

Unit C. A. M. C. Rank Nursing Sister Name Elizabeth Goodhead

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

BASE HOSPITAL

MILITARY DISTRICT No. 2

ORIGINAL

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (a) What is your Surname? Goodhead
(b) What are your Christian Names? Elizabeth
2. (a) Where were you born? (State place and country) Birmingham England
(b) What is your present address? Base Hospital Toronto
3. What is the date of your birth? Jan 10th 1893
4. What is (a) the name of your next-of-kin? (Mrs) Lillian Johnstone
(b) the address of your next-of-kin? 170 Clifton Rd. Aston
(c) the relationship of your next-of-kin? Sister Birmingham
England
5. What is your profession or occupation? nurse
6. What is your religion? Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? X
9. State particulars of any former Military Service X
10. Are you willing to serve in the

CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

Elizabeth Goodhead (Signature of Officer.)

Taken on strength (place) Toronto

(date) Aug 20th 1917

E. J. Sanders
(Signature of Commanding Officer.)

Lieut Colonel, A.M.C.

BASE HOSPITAL

MILITARY DISTRICT No. 2

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Jan 24th 1918

Place Toronto

*Insert here "fit" or "unfit"

H. B. Wales Capt
Medical Officer.

QUESTIONS TO BE ANSWERED BY OFFICERS

CANADIAN CIVIL SERVICE EXAMINATION

QUESTIONS TO BE ANSWERED BY OFFICERS

CANADIAN CIVIL SERVICE EXAMINATION

inc.

Officers

REGIMENTAL DOCUMENTS

NAME

GOODHEAD ELIZABETH

REGT. NO.

N/S.

UNIT

C. A. M. C.

H. Q. FILE NO.

R#15-5-19



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

Recd 14.10.19

Doc's to B.P.C.
Certs

29.9.19
18.11.19

R/B.P.C. spec 223
Ref 3-12

DEATH

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. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

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)

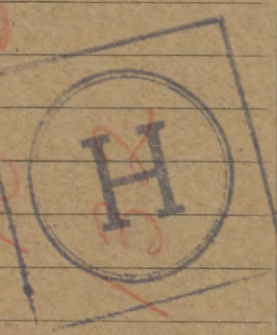
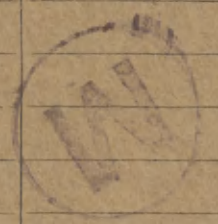
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1-2 A 7 A 45
1 M 7 W 51
1 A 9 7m 32

2 2000
1 card
1 2012
1 2019



6
3
16
1392-7-1
1392-7-1

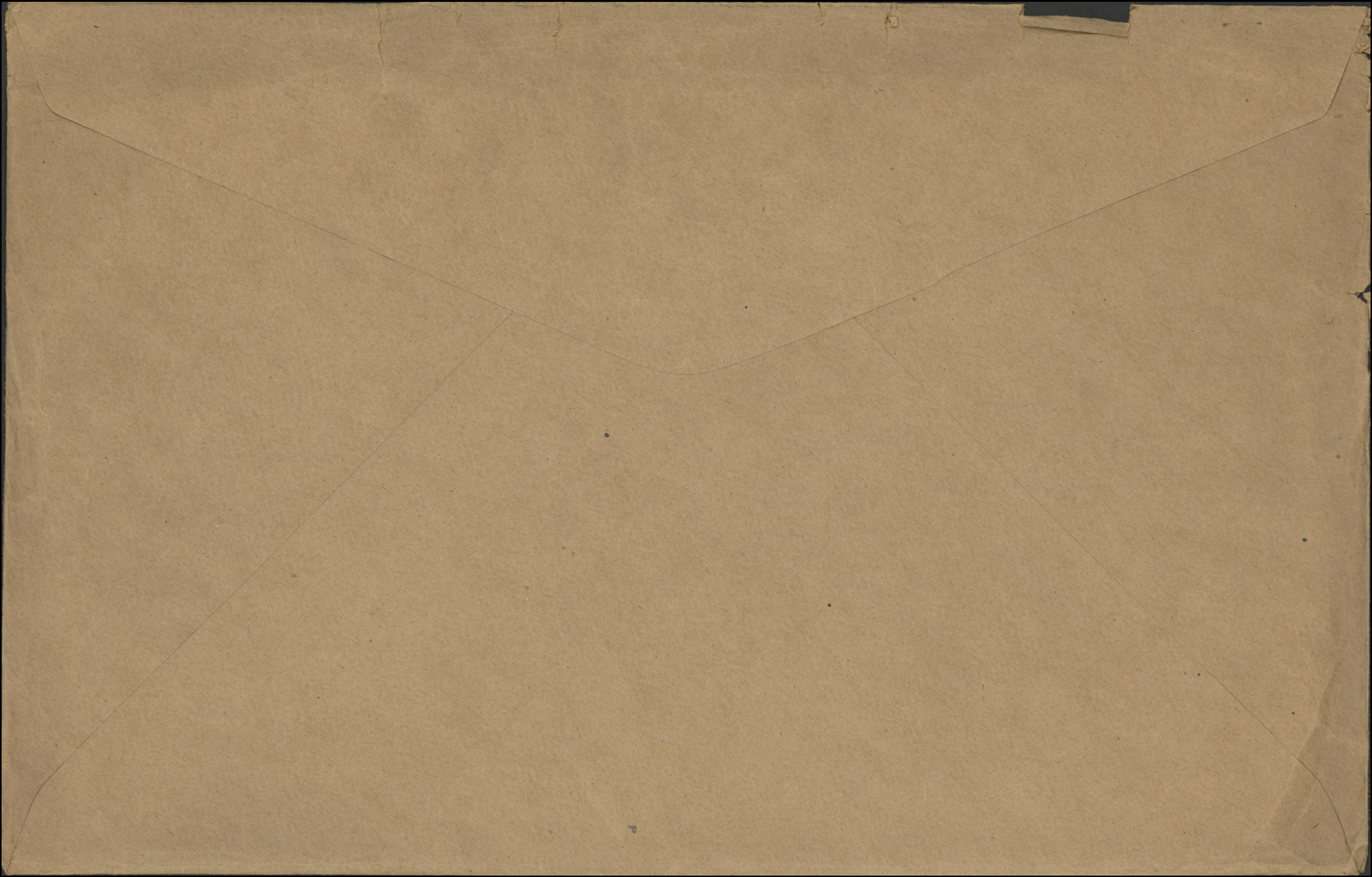
17304

DISCHARGE

Category

DESERTION

2
1-25
1-25



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

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

350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.

C.A.M.C. BASE HOSPITAL
MILITARY DISTRICT No. 2

Regimental No.

Rank

Murphy's Sister
Name

Goodhead, Elizabeth
C. E. F.

