12 M. D. 1st Depot B'n Sask. Regt. Depot Battalion Regiment

Regtl. No. 335-H-S-84

PARTICULARS OF RECRUIT

2 copy

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class one)

ORIGINAL

1. Surname White
2. Christian name John Thomas
3. Present address Gen. Del. Cypress. P.O. Sask
4. Military Service Act letter and number 647078
(If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension. or surrender)
5. Date of birth Nov 1st. 1895
6. Place of birth Donegal county Ireland
(town, township or county and country)
7. Married, widower or single Single
8. Religion English Church
9. Trade or calling Farmer
10. Name of next-of-kin Samuel White
11. Relationship of next-of-kin Father
12. Address of next-of-kin R.R. no 2. Carp. Carleton county (ont
13. Whether at present a member of the Active Militia no
14. Particulars of previous military or naval service, if any none
15. Medical Examination under Military Service Act :—
(a) Place Swift Current (b) Date Dec 5/17 (c) Category A 11/11

DECLARATION OF RECRUIT

I, John Thomas White, do solemnly declare that the above particulars refer to me, and are true.

John Thomas White (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 22 yrs. 1 mths.

Height 5 ft. 7½ ins.

Chest measurement — fully expanded 38 ins.; range of expansion 4 ins.

Complexion Ruddy

Eyes Blue

Hair Dk Brown

Distinctive marks, and marks indicating congential peculiarities or previous disease.

W. White

O. C. 1st Depot B'n Sask. Regt. Depot Btln.

Regt.

Place Regina Sask Date July 6/1918

M. F. W. 133.
500M.—5-18.
1772—39—1158.

Adm. 31/8/19

O. H. M. S.

REGIMENTAL DOCUMENTS

WHITE JOHN THOS. REGT. No. 335458 UNIT L.-S.R.

NON-EFFECTIVE BY..... CATEGORY Demob

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UNIT INDEX CARD (M. [illegible] OR 132)
M.H.C. 11
M+W 20
M+W 2509
Identity Card

17714

24 - 24
14 -
1
24
1

M. F. B. 270.
850M-5-18
H. Q. 1772-39-67

H. Q.

M. D. No. 12

Surname White

T. O. S. July 6th 1918

Christian names John Thomas

D. O. Pt. II 286 of 5-7-18

Regtl. No. 335-45-84 Rank Pte

S. O. S. 12-3-19

Unit Sask. Regt. 1st Depot Bn

Reason Mcd Unfit

Auth. DI 72 of 13-2-19 & 87 (RCS)

Next of kin White Samuel

Relationship Father

Address R.R.#2 Carp, Carleton Co. Ont.

Also notify:

BORN—Place Ireland, Donegal City Date Nov 1st 1895

ATTESTED—Place Regina Sask. Date July 6th 1918

O/S

R/C

W. 22—75M-5-18. 1772-39 839.

M. F. W. 71—500M.—5 18.
1772—39—961.

NAME White J. T. John Thomas.

REGIMENTAL NO. 33564 5-84. RANK Private.

ENLISTED AT Regina Sask. PROMOTIONS, &c. AND DATE

DATE 6—7—18.

IF SERVED PREVIOUSLY. STATE UNIT. &c. Nil.

MARRIED, WIDOWER, OR SINGLE Single.

NEXT OF KIN S. White RELATIONSHIP Father.

ADDRESS OF R.R.#2. Carp. Carlton City Ont.

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	No.	DATE	
Adm to Hosp	268	25-9-18	ad to 24 Inguen 24-9-18
Dis from Hosp	20	20-1-19	20-1-19
Adm to Hosp	28	28-1-19	24-1-19
Dis from Hospital	65	6-3-19	6-3-19
Discharged	72	13-3-19	12-3-19

LEDGER NO. 15 SERIAL NO. a 17448 8602

REG. NUMBER 3354384 NAME Wilkie J. S.

RANK Pte CORPS L. S. H.

AGE 22 SERVICE 11/12

NAME OF HOSPITAL Military PLACE Calgary

DATE OF ADMISSION 26.9.18

DISEASE Fract. L Patella

TRANSFERRED TO OTHER HOSPITALS

OPERATION

DISCHARGED TO 20.1.19 IN CATEGORY

Orvel

P. T. O.

M. F. W. 2553.
50m.—6-18.
1772-39-1332.

REMARKS: Admitted Ogden Military Calgary 24-1-19.

