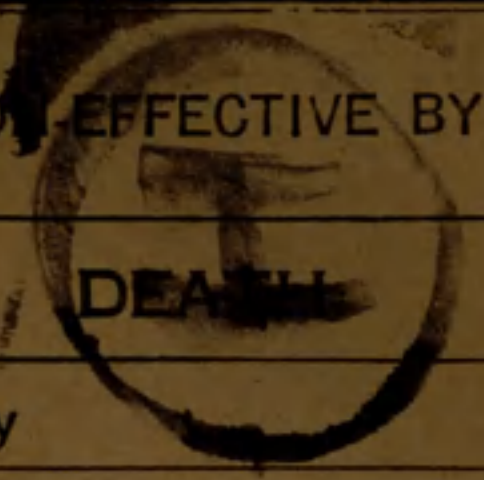
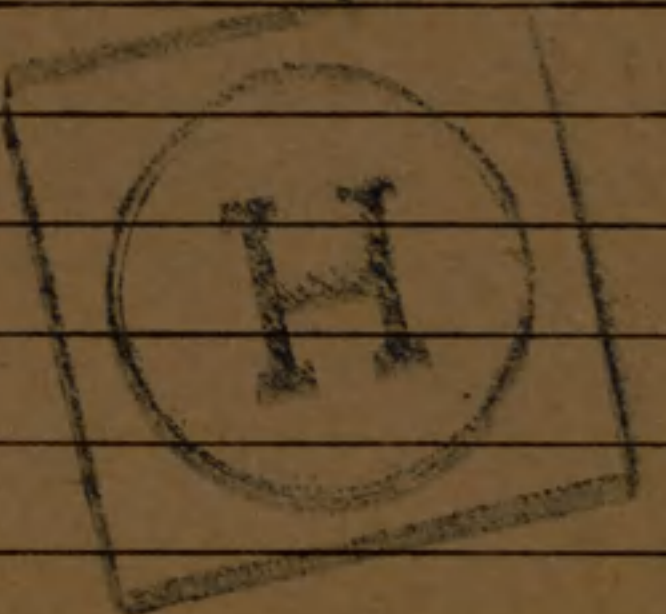
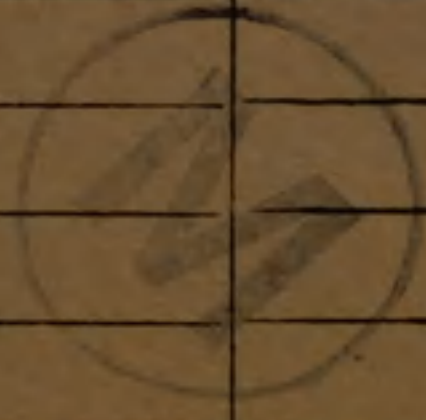


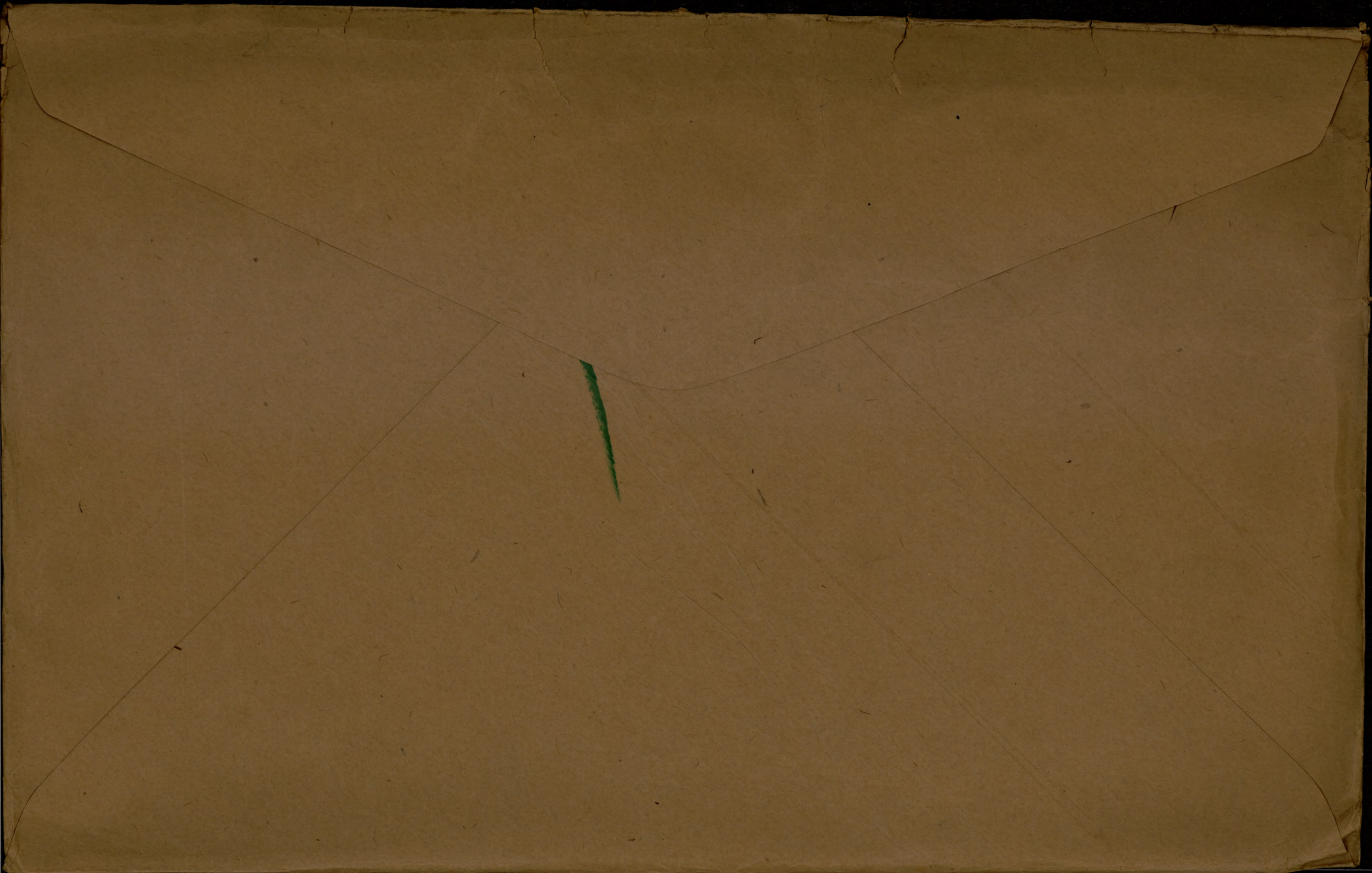
REGIMENTAL DOCUMENTS

25616

NAME Baetchee Hugh Lewis REGT. NO. 657983 UNIT \_\_\_\_\_ H. Q. FILE NO. one

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NOT EFFECTIVE BY
37 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					 Category <i>Died in</i> <i>England 11-1-17</i>
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)		 			DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3225)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					DESERTION
<i>m 7-20-27</i>		BOX 845			$\frac{1}{10-9}$ $\frac{1}{10-9}$ 11-9
<i>R 10-9</i>					
<i>Cascard</i>					
<i>2 AFB 1537</i>					
<i>1 AFB 181</i>					
<i>4 more</i>					
<i>6 AFB 3212</i>					
<i>4 Series</i>					
<i>R 10-9</i>					
<i>paid</i>					

*mx*  
*24-2-21*



copy  
6.2.16  
A1-16-16

Duplicate  
No. 657983  
Folio.

# ATTESTATION PAPER.

162nd O. S. Batt'n, C. E. F.  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Baettcher
- 1a. What are your Christian names?..... Hugh Lewis
- 1b. What is your present address?..... Magnetauwer Hill
2. In what Town, Township or Parish, and in what Country were you born?..... Swp. Chapman Canada
3. What is the name of your next-of-kin?..... Louis Baettcher
4. What is the address of your next-of-kin?..... Magnetauwer Hill
- 4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... June 4<sup>th</sup> 1897
6. What is your Trade or Calling?..... Farmer
7. Are you married?..... no
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... yes
9. Do you now belong to the Active Militia?..... no
10. Have you ever served in any Military Force?.. no  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... yes
12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } yes

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, H. L. Baettcher, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date April 10 1916 H. L. Baettcher (Signature of Recruit)  
C. Chauncy (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, H. L. Baettcher, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date April 10 1916 H. L. Baettcher (Signature of Recruit)  
C. Chauncy (Signature of Witness)

## CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Parm. Saund this 10<sup>th</sup> day of April 1916.  
[Signature] (Signature of Justice)

Description of A. L. Boettcher on Enlistment.

Apparent Age 28 years ..... months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.  
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height ..... 5 8 1/4 ft. .... ins.

Chest measurement { Girth when fully expanded ..... 38 1/2 ins.  
 Range of expansion 4 ins.

Complexion ..... Fair

Eyes ..... Blue Grey

Hair ..... Brown

Religious denominations.  
 Church of England .....  
 Presbyterian ..... Yes  
 Methodist .....  
 Baptist or Congregationalist .....  
 Roman Catholic .....  
 Jewish .....  
 Other denominations .....  
 (Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him Fit for the Canadian Over-Seas Expeditionary Force.