Enlisted (a) *20-9-17*

Terms of Service (a) *Can. Exped. Force*

Service reckons from (a) *20-8-17*

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) *(M) Murphy's Sister (C) graduate nurse*

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				
29-8-18	S. O. S. BASE HOSPITAL	on proceeding Overseas MILITARY DISTRICT No. 2 (Auth: A.D.M.S. letter 2MD. 34-3-33, dated 19-8-18 and H. Q. Telegram 5047)			<i>P. J. Parry</i> Lieut Colonel, A.M.C. BASE HOSPITAL MILITARY DISTRICT No. 2
		<i>Embarked</i>			
		<i>Disembarked</i>			
21 SEP 1918	O.C., C.A.M.C.	R. & T. Depot, T.O.S. from <i>Canada</i>	SHORNCIFFE	4 SEP 1918	<i>P# 20264</i>
<i>4/10/18</i>	O.C., C.A.M.C.	R. & T. Depot, S.O.S. to <i>701264. Rep</i>	do	<i>1/10/18</i>	<i>P# 20277</i> <i>M. Davis</i> Capt. Asst. Adjutant For O.C. C.A.M.C. Reserve Depot

(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.

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				
7.10.18	12.6.8. N	T.O.S. 12.6.8. H. from 6-a.m. to R. & L. Depot	Bramstott	1.10.18	Pt II A.O. 238
26.11.18	"	S.O.S. 12.6.8. H. to Camb. bas. loy	"	26.11.18	Pt II A.O. 281
29.11.18	Camb. bas. loy.	T.O.S. from 12.6.8. H. to Scliff.	Scliff.	26.11.18	Pt II D.O. 176.
16.6.19	do.	S.O.S. on transfer to The C.E.F. Canada	do	13.1.19	Pt II No 140
					Capt. Pauline for Camb. bas. loy.

CAPT.
 ADJUTANT,
 No. 12 CANADIAN GENERAL HOSPITAL

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

H.S. 2-33.

H.S.

ISSUED TO OFFICERS AND NURSING SISTERS



This is to Certify that (Rank) Nursing Sister

(Name in full) Elizabeth GOWMAN, D.

Enlisted in The Canadian Army Medical Corps,

CANADIAN EXPEDITIONARY FORCE, on the XXXXXXXXXXXX

day of XXXXXXXXXXXX 191..... AND WAS APPOINTED to COMMISSIONED RANK

in The Canadian Army Medical Corps,

CANADIAN EXPEDITIONARY FORCE on the Twentieth..... day

of August..... 1917.....

He SERVED in CANADA, and ENLISTED with the Can. Army Medical Corps, Base Hospital, H.Q. #2, Can. Army Medical Corps Depot, Thorncliffe, #12 Can. General Hosp., Can. Army Medical Corps Co. Company, Thorncliffe, District Depot #2.

and was STRUCK OFF THE STRENGTH on the Twenty-seventh..... day

of May..... 1917..... by reason of Being medically unfit.

Dated at Ottawa, this Second..... day

of December..... 1917.....

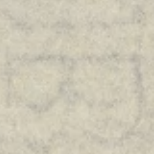
Heafnoll
for Director of Personal Services.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NON-COMMISSIONED RANK

THIS IS TO CERTIFY THAT _____
OF THE _____
CANADIAN EXPEDITIONARY FORCE, IN THE _____
AND WAS APPOINTED TO COMMISSIONED RANK _____
ON THE _____
CANADIAN EXPEDITIONARY FORCE, IN THE _____
AT _____
HE SERVED IN CANADA _____
AND WAS STRUCK OFF THE ROLL WITH AN INJURY _____
ON THE _____
Dated at Ottawa, Ont. _____
1917



A.O. 2.-33.

1 THIS IS TO CERTIFY that (Rank) *Missing Sister*
2 (Name in full) *Elizabeth GOODHEAD*
3 Enlisted in *C.A.M.C.*
4 CANADIAN EXPEDITIONARY FORCE, on the *~~~~~*

5 day of *~~~~~* 191 *~~~~~* AND WAS APPOINTED TO COMMISSIONED RANK
6 in *C.A.M.C.*

7 CANADIAN EXPEDITIONARY FORCE on the *Twentieth* day
8 of *August* 191 *7*.

9. *S* He SERVED in CANADA *& England*
with the C.A.M.C. Base Hosp M.D.#2,
C.A.M.C. D.cliffe, #12 C. Gen. Hosp,
C.A.M.C. Cas. Co. Ycliffe, D.D.#2.

10 and was STRUCK OFF THE STRENGTH on the *Twenty-Seventh* day
11 of *May* 191 *9* by reason of *Med unfit*

12 Dated at Ottawa, this *~~~~~* day
13 of *~~~~~* 191 *~~~~~*

14

Temporary
St. Andrew's Military Hospital
MEDICAL HISTORY SHEET

(M.S.)

Surname Brinkhead Christian Name Elizabeth

Examined	{ on _____ day of _____ 191	Approved by _____
	{ at _____	
Birthplace	{ City or Town _____	Rank _____ M.O.
	{ County _____	
Apparent age	_____	
Trade or occupation	_____	M.O.
Height	_____ feet _____ Inches	M.O.
Weight	_____ lbs.	M.O.
Chest measurement	{ Minimum _____ inches	M.O.
	{ Maximum expansion _____ inches	M.O.
Physical development	_____	M.O.
Small-pox Marks	_____	M.O.
Vaccination Marks	{ Arm _____ Right _____ Left _____	
	{ Number _____	
When Vaccinated last	_____	M.O.
(a) Marks indicating congenital peculiarities or	_____	M.O.
previous disease	_____	M.O.
(b) Slight defects but not sufficient to cause rejection	_____	M.O.
		M.O.
		M.O.
		M.O.

Enlisted on _____ day of _____ 191 at _____

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to	{ #200.	_____		
	{ (C.M.B.)			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

(M.S.) Surname Goodhead Christian Name Elizabeth

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				
St. Andrew's M.H.	Toronto	29	1	19	10	3	19		40	Admitted with diagnosis of Bronchitis. Cough & expectoration. Sputum streaked with blood & mucus prior to admission. X Ray - show paratracheal infiltration. Cal. Elliott states. Debility following frequent A.P. of lung - apparently arrested. One month's convalescence recommended. Sent to St. Catharines.	C. E. Innes M.D.
Oakhill Conv. Hosp.		10	2	19	6	5	19		56	Condition improved with rest and feeding. For transfer to St. Andrew's M.H. for final disposal. Declared fit by Cal. Elliott & boarded as medically unfit.	
St. Andrew's M.H. Hospital		5	5	19	17	5	19	Bronchitis	12	Transferred to St. A. M. H. for final disposal. Declared fit by Cal. Elliott & boarded as medically unfit.	C. E. Innes M.D.

CLINICAL CHART.

Corps C. a. w. c.

Hospital Station.....

No. _____ Rank and Name Goodhue, N. Sailer Age 26 Service C²¹ 12 E⁵ 12

Disease Bronchitis Date of Admission 11-2-19 Date of Discharge MAY 17 1918 Result Boarded 227 Serial No. A. & D. Book FD 19

Dates of Observation	February																													
Days of Disease																														
Temperature Fahrenheit	TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME	
	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.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.
107°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
106°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
105°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
104°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
103°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
102°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
101°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
100°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
99°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
98°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
97°	.8	.6	.4	.2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Pulse per Minute																														
Respirations per Minute																														
Motions																														

C. P. Smith

In charge of case.

