ORIGINAL

C.A.M.C.DEPOT No,X1,C.E.F.

ATTESTATION PAPER.

No. 2638901

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Halstead
1a. What are your Christian names? — William Henry
1b. What is your present address? — 2531 Maplewood Ave. Vancouver B.C.
2. In what Town, Township or Parish, and in what Country were you born? — Hendon, Middlesex, England
3. What is the name of your next-of kin? — Mary Jane Halstead
4. What is the address of your next-of-kin? — 7 Sawyers St.
4a. What is the relationship of your next-of-kin? — Wife
5. What is the date of your birth? — March 30th 1864
6. What is your Trade or Calling? — Ordnanceman
7. Are you married? — Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes
9. Do you now belong to the Active Militia? — Yes
10. Have you ever served in any Military Force? (Naval or) — 18th Field Ambulance Unit
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? — No
14. If so, what was the nature of the disability? — None
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? — No
16. If so, what was the reason? — None

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, W H Halstead, 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.

W H Halstead (Signature of Recruit)

Date FEB 1 1919 Feby 11th 1919. M C Flemingfeld (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, W H Halstead, 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.

W H Halstead (Signature of Recruit)

Date FEB 1 1919 191 . M C Flemingfeld (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 VANCOUVER, B.C. this FEB 1 1919 day of 191 .

C Drusette major (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

D.O.Part II #4
d/4/2/19

Description of Wm. Henry Halstead on Enlistment.

Apparent Age 54 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 ins.

Chest measurement.
- Girth when fully expanded 36 ins.
- Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Brown

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

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).

Vision 20/60 ea
Hearing. Normal. ea

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 C III for the Canadian Over-Seas Expeditionary Force.

Date FEB 1 1919 191 .

Place VANCOUVER, B.C.

E. Odlumselle major
G. M. Foster major
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.

William Henry HALSTEAD 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.

H. MacPherson Major (Signature of Officer)
O/C.C.A.M.C.Depot No.XI, C.E.F.

Date Feby 17th 1919.

REGIMENTAL DOCUMENTS

Pte NAME Halstead William Henry REGT. NO. 2638901 UNIT C.A.M.C. H. Q. FILE NO.

	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)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
2	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)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				03686	DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Med. Unfit
	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)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M+W 71					

6-22
25-22
27-22
1

W 2588
10CM-11-18
1772-54-1177

D. 1338/20

1

H. Q. .....

M. D. No. 11

Surname Halstead

T. O. S. Feb 1 1919

Christian names William Henry

D. O. Pt. II 4 of 4-2-19

Regtl. No. 263891 Rank Pte

S. O. S. Drs 25-11-1919

Unit C. A. M. C.

Reason M. U.

Auth. Do 2987/25-11-19
C.A.M.C. Spo 7/11 vol 2

Next of kin Halstead, Mrs Mary Jane Relationship Wife

Address 2531, Woodland Drive
Vancouver,
B. C.

Also notify: .....

BORN—Place England, Huddersfield Date Mar 30th 1864

ATTESTED—Place Vancouver B. C. Date Feb 1st 1919

O/S .....

R/C .....

W. 22—100M-7-18. 1772-39-839

C.A.M.C.DEPOT No,Xl,C.E.F.

M. F. W. 71—500M.—5 18.
1772—39—961.

NAME HALSTEAD William Henry

REGIMENTAL NO. 2638901 RANK Pte

ENLISTED AT Victoria B.C. PROMOTIONS, &c. AND DATE

DATE 1/2/19

IF SERVED PREVIOUSLY, STATE UNIT, &c. 18th F.A.Unit

MARRIED, WIDOWER, OR SINGLE Married

NEXT OF KIN Mary Jane Halstead RELATIONSHIP Wife

ADDRESS OF 2531 Woodland Drive, Vancouver B.C.

ASSIGNMENT OF PAY $ 15 c. 00 TO Wife

ADDRESS as above

SEPARATION ALLOWANCE, ENTITLED OR NOT Yes

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER by L.P.C.fr,18th F.A.U.