Date ..... March 27 1916

Place ..... Burks Falls

A. L. Barber  
 Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

A. L. Boettcher ..... having been finally approved and

inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

[Signature] ..... (Signature of Officer)

Date ..... March 27 1916

162nd O. S. Batt'n, C. E. F.

General to  
Mr. Matilda Warren,  
of E. B. Warren,  
Magalloway.

25/7/17

cut

*no grace*

*Duplicate*  
No. 657983

**ATTESTATION PAPER.**  
162nd O. S. Batt'n, C. E. F.  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**

(ANSWERS.)

1. What is your surname? *Buttcher*
- 1a. What are your Christian names? *Hugh Lewis*
- 1b. What is your present address? *Magntawan, Ont. Can*
2. In what Town, Township or Parish, and in what Country were you born? *Sup Chapman Peryland Ont*
3. What is the name of your next-of-kin? *Lewis Buttcher*
4. What is the address of your next-of-kin? *Magntawan, Ont. Can.*
- 4a. What is the relationship of your next-of-kin? *Father*
5. What is the date of your birth? *June 4th 1897*
6. What is your Trade or Calling? *Farmer*
7. Are you married? *no*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
9. Do you now belong to the Active Militia? *no*
10. Have you ever served in any Military Force? *no*  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *yes*
12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

**DECLARATION TO BE MADE BY MAN ON ATTESTATION.**

I, *H. L. Buttcher*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *April 10* 1916. *H. L. Buttcher* (Signature of Recruit)  
*B. E. Henry* (Signature of Witness)

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I, *H. L. Buttcher*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *April 10* 1916. *H. L. Buttcher* (Signature of Recruit)  
*B. E. Henry* (Signature of Witness)

**CERTIFICATE OF MAGISTRATE.**

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Farmington* this *10* day of *April* 1916.  
*Arthur [Signature]* (Signature of Justice)

Description of H. L. Baettcher on Enlistment.

Apparent Age 26 years ..... months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.  
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height ..... 5 ft. 8 1/4 ins.

Chest measurement { Girth when fully expanded ..... 38 1/2 ins.  
 Range of expansion ..... 2 1/4 ins.

Complexion ..... Fair

Eyes ..... Blue-grey

Hair ..... Brown

Religious denominations.  
 Church of England .....  
 Presbyterian ..... Yes  
 Methodist .....  
 Baptist or Congregationalist .....  
 Roman Catholic .....  
 Jewish .....  
 Other denominations .....  
 (Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* Fit for the Canadian Over-Seas Expeditionary Force.

Date ..... Mar 27 1916.

Place ..... Burks Falls

H. L. Barber M.D.  
 Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....  
 .....  
 .....

CERTIFICATE OF OFFICER COMMANDING UNIT.

H. L. Baettcher ..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Date ..... 10 April 16 1916  
Mar 27

[Signature] ..... (Signature of Officer)

162nd O. S. Batt'n, C. E. F.

# FORM OF WILL

I, Hugh Lewis Boettcher (Name in full)

Regimental Number 657993 serving in 162nd C.B. Batta. C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Mrs. Matilda Wurm Wife of  
E.B. Wurm, Magnetawan  
(SISTER) Ont.

Name and Address  
of person or  
persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Matilda Wurm, wife of  
E.B. Wurm, Magnetawan,  
Ont.

Name and Address  
of person or  
persons to receive  
personal estate\*  
(See note).

## NOTE

This space for the  
appointment of  
Executor if  
necessary.

## IMPORTANT NOTE

this 26th day of September A.D. 1916.

This must be signed  
and Dated by  
THE SOLDIER  
HIMSELF.

H. L. Boettcher Signature of Soldier.

\*N.B. Personal estate includes p.p.y. effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness A. H. Boddy, Capt.

Address of Witness Brantford, Ont.

THE TWO  
WITNESSES

Occupation of Witness Barrister

MUST  
SIGN HERE

Signature of Second Witness G. M. Hodgson, L. Corp.

Address of Witness Sundridge,

Occupation of Witness Operator.





Regtl. No., Rank and Name 657983 Pte. Boeltcher, Hd. Corps 36<sup>th</sup> Batt

Disease Cerebro-spinal fever Hospital Moore Barracks.

To Officer i/c Laboratory. Ward 26.

Please carry out an examination of the accompanying specimen of C.S. fluid.

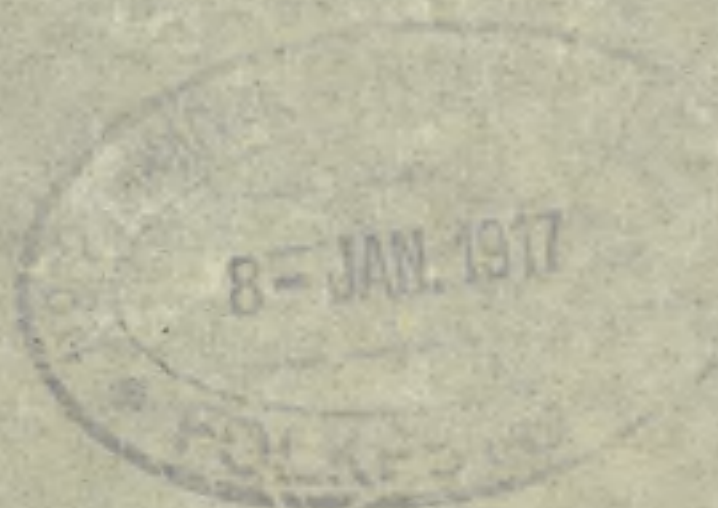
with special regard to meningococci.

Date 7-1-17. Ross Mitchell  
Capt. O. i/c Ward.

**LABORATORY REPORT.**

*Meningococcus Present.*

*39 B<sup>m</sup>  
on M.N.S.*



Date of Examination 8-1-17

C. Douglas Capt.  
O. i/c Laboratory.

Regt. No. \_\_\_\_\_  
 Disease \_\_\_\_\_  
 Hospital \_\_\_\_\_  
 Ward \_\_\_\_\_

To Officer in Laboratory \_\_\_\_\_  
 Please carry out an examination of the accompanying specimen of \_\_\_\_\_  
 with special regard to \_\_\_\_\_  
 Date \_\_\_\_\_  
 O. J. \_\_\_\_\_  
 Ward \_\_\_\_\_

LABORATORY REPORT

Date of Examination \_\_\_\_\_  
 O. J. \_\_\_\_\_

Regtl. No., Rank and Name 657983 Pte. Boettcher H. D. Corps 36<sup>th</sup> Batt<sup>y</sup>

Disease Cerebro-spinal fever Hospital Moore Barracks

To Officer i/c Laboratory. Ward 26

Please carry out an examination of the accompanying specimen of \_\_\_\_\_  
with special regard to a differential white cell count.

Date 9-1-17. Ross Mitchell  
Capl. O. i/c Ward.

**LABORATORY REPORT.**

Polymorphs. 85%  
Lymphocytes 9%  
Eosinophiles 3%  
Transitional 2%  
Mononuclear 1%

39/3<sup>m</sup>  
on MNS.

Date of Examination 9.1.17.

R B Jenkins Capt  
for O. i/c Laboratory.

Regt. No. Blank and Name of \_\_\_\_\_  
 Corps \_\_\_\_\_  
 Hospital \_\_\_\_\_  
 Ward \_\_\_\_\_  
 To Officer in Laboratory \_\_\_\_\_

Please carry out an examination of the accompanying specimen of \_\_\_\_\_

with special regard to \_\_\_\_\_

Date \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### LABORATORY REPORT.

0111

Date of Examination \_\_\_\_\_

Of the Laboratory \_\_\_\_\_

Regtl. No., Rank and Name 657983 Pte Boettcher H.L. Corps 36<sup>th</sup> Batt

Disease Measles - ? Hospital Moore Barracks

To Officer i/c Laboratory. Ward 26

Please carry out an examination of the accompanying specimen of fluid

with special regard to Widal exam

Date 1-1-17 Ross Mitchell  
Capt. O. i/c Ward.

LABORATORY REPORT.

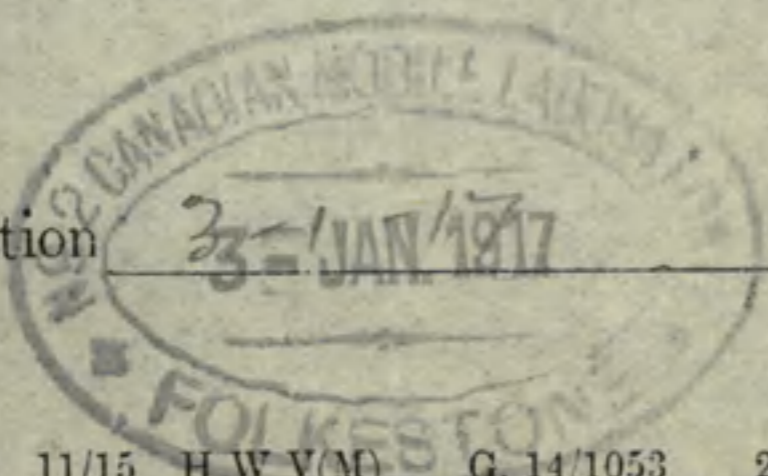
Positive in Typhoid (in 125)  
Neg. Para A + B

39/B<sup>n</sup>  
M.H.S.

Two more examinations required  
on 5-1-17 & 9-1-17 before final reading  
may be given

Kindly send complete history with  
exact requisition for record purposes.