(Synovitis Rt Knee) Discharged 6-3-19.

REGT. NO. 335458H RANK Pte NAME White John T

UNIT LSH AGE 23 SERIAL NO. IN A. AND D. BOOK 9 T.

TOTAL SERVICE WHERE AND HOW LONG C 1/12 DATE AND PLACE OF ORIGIN 24/9/18 Calgary

DISEASE OR INJURY Synovitis Right Knee *DUE TO SERVICE *~~NOT DUE TO SERVICE~~

OPERATIONS

RESULT OF OPERATIONS

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION 24.1.19

(B AS A TRANSFER (STATE WHERE FROM) NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT 6.3.19 to LSH IN CATEGORY C III

DATE OF DISCHARGE AS AN INVALID

DATE OF DEATH

DATE OF TRANSFER (STATE WHERE TO) NAME OF HOSPITAL

OTHER INDEPENDANT CONDITIONS DIAGNOSED

Next of Kin Mrs S White
Brother RR No 2 Carp Ontario.

M. F. W. 142.
1772
100M —6-18.

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)

REMARKS:- On 24/9/18 while patient was riding in squad the horse ~~immediately~~ in front kicked back and struck patient on knee, fracturing patella was treated at the Calgary Military up till 20/1/19 went on duty Now complains of pain in knee joint & weakness. There is some fluid in joint, patella quite firm.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3354 584 (Rank) Private

Name (in full) John Thomas White enlisted in

the First Depot Battalion Pask Regiment

CANADIAN EXPEDITIONARY FORCE at Regina Pask on the Sixth

day of July 1918

HE served in — Canada only —

and is now discharged from the service by reason of R01420 para 1 (a)

medically unfit.

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

Age Twenty Two yrs one mth

Height Five ft Seven one half ins.

Complexion Ruddy

Eyes Blue

Hair Dk Brown

Marks or Scars

Nil

J T White

Signature of Soldier

J. Stevens, Capt.

Issuing Officer

for Lt-Col

Rank

O.C. L.S.H.(R.C.) Depot 1

Appointment

Date of Discharge 12-3-19

Signed at Calgary Alta this Twelfth day of March 1919

in Military District No. 13

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
200m.—2-18.
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 required by this certificate will be completed.

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

M. F. W. 54. (A. F. B. 103.)
500M.—9-16
H. Q. 1772-39-9?0.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st Depot Battn. Sask. Regt.

Regimental No. 335484 Rank Pte Name White John Thomas

Enlisted (a) July 6/18 Terms of Service (a) C. E. F. Service reckons from (a) July 6/1918

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) Mil Nil civilian Farmer

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
17/7/18.	I.D.B.S.	Steel Armed Cavalry.	Calgary.	17/7/18.	B.O.196,P.2. Para.1822. G. Hemmans Lt. Officer i/c Records.
		Discharged under P.O. 1920 para 1 (a) 12-3-19			A.O. #72 Part 2, Para 1. 18-3-19 J. R. Shanks Capt. Lt-Col. for Commanding Regtl Depot L.S.H. (R.C.)

(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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 13

NAME OF SOLDIER W Ritchie

RANK Gde

No. 3354-84

REGIMENT Lord Strathcona's Horse

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	Pyrrhea	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	Aug 4										14,19									H Robinson	13	Can 5th 18, 39

M.F.B. 465.
200M.—6-18.
1772-39-060.

Ogden M & E. HOSPITAL

REQUISITION FOR TREATMENT OR EXAMINATION. Date Sept 5th/17

Reg'tal No. 985[illegible] 3354584 Rank Pte Name White J J Unit C.D.N.

Bed Ward

Injury or disease Accidental Part affected Rt knee.

Treatment or Exam. X-ray exam Rt knee.
J.S. Richardson
Capt A.A.M.C.

Report Evidence of a fracture of the patella & union. Some organized inflamatory exudate of the knee joint - & patella.
W.H.H. Griffin
Capt C.A.M.C.