4
 3
 23
 18
44
 13
 126
 11
150

CLINICAL CHART

Diagnosis

Date of Admission

Date of Discharge

Age

Serial No. of S.D. Card

Barthelme

Sex

Notes

Medical Section

101

102

103

104

105

106

107

108

109

110

111

112

113

114

115

116

117

118

CASE HISTORY SHEET.

Oak Hill Cw. Hospital. Burlington Station Station.
 No. _____ Rank 2nd Name Goodhead Elizabeth Age _____
 Unit (Came) #2DD Completed years of service _____ Where and how long 6. 22/12, 2 9/12
 Date of admission 10/3/19 Date of discharge MAY 17 1919
 Diagnosis Bronchitis Place of origin England

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Still coughing, greenish colored sputum
much in a.m. - sleeping well at night, more
Pain in left side of chest still, but not so severe -
Has gained 4 lbs in last 2 weeks - He had
a little rise in temp. at times in p.m. to 99.3 -
2 8/3/19 Hudson sent him

St. Andrew's Military Hospital

14. 5. 19. -

Col. Elliott states - Chest is quite clear of
admission sounds & recommends discharge

FAMILY HISTORY.

(Tuberculosis, mental or nervous diseases.)

TREATMENT.

(Especially any specific or special form.)

CONDITION ON DISCHARGE.

(and disposal made of case.)

Date _____

Medical Officer i/c case.

B. P. C. FOLIO
FALSE DOCKET
5

TORONTO GENERAL HOSPITAL

Department of Radiology

REPORT OF THE ROENTGEN EXAMINATION OF

Date Mar 3/19 Name N/S. E. Goodhead,
Address St. Andrews Military Hosp; ^S
Referred by Dr. M. Crawford. Case No. 45255

Stereoscopic plates were made of the chest.

The bony contour is normal, and the heart and arch of the aorta are normal in size and position.

There is a fine diffuse infiltration of the whole bronchial tree throughout the entire chest, with no evidences of localised involvement at any point. There are, however, a number of small fibrotic nodules along the distribution of the right vertical bronchus, and left 2nd interspace trunk. The latter practically corresponds to the left posterior apex. These two areas are suspicious, but do not constitute definite lesions.

G. Richards

Capt. C.A.M.C.,

O.C., X-Ray Dept.

Arves

CASE HISTORY SHEET.

St Andrews Hospital. Toronto Station.
 No. _____ Rank N/S Name Goodhead E Age 26
 Unit (Bamb) #200 Completed years of service 6 $\frac{12}{12}$ 8 $\frac{5}{12}$ Where and how long }
 Date of admission 5.5-19 Date of discharge MAY 17 1919
 Diagnosis Bronchitis Place of origin England

CONDITION ON ADMISSION AND PROGRESS OF CASE

Returned to St. A. M. H. after convalescence at Oakhill, for final
board -
Examined by Col. Elliott and chest examination negative -
to consider her chest clear - J. Elliott
4.6.19 - X-ray - heart - acid. alt. reg. Sug. reg. S.F. 10.13.
4.5.19. Weight 112 $\frac{3}{4}$
15.5.19. Boarded to-day and recommended for
discharge.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

C. F. Jones Major
 Medical Officer i/c case.

CLINICAL CHART.

Corps C. H. M. L.

Hospital Station St. Andrews

No. _____ Rank and Name Mrs Goodhead

Age 26 Service 0 22/12 3 15/12

Disease. *Brachitis*

Date of Admission 5-5-40 Date of Discharge MAY 17 1940

Boarded ²²¹⁰ 227 Serial No. A. & D. Book 70.19

[illegible]

M. F. B. 288.

50M.—10-18,
H. Q. 1772-39-513.

Signature C. F. Imrie Major In charge of case.

CIVILIAN CARGO

1042

30-1-19

61-1-08
128-2
JAN 3 0 1919

1. What is the officer's present condition? General condition not good. Normal wt.
114. Present wt. 110 lbs. Heart and kidneys normal. Breath sounds
exaggerated and roughened over both upper lobes. X-ray shows:
"Linear markings in chest slightly more marked than normal running
up to Apices" Sputum neg. for T.B. Patient complains of persistent
cough more marked in mornings.

15. To what degree is the officer disabled at the present time? 80%.
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)
16. Is the disability permanent? n.a.
17. If not permanent, how soon is re-examination recommended? n.a. months.
18. Is it necessary that the officer should be re-examined by the same Board? xxx. No.
19. What treatment is the officer receiving, and where, and from whom? Hospital.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature?
Convalescent Hospital.

21. Does the officer require the constant attendance of another person?
22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.
A.—Fit for general service No- six months.
B.—Fit for service in a garrison or labour unit abroad No- six months.
C.—Fit for home service :—
(i) Active duty with troops No- six months.
(ii) Sedentary employment only No- six months.
D.—For admission to a command depot No- six months.
E.—Requiring indoor hospital treatment :—
(i) In an officers' military or auxiliary convalescent hospital YES. I.to.C. (Hosp. Ship).
(ii) In an officers' hospital n.a.
F.—Permanently unfit for any further military service n.a.
23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? n.a.

Philip Burnett, Lt.Col., C.A.M.C. President.
H.B.Boyd, Major, C.A.MMC.,
L.L.Buck, Capt., C.A.M.C., Members.

15-5-8-18
CONFIDENTIAL.

RC 1999
eff 27-5-19
Army Form A. 4

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station Can. Red Cross Special Hospital,

Date 31-12-1918. Buxton, Derby.

1. Rank and Name Nursing Sister, GOODHEAD, Elizabeth.

2. Unit C. A. M. C.,

3. Age 26.

4. Total Service 26/12.

War Service

(a) at home

26/12.

(b) abroad

Nil.

5. Address 133, Oxford Street, London.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability BRONCHITIS.

7. Date of origin of disability 24-10-18.

8. Place of origin of disability No.12. Can.Gen.Hosp.

9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Family history: ~~xxxxxx~~. Father died of T.B. at age of 30 yrs.

Previous illnesses: Appendectomy at age of 13 yrs. In bed for one week in 1908 suffering from Bronchitis. Had Bronchitis again in 1912 when she was ill for five weeks. Admitted to No. 12. Can.Gen.Hosp. 24-10-18 -- 28-10-18 diagnosis Influenza. Admitted No.12. Can.Gen.Hosp. 5-11-18 -- 18-12-18 diagnosis Influenza. Transferred to Northwood, Buxton, 12-12-18 diagnosis Bronchitis.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No.

(b) in the service? No.

11. Was it attributable to military service? Yes.

If so, to what specific military conditions is it attributed? Active service conditions.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N/A.

If so, by what specific military conditions? N/A.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

[P.T.O.]

ac
WSB.
4/6/19.

Name

Regimental No.

Unit

Bgde. or Div.

Nationality

Injury

Received at

Referred from

(Plates) (Brom. Paper)
(Stereo) (Localization)
(Screened only)

RADIOGRAPHS

SIZE.	DATE.	REMARKS.
12. x 15.	6. 12. 18.	Screened
12. x 15.	6. 12. 18.	
10. x 12.	6. 12. 18.	
12. x 15.	9. 12. 18.	
10. x 12.	9. 12. 18.	
x		
x		
x		
x		
x		

Name

No.