Date of Examination 3-1 JAN 1917



C. H. Douglas Capt.  
No. 2 Canadian Mobile Laboratory  
O. i/c Laboratory  
FOLKESTONE

WEDVAL

WEDVAL

Regt. No. Rank and Name of Recipient in Hospital or Corps

Hospital

WEDVAL

Ward

To Officer in Laboratory

Please carry out an examination of the accompanying specimen of

with special regard to

Stool exam

Date

1-17

LABORATORY REPORT

Date of Examination

Of the Laboratory

Regtl. No., Rank and Name 657983 Pte. Boettcher H & Corps 36<sup>th</sup> Batt

Disease Measles ? Hospital Moore Barracks

To Officer i/c Laboratory. Ward 26

Please carry out an examination of the accompanying specimen of C.S. fluid  
with special regard to general chemical & cytological examination

Date 2-1-17. Ross Mitchell  
Capt. O. i/c Ward.

LABORATORY REPORT.

Positive  
for Meningococci

39 B<sup>m</sup>  
on M.N.S.

W. B. Brown

..... Captain, R.S.  
No. 3 Canadian Mobile Laboratory  
FOLKESTONE



Date of Examination

O. i/c Laboratory.



Regt. No., Rank and Name \_\_\_\_\_  
Disease \_\_\_\_\_  
Hospital \_\_\_\_\_  
Ward \_\_\_\_\_  
To Officer in Charge \_\_\_\_\_

Please carry out an examination of the accompanying specimen of \_\_\_\_\_  
with special regard to \_\_\_\_\_  
Date \_\_\_\_\_  
Hospital \_\_\_\_\_  
Ward \_\_\_\_\_

LABORATORY REPORT.

*Parasites*

*for Microscopic*

*10/10/1918*  
*10/11/1918*  
*10/12/1918*

*10/13/1918*  
*10/14/1918*

Date of Examination \_\_\_\_\_  
O. P. Laboratory \_\_\_\_\_

Regtl. No., Rank and Name 657983 Pte. Boettcher H.R. Corps 36<sup>th</sup> Batt<sup>n</sup>

Disease Measles ? Hospital Moore Barracks

To Officer i/c Laboratory. Ward 26

Please carry out an examination of the accompanying specimen of Blood

with special regard to white cell count

Date 1-1-17.

Ross Mitchell  
Capt. O. i/c Ward.

*Please come over & get blood.*

**LABORATORY REPORT.**

*Leucocytes 14,900  
Polymorphs 85%  
Lymphs 7%  
Eosinophils 10%*

*39 B<sup>n</sup>  
in M.H.S.*

Date of Examination 1.1.17

R.B. Jenkins Capt  
O. i/c Laboratory.

Regt. No., Rank and Name 100th Cavalry Regt. 5788 Pte. J. G. ...

Disease ...

Hospital ...

Ward ...

To Officer in Charge Laboratory

Please carry out an examination of the accompanying specimen of ...

with special regard to ...

Date ...

...

Ward

# LABORATORY REPORT

Date of Examination

Of the Laboratory

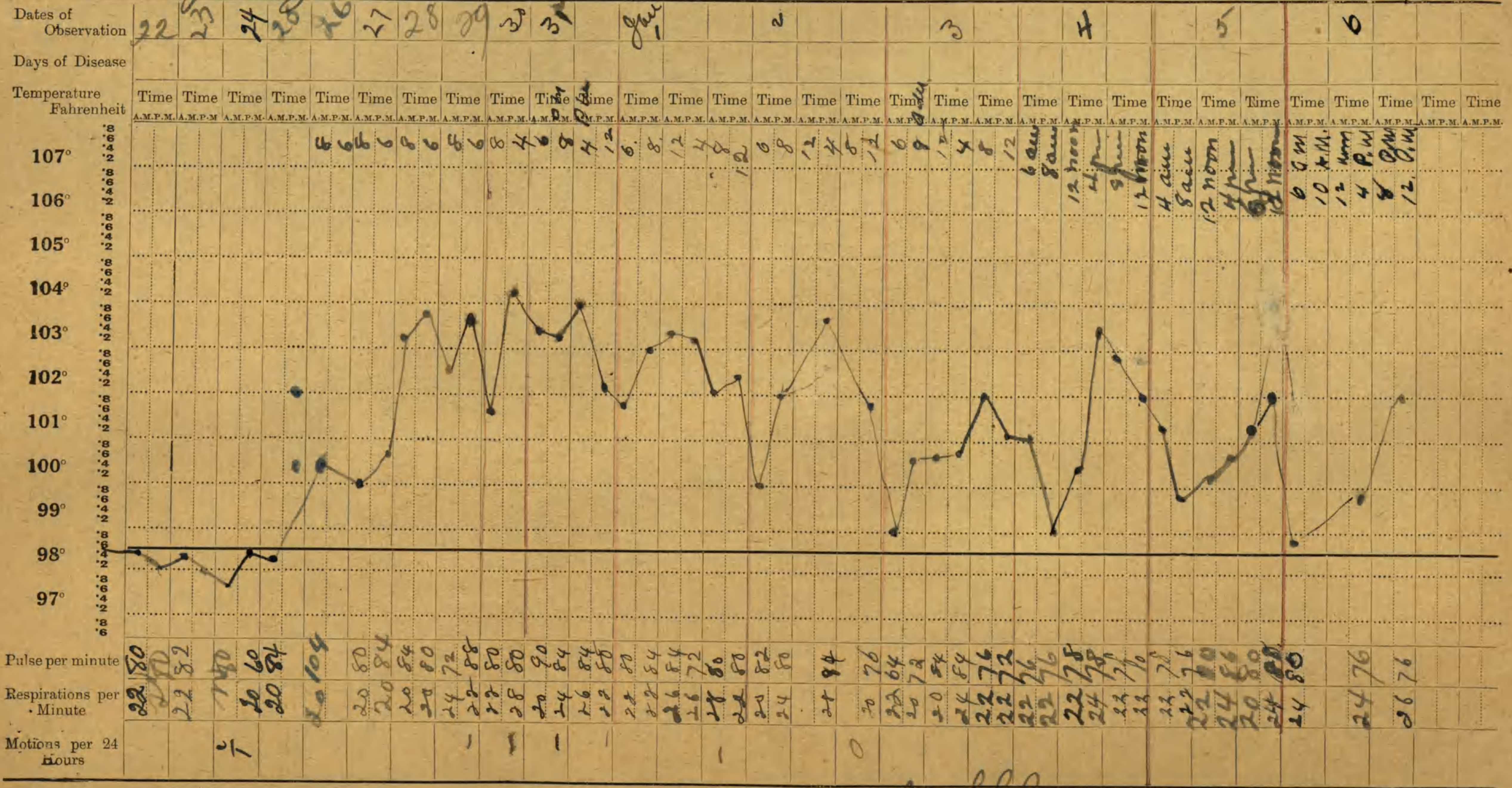
Corps 36 Bn. ~~3913 on 11/11/16~~

**CLINICAL CHART.**  
(To be attached to Case Sheet.)

Army Form B. 181.  
MOORE BARRACKS  
CANOGA, CALIF.

No. 657983 Rank and Name Cpl. Bellcher, A. L. Age 29 Service 9/12

Disease Influenza Date of admission 22-12-16 Date of discharge \_\_\_\_\_ Result Died



Signature W. Shannon Capt In charge of case.

1850-1851

**MEDICAL CASE SHEET.\***

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
23369 Year 1916	657983	Pte	Boettcher	Hugh
	<del>3987</del>	<del>Cor. M.H.S.</del>		
	36	Batt		Age. 29
				Service. 9/12
Station and Date.	Disease			
WOODS BARRACKS, CANADIAN HOSPITAL, 22-12-16	Influenza			
Ward 18	complaints on admission of itchininess especially when he gets warm. Rash on chest & back. Pain in all the joints & in right arm.			
	Hist? Pres. Illness -			
	Two days ago complained of pain in ankles. Sent to Byde Hosp. Condition did not improve. Vomited several times. No sore throat			
	Prev. Illnesses -			
	Had some skin trouble about four weeks ago, it all went away. Then began again about a week ago. Sunstroke last summer. Does not admit v.D.			
	Pres. Cond.			
Arthritis	Left ankle & knee & right shoulder are tender & painful..			
	Skin - has a papulo squamous eruption on chest & back -			
	Heart sluggish etc -			
	Diet - Rsh on Bed Milk Diet.			

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station  
and Date.

11.12.16. Few macula spots on shoulder  
Temp. elevated. Throat inflamed  
Admitted neck & axilla Conga  
diagnosed measles. Transfer  
to Quon. ward of Mackay  
Ward

2-1-17. Admitted to this ward 26.12.16. Vomiting frequently  
small quantities of bile stained fluid. Temp 101 $\frac{1}{5}$ -98-20.  
Slept soundly during night and did not vomit. Was very  
27 miserable next day. Kept vomiting at intervals. - Temp 103 $\frac{1}{5}$ -88  
28 -22. - during night. Seemed to be better this day but temp  
rose to 103 $\frac{4}{5}$ . - still with slow pulse. Given milk and  
lime water. Vomited during night. Had tenacious sputum  
which it was difficult to expectorate. Albumen in urine  
29 Temp. 103 $\frac{3}{5}$ -88-22. Quiet. Likes to lie with the  
window shaded. No vomiting No sign of rash. Slight icteroid  
tinge to skin  
30 104-84-26. Slight epistaxis during  
night. Is more comfortable. Spleen not palpable.  
31 102-80-28. Quite apathetic. Flush on cheeks.  
Kernig's sign slightly positive. Complains of backache.  
1 - Quite apathetic. Temp. not so high. White cell count  
14,900. Polymorphonuclear 83%  
Large lymphocytes 7%  
Small lymphocytes 10%.