Signed

M. F. W. 2509.
50M.—4-18.
1772—39—1276.

HOSPITAL

REQUISITION FOR TREATMENT OR EXAMINATION. Date

Reg'n No. Name Unit

Ward

Injury or disease Part affected

Treatment or Exam. Report

Signed.

M.U.13
No. 3

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-908.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 3354594 Rank Private Name White, J.T.
(Surname first)

Unit "B" OVERSEAS DETACHMENT LORD STRATHCONA'S HORSE (R.C.) who was* Discharged

On March 12 191 9, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1.3.19 to 12.3.19 191... the inclusive date of ~~transfer or~~ discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		166.40
Regimental Pay 12 days at $1.00 c.		12.00
Field Allowance 12 days at $.10 c.		1.20
Separation Allowance		
Clothing Allowance		35.00
Post Discharge Pay		
*Other Credits		
Advances 1109	150.00	
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges Reg. Charges	1.06	
Balance on ~~transfer or~~ on discharge, cheque No. 1128	65.54	
Total	214.60	214.60

*Give particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of

Assigned Pay for the month of 191...
and Separation Allce. for month of 191...

(to) Assignee

(Address)

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment 6.7.18 married or single Single

(2) Separation Allowance, entitled or not No (3) Reason for discharge Medically unfit

(4) Authority for discharge or transfer D.O. Part II. 71

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date MAR 13 1919

Place CALGARY, ALTA.

Wm Leacock Capt.
Paymaster, L. S. H. (R.C.)
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

RB

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT				Signature of Officer Making Payment.
			Dr.		Cr.		
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
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.....	.....	.....	.....	....	.....	....	.....

DEC. 7 - 1917

#335458

Lord Strathcona's Horse

S.A. 15.

MILITARY SERVICE ACT, 1917. ORIGINAL

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname White Christian name John Thomas

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 6470978

3. Consecutive number on schedule of men reporting for service (if he appears on it) 60

4. Address (including street and number, if any) Gen. Del. Cypress Sask

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 3 day of Feb 1917, by the undersigned medical board sitting at Swift Current Sask

5. Age as stated 22 Years 1 Months. 6. Apparent age 23 Years — Months

7. Height 5 Feet 7 1/2 Inches. 8. Weight 130 Pounds.

9. Chest measurement { Minimum 34 Ins. / Maximum 36 Ins. } 10. Complexion Sallow { Eyes Blue / Hair Brown }

11. Physical development { Good / Fair / Poor } 12. Smallpox marks No

13. Number of vaccination marks { Right arm 2 / Left arm +2 } 14. When vaccinated last Child

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar on right cheek.

16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2. 20/20 each eye not. ear.

DuGraham President.

Member. Member.

Signature of Man

Ckd. to Schedule by No. 6

Date	Result	Vaccinations		Date	Result	Anti-Typhoid Inoculations, Etc.	
8/7/18		Army Book capt	M.O.	7/18			M.O.
AUG 10		A R Shore	M.O.	JUL 27 1918		Army Book Capt	M.O.
			M.O.	AUG 3		J Macdonald Capt	M.O.
				AUG 10		A R Shore	

Joined 6 day of July 191 8 at Calgary

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	Depot Bath	335458		6/7/18
Transferred to.....				15-7-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Calgary	26-2-19	Cir	Discharged Capt Cause

N.B.—This sheet is 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.

Surname Christian Name

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				
Camp Mil. Hosp	Sarcee	24	9	18.	26	9	18	Injury to Knee 1220	3	Transferred to Military Hospital Calgary	Capt A.M.C.
Military Hosp. Calgary		26	9	18	20	1	19	Fracture of right patella. #1057.	116		
Ogden M.C.H.		24	1	19	6	3	19	do		Fracture well united. Discharged from Convalescent	Capt Carve

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3354584.

2 Rank. Private.

3. Name. WHITE, John Thomas

4. Unit. Lord Strathcona's Horse (RC)

5 Date of Discharge 12-3-19. Place Calgary, Alberta.

6 Reason for Discharge R.O.#1420 para 1 (a).
Med. Dis.

7. Authority.

8. Proposed Residence after Discharge Maple Creek. Sask.

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

J T White
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Calgary, Alberta.

Date 12-3-19.

Signature J. M. Rogers Capt. for Lt.-Col.
Commanding Regt'l. Depot. L.S.H.(RC). (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—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

CASE HISTORY SHEET.