46

4762

Diagnosis & Localization

no abnormality was seen in radiograph of spine. The linear markings in chest were slightly more marked than normal running up to both apices. The diaphragm on the right side was higher in the centre than normal but even and regular.

GR Reid Capt.

Radiographs by

Report by

No.

RANK

N. Sister

NAME

Goodhead, E.

T. O. S. 20-8-17

UNIT

Base Hospital C. A. M. C.

D. O. 234 of 22-8-17,

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Aug 20	Aug 31	✓		
	Sept.	✓		
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		
1918	1918			
	Jan.	✓		
	Feb.	✓		
	Mar.	✓		
	Apr.	✓		
	May.	✓		
	June	✓		



No. 12 CAN. GENERAL HOSPITAL. HOSPITAL.

A. & D.
CARD

AT

Bramshott

A. & D. No.

86

PL. OF ACTION

RANK

N. 8.

REG.

No.

UNIT

SICK OR
WOUNDED

NAME

Goodhead, E.

AGE

25

RELIGION

Pres

PLACE IN HOSPITAL

B. H.

DIAGNOSIS

9 influenza

ADMITTED

6 NOV 1918

FROM

DISCHARGED

18-12-18

TO

Rd X Buxton

TRANSFERRED

SERVICE AT HOME

3/12

IN FIELD

RESULTS

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

514-11

NAME

Goodhead

E

REGT. NO.

RANK AND UNIT

N/ptv

Came

12 CHN.

NEXT OF KIN

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1124 ^I	12 Cav. Gen. Branscott	25-10-18	Influenza
1134 ⁴	12 " " "	7-11-18	(2) "
1137 ^I	Disch	28-10-18	" "
1169-5	Com. R. Co. Spt. Beuyton	19-12-18	Debility
1187	Disch	13-1-19	" "

Reg. No.

Next of Kin (Sister)

(Sister)
Mrs Lillian Johnstone { 170 Clifton Rd., Aston,
Birmingham, England.

[illegible]

[illegible]

No 12 Can Genl HOSPITAL.

A. & D.
CARD

AT.....

A. & D. No. 75 PL. OF ACTION.....

RANK N/S REG. No. 7 UNIT Camb No 12 BGN SICK OR WOUNDED

NAME Goodhead AGE 26 RELIGION Pres

PLACE IN HOSPITAL Sick Hut

DIAGNOSIS Influenza

ADMITTED 24 10 18 FROM.....

DISCHARGED..... TO.....

TRANSFERRED.....

SERVICE AT HOME 3 years IN FIELD.....

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

Number _____ Rank N/SB

Surname GOOD HEAD

Christian Name ELIZABETH

Units _____ Theatre of War ENGLAND

Date of Service 4-9-18

Remarks _____

Latest Address ~~Address not available~~

258 Ashdale Ave Toronto

Roll No. A Page 4902 Ont

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

[illegible]

SURNAME.

Goodhead.

2.

CARD NO.

CHRISTIAN NAMES

Elizabeth

S.O.S. 27-5-19

R.O. 1929 FOLL. demob

D.O. 15-3-2-6-19

200

REGL. NO.

RANK

Nur. Sister.

UNIT

C.A.M.C. (Base Hosp.)

FORMER CORPS

Nil

NEXT OF KIN.

NAMES IN FULL

Johnstone, Mrs. Lillian

RELATIONSHIP TO SOLDIER

Sister.

ADDRESS

170 Clifton Rd., Aston, Birmingham, Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

England. Birmingham

DATE

Jan. 15th 1893.

PLACE OF ATTESTATION

Toronto, Ont.

DATE

Aug. 20th 1917.8/1 30-8-18 1417
1

R/c 26-1-19, 25/1.

L. L. 25989. M. & D. 8191.

M. F. W. 22. 100M.-8-17. H. Q. 1772-39-339.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Graduate Nurse

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Toronto, Ont.

DATE

Jan. 24th 1918.

Present Address

- Base Hospital, Toronto Ont.

Surname. Christian Name.
GOODHEAD E.
Rank. Unit.
N/Str. C.A.M.C. 12 C.G.H.

No. 12 Canadian Gen. Hosp. Bramshott 29-10-18.
do. do. do. do. 7-11-18
Canadian Red Cross Spec. Hosp. Buxton 19-12-18

Transferred Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Diagnosis. Influenza.
Influenza^{Rw}.
Debility. *as*
Later diagnosis.

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

Disposition. Discharged:-28-10-18.
do. Date. 13-1-19.
29-10-18 1124-7.
9-11-18 1134-4.
13-11-18 1137-7.
20-12-18 1169-5.
14-1-19 1187-6.

C.L. Remarks.
C.L.
C.L.
C.L.
C.L.
C.L.
C.L.
C.L.

A.M.D. 2 DEPT.

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

Surname

Christian Name

Reg. No.

GOODHEAD

E.

4-G-630

Rank

Unit

N/Str.

C.A.M.C.

MEDICAL BOARD held at

Date

Serial No.

(1) Buxton Area

31-12-18

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Bronchitis.

Disposition Recommended

(1) Unfit any service 6 months, returned to
Hospital in Canada.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

To Canada per Sailing No. 70 V.L'pool. 13-1-19.

Remarks

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
DAILY RATE OF PAY AND ALLOWANCES

9-51

M. OR S.

REGT. NO.

RANK N/3.

NAME (IN FULL)

GOODHEAD, E.

Elizabeth

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)
ADDRESS					C.A.M.C.	83	Davidville Gas
					PLACE OF ATTESTATION	TRANSFERRED TO	Toronto, Ontario
					DATE OF ATTESTATION	1/11/16	
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY, \$	DATE EFFECTIVE	
TO WHOM PAID	RELATIONSHIP				PAYABLE TO		
ADDRESS					ADDRESS		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	27-5-19	REASON Demob.
							AUTHORITY 20-153
							IF ENTITLED TO POST DISCHARGE PAY <i>yes</i>

MONTH	PAY AND F. A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	PAY										
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
Balance from previous account																							Rel. Missing 13-31/19
July 1																		19 00	19 00	19 00			
July 1 to	59	300																19 00	20 420			200.80.35 sub 28.19	
mch 31																							
Apr 1	30	3 90																	120 50				
May 1	27	3 81 00																	94 50				
153 days	300																		183 00	183 00	376 00		
																			92 00	276 00	276 00		
																			90	366	93		
																			92	459			
																			459	459			

[illegible]

ASSIGNED PAY.

UNIT.

RANK.

NAME OF

RATE OF P. AND A.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

62 m 6

Pay 2nd pd

F.A. 1 60

Messing 1st y.

A/S

add. outfit Allow 1/9/18

DATE

PARTICULARS

CK. NO.

CR.

DR.

1918

1918-19

Sept 27 P.A. for 9th mess for 16th 15074

93

Do Do

cash

9204

93

Oct Oct Pay R

111 60

24

Bank.

10404.