2-1-17. About 20cc. c.s. fluid withdrawn by lumbar  
puncture this morning. Slightly turbid or rather  
opalescent. -

3-1-17. Temp. lower this morning. Pathologist reports  
meningococci present in c.s. fluid.  
Pupils equal and normal. Ross Mitchell

Station  
and Date.

7-1-17.

About 10cc. was withdrawn. The rate of flow was slower than on previous occasions, and the fluid was turbid. After standing clear serum appeared above and a whitish somewhat flocculent precipitate below. 30cc. serum (Lister) was given.

9-1-17.

No carriers were found in this ward. The naso-pharynx of every one in the ward was swabbed on 3-1-17 but with negative results. Exam<sup>n</sup> of c.s. fluid withdrawn from Boetcher yesterday revealed a Gram-negative diplococcus.

10-1-17

Lumbar puncture - 60 c.c. turbid yellow - fluid. Drug - normal saline  
Caused pain -

12-1-17

Lumbar puncture - Slightly yellow & turbid 60 cc. withdrawn - On way - with saline severe pain - had to stop - and was unable to see serum -  
Stained specimen shows pus and occasional intra cellular cocci  
Vented afterwards. Culture - meningococcus

14-1-17

L. puncture & chelz - 20 c.c. slightly turbid. Small amt of serum injected - pus cells  
No growth from culture -

16-1-17.

Severe headache. T. normal. Became irrational at noon. Lumbar Puncture - 35 c.c. Turbid fluid withdrawn. 40 c.c. Lister's Meningococcus serum injected. Slight respiratory distress at end of injection. W. S. Shannon Capt.  
Patient did not regain consciousness & died at 4:50 p.m. W. S. Shannon Capt.



MEDICAL CASE SHEET.\*

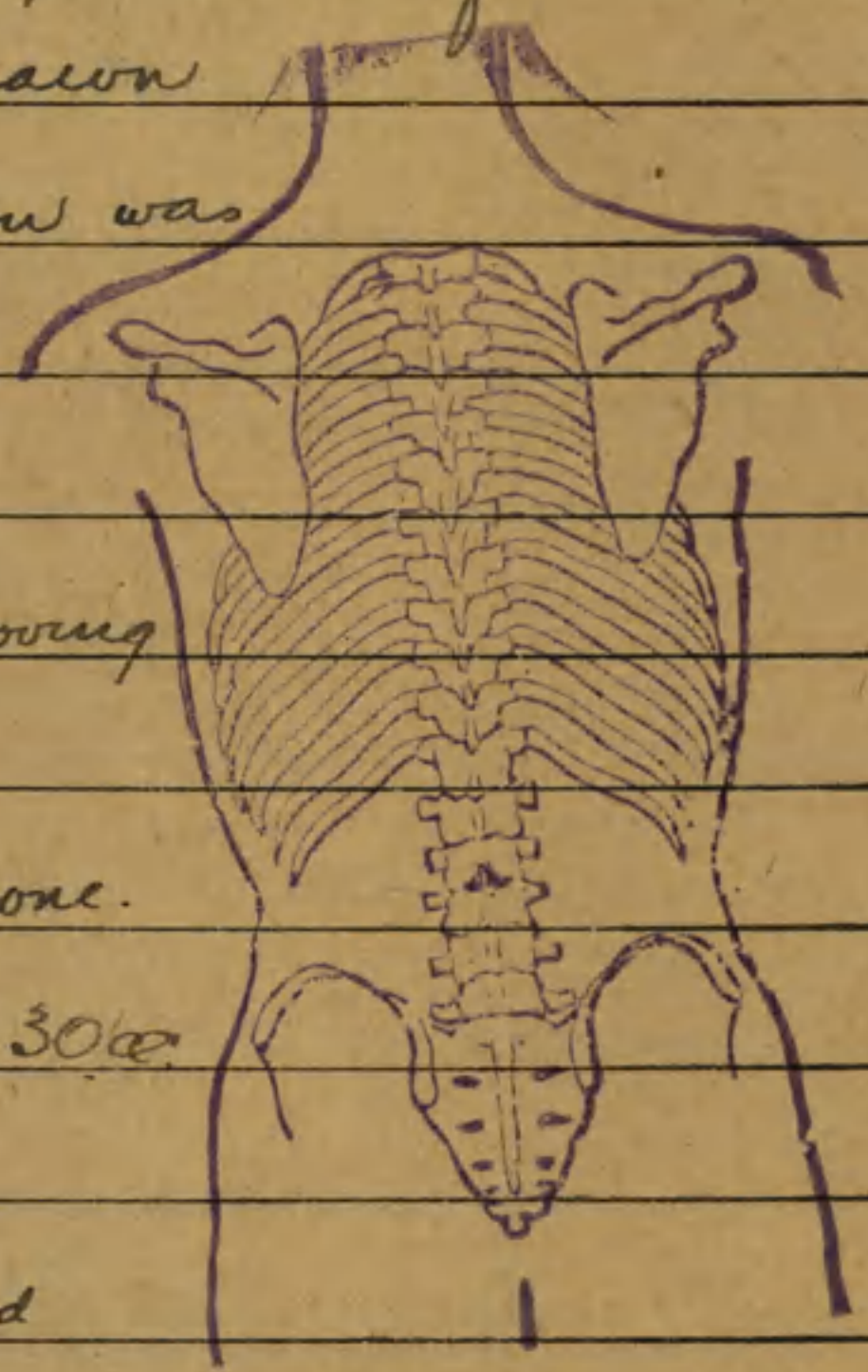
No. in Admission and Discharge Book. 23369 Year 1916	Regimental No.	Rank.	Surname.	Christian Name.
	657983	Pte.	Boettcher	Hugh L.
	39 <sup>th</sup> on Unit M.I.S. 36 <sup>th</sup> Batt.			Age. 29
				Service. 9/12

Station and Date.  
MOORE BARRACKS.  
CANADIAN HOSPITAL,  
SHORNCLIFFE.

Disease Cerebro-spinal fever.

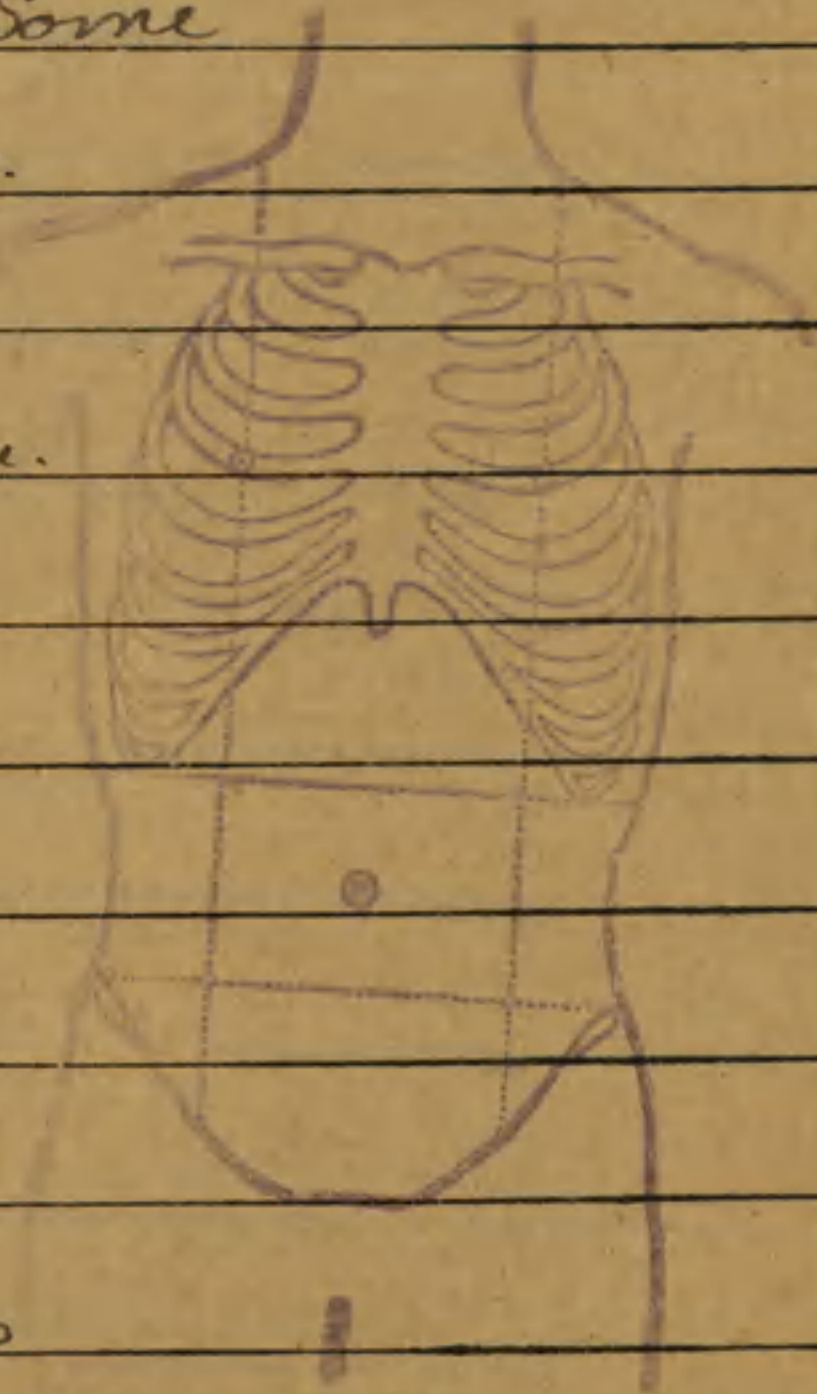
3-1-17 About 45cc. c.s. fluid withdrawn this morning and that amount of meningitis serum (Mullford) injected slowly. Complained of headache after c.s. fluid had been withdrawn but was easier after injection was made.