Military Hospital. Calgary, Alta., Station.

No. 3354584. Rank Private. Name White. John Thomas. Age 22.

Unit L.S.Horse. Completed years of service (Where and how long) C 11/12. year. A&D#1294.

Date of admission Sept.26th.1918 Date of discharge January 20th.1919.

Diagnosis #1057. Frac. of Patella. Place of origin Sarcee Camp. 24-9-18.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Admitted from Sarcee Camp. Hosp. where he had been for two days after injury (Kicked on knee by horse). On admission right knee was greatly swollen and painful. Crepitus could be felt on movement of patella and narrow line of cleavage could be palpated. X-Ray confirmed diagnosis of fracture (Intra Capsular)

Patella was held up considerably by exudate in joint.

27-9-18 Aspirated with a large needle about 2.1/2 to 3. ozs of very dark viscid blood. This relieved tension and pain. Adhesive tape was arranged in a retententive way around patella and then knee put in plaster in extended position. Kept one month in plaster then removed. Given some passive movement and bandaged every day or two for another couple of weeks. then left off bandage. Some thickening of tissues about joint. No fluid on Dec.15th.1918.

Swelling or thickening has gradually subsided, movements have become free - Flexion and extension normal.

Jan.16th./19 Right knee is about 1/4- 1/2" larger in circumference than left. movements free. Says he dosen't feel quite as strong ar secure on it as on the left, but gait or walk is natural on plank or dry level road. Feels insecure on going down hill or on ice.

FAMILY HISTORY Parents and brothers and sisters living and healthy.

(Tuberculosis, mental or nervous diseases.)

TREATMENT (1) Aspiration of blood from knee joint.

(Especially any specific or special form.) (2) Imobilization of knee in plaster.

(3) Massage and passive followed by active movements.

CONDITION ON DISCHARGE Healthy, well nourished individual. Had "Flu" while in hospital for about 10 days. Recovered without apparent ill effects. Heart, Lungs Nervous and genito-urinary systems normal. Knee as described above. Has gained about 6.1bs in hospital

(and disposal made of case.) Return to unit and try out on duty.

Date Jany.20th.1919.

for Medical Officer i/c cases. Captain C.A.M.C.

Military Hospital, M. D. No. 13, Calgary

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

8602

CASE HISTORY SHEET.

Camp Military Hospital. Sarcee Camp Station.

No. 3354584 Rank Pte Name White, John Thomas Age 22

Unit L.S.H.(R.C.) Completed years of service (Where and how long) 6 11/12

Date of admission 24-9-18 Date of discharge 26-9-18 Totalulary Hosp: Calgary

Diagnosis Injury to knee (Right) from horse kick. Place of origin Sarcee Camp.

CONDITION ON ADMISSION AND PROGRESS OF CASE

While riding the horse ahead of patient kicked up and kicked patient on right knee. Patient was able to walk on to hospital after injury. Swelled up rapidly and was very painful.

Exam - Right knee very much swollen and tender on palpation. Synovial sack marked distended and fluid in joint. Apparent point of contact of horse hoof just on patella. Causes severe pain on attempting to move. Slight raised blister of skin over patella. No crepitation on palpation. Joint slightly red and hot.

Respiratory system normal.
Circulatory system normal
Genito Urinary system normal
Alimentary system normal
Nervous system normal

FAMILY HISTORY Good.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Referred for X ray. Rest.

(Especially any specific or special form.)

Injured at knee X ray reports slight fracture of patella.

CONDITION ON DISCHARGE,

(and disposal made of case.)

Date 25/9/18.

Jas Thomson
Medical Officer i/c case.
Capt. C.A.M.C.

M. F. B. 313a.
200M.—5-18.
17(D)-39-439.

ORIGINAL B. P. C.

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 soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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 Ogden, Calgary, DATE Feb., 24/1919.

1. 1 (a) Unit L.S.H. (b) Regimental No. 3354584 (c) Rank Pte.

(d) Surname WHITE. (e) Christian name J.T.

2. Age last birthday 23 Years Date of birth Nov. 1st. 1895.

3. Enlisted at Calgary, Alta., on July, 17th., 1918.

4. Personal description:—

(a) Height 5'-8" (b) Weight 160 Lbs. (stripped) (c) Complexion Medium

(d) Colour of hair Lt. Brown (e) Colour of eyes Blue (f) Identification marks Scar on right cheek.