111 60

Nov Nov Pay R

140

Bank

140

Dec Dec Pay. (R)

124

Bank

124

Jan 9 Add P & A

cash

114570

124

22

Jan Pay (R)

124

Bank

UNIT.

RANK.

NAME.

11-9-134

NAME OF

RATE OF P. AND A.

mess
DATE

AUTHORITY

Canada

Carmel

Pay 2nd pd

A/S

16 9/18 2018 2018

Name

Goodhead

Initials

Elizabeth

Bank

of Montreal
Tray 1918

F.A. 1.60

Messing 1st y.

s or No.....

add. outfit Alice 1/9/20

ICULARS

1918-19

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

9/18 1/15074

93

Do

cash

9204

93

✓

✓

111 60

Bank

10404

111 60

✓

✓

140

Bank

140

✓

y. (R)

124

Bank

124

✓

cash

14570

124

✓

(R)

124

Bank

Netto leau
 P.P. letu 31/19
 1/12 to 1/12 ledger 12
 From ledger 5 5 1/19

ASSIGNED PAY.

UNIT.

RANK.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Pay

Address

F.A.

Messing

Amount. \$

Separation Allowance issued. Yes or No.....

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

\$
To

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Quebec DATE 13. 5. 19

1. (a) Unit Can. 222 (b) Regimental No. 222 (c) Rank Major
 (d) Surname GOODHEAD (e) Christian name ELIZABETH
 (f) Home address 83 Denison Ave. Toronto
 (g) Next of Kin JOHNSON. MRS LILLIAN (h) Relationship Sister
 (i) Address of Next of Kin 170 Clifton Road, Aston, Birmingham England
2. Age last birthday 26 Date of birth Jan. 10th 1893
3. Enlistment, or Appointment (if an Officer) (a) Place Toronto (b) Date Apr. 1st 1916
4. Personal description:
 (a) Height 5ft 1 1/2" (b) Weight 112 (c) Complexion Dark
 (d) Colour of hair Black (e) Colour of eyes Hazel (f) Identification marks, Scars, etc. Linear Scar in lower right abdominal segment - appendectomy
5. Former trade or occupation

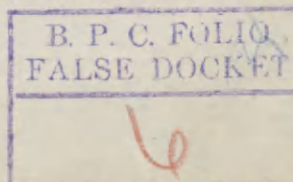
	PERIODS	
	From	To
6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	<u>2 6/12</u>	<u>14</u>

	PERIODS	
	From	To
Canada	<u>1. 11. 16.</u>	<u>8-9. 18.</u>
England	<u>8-9-18</u>	<u>25-1. 19.</u>
France or other theatres of War	<u>Canada</u>	<u>25. 1. 19 - date</u>

7. Original disease, or injury Brucellosis
 (a) Date of origin 24. 10. 18. (b) Place of origin England
 (c) Cause Exposure & Infection

M. F. B. 227.

400m-11-18.
 1772-39-117.



8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness, slight, moderate, marked, etc.; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

11. need of rest for Therapeutic Reasons.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional contributing to present disability; objective findings to be stated first, then subjective findings.)

Object: Cal. Elliot states: ~~that the chest is narrow, the right side is somewhat narrower - Percussion note fair~~ The chest is now quite clear

of adventitious sounds. The tuberculous infection, which was the cause of her debility may be considered inactive at present. - patient ready for discharge

12. Patient still has plethoric cough -

13. Response to Exercise - extending arms rapidly 20 times

Pulse before - 72. after 104. in 1/2 minute to 72.

X-ray Pectus shows peribronchial infiltration - see report.

Subjective: usually fatigued after moderate exertion - quite tired after walk of two miles.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System. No. Cardio-Vascular System. No. Genito-Urinary System. No.
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)

Special Senses. No. Respiratory System. No. Integumentary System. No.

Disturbances of Mentality. No. Digestive System. No. Muscular System. No.

Osseous and Joint Systems. No. Any other general condition. No.

10. (a) History (of the condition referred to in Section 9 (a).)

Had ill 24. 10. 18. in England with Influenza. At the time had temp 102° - pain in chest, and cough. - On account of the persistence of her cough + expectoration she was retained in hospital and finally invalided to Canada. - The sputum was neg. for TB. at that time and X-ray plates showed peribronchial infiltration. Admitted to St. A. N. H. 25. 1. 19. & has received treatment for her debility since that date.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Appendectomy at 13 yrs. - Service in the wound, with subsequent surgical repair -
Bronchitis in 1912.

(c) (Here give a description of wounds, scars and deformities.)

Appendectomy scar in right quadrant

11.—(a) Did the disabling condition have its origin before enlistment? *no.*

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

not applicable.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? *no.*

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? *6 months.*

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

England 24. 10. 18. to 13. 1. 19.
Canada 13. 1. 19 & date

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? *no.*
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? *yes.*
(If not, briefly state why)

17. Recommendations *Discharge.*

C. P. Dineen Major
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

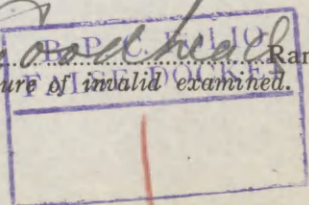
(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out.)

I, the undersigned, have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Eng.

Elgar
Rank.
Signature of invalid examined.



OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

we concur

MAY 22 1919

MAY 22 1919

19. Is the invalid fit for

- | | | |
|--|--------------|--------------|
| (a) General service, | (Category A) | (Yes or No.) |
| (b) Service abroad, not general service, | (" B) | (Yes or No.) |
| (c) Home service (Canada only), | (" C) | (Yes or No.) |
| (d) Temporarily unfit. | (" D) | (Yes or No.) |
| (e) Unfit for service in Categories A, B and C | (" E) | (Yes or No.) |

20. It is certified that the invalid

- (a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

~~We recommend that he be discharged as medically unfit for service.~~

~~We recommend that he be discharged as medically unfit for service.~~

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

W. D. Macdonald President.

PLACE.....

DATE *May 15/19*

W. D. Macdonald Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....
Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.....President.

PLACE.....

DATE.....

APPROVED BY *W. D. Macdonald*
Assistant Director of Medical Services.

DATE *20-5-19*

APPROVED BY *James Macdonald*
Director-General of Medical Services.

DATE *27, 5, 19*

O.C. No. 2 District Depot

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				

MEDICAL HISTORY SHEET.

Surname Goodhead Christian Name Elizabeth

Examined	on <u>24th</u> day of <u>January</u> 191 <u>8</u> at <u>Base Hospital Toronto</u>	Approved by <u>Hewales</u>
Birthplace	City or Town <u>Birmingham</u> County <u>England</u>	Rank <u>Capt</u> M.O.
Apparent age	<u>25</u>	
Trade or occupation	<u>Graduate Nurse</u>	M.O.
Height	<u>5</u> Feet <u>1 1/2</u> Inches.	M.O.
Weight	<u>114</u> Lbs.	M.O.
Chest measurement	Minimum <u>34</u> inches. Maximum expansion <u>34</u> inches.	M.O.
Physical development	<u>fair</u>	M.O.
Small-Pox Marks	<u>none</u>	M.O.
Vaccination Marks	Arm <u>Right</u> Left <u>✓</u> Number <u>4</u>	
When Vaccinated last	<u>In childhood</u>	M.O.
(a) Marks indicating congenital peculiarities or previous disease	<u>24-1-18</u> <u>Go Vorter Capt</u>	M.O.
(b) Slight defects but not sufficient to cause rejection	<u>15-10-17</u> <u>22-10-17</u> <u>29-10-17</u> <u>Go Vorter Capt</u>	M.O.