Has had a marked conjunctivitis, which is improving now.



4-1-17 Lumbar puncture again done. About 30cc. fluid withdrawn, 30cc. serum (Lister) injected. Was irritable during night. Fluid was yellowish in color this morning.

5-1-17 Lumbar puncture this morning. Some blood in fluid at first. About 15cc. withdrawn. Fluid came more slowly than before. 15cc. serum (Lister) given. Is very patient. - - -  
Prolarqol 5% in each eye.  
Condition on the whole is somewhat improved.



7-1-17 Temp. normal yesterday morning but rose to 102° during night ~~last~~ and was very thirsty. Fluid withdrawn this morning from 3<sup>rd</sup> interspace.

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

DUPLICATE

H.Q. 54-21-23-53

To be made out in duplicate.

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....162nd O. S. Batt'n, C. E. F. ....

.....

(2) Regimental Number.....657983.....

(3) Full Name of Soldier.....Hugh Lewis Boettcher.....

.....

(4) Place of Birth.....Magelawan, Ont.....

.....

(5) Are you married, or not?.....no.....

(6) If married, state,

(a) Full name of your wife.....

.....

(b) Present Postal Address.....

.....

(7) Are you a widower?.....no.....

(8) Have you any children?.....no.....

If so, give number of boys and girls.....

Also their names and ages.....

.....

.....

.....

.....

(9) Is your Father alive? *Yes*

If so, state name and address *Lewis Boettcher, Magpetawan Ont*

(10) Is your Mother alive? *No*

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

15) Are you insured? *No*

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date *OCT 14 1918*

*Arthur F. [Signature]*  
Officer Commanding.  
162nd O. S. Batt'n, C. E. F.

*mt  
24-2-21  
21*

A.G.R. Rank Name **BOETTCHER, Hugh Lewis** Reg'l No. **657983**  
 Unit **162nd Bn.** If in perm. Corps, } Married or Single **Single.**  
 What Unit? }  
 Place and Date of Enlistment **Parry Sound, 10th April, 1916.** Place of Birth **Twp. Chapman, Canada.**  
 Name and Address, Next-of-Kin **Louis Boettcher, Magnetewan, Ontario, Canada.** Relationship **Father.**  
 Assigned Pay Monthly \$ Payable to Relationship



Separation Allowance \$ Payable to Relationship **WERB#1**  
 Discharge, Date and Place **16.1.17** Reason **died** Character

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		<i>Arrived in England.</i>		<i>11-11-16</i>	<i>per S.S. "Baronia"</i>
<i>5-12-16</i>	<i>162nd Bn.</i>	<i>S.O.S. to 36th Res. Bn.</i>	<i>Stomeliffe</i>	<i>5-12-16</i>	<i>PT # 224 A</i>
<i>6-12-16</i>	<i>36th Bn</i>	<i>Taken on strength.</i>	<i>W Sandling</i>	<i>5-12-16</i>	<i>" 340.</i>
<i>4-1-17</i>	<i>6L do</i>	<i>Adm Moore B Hosp:</i>	<i>S'uffe</i>	<i>3-1-17</i>	<i>6.L. 236 Security All. ON</i>
<i>4-1-17</i>	<i>36th BN</i>	<i>SOS to 3RD RES BN</i>	<i>W S'line</i>	<i>4-1-17</i>	<i>PT. 2 D.O. 4</i>
<i>4-1-17</i>	<i>3rd R. BN</i>	<i>TOS of 3RD RES BN</i>	<i>W.S'line</i>	<i>4-1-17</i>	<i>PT. 2 D.O. 1</i>
<i>17-1-17</i>	<i>6L</i>	<i>Died in Moore B Hosp.</i>	<i>S'uffe</i>	<i>16-1-17</i>	<i>6.L. 241 Security All. ON</i>
<i>19-1-17</i>	<i>3rd Res Bn</i>	<i>Having died in Moore B Hosp.</i>	<i>W Sandling</i>	<i>16-1-17</i>	<i>PT # 6. 16.</i>
		<i>16/1/17 from Security All. ON</i>			<i>meningitis is struck off the strength from that date</i>



Fill in Only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)

# Casualty Form—Active Service.

250M.—1-16.  
H. Q. 1772-39-920.

Unit, Regiment or Corps 162nd O. S. Batt'n, C. E. F.

Regimental No. 657983 Rank Pte Name Boettcher, Hugh Lewis

Enlisted (a) Apr 20/16 Terms of Service (a) Duration of war Service reckons from (a) Apr 20/16

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Farmer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<del>Embarked</del> Disembarked	Halifax	1/11/16	
			Liverpool	11/11/16	
5/12/16	162nd BN.	Transferred to 36th Bn. West Sandling	West Sandling	5/12/16	D.O. 224
7/12/16	OC 36 <sup>th</sup> Bn	Taken on strength	W. Sandling	7/12/16	Part 2 Bn. O. 340
APR 4 1917	"	TRANSFERRED TO 3 <sup>rd</sup> Res BATTN C.E.F.		JAN - 1917	pt 2 Bn O-4
					<i>J. Oallison</i> <i>Lieut of a Coy</i> <i>162<sup>nd</sup> Bn</i>
4/10/17	OC 3 <sup>rd</sup> Res Bn	Taken on strength	W Sandling	4/10/17	Part 2 Bn. O. 1

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.



Regtl. No., Rank and Name \_\_\_\_\_ Corps \_\_\_\_\_

Disease \_\_\_\_\_ Hospital \_\_\_\_\_

To Officer i/c Laboratory. Ward \_\_\_\_\_

Please carry out an examination of the accompanying specimen of \_\_\_\_\_  
with special regard to \_\_\_\_\_

Date \_\_\_\_\_

O. i/c \_\_\_\_\_ Ward \_\_\_\_\_

**LABORATORY REPORT.**

Capt. Mitchell.

Ward 26 Moore Barracks Hospital.

We have no anti-meningococcic serum in stock and so are unable to supply same as requested.



Date of Examination 9-1-17

*C. Douglas Capt.*  
\_\_\_\_\_  
O. i/c Laboratory.



\_\_\_\_\_  
Name

\_\_\_\_\_  
Rank and Branch

\_\_\_\_\_  
Regiment

\_\_\_\_\_  
Ward

\_\_\_\_\_  
Hospital

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

# LABORATORY REPORT

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Rank and Branch  
\_\_\_\_\_  
Hospital

We have no anti-meningococcus serum in stock and are unable to supply one as requested.



\_\_\_\_\_  
Name of Institution

\_\_\_\_\_  
Address

Regtl. No., Rank and Name 657983. P. H. L. Boettcher Corps 36<sup>th</sup> Batt

Disease Influenza Hospital Moore Barracks

To Officer i/c Laboratory. Ward 26

Please carry out an examination of the accompanying specimen of Urine with special regard to General

Date 27-12-16 Capt. Russ Mitchell O. i/c per E. M. Ward.

LABORATORY REPORT.

Color - turbid  
S.G. - 1.032  
Reac - acid  
Sugar - neg  
Albumen - neg

39th B<sup>m</sup>  
on M.A.S.

Date of Examination \_\_\_\_\_

R. B. Jenkins Capt  
O. i/c Laboratory.



Regtl. No., Rank and Name 65798 Pte. Brethcher. H.L. Corps 30th R.

Disease Cerebro-spinal meningitis Hospital Moore Barracks

To Officer i/c Laboratory. Ward 26

Please carry out an examination of the accompanying specimen of Cerebro-spinal fluid.  
with special regard to Meningococci.

Date 12-1-17.

O. i/c Ward.

### LABORATORY REPORT.

POSITIVE

39133  
on mms

*[Signature]*

..... Captain O.C.  
No. 3 Canadian General Hospital  
.....  
.....  
.....



Date of Examination \_\_\_\_\_

O. i/c Laboratory.

Regt. No. Rank and Name *[Faint handwritten text]*

Masses *[Faint handwritten text]* Hospital *[Faint handwritten text]*

To Officer's Laboratory *[Faint handwritten text]* Ward *[Faint handwritten text]*

Please carry out an examination of the accompanying specimen of *[Faint handwritten text]*

with special regard to *[Faint handwritten text]*

Date *[Faint handwritten text]*

Of the *[Faint handwritten text]* Ward *[Faint handwritten text]*

LABORATORY REPORT

*[Handwritten notes: Mr. H. G. ...]*

Date of Examination *[Faint handwritten text]*

Of the Laboratory *[Faint handwritten text]*

Special

8

REQUISITION

Urinalysis

REPORT

amb.

