Primary Source: Railroad Quarantines [1]

The following is excerpted from the Bulletin of the North Carolina Board of Health concerning "Railroad Quarantine." Guidelines like these were used to limit the influence and damages caused by sick passengers, similar to travel quarantines today.

Rules for railroad quarantine

[From Proceedings of Montgomery Quarantine Conference]

The rules for the government of railroad quarantine, as drawn up by the special committee appointed for that purpose, are here subjoined [2].


Rules Prepared By the Committee

1. Quarantine should not be made against any place until it is officially known that yellow fever or other infections or contagious disease exists in such place.
2. Only competent physicians should be put in charge of quarantine stations; and only thoroughly qualified persons should be employed as inspectors on railway trains.
3. Quarantine stations, located on railroads, should be established at convenient points, on one or both sides of a town or station, as may be deemed necessary.
4. If an epidemic [3] of yellow fever, or other infectious or contagious disease, exist at a town or station, trains carrying passengers or freights should be required to pass through the limits of such towns or stations at a speed of not less than ten (10) miles per hour, without stopping at such towns or stations but should stop at the quarantine stations.
5. Passengers to or from such infected point should only be received or delivered at the quarantine station, under the supervision of the quarantine officer in charge of the station.
6. Railway tickets may be sold to persons leaving an infected place to any point willing to receive them.
7. All baggage from any infected point should be properly disinfected.
8. As far as practicable, the same rules proposed for railroad stations should be applied to vessels of every kind, stage coaches, or other means of travel.
9. The passage of railroad trains through any point on the line of road, whether infected or not, should not be prohibited by any quarantine regulations. The conductors of passenger trains should close the windows and ventilators and lock the doors of cars passing through any place where a train is not permitted to stop.
10. All freight to any infected place should be delivered either at the quarantine stations or the nearest railway station to such infected point, where it can be properly cared for.
11. All mail matter from any infected place should be properly disinfected by the United States Government. And mail matter intended for infected points should be put off the trains at the quarantine stations. The United States Government should instruct postmasters to receive and deliver mails at such quarantine stations.
12. Railroads and express companies may receive for transportation from any inspected place during the time such infection exists, any merchandise or other traffic consigned to places willing to receive it.
13. State authorities should employ competent persons on passenger trains as inspectors of passengers, baggage and express matter as additional precaution; but the fact of inspectors being on such trains should not relieve trains carrying passengers, or express matter or baggage, from stopping at quarantine stations for such inspection as the officer in charge may determine to be necessary.
14. It is recommended that all quarantines, as far as practicable, should be uniform in their requirements and operations, which will greatly contribute to the prevention of panics, and tend to allay unnecessary excitement and fear on the part of the people.
15. The form of health certificate adopted by the quarantine convention held at Montgomery, March 5, 1889, should be prepared for health officers to issue to such persons as may be found entitled to receive the same. A copy of this certificate should be printed with these rules, and conspicuously [4] posted at railway stations.
16. It is the desire and intention of health authorities, as far as practicable, to throw every safeguard around the public health of all localities. Municipal, county, and State authorities are expected to co-operate in every possible way with health officers located in towns, villages and cities, and in charge of quarantine stations, to enable them to prevent the introduction or spread of yellow fever or other infectious or contagious diseases.

Isolation

Preamble.— The first and most important step to take against the invasion of contagious diseases is isolation. It is the most certain and direct way of preventing them from spreading through the population, therefore the isolation of those
who are sick with small-pox, cholera, diphtheria, typhoid, and scarlet fevers is to-day universally recognized as of absolute necessity and a most blinding obligation whenever any of the above contagious diseases break out in a family.

1. In densely populated cities, and in smaller towns and villages where circumstances render it necessary (such as in places where there are factories or residences built in rows, &c), and, more particularly in case of an outbreak of cholera or small-pox, the sick should be removed to a special building, either permanent or temporary, erected for the purpose, and the houses from which the sick are taken should be disinfected and cleaned under the direction of the local board immediately after the removal of the patients.

2. When no special building has been set apart or erected for the purpose, the sick should be isolated at home, and should be put in a room on the topmost flat of the house, and, if possible, in a room at the end of a passage. If necessary, the house itself should be quarantined.

3. All carpets, curtains, articles of dress, pictures, and all things not absolutely needed by the patient, must be removed from the room.

4. There should be plenty of sunlight and good ventilation, without, however, exposing the patient to draughts of air.

5. The patient's bed should be placed in the centre of the room, and the door kept closed as much as possible.

6. All discharges from the throat, mouth or nose of the patient should be received on rags, and these should be immediately burnt, or in a vessel containing a disinfecting solution.

7. The discharges from the bowels, as well as the urine of the patient, should be received into a vessel containing a disinfecting solution, and should then be thrown into the water-closet. Should there be no water-closet, they should be buried in the ground at a distance of one hundred feet at least from any well of other source of water supply, and, at a depth of not less than two feet.

8. Clothing, bed-linen, towels, &c, which have been used by the patient, should, immediately on removal, be dropped into a bucket or tub containing a disinfecting solution, and should remain soaking in that fluid for at least two hours before being taken out of the room. They should then be boiled in water and washed in the ordinary way.

9. No one must enter the sick-room except those absolutely necessary to the care of the patient, and such persons should wear linen or cotton, rather than woolen clothing so that it can be more easily washed in boiling water, to free it from contagion immediately after the nursing is done with the patient.

10. No article of food or drink which has been in the sick-room should be used by any other person. The dishes, &c., which have been used by the patient should be thoroughly cleaned with boiling water before being used by the other members of the household.

11. After complete recovery, the patient should be given at least one bath in hot water, using carbolic soap, and should have a complete change of clothing before leaving the sick-room and mixing with healthy persons.

12. When a patient is isolated, no member of the household should be allowed to attend school, college or convent, or to take part in any public assembly, or to attend the services of the church.

13. The measures of isolation and quarantine should be strictly put in force during the whole course of the disease, and until, recovery or death having occurred, the sick-room, with the whole house, has been properly disinfected and cleaned under the superintendence of the health officer or family physician.

14. During the prevalence of a contagious disease in locality, it is most important to see that the drains, ditches, privy-pits and yards around the house should be kept clean and in good order. It is then especially that all refuse, garbage and decomposing organic matters, &c., should be removed, burned or buried, also chloride of lime, in powder or solution, sprinkled over unwholesome places to disinfect them.

15. Under no pretext whatever may other person be admitted into the sick-room than the nurse, the physician or the clergyman.

16. In a house where a contagious disease, such as diphtheria, scarlet or typhoid fever, measles or whooping-cough is known to exist, no children from other houses should be admitted under any pretext whatever; neither should adults be allowed to enter, except under certain restrictions, as infection is frequently carried from one house to another by visitors.

17. Whenever there is small-pox, cholera, or even diphtheria, when the patient cannot be properly isolated, not only the patient must be kept in his room, but the whole house must be quarantined.

18. When a house is quarantined, nobody from the inside should be allowed to have any communication with those outside, and nobody from outside should go into the house under any pretext, always excepting the physician and clergyman.

19. Immediately after the death of an infected person, the body should be enveloped in a sheet thoroughly saturated with a disinfecting solution and be immediately buried without a public funeral and without being taken into any church.

20. In order to prevent premature burial, it is desirable, whenever possible, to have the actual death determined and certified by a properly qualified physician, and to have the body buried only on the presentation of such medical certificate of death—Taken from the pamphlet issued by the Provincial Board of Health of Canada.
History of Quarantine

from the Center for Disease Control and Prevention

3 January 2018