IN WHOSE FAVOUR Wife

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
T.O.S. from 1.2.19	4	4.2.19	A.M.C. Ord. No 12. 31.1.19
S.O.S on transfer to Shanghai Sta Hosp } T.O.S. through Mili Hosp	109	20.5.19	— " — 498. 19/5/19
20-5-19 on transfer from A.M.C. Dep. No XI	141	21-5-19	AMC. 498
Admitted to Hos. 27-9-19	273	30-9-19	with "Pyloric Obstruction"
Increased pay.	300	27-10-19	A.M.C. order. 1092.
S.O.S on transfer to Camp Depot No XI 31-10-19	303	30-10-19	" " 1095
T.O.S. Camp Depot No 11 1/11/19	274	1-11-19	" " "
Sick in Hospital from 27.9.19	278	5-11-19	
S.O.S. Medically Unfit 25/11/19	298	25-11-19	" " #1184

649-H-29829.

HALSTEAD, W.H. (Pte) #2638901, (18th F. Amb.) C.A.M.C

MEDALS & DECORATIONS. (Widow) Mrs. Mary J. Halstead,
2531 Woodland Drive,
Vancouver, B.C.

PLAQUES & SCROLLS. (Widow) Mrs. Mary J. Halstead.
Ser # 83142C Address as above.

MEMORIAL CROSS. (Widow) Mrs. Mary J. Halstead,
Address as above.

S.C.R.

50816

(Mother dead)

Canada only

B ac

Scroll Desp. JAN 26 1923 Reqn. No Z 55475

Plague Desp. JAN 27 1923 Reqn. No P 48558

W/ 47905. MAR 14 1921

892

Reg. No. 263890 Name Halstead W. H.

Rank Pte Corps C.A.M.C. Age 62 Service 6 2 10/12

Ledger No. Serial No. C 6148

HOSPITALS	DATE	DIAGNOSIS
Convalescency Mil Vancouver	23-9-19	Duodenal Ulcer
Convalescent Sec. C.M.H.	9-10-19	
Military Esquimalt	11-11-19	" "
Rel. of D.D. 11	25-11-19	

C.

P.T.O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

Register No. DH 1291

A.P. File No. 7809-10-16

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. 2638901 Name William H. (Christian Name) Halstead (Surname)

Unit CAMC Rank Pte Date of enlistment

Date of casualty 8/3/20 B.P.C. File No. 197920

Was service performed overseas? yes

DEPENDENT

Name Mrs Mary J. Halstead Relationship widow

Address 25-31 Woodland Drive
Vancouver
BC.

Amount of Special Pension Bonus $ 80.00 ? Abstracted by Mrs M. Colane

M.F.W. 2652
25M—6-20.
H.Q. 1772—39-1473

Eligible for Gratuity $

Less amount of Special Pension Bonus paid $

Less Debit Balance of S. A. or A.P. $

Total deductions $

Balance due $

Cheque No. Date issued 20/8/20

Clerk R. Lebourt

Remarks: Soldier discha. 14/12/19.
(W.S.G. Query)
Not Eligible Dependent
in receipt of W.S.G.

Noted "Dy 17"

Audited by

Date

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
300M-1-19
1772-39-1140

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and other ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3687 Rank. Pte. Surname. Halstead
(Given name in full.)
William Henry.

Unit or Corps. 18th. Fd. Amb. Birthplace. England.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique. Slight. Weight. 134. Height. 5'. 4". Colour of Eyes. Blue.

Nutrition. Fair.

Pulse. 76.

Condition of arteries. Moderate thickening.

Vision Rt. 20/60. Left. 20/60.

Hearing (Conversation voice) Rt. 20.

Left. 20.

Identification marks, scars or Deformities.
(Give cause and date or origin.)

Scar below L. eye.

Opinion as to general health and physical condition. Good.

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? Answer("Yes" or "NO") (Subjective evidence may be sufficient in certain cases.)

Nervous System. No. Genito Urinary System. No. Cardio-Vascular System. Yes.

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

Disturbance of mentality. No. Muscular System. No. Digestive System. No.

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

If the answer to any part of Section 2 above is "Yes" heregive full particulars with case and date of origin; and also a description of the present condition.

Some thickening of radial and temporal arteries. gives no symptoms and is not more than might be expected at his age (61)
Was present before enlistment. No aggravation by service.
Eyes as above.

(If space is insufficient, continue on back of form.)
(Over.)

2

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS--

Examined at.....(Overseas.)

Date.....Signed.....O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature.....