DATE

28-12-16

COLOUR

to

Reg. NUMBER

657983

S.G.

1022

NAME

Pte. Boucher H.L.

REACTION

acid

UNIT

36<sup>th</sup> Batt

SUGAR

neg

WARD

26

ALBUMIN

Pos

DIAGNOSIS

Cholangitis

MICROSCOPE

few WBC.

EXAM. REQUIRED

General and  
for bile.

MEDICAL OFFICER

Ross Mitchell  
Capt C.A.M.C.

Sept. 5, A.M.O.

Officer i/c Laboratory

Faint mirrored text at the top left, likely bleed-through from the reverse side.

Faint mirrored text at the top right, likely bleed-through from the reverse side.

MIRRORED

Faint mirrored text in the upper middle section.

MIRRORED

Faint mirrored text in the upper right section.

Handwritten scribbles and marks in the middle left section.

Handwritten scribbles and marks in the middle right section.

MIRRORED

MIRRORED

Faint mirrored text in the lower middle section.

MIRRORED

MIRRORED

Faint mirrored text in the lower right section.

Handwritten text on a yellowed, stained area at the bottom left.

Handwritten text on a yellowed, stained area at the bottom middle.

MIRRORED text at the bottom right, likely bleed-through from the reverse side.

REGISTRATION

DATE 1/1/17  
Reg. NUMBER 657983  
NAME Pte Boettcher W.S.  
UNIT 36<sup>th</sup> Batt  
WARD 26  
DIAGNOSIS Influenza  
EXAM. REQUIRED

MEDICAL OFFICER

REPORT

COLOUR amb.  
S.G. 1.026  
REACTION acid  
SUGAR neg.  
ALBUMIN neg.  
MICROSCOPE

R.B. Jenkin  
Capt. D.A.M.C.  
Officer i/c Laboratory





EMPORE

COLORE

B. G.

HAMPTON

BUVA

ALPHIA

MIDWINTER



WILLIAM J. BARNARD  
1870

EMPORE

COLORE

B. G.

HAMPTON

ALPHIA

MIDWINTER

WILLIAM J. BARNARD  
1870



COLONEL C.M.C.  
OFFICER IN CHARGE BARRACKS,  
CANADIAN HOSPITAL, SHORWELL.

*Mr. [unclear]*  
*to*

*23369*  
*laboratory*  
*to file*  
*Dear Sir*  
*Best wishes*  
*and hope you are well*

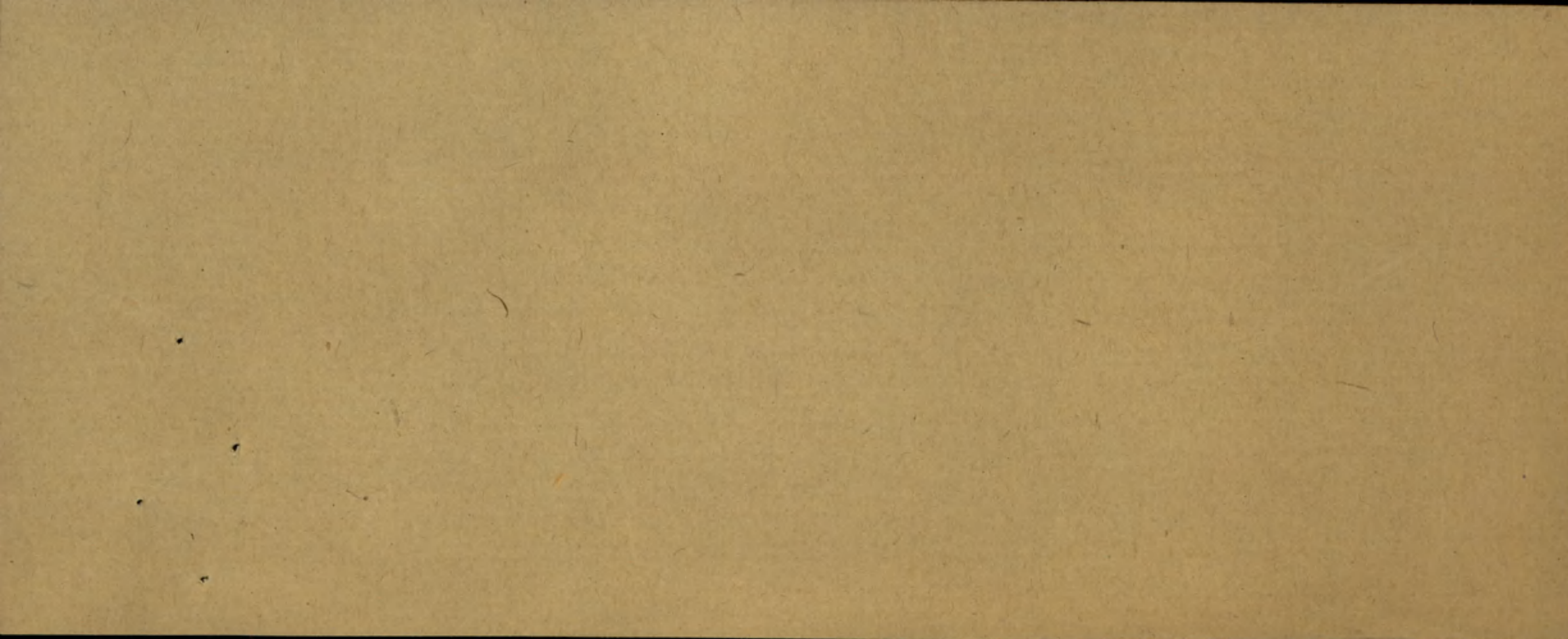
MOORE BARRACKS  
CANADIAN HOSPITAL  
SHORWELL



Diagnosis  
Cerebro Spinal Fever

W. H. Hammond Capt

Written by J. Res. Dr. J.



REQUISITION

DATE

Dec 23

REG. NUMBER

657983

NAME

Mr. Wheeler

UNIT

36 Batt

WARD

18

DIAGNOSIS

Influenza

EXAM. REQUIRED

Routine

Lt. Col. Pope, Capt.  
MEDICAL OFFICER

REPORT

COLOUR

ltamb

S.G.

1.029

REACTION

acid

SUGAR

neg

ALBUMIN

neg

MICROSCOPIO

Capt. C.A.M.C.  
Officer in Charge Laboratory



12/11



Capit. ...  
not ...

...

Surname

Christian Name or Names

Reg. No.

*Boettcher*

*H. L.*

*657983*

Rank

Unit

Co.

Troop

Batty.

*Pte*

*36 Batt'n*

Hospital

Date of Admission

*Moore*

*Barrocks' Thornecliffe 3-1-17.*

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

*C. Spinal Meningitis*

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Died 16.1.17.*

DISPOSITION

Date

*4-1-17 — 236*

REMARKS

*17.1.17 LHM*

*Ser ill 3-1-17*

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London.

*Handwritten mark*



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

REGT'L NO 65-7983

NAME

Baettcher Hugh Lewis

H. Q. FILE NO. 649-

RANK AND CORPS

Plt. 36th Bn form 162nd Bn

FOLLOWS

NO.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

No.	DATE	NATURE OF CASUALTY
0. 7162.	3-1-17.	Sev. ill. Moore Bks Hosp Jan 3rd. 1917. Cerebrospinal meningitis.
07725	16-1-17	Died of cerebrospinal meningitis at Moore Barr Hosp Jan 16th 1917 ✓
A.F.B. 2090	19-1-17	Died of cerebrospinal meningitis. Moore Barr hospital Shorncliffe Jan 16th 1917

LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

236

Moore Bays Shore

3-1-17

Serial cerebro spinal Meningitis

241

Moore Bays Shore

16-1-17

Died, cerebro spinal Meningitis

150  
Number

657 983

Rank

Pvt ~~B~~

Surname

BOETTCHER

Christian Name

Hugh Lewis

Units

162<sup>nd</sup> Bn Can Div Theatre of War England

Date of Service

11-11-16

Remarks

(Sister) Mrs. Matilda ~~by~~ <sup>D</sup> ~~by~~ <sup>D</sup>

Latest Address

C/o H. H. MacLean, Esq.  
Box 1097

Roll No.

A Page 4511 North Bay, Ont.