Enlisted on 1st day of November 1917 at Toronto Ont

CORPS.	REG'TL NUMBER	HABITS.	DATE.
<u>C.A.M.C.</u>	<u>1916</u>		<u>20th August 1917</u>
<u>BASE HOSPITAL</u>			<u>1st November 1916</u>

Joined on enlistment

Transferred to

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
Canadian Red Cross Special Hospital, BUXTON, DERBY.	31-12-18.	Bronchitis	Invalid to Canada
<u>St Andrew Hospital</u>	15/5/19	" "	Philip Burnett St Col Pks. C.A.M.C. Discharge

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Mr. Albert

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				
12 C & H. Bramble		24	10	18	28	10	18	Influenza	5	Could attach discharge for	J. G. P. H.
12 C & H.		12	11	18	18	12	18	Influenza	37	Recurrence followed by debility. Transferred to Buxton for convalescence boarded at E. Hope Bramble for disposal. Dr. J. G. P. H. X-ray shows "linear markings in chest slightly more marked than normal running up to apices." Sputum neg. Persistent cough & expectoration. Transferred to Leaked Cross Hospital, Buxton - E. Hope	
Canadian Red Cross Special Hospital BUXTON, DERBY.		18	12	18	13	1	19.	Bronchitis.	26.	Gen condition not good. Normal wt 114 lbs Present wt 110 lbs. Heart & Kidneys normal. Breath sounds exaggerated & roughened over both upper lobes. X-ray shows "linear markings in chest slightly more marked than normal running up to apices. Sputum neg for TB. Patient complains of persistent cough more marked in mornings.	

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.			
			<i>W. B. Goodhead</i>	<i>E</i>			
Year	Unit.		Age.	Service.			
<i>1918</i>							
Station and Date.	Disease						
<i>12 Clg. H.</i> <i>5711/18</i>	<i>Influenza.</i> <i>complaining of pain & soreness of throat. difficulty in swallowing, cough. (Duration of cough two weeks)</i>						
Previous Illnesses	<i>Bronchitis 6 years ago. Laid up 5 weeks.</i>						
Family History	<i>Father dead of I.B. @ 38. One brother dead of inflammation of bowels. Two brothers & three sisters healthy.</i>						
Military History	<i>Came over from Canada Sept. 18/18. Three weeks after coming on duty she caught cold & has been coughing for past fortnight. Throat became sore yesterday -</i>						
Present Condition	<i>Pt slightly flushed, t 99 2/5 - pulse 80, respir 22. Respiratory system - slight dry cough, chest examⁿ neg. Other systems neg.</i>						
	<i>Treat^t - Rest in bed. light diet. Dover's Powder qd. V. Hot lemonade</i>						
<i>4/11/18</i> <i>7/11/18</i>	<i>Better - complaining of agonizing pain in left side of throat. Throat examⁿ reveals no marked abnormality - cough rather severe. Some mucus -</i>						

Station
and Date.

12 blyth

purulent sputum, slight blood stain
sputum to be examined -

8/11/18

Throat painted by Capt
Atkinson, aspirin gr x v -
Throat relieved. coughing a
good deal especially at night.
Greenish yellow mucous purulent
expectoration.

Aspirin gr at bedtime.

4-15-16-18

Cough & expectorates

No sore throat. appetite good
Tongue clean.

Ki gr - Ammon Bicarbonate gr x - 4 - h -

17.11

18. No sore throat - passed yesterday
- a right today. expectorates greenish
purulent sputum.

19.11.18

Paint chest every alternate day with
Iodine. ~~Atkinson's~~ ~~Atkinson's~~ ~~Atkinson's~~

1.12.18

Atte cough & expectorates. ~~Atkinson's~~
normally high in the centre.

up to both apices. Right deepening at
midline in chest abnormally marked; remaining

10.12.18 2nd of spine negative: trachea

2nd of chest refers to be taken.

is held by loose etc.

device spine will have when spine

cold in the head, tenderness of lower

4.12.18 cough & expectorates, has a thick

5.11-18 - trachea. ~~Atkinson's~~ ~~Atkinson's~~ ~~Atkinson's~~

11-11-18 heat at 10.30, 11.30, 12.30

18.11-18 ~~Atkinson's~~ ~~Atkinson's~~ ~~Atkinson's~~

15.11.18 cough & expectorates

18.12.18 Transferred to Canadian Red Cross Hospital, Antwerp.
Ed. Poppe M.D.

(To be attached to Case Sheet.)

Corps C. G. M. C.

Military Hospital.

No.

Rank and Name

N/S. Goodhead 2

Age 26 yr

Service 2 yrsDisease Influenza

Date of admission' 24/10/18

Date of discharge

Result

Dates of
Observation

Oct.

Days of Disease

24	25	26
----	----	----

Temperature
Fahrenheit

[illegible]

107°

106°

105°

104°

103^o

102°

101°

100°

99°

98°

97°

Pulse per minute

Respirations per
Minute

Motions per 24
Hours

(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181. (373)

Signature

—In charge of case.

PHYSICAL CHART.

(To be attached to Case Sheet.)