(If not satisfied, M.F.B. 227, will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA--

Examined at..VANCOUVER.....Canada)

Date.....DEC 6 1918.....Signed.....O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature..W. H. Halstead

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf only.)

M.F.W. 129,
1033.(D.P.) 500M-11-18.
1772-39-1142.

(Over.)

MEDICAL HISTORY SHEET

Surname Halstead Christian Name William Henry

Examined { on FEB 1 day of 1919 191 / at VANCOUVER, B.C.

Birthplace { City or Town Huddersfield / County England

Apparent age 54

Trade or occupation Orderly

Height 5 feet 4 Inches

Weight 130 lbs.

Chest measurement { Minimum 33 inches / Maximum expansion 36 inches

Physical development fair

Small-pox Marks

Vaccination Marks { Arm Right Left Yes / Number 2

When Vaccinated last childhood

(a) Marks indicating congential peculiarities or previous disease

Slight defects but not sufficient to cause rejection

Approved by C. D. Lawrence

Rank Major M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
	C III	C. D. Lawrence major	M.O.
	c/c average		M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
			M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
			M.O.
			M.O.
			M.O.

Enlisted on 1st *day of* February 1919 *at* Victoria B.C.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	C.A.M.C.D.X1, C.E.F.	2638901		1/2/19
Transferred to	Shorncliffe No 4			20-5-19
	C. A. M. C. DEPOT No. 11, C.E.F.			1-11-19

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.

Vision 20/60 ea
Hearing Normal

M. F. B. 313.
300M.—1-17.
H. Q. 1772-39-439.

Surname HALSTEAD Christian Name William Henry

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				
Shaughnessy Mil. Hosp. Vancouver.		23	9	19				Duodenal Ulcer		Complains of pain in stomach immediately after meals. Obstipation – vomiting & loss of weight. X-ray shows pyloric obstruction. Trans. to Esquimalt Mil. Hosp. for further observation	J. S. Belchman Capt. C.A.M.C.
Esq. Mil. Hosp.		8	10	19	25	"	19	" "	48	Discharged to S.B.R. for further treatment	James Bridge Maj. C.A.M.C.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2636901 (Rank) Private

Name (in full) William Henry HALSTEAD. enlisted in

the C.A.M.C. Depot No 11, C.E.F.

CANADIAN EXPEDITIONARY FORCE at Vancouver.B.C. on the First

day of February 1919.

HE served in Canada.----------

and is now discharged from the service by reason of being Medically Unfit, under Routine Order # 1420.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows :—

Age	55 Years 8 Months	Marks or Scars	Scar below Left eye.
Height	5 Feet 4 Inches		
Complexion	Fair		
Eyes	Blue		
Hair	Dark Brown, to Gray		

W. H. Halstead
Signature of Soldier

R. J. Miller
Issuing Officer

Major
O. C. A. M. C. Depot No. 11, C.E.F.
Rank

Date of Discharge 25th November 1919.

Appointment

Signed at Victoria, B.C. this Twentyfifth day of November 1919.

in Military District No. XI.

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a.
250m.—6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. .....(Rank)..... Name.....

Unit.....

Address on Discharge.....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life.....

.....

Medals and Decorations.....

.....

Remarks .....

.....

Signed at.....this.....day of.....19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

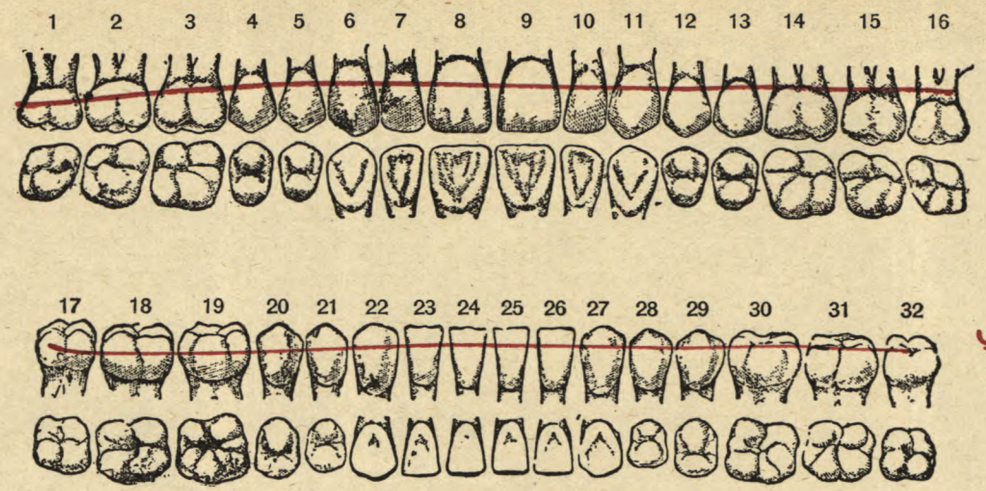
DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT X1