DESF  
REGN NOV 24 1922  
1954  
2491

No 657983

RANK *Pte*

NAME *Boetcher Hugh L.*

T. O. S. *1/5/16*  
*20/7/1916*

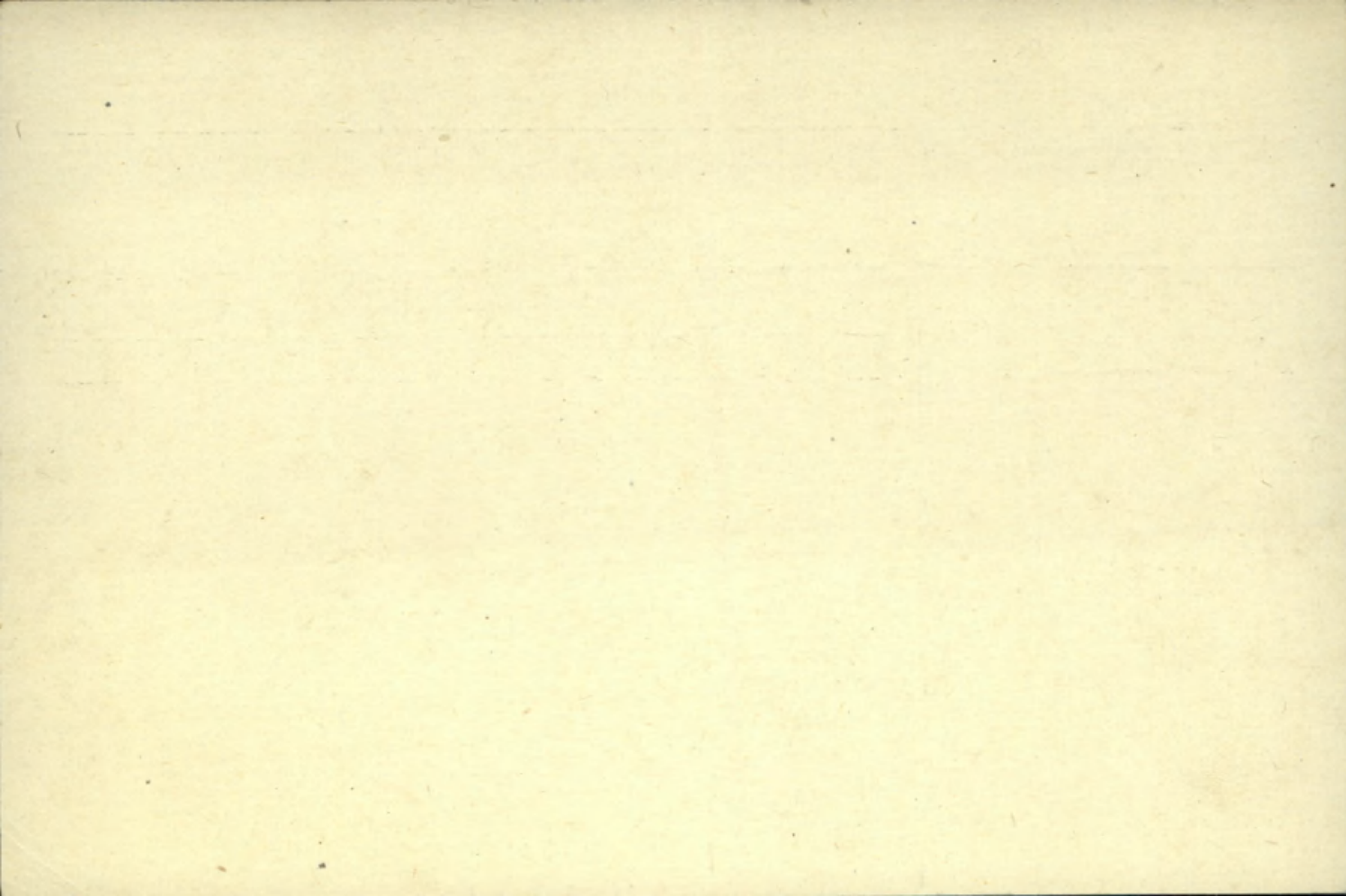
UNIT *16<sup>th</sup> 2nd Battalion*

M. D. *2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>May 1</i>	<i>May 31</i>	<i>✓</i>		
	<i>June</i>	<i>✓</i>		
	<i>July</i>	<i>✓</i>		
	<i>Aug</i>	<i>✓</i>		
	<i>Sept</i>	<i>✓</i>		
	<i>Oct</i>	<i>✓</i>		
	<i>Nov</i>	<i>✓</i>		

**UNIT SAILED**

**OCT 3 1 1916**



Hugh Lewis

Name **Boettcher**

Rank

Pte

Reg. No. **657983**Unit **36th Battalion.**

Next of Kin

**Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3-1-17	Moore Bcks. Hosp. Shorn.	<u>SER. ILL.</u> Cerebro Spinal Meningitis.	236	0/7162		
4-1-17	Still Ser. Ill.		"	"	"	"
9-1-17	Still Ser. Ill.	"	"	"	"	"
10-1-17	<b>Died</b>	"	"	"	"	"
				241.	9/7725.	
				25. B. 2863.		





ADMITTING CARD.

Regt. No. 657983 A. &amp; D. No. 23369

Rank Pte

Name

Boettcher Hugh L

Corps

39 Batt C Coy

Religion

CofC.

Age 29

M. H. Rec'd

M. H. Requested

M. H. Ret'd

Disease

Influenza to Cerebro Spinal  
Meningitis

Admitted

22-12-16

Discharged

Place in Hospital

18 - 14 - 26

Transferred

Results

Died 4 50 Pm 16 1 17

9/12 Burks Falls

no no

10 30 am

P.T.O.

MEDICAL	recd. from	39 B <sup>n</sup>	23	1/12/1916
	recd. from			/ / 191
	recd. from			/ / 191
	recd. from			/ / 191
	received from Registrar this	21st	3	1/1/1917
	Ross Mitchell, Ward 26			
		Capl.		

H. Q. 649-B-11095.

✓ BOETTCHER, Pte. ✓ Hugh L. ✓ #657983, ✓ M 162nd Bn.

3rd Rec. Bn form  
364  
Dn.

Med & D (Sister)

Mrs. Matilda Wurm,  
C/o H. H. MacLean, Esq.,  
Box 1097,  
North Bay, Ont.

P & S (Brother)  
*ser # 784932*

Mr. J. W. Boettcher,  
Findlater, Sask.

*24975*

scroll Desp. ~~NOV 20 1921~~

Mem Cross (Nil)

Plague Desp.

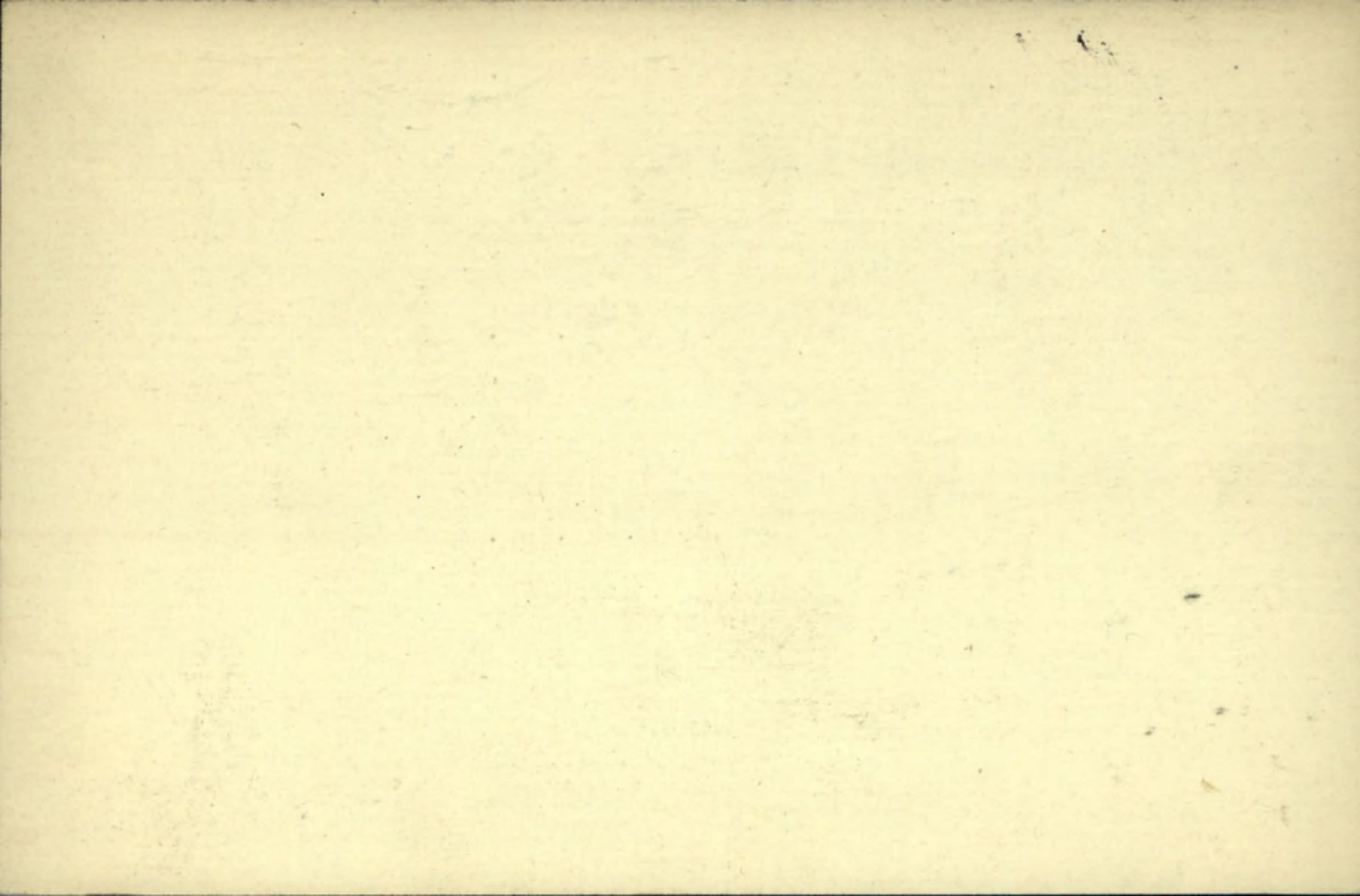
JUL 9 1921  
JUL 5 1922

Reg. No. *P 415'94*

*not elig. 14/15 star  
not elig. U. m.  
\* 6 leg. B. W. m.*

49847

*B-*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

482 M. F. W. 12a.  
 50m.—7-16  
 1772—39—819.

Sheet No. 2. *Mrs. Matilda Wurm*  
 (Assignee)

