to a petition of WBRE-TV, Inc.

2. Comments supporting the proposal were filed by petitioner WBRE-TV, Inc., Wilkes Barre, Pennsylvania. Three Cortland parties filed comments opposing the proposal—The Cortland Chamber of Commerce, the State Teachers College, and Radio Cortland, Inc.

3. In support of its request petitioner submits that the Binghamton area has only one operating television station (Station WNBF-TV on Channel 12); that although a permit is outstanding for Channel 40 in Binghamton, the station has not been constructed;[1] and that the assignment of Channel 56 to Binghamton would make possible a diversified television program service for the area and would comply with the Commission's rules. WBRE-TV represents that it will file an application for a construction permit to operate on Channel 56 if its request is granted. It notes that no applications for Channel 56 in Cortland have been filed and submits that the substitution of Channel 72 for Channel 56 in Cortland would make future television service available to that community.

4. The Cortland Chamber of Commerce, the State Teachers College, and Radio Cortland, Inc., oppose the substitution of Channel 72 for Channel 56 in Cortland. They urge that Channel 72 is less desirable than Channel 56 since technical difficulties have been encountered in operating on the higher UHF channels; that the Cortland area is an important population, industrial, and

[1] Southern Tier Radio Service, Inc., was granted a construction permit for a station (WINR-TV) on Channel 40 at Binghamton on September 29, 1954.