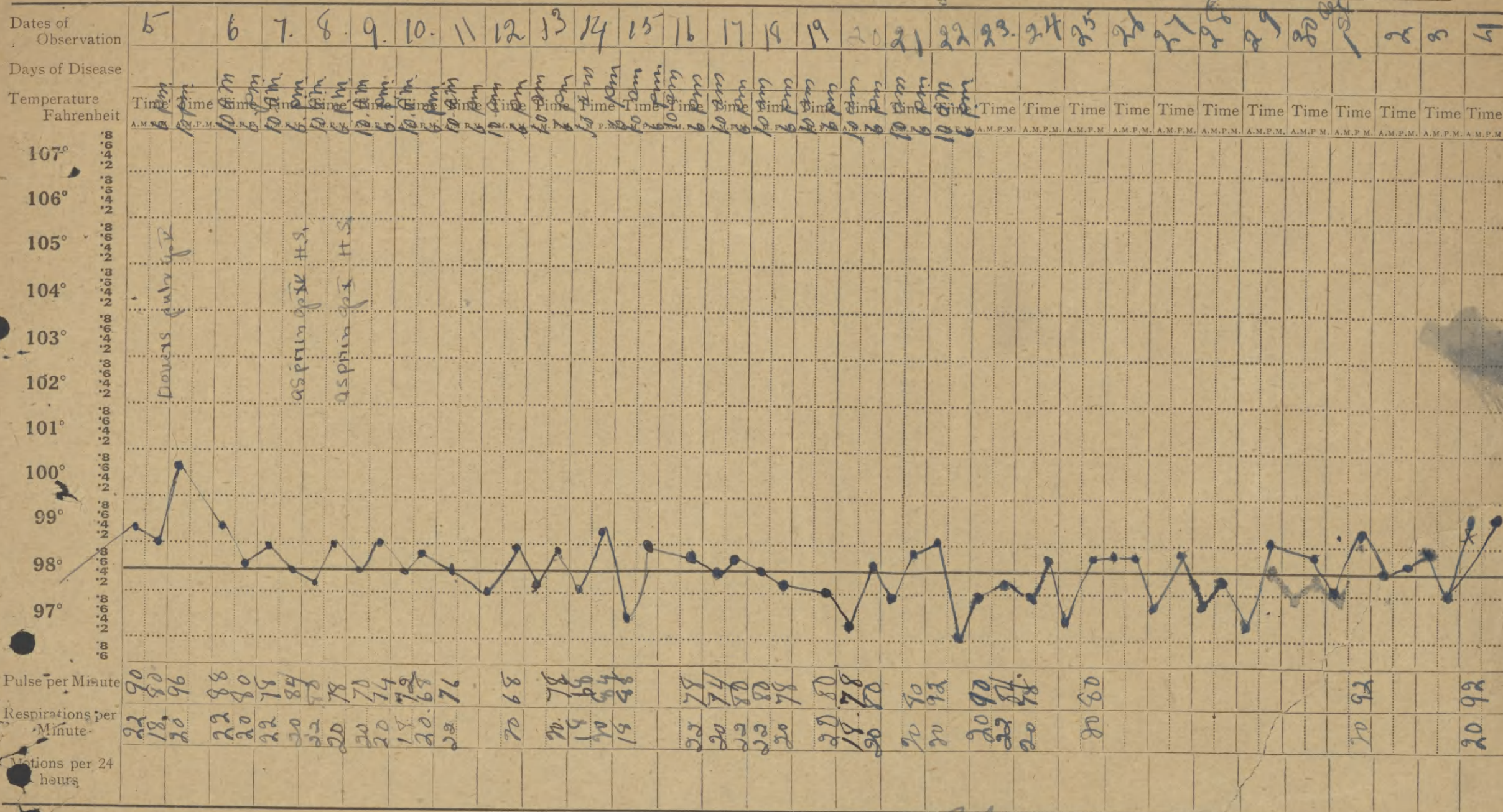
Army Form B, 181.

Military Hospital *M. 12. Can. Gen. Hosp.*

Disease *typhoid* Rank and Name *O/S Goodhead E.* Age *21*

Service *12th Can. Gen. Hosp.*

Date of admission *5-11-18* Date of discharge *25-11-18* Result *Discharged*



Signature *E. H. Pope* In charge of case. *Shapiro*

(To Be attached to Case Sheet.)

Corps.

Rank and Name

Age 26

Service

Service

Disease

No.

Date of admission

5/10/18

Date of discharge

Result

Recovery

Dates of
Observation

Days of Disease

Temperature
Fahrenheit

107°

106°

105°

104°

103°

102°

101°

100°

99^c

98°

97°

Pulse per Minute

Respirations per Minute

Motions per 24
hours

Signature

Signature E. L. Pope Major In charge of case.

In charge of case.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
6-1.141.		1/2	Goodhead	Elizabeth
Year 1918-19.	Unit. C.A.M.E		Age. 26	Service. 20 1/2
Station and Date. Dorchester 19-12-18	Disease <u>Debility (Post Influenzal)</u> <u>Family History - Degenerated</u> <u>Prenatal Illnesses, Bronchitis</u> <u>in 1908, and 1912.</u> <u>Admitted to 12 Can Gen Hosp.</u> <u>24-10-18 - 28-10-18. Diagnosis</u> <u>Influenza. Admitted to 12 Can Gen</u> <u>Hosp. 11-11 - 18-12-18. Diagnosis</u> <u>Influenza. Transferred to Dorchester</u> <u>18-12-18. Diagnosis - Debility.</u> <u>Present Condition. General</u> <u>condition fair. Dorsal vert 112</u> <u>Prenatal 112 lb.</u> <u>The art. Lungs and Kidneys, Digestive</u> <u>Breathing. Improved over both upper lobes.</u> <u>Patient complains of moderate</u> <u>cough and expectoration more marked</u> <u>in morning. Appetite fair. Tries</u> <u>early on exertion.</u> <u>Eggs and Cream, &</u> <u>Diet. Tonic.</u>			
21-12-18	Still complains of cough which is slightly better. Still Sed cough mit.			
28-12-18	Still complains of cough which has not improved			
13-1-19	Discharged to Sick Convoy for invaliding to Canada			

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

Station
and Date.

CASE HISTORY SHEET.

St Andrews Hospital. Yoronto Station.
 No. Rank R/S Name Goodhead E Age 26.
 Unit (C.A.M.C.) #200 Completed years of service 2 1/2 2 1/2
 Date of admission 29 1 19 Date of discharge MAY 17 1919
 Diagnosis Bronchitis Place of origin England

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaint: Cough and
expectoration
Duration: 3 months
Pre-history: Has been ill 6 years ago lasted 5 weeks
Family History: F.D. - Tuberculosis - 25 years ago.
M.D. - Cerebral embolism.
Present Illness: Began 3 1/2 months ago with severe
cough, fever, haemoptysis (spitting) and has lasted ever
since. but is not so bad as it was. Has had blood
stained sputum up to 4 weeks ago. Sputum about 2 oz daily.
Expectoration:
 13.2. Left apex is narrower than Rt. Rt. also slightly narrower.
 pericardial note is faint. uncertain rales above & below left clavicle.
 Clinique picture is that of Tb. but pharynx is not
 suggestive.
 No further Temp or x-ray plates of chest.
 27.2. No adv. obs in apices today.
 But Rt base under supra scapular shows shower of fine
 cusp after m. few deep breaths. then disappears.
 Good most of lower lung border.
 x-ray plates to be sent to Radcliffe.
 FAMILY HISTORY (Tuberculosis, mental or nervous diseases)

14.2.19. Therapy is - Acid - S.G. 10 x 1. Diet - Reg. Sug. Reg.
 6.3.19 with 2 Ray plates (T.H. # 45255) showing only
 peribronchial infiltration. The infection
 may be considered quite inactive at present
 though doubtless recent active.
 Big "debility" much improved. Tubercle of lung now
 apparently arrested (peribronchial tubercle in Rt. & Lt. upper bronchi).
 Rec 1 month further convalescence at St. Catherine's
 CONDITION ON DISCHARGE discharge (F.)
 (and disposal made of case.)

Sent to St Catherine's Convalescent Hospital 10.3.19.
 Date C. E. Drury
 Medical Officer i/c case.



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

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

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

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

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

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

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station Can. Red Cross Special Hospital,Date 31-12-1918. Buxton, Derby.,

1. Rank and Name Nursing Sister, GOODHEAD, Elizabeth.
 2. Unit C. A. M. C.,
 3. Age 26. 4. Total Service 26/12. War Service { (a) at home 26/12.
 (b) abroad Nil.
 5. Address 133, Oxford Street, London.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability BRONCHITIS.
 7. Date of origin of disability 24-10-18.
 8. Place of origin of disability No.12. Can.Gen.Hosp.
 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Family history: ~~xxxxxxx~~. Father died of T.B. at age of 30 yrs.