NAME OF SOLDIER ..... HALSTEAD, William Henry

REGIMENT C.A.M.C.D.X1, C.E.F. RANK Pte No. 2638901



Y. U Plat

Y. L Plat

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																							
June	21											32 1.7.032.	1	1							Lieut Ferge	11	No Work Required

SPECIALIST REPORT. November 13th, 1919

#263890 Pte Halstead WH. CAMC.

A descending opaque meal was given the above mentioned man and we found it to be arrested in the upper esophagus where the lumen narrows down quite suddenly and allows only the fluid contents to pass and this at a very slow rate, so slow in fact, that the solution of barium was found in part after four hours; the situation is behind the manubrium sterni and is, I think undoubtedly malignant.

I.K. Poyntz, Captain, CAMC.

#2638901 Pte Halstead W.H. CAMC.

EXAMINATION OF LARYNX

Right vocal chord in cadaveric position movement very slight in Pronation and Resperation - left vocal chord moves normally.

Diagnosis Unilateral Paralysis of right recurrent laryngeal.

19-11-1919 Walter Graham, Captain, CAMC.

DEPARTMENT OF RADIOLOGY AND ELECTRO-THERAPEUTICS
PROVINCIAL ROYAL JUBILEE HOSPITAL
L. K. POYNTZ, M.D., L.M.C.C., DIRECTOR
VICTORIA, BRITISH COLUMBIA

November
Thirteenth
Nineteen Nineteen.

The Officer Commanding,
Esquimalt Military Hospital.
B.C.

REPORT OF Pte. Halstead.
YOUR REFERENCE No. 263890
OUR RECORD No. 3188

A descending opaque meal was given the above mentioned N.C.O. and we found it to be a arrested in the upper esophagus where the lumen narrows down quite suddenly and allows only the fluid contents to pass and this at a very slow rate, so slows in fact, that the solution of barium was found in part after four hours; the situation is behind the manubrium sterni and is, I think, undoubtedly malignant.

L. K. Poyntz
Capt. C.A.M.C.

LKP/ML.

CASE HISTORY SHEET.

Shaughnessy Mil. Hospital. Vancouver B.C. Station.

No. 263890 Rank Pte. Name Stalstead, W.H. Age 62

Unit ~~H.D.~~ Shaughnessy Mil Hosp Staff. Completed years of service (Where and how long) Canada. 2 10/12 yrs. E & S. Mil.

Date of admission 23-9-19 Date of discharge 25.11.1919

Diagnosis Duodenal Ulcer. Place of origin Canada —

CONDITION ON ADMISSION AND PROGRESS OF CASE. Occupation. Steward.

Complaints — Pain in Stomach immediately after meals — & vomiting.

Past History — Enlisted Nov. 22/1916
Did duty in Canada up to present.
Joined Shaughnessy Mil. Hosp. Staff Jan 1/1919.
always healthy in civil life.

Pres. Condition. Began about 2 mos. ago — & burning pain in stomach — sour eructations in mouth — & distaste for food. Gradually he noticed he had pain following food — relieved by alkalies. Sts lost about 30 lbs. during past 2 months.

Pres. Cond — Patient is emaciated tortuous arteries. quite marked sclerosis
Lungs & heart neg.
abdomen. flat. Some tenderness — no masses.
The tenderness is in mid-epigastrium.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

Neg —

TREATMENT (Especially any specific or special form.) Diet & Bis. mixtures.

Ntg. attached — Shows some pyloric obstruction.