5. Address after discharge (for the use of the Board of Pension Commissioners)

Cypress P.O. Maple Creek, Sask.,

6. Former trade or occupation Farmer.

7. (a) Service	Years	Days
	-	222

		Periods	
		From	To
L.S.H. In Canada.	Total service. In Canada.	July, 17/1918.	Feb., 24/1919.

(b) Has he been overseas? Canada 8. Original disease or disability Fracture of right patella.

(a) Date of origin Sept. 24/18. (b) Place of origin Canada (Sarcee Camp)

(c) Cause* Was kicked by a horse.

(d) Present disease or disability Internal derangement of knee joint.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

This man is a well developed well nourished healthy looking soldier who is apparently normal in every respect except for condition of right knee. The patella has been fractured as shown by attached

P.T.O.

300M.—2-18.
1772—39—117.

9. Present condition.—(*Continued.*)

X-Ray report. The fragments are now well united and in good position. There is no apparent synovitis. His only complaint is that the knee is weak. If he walks ½ mile he experiences severe pain on inner side of knee. He complains that the knee gives way under him at times. Movements of knee are normal.

(b) Are the following systems normal? If not, briefly state abnormality

Nervous Yes Digestive Yes Respiratory Yes Cardiac Yes

Genito-Urinary Yes Skin, Middle Ear, Eye or any other part Knee as described.

10. History: (*a*) of Condition referred to in "a" section 9.

On Sept., 24th., 1918, he was kicked on the knee by a horse. Knee was placed in a cast for 4 weeks. He has lately had massage for one week.

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

No.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or 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? Six months.

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

Canada.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

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.)

No.

16. Can the former trade or occupation be resumed ? Yes with limitation.
(If not, briefly state why.)

17. Recommendations Classification.

Medical Officer by whom the case is brought forward.

Capt. CAMC.

STATEMENT OF THE SOLDIER.

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

I, the undersigned WHITE, J.T. 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

J T White
Signature of soldier examinea.

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 criticized.

Yes.

He is unable to go down on his right knee alone, like he can on the ~~right~~. left.

19. Is the soldier 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 soldier
(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).

OPINION OF THE MEDICAL BOARD—(*Continued*).

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

Class "C-3"

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

..... *President.*

PLACE... Calgary, Alberta. .....

DATE... February 25th, 1919. ..... } Members.

APPROVED BY ..... Captain

Assistant Director of Medical Services.

DATE... 26. 2. 19

APPROVED BY .....

Director-General of Medical Services.

DATE.....

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 soldier 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.

File No. 2144.

MILITARY CONVALESCENT HOME

NAME OF HOME OR HOSPITAL

OGDEN MILITARY CONVALESCENT HOSPITAL.

No. of M. H. C. File. Name of Inmate WHITE, J.T.

Address .....

.....

Regimental No. 3354584 Rank Pte Reg. and Batt. L.S.H.

In Home from ..... to .....

ditto ..... to .....

ditto ..... to .....

Out-patient from ..... to .....

ditto ..... to .....

ditto ..... to .....

Whether discharged as cured, for pension or for misconduct .....

Conduct in Home or while undergoing treatment .....

DATE	P. A. of B. F.	INITIALS	REFERRED TO	FOR REMARKS	INITIALS	DATE
		(If purpose for which referred cannot be expressed on one line, add minute to file and enter here "With Minute.")				

As soon as the above Inmate is discharged this file should be sent to The Secretary,
Military Hospitals Commission, Ottawa

M. H. C.—FORM No. 11.

TO BE LEFT BLANK.

TO BE LEFT BLANK.

File No.. .....

MILITARY CONVALESCENT HOME

NAME OF HOME OR HOSPITAL

.....

No. of M. H. C. File. Name of Inmate..... ....

Address ....

....

Regimental No.....Rank..... .....Reg. and Batt.....

In Home from..... to.....

ditto ..... to.....

ditto ..... to.....

Out-patient from..... to.....

ditto ..... to.....

ditto ..... to.....

Whether discharged as cured, for pension or for misconduct.....

Conduct in Home or while undergoing treatment.....

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