Name of Soldier *Boettcher, Hugh Louis*  
*657983, Pte. 162nd Bn.*

PAYMENTS.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			20. <sup>00</sup>	NOV 1 1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		C 30909	20	
Dec.		X 33663	20	
Jan.	1917	T 37208	20	<i>cut closed car. B.M.M.</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

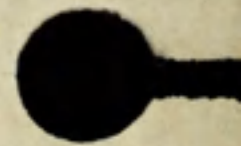
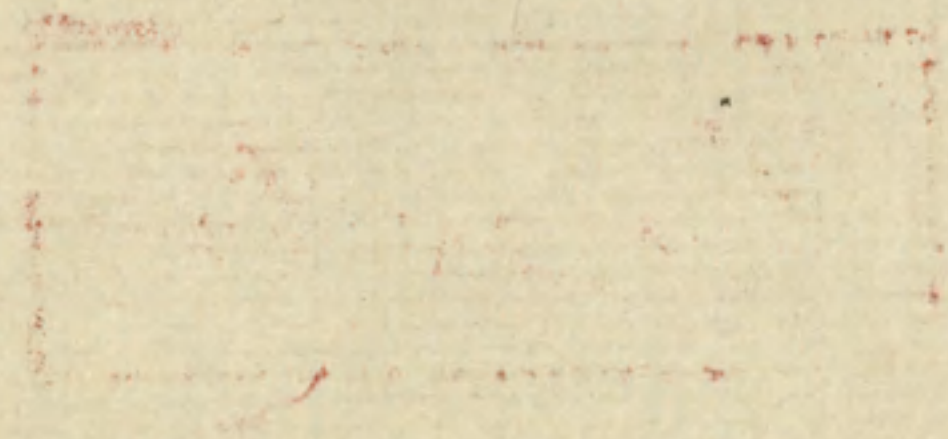
Casualties

F. X. Rend. Date ..... By .....  
 E. F. X. " Date *3-10-17* By *H.L.*

*W*

*W*

*Worm suspended T 37208 mailed*





*Ew*

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

481

To Whom *Mrs. Matilda Wurm,*  
Address *Magnetawan,  
Ont.*

By Whom Assigned *Boettcher, Hugh Lewis,*  
Regtl. No. *657983*  
Rank *Pte.*  
Corps *162<sup>nd</sup> Btn. C. C. F.*

Rate *20.<sup>00</sup>*

NOV 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p><i>Sup payment 1<sup>4</sup>/<sub>17</sub></i>  <i>Discharge to Canada</i>  <i>3<sup>14</sup>/<sub>17</sub> 19<sup>3</sup>/<sub>17</sub> I. 7<sup>1</sup>/<sub>17</sub> 13<sup>4</sup>/<sub>17</sub></i>  <i>Died Jan 16/16 C.R. (1) 17/17 13<sup>4</sup>/<sub>17</sub> M.</i></p> <div style="border: 1px solid red; padding: 10px; width: fit-content; margin: 10px auto;"> <p><i>Casualties</i></p> </div> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;"> <p>F. X. Rend. Date..... By .....</p> <p>E.F.X. " Date <i>3-10-17</i> <i>H.L.</i></p> </div> <p><i>F.X. - 2/17/17 G.R.</i></p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

391377 ~~on 1118~~  
 Corps 36<sup>th</sup> Batt.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Military Hospital

No. 657983. Rank and Name Pte Hugh L. Boettcher Age 29. Service 9/12  
 Disease Cerebrospinal Fever Date of admission 22-12-16. Date of discharge Result Died

Dates of Observation	7		8		9		10		11		12		13		14		15		16						
	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time				
Temperature Fahrenheit	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.			
107°	12	2 p.m.	6 p.m.	10 p.m.	6 a.m.	10 a.m.	2 p.m.	6 p.m.	10 p.m.	6 a.m.	10 a.m.	2 p.m.	6 p.m.	10 p.m.	6 a.m.	10 a.m.	2 p.m.	6 p.m.	10 p.m.	6 a.m.	10 a.m.	2 p.m.	6 p.m.	10 p.m.	
106°																									
105°																									
104°																									
103°																									
102°																									
101°																									
100°																									
99°																									
98°																									
97°																									
Pulse per Minute	96	98	90	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82	82
Respirations per Minute	26	26	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24	24
Motions per 24 hours																									

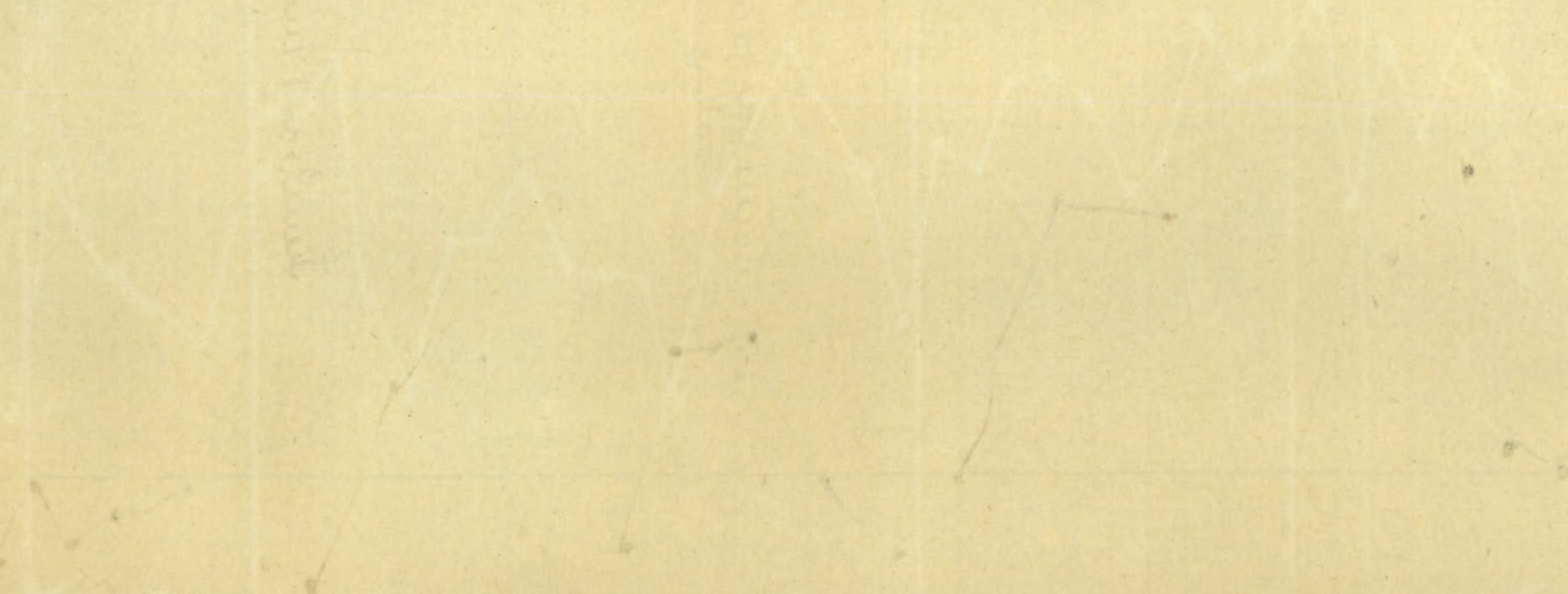
Signature W. Shannon Capt. In charge of case.

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Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Mwaga Baraka Mpl. Shereffe.	23369	27	12	16	16	1	17	Cerebro-spinal Fever	26	Admitted with symptoms of influenza. On 26/12/16 macular spots on shoulders, cough. No symptoms or signs of meningitis. On 2/1/17 T. went to 103°. Sudden onset vomiting, photophobia, apathy, backache. Slight stiffness neck. Suggestion of Kernig. No pathological reflexes. Marked conjunctivitis. Lumbar puncture showed slight cloudiness of fluid. Path. Report - Meningococcus present. W.B.C. 14,900 Polys 83%. Urine - Alb. positive. 45c.c. Sister's serum injected. From this on, on alternate days <sup>C.S.</sup> fluid withdrawn & serum injected. Case became well marked. On 14/1/17 T. subnormal, severe headache, conscious. On 16/1/17 T. suddenly to 102°, delirium. Fluid which had been slightly cloudy became muddy. Died at 4.50 p.m. 16/1/17. Total serum - 165c.c. P.M. - Pus on vertex brain and along all the basilar sinuses & sulci - no plastic exudate. Pus over roof of 4 <sup>th</sup> ventricle. Marked internal hydrocephalus. Pus about poles of hippocampi. Methylene injected. No encephalitis. Cord not done. Spleen normal. Lungs - congestion bases post. Siver congested.	W.S. Shannon Capt.

Duplicate Medical History sheet posted to here