CONDITION ON DISCHARGE (and disposal made of case.) The same as above
Transferred to Shaughnessy Mil. Hosp. for further observation & treatment

Date Oct 7/19

Medical Officer i/c case.
D W McKay Capt CAMC

M. F. B. 313a.
100M.—6 18.
1772—39-439.

A 6148

263890 Pte. Halstead Diary.

9.10.19 admitted to Resthaven Sec. E.M.H.

An emaciated individual aged 62 years. Looks his age.
Complaints:- Weakness, loss of weight, pain in abdomen worse after meals, vomiting. At present time he suffers from a sharp burning like pain in epigastrium which is worse after meals and he hearly always vomits after meals.
Since last May he has lost 32 lbs in weight and has gradually be come weaker. At present time cannot walk a mile without becoming exhausted. Has been living on milk and eggs since August.
He first noticed the pain in August and it has gradually become worse
Has vomited regularly almost every day for the last 2 months.
Examination:- Abdomen thin walled and somewhat distended. Marked tenderness either side of R.L. midway between umbilicus and sternum

HH McKenzie Capt.CAMC.

11.11.19 Transferred to Esquimalt:-

12.11.19 Seen by Specialist. Have gastric analysis made at once and Barium meal and X Ray Repeated.
Probably malignant.
Visible paristalsis. No definite mass felt. Pain over pyloric area. No blood vomited.
When work is finished discharge to SCR One week.

H.C. Partons Lt-Col.

13.11.19 X Ray Report:- Descending opaque meal given the above mentioned N.C.O. and we found it to be arrested in the upper esophagus, where the lumen narrows down quite suddenly and allows only the fluid contents to pass and this at a very slow rate, so slow in fact that the solution of barium was found in part after 4 hrs. the situation is behind the manubrium sternia and is I think, undoubtedly malignant.

LAP.

19.11.19 Complains of difficulty in swallowing for past 3 mos, increasing, huskiness of voice, oesophagcal bougie is stopped about 9" from incisor teeth. No bleeding. Has paralysis of R cord. Several enlarged glands in post. triangle of neck on L side. Loss of weight 38 lbs. since August. X Ray report "undoubted malignancy" Advise continuace of medical treatment. Board to SCR with possible gastrostomy or enterostomy later.

TMcP.

19.11.19 Exam of Larynx:- R vocal chords in cadaverix position, movement very slight.
In Phonation and respiration - L vocal chords moves normally.

Diagnosis:- Unilateral Paralysis of R recurrent laryngeal.

W. Graham, Capt.

Boarded to S. C. R.

D. W. McKay. Capt.

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

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

Casualty Form—Active Service.

Unit, Regiment or Corps C.A.M.C. Depot No. XI, C.E.F.

Regimental No. 2638901 Rank Sergt Name HALSTEAD, William Henry

Enlisted (a) 1/2/19 Terms of Service (a) C.E.F. Service reckons from (a) 1/2/19

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) Civil:- Orderly Military:- Orderly

Report: Date	Report: From whom received	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
m X 7-3-21 ac	AMC ord. 498	T.O.S. Shaugh. Mil Hos on Transfer from AMC Depot No XI 21-5-19	Vancouver BC	21-5-19	Pr 2 DO 141-d/21-5-19
30-10-19	O.C. S.M.H. AMC ord 1095	admitted to Esquimalt Mil Hospital - Pyloric obstruction	Esquimalt	27-9-19	Pbz. DO. #273 d/30-9-19.
		S.O.S on transfer to CAMC Depot No XI	Vancouver BC	31-10-19	Pr 2 DO 303 a/31-10-19
					W.H.K. Anderson LIEUT-COL. REGISTRAR AND ADJUTANT SHAUGHNESSY MILITARY HOSPITAL
30-10-19	C.A.M.C. ord #1095	T.O.S. C.A.M.C. DEPOT No. 11, C.E.F.	Victoria BC	1-11-19	D.O. Pbz, Nr 274 d/1-11-19
24-11-19	" # 1184	S.O.S. as Medically Unfit	Victoria, B.C.	25-11-19	" " #298, d/25-11-19.
					R. S. Miller Major O. C. A. M. C. Depot No. 11, C.E.F.

(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.

[P.T.O.

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				

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2638901.