Previous illnesses: Appendectomy at age of 13 yrs. In bed for one week in 1908 suffering from Bronchitis. Had Bronchitis again in 1912 when she was ill for five weeks. Admitted to No. 12. Can.Gen.Hosp. 24-10-18 -- 28-10-18 diagnosis Influenza. Admitted No.12. Can.Gen.Hosp. 5-11-18 -- 18-12-18 diagnosis Influenza. Transferred to Northwood, Buxton, 12-12-18 diagnosis Bronchitis.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
 (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
 (iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No.
 (b) in the service? No.
 11. Was it attributable to military service? Yes.
 If so, to what specific military conditions is it attributed? Active service conditions.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N/A.
 If so, by what specific military conditions? N/A.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

4. What is the officer's present condition? General condition not good. Normal wt.

114. Present wt. 110 lbs. Heart and kidneys normal. Breath sounds exaggerated and roughened over both upper lobes. X-ray shows: "Linear markings in chest slightly more marked than normal running up to Apices". Sputum neg. for T.B. Patient complains of persistent cough more marked in mornings.

15. To what degree is the officer disabled at the present time? 80%.

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent? n.a.

17. If not permanent, how soon is re-examination recommended? n.a. months.

18. Is it necessary that the officer should be re-examined by the same Board? Yes. No.

19. What treatment is the officer receiving, and where, and from whom? Hospital.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature?

Convalescent Hospital.

21. Does the officer require the constant attendance of another person?

22 Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service No- six months.

B.—Fit for service in a garrison or labour unit abroad No- six months.

C.—Fit for home service :—
(i) Active duty with troops No- six months.

(ii) Sedentary employment only No- six months.

D.—For admission to a command depot No- six months.

E.—Requiring indoor hospital treatment :—

(i) In an officers' military or auxiliary convalescent hospital YES. I.to.C. (Hosp. Ship).

(ii) In an officers' hospital n.a.

F.—Permanently unfit for any further military service n.a.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? n.a.

Philip Burnett, Lt.Col., C.A.M.C. President.

H.B. Boyd, Major, C.A.M.C.,

L.L. Buck, Capt., C.A.M.C.,

} Members.

CONFIDENTIAL.

Army Form A. 45.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station

Canadian Red Cross Special Hospital,

BUXTON, DERBY.

Date 31-12-1918.

1. Rank and Name N/S Goodhead Elizabeth
2. Unit. C.A.M.E
3. Age 26 4. Total Service 26 War Service { (a) at home 26
(b) abroad 2 1/2
5. Address 133 Clifford St., London

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability Bronchitis
7. Date of origin of disability 24-10-18
8. Place of origin of disability No 12 Can Gen Hosp.
9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.):—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Family History, Father died of D.B. at age of 30 yrs.
Previous Illnesses, Appendicitis at age of 13 yrs,
In bed for one week in 1908 suffering from bronchitis
Had bronchitis again in 1912 when he was ill for five weeks.
Admitted to No 12 Can. Gen Hosp. 24-10-18 - 28-10-18
Diagnosis Influenza. Admitted No 12. Can Gen Hosp.
5-11-18 - 18-12-18 Diagnosis Influenza. Transferred
to Northwood, Buxton. 12-12-18, Diagnosis - Bronchitis

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? no
(b) in the service? no
11. Was it attributable to military service? yes
If so, to what specific military conditions is it attributed? Actual service conditions

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? yes
If so, by what specific military conditions? 2/9

I certify that the findings of the Board are here recorded.
Captain, D.M.S. for Canadians,

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? no

14. What is the officer's present condition ?

General condition not good. Temp wt 114, Pres wt 110 lbs. Heart and kidneys - normal. Breath sounds exaggerated and roughened over both upper lobes. X-ray shows "Linear markings in chest slightly more marked than normal running up to apex." Sputum neg for D.B. Patient complains of persistent cough more marked in mornings.

15. To what degree is the officer disabled at the present time ?

80%

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent ?

N/A

17. If not permanent, how soon is re-examination recommended ?

N/A

months.

18. Is it necessary that the officer should be re-examined by the same Board ?

No

19. What treatment is the officer receiving, and where, and from whom ?

Hospital

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature ?

Convalescent Hospital

21. Does the officer require the constant attendance of another person ?

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service

No six mon

B.—Fit for service in a garrison or labour unit abroad

No - six mon

C.—Fit for home service :—

(i) Active duty with troops

No - six mon

(ii) Sedentary employment only

No - six mon

D.—For admission to a command depot

No - six mon

E.—Requiring indoor hospital treatment :—

(i) In an officers' military or auxiliary convalescent hospital

Yes. 92C (Hosp. Ship)

(ii) In an officers' hospital

N/A

F.—Permanently unfit for any further military service

N/A

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with ?

N/A

Philip Burnett President.
H. B. Boyd Major
S. Duck Capt. Members.

Surname GOODHEAD

Christian Names Elizabeth

Rank N/Str.

Name and Address of Next-of-Kin

Promotion

Mrs. Lillian Johnstone (sister)

Unit CAMC.

170 Clifton Rd., Aston,
Birmingham, England.

Place of birth Birmingham, Eng.

Married (Yes or No)

Appointments

Date of leaving Canada 4-9-18, RL. 28-15 7/90 7/187
Date and Cause of Resignation

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				
20-9-18.	DGMS. CAMC.	TOS. on arrival from Canada,		4-9-18.	C.O. 710.
21-9-18	Res. & Tr. Dep.	T.O.S. on arrival from Canada		4-9-18	P ^T . ord. 264.
4-10-18	- do -	S.O.S. on posting to 12 C th H. Bramshott		1-10-18	P ^T . ord. 277
7-10-18	12 C th H.	T.O.S. on posting from CAMC. R. & T. Dep.		1-10-18	P ^T . ord. 238.
29-10-18	AMS.	Adm 12 Can. Gen. Hosp. Bramshott		25-10-18	Ch. 1124. Influenza.
		Discharged		28-10-18	Ch. 1137
9-11-18	do	Adm 12 Can. Gen. Hosp. Bramshott		7-11-18	Ch. 1134 Influenza
		Discharged			
26-11-18	12 C th H. CAMC.	S.O.S. on posting to CAMC. Cas. Coy (21 days Cas)		26-11-18	P ^T . ord. 281.
29-11-18	Cas. Coy.	T.O.S. on posting from 12 C th H. (21 days Cas)		26-11-18	P ^T . ord. 176.
20-12-18	AMS.	Adm. Can. Red & Sp. Hp. Buxton		19-12-18	Ch. 1169 Debility
	caused	Discharged		13-1-19	Ch. 1187
16-6-19	Cas Coy	S.O.S. on transfer to C th 7 in Canada		13-1-19	P ^T . 116. 140
24-1-19	AMS.	S.O.S. on trans to C th 7 in Canada (Inv.)		13-1-19	CO. 16.

SOS. 275/19

14229

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				
		Sailing to Canada		13-1-19 Sailing list 70.	