2. Rank Private

3. Name William Henry HALSTEAD.

4. Unit C.A.M.C. Depot No 11. C.E.F.

5. Date of Discharge 25 Novr 1919. Place Victoria, B.C.

6. Reason for Discharge Medically Unfit, under Routine Order #1420.
(For further treatment under S.C.R.)

7. Authority Daily Orders Part2, # 298, dated 25-11-19.

8. Proposed Residence after Discharge
2531 Woodland Drive
Vancouver. B.C.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? 39.

W H Halstead
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Victoria, B.C.

Date 25th November 1919.

MEDICAL DOCUMENTS FORWARDED TO S. C. R. ~~OR D. P. C.~~ ON 20 NOV 1919

R. K. Miller
Signature O. C. A. M. C. Major Depot No. 11, C.E.F.
(O.C. Discharging Unit.)

M.F.B. 218a—150M-3-19—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M.F.W. 129 or D.M.S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

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 Esquimalt, BC DATE November 20th, 1919

1. 1 (a) Unit XI. CAMC. Depot (b) Regimental No. 2638901 (c) Rank Pte

(d) Surname HALSTEAD (e) Christian name William Henry

(f) Home address 2531 Woodland Drive, Vancouver, BC

(g) Next of Kin Mrs W.H. Halstead (h) Relationship Wife

(i) Address of Next of Kin 2531 Woodland Drive, Vancouver, BC

2. Age last birthday 62 Date of birth March 30th, 1857

3. Enlistment, or Appointment (if an Officer) (a) Place Vancouver, BC (b) Date January 31st 1919

4. Personal description:

( ) Height 5 ft 4" (b) Weight 109 lbs (clothing) (stripped) (c) Complexion Fair

(d) Colour of hair Gray (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

SCAR BELOW LEFT EYE

5. Former trade or occupation Steward

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
		320

A.D.M.S., M.D. XI.
NOV 21 1919
VICTORIA, B.C.

	Periods From	To
Soldier's statement Transfer from 18th Field Ambulance		
Canada	January 31st 1919	To date
England		
France or other theatres of War		

7. Original disease, or injury CARCINOMA OF OESOPHAGUS

(a) Date of origin July 9th, 1919 (b) Place of origin Vancouver, BC

(c) Cause NATURAL CAUSES

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*) Weakn[illegible]-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.)

CARCINOMA OF OESOPHAGUS. Partial loss of function of gastro Internal System

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.)

OBJECTIVE Man of small stature - quite emaciated. Voice weak and husky. Present weight 109 - normal weight 138 (clothing on) X Ray shows food arrested in upper oesophagus with ~~[illegible] malignancy benign [illegible]~~ narrowing of lumen - diagnosis of malignancy behind manubrium sterni. Report and recommendation Capt, MacPherson Surgeon Complains of difficulty in swallowing for past three months increasing. Has huskiness of voice - oesophageal bougie is stopped about 9 inches from incisor teeth. No bleeding. Has paralysis of right cord. Several enlarged glands in posterior triangle of neck on left side. loss of weight 38 since August. X Ray report undoubted malignancy. Advise continuance of medical treatment. Board to SCR with possible gastrostomy or enterostomy later. Specialist Report larynx attached - corroborates diagnosis.

SUBJECTIVE Complains of 38 lbs loss of weight since August with increasing weakness and huskiness of voice. Has difficulty in swallowing - food seems to stop in the chest - cannot eat dry food or any lumpy food. Appetite is poor. Has to be very careful of diet, milk - eggs - fluids - fish. Has pain just after eating - burning sensation in Epigastrium - vomits after meals. bowels regular.

(*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 (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System NO (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*).) States that he never noticed any gastric trouble before July 9th 1919. First came on by vomiting - this vomiting became continous. Could not eat solid foods. Began to lose weight - this been rapid lately. Voice was good before July - has gradually become weaker and huskier. Admitted to Shaughnessy September 1919 - diet. Has had diet and medicinal treatment since. Condition has become aggravated.

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*).)

Civil - Nil Military - Nil

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

Scar below left eye

11.—(*a*) Did the disabling condition have its origin before enlistment? NO.(Not noticed before July 1919)

(*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.)

N.A.

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? Permanent

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

Hospital - diet - three months

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

YES. Diet - medicinal - medical supervision - later probable gastrostomy

16. Can the former trade or occupation be resumed? NO. Because of Carcinoma - rest

(If not, briefly state why)

17. Recommendations

Discharge to S.C.R. for further treatment

D. McKay Capt.

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 William Henry Halstead 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~~

W H Halstead Pte Rank.

Signature of invalid examined.

D. McK.

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.

YES Concur

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.)

Diet - medicines - medical supervision - later probable gastrostomy.

(*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.)

Refer to S.C.R.

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.

D W McKay Capt. *President.*

PLACE Esquimalt, BC

DATE November 20th, 1919

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.....

Members

APPROVED BY

R. Mills Major, A. M. C. M. D. 11

For *Assistant Director of Medical Services.*

DATE NOV 22 1919

APPROVED BY

Director-General of Medical Services.

DATE.....

AUDITOR | PAYMASTER

M. OR S. Married

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

REGT. No. 2638901 RANK Pte. NAME (IN FULL) HALSTEAD, William Henry (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN: Mrs Mary J. Halstead — RELATIONSHIP: Wife

ADDRESS:

IS SEPARATION ALLOWANCE PAID? YES — DATE EFFECTIVE:

TO WHOM PAID: Mrs Mary J. Halstead — RELATIONSHIP: Wife

ADDRESS:

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Table a 5(3)	1919	Do 300
To S. Camp Depot	1.11.19	P.O. 274
S O S	25.11.19	P.O. 298
To S.C.R. for further treatment		

ORIGINAL UNIT C.E.F.: Camp Depot No 11 — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION: Shaughnessy Mil Hosp — TRANSFERRED TO — DATE: 20.3.19 — AUTHORITY: P.O. 109

DATE OF ATTESTATION: 20.11.16 — TRANSFERRED TO: Camp Depot — DATE: 31.10.19 — AUTHORITY: P.O. 303.

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE:

PAYABLE TO: Mrs Mary J. Halstead — RELATIONSHIP: Wife

ADDRESS: 2531 Woodland Drive, Vancouver, B.C.

ANY CHANGE IN ASSIGNEE OR ADDRESS: Both Same

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE: Victoria — DATE: 25.11.19 — REASON: Med Unfit Sent to S.C.R. for further treatment — AUTHORITY: P.O. 298. — IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					S.A. Subsistence Society
Feb 1.28	28	1.10	30	80	22	40			83	20	2897	3753	2925				20				18	20	15								83	20					
Mar	31		34	10	24	80			88	90	3890	5277	4624				20				23	90	15								88	90					
Apr	30		33		24				87		5238	3586	5528				20				22		15								87						
May	31		34	10	24	80			88	90	6718	5282701	5278994				20				23	90	15								88	90					
June	30		33		24				87		5284686	5287662	5284823				20				22		45								89						
July	31		34	10	24	80			88	90	5287953	5456490	5495227				20				23	90	45								88	90					
Aug	31		34	10	24	80			88	90	5511300	5514925	5517510				20				23	90	45								88	90					
Sept	30		33		24				87		5516086	5516005	5516367				20				22		45								87						
Oct	31	1.50	46	50	24 / 30 / 12	80 / 00 / 00			113	30	5514457	5546135	5520361				20				21	10	45				27	20			113	30					Admitted Hpl 27.9.19 P.O. 273. Adjust T.A. S.C. 29.9.19. Interrupted 4 days subsistence allowance 25 days.
Nov	25		37	50	33 / 20 / 35	50 / 00 / 00			117	50	5526190	5546026	5546368				20				35	00	45				20	00			120	00	2	50			Cheque for clothing allow 35.00 sent with D.O.C. to S.C.R.
			350	20	580	40			930	60							200	00			235	90	450	00			47	20			933	10					
	61 days	W.S.G.	140				60		200		Jan 19. 15										137	50	60				2	50			200						W.S.G. forwd to S.C.R.

Certified that all payments have been made on this account for which covering authority has been received to date.
Paymaster, Demobilization Pay
M.D. No. 11

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.
Officer i/c War Service Gratuity
M.D. No. 11

SCR 1.7

100M-1-19.—L. L. 53962-M & D. 9723.
M. F. W. 2596.
1772-39-1390.

Halstead W St. Phe 2638901. Canc aged 62.

Examination of Larynx

Right vocal chord in cadaveric position
movement very slight
in Phonation & Respiration – left vocal chord
moves normally.

Diagnosis Unilateral Paralysis of right recurrent
laryngeal.

W Graham Capt

19/11/19.