

Lieut.
SIN/NAS

COLLINS
Surname/Nom

George Donald
Given names/Prénoms

**CANADIAN FORCES
FORCES CANADIENNES**

**PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL**

Box
1876

**"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"**

**COMPONENT
ÉLÉMENT**

C.E.F.

REGIMENTAL DOCUMENTS

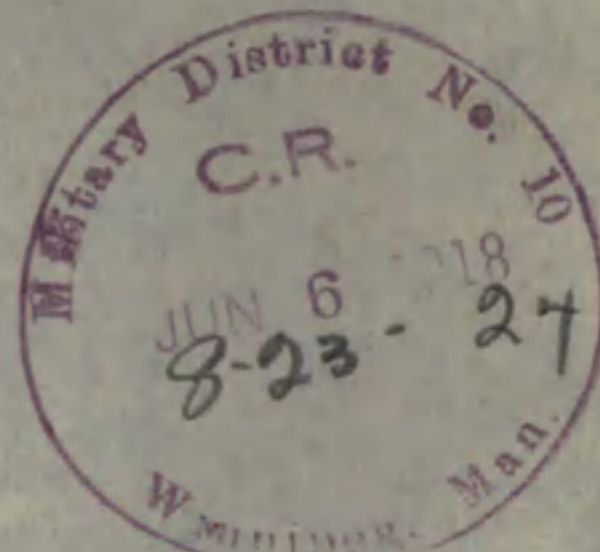
NAME COLLINS, GEORGE DONALD REGT. NO. Lieut UNIT 224th Baltn H. Q. FILE NO. _____

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2 ATTESTATION PAPER (M.F.W. 23, 133, or 51)		(M)		29581	DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)			Category		
TRAINING HISTORY SHEET (M.F.W. 113)			(H)		
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)			d 23 IV 19		
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)			DISCHARGE		
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					Category
5 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
DENTAL HISTORY SHEET (M.F.B. 465)					
1 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)		(H)	23/7/19		
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
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)					
Doc. S.F. 10					
M.F.W. 67					
M.F.W. 51					
3 cas cards					
2 A.F.S. 1237					4
1 M.F.W. 125					- 17
					1 - 17

BOX
1876

Broadview Sask
FOR ALL RANKS.

PROCEEDINGS OF A MEDICAL BOARD.
(Short Form)



Place Winnipeg, Man. Date June 6th 1918

DEPT. OF MILITARY AFFAIRS
CANADA

Number..... Rank Lieut. Name George Donald COLLINS
Corps 229th Batt'n. CEC Age 33 Religion Roman Catholic

(1) Disability Potts Disease Transplantation of bone for a minimum
period of 2 months.

(2) Incurred
Cancel one - { Overseas
Canada

(3) Category "D" 3

(4) Recommendations:-

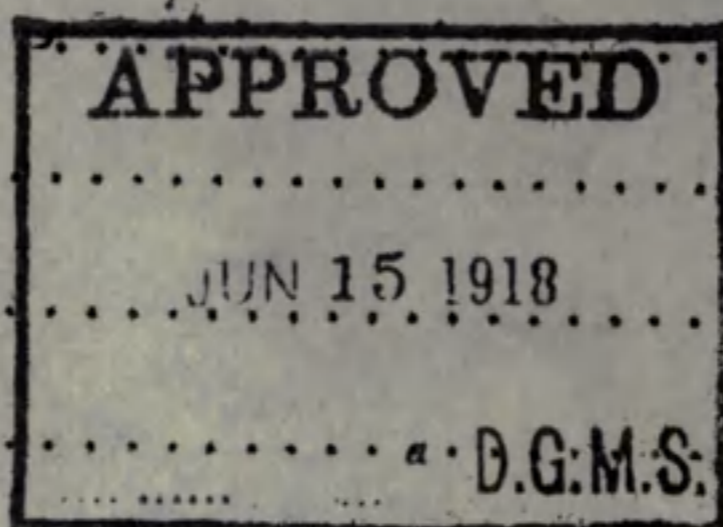
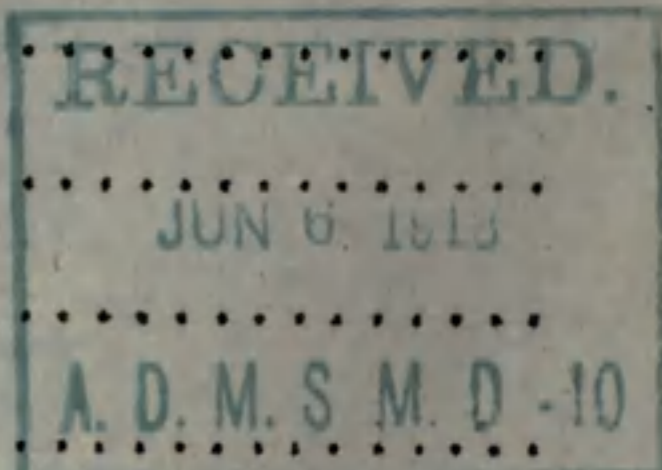
(a) Treatment (specify nature of) Convalescent at own home.

(b) Return-to-duty

(a) General

(b) Special (Specify nature of)

(c) Special



PRESIDENT Donald Bond Capt 74

MEMBERS Rob Burns Lt

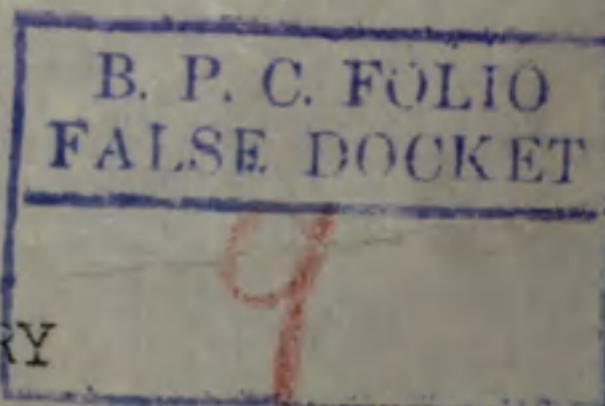
Place Winnipeg, Man. Date June 6th 1918.

APPROVED

APPROVED

ES

W. Lawson
A. D. M. S., M. D.
A. D. M. S., M. D. No. 10
or Camp.



CANCEL WHERE NOT APPLICABLE IF NECESSARY
MAKE SPECIAL RECOMMENDATIONS UNDER (c).

To Be Reboarded Aug 6-1918

R.C. JUN 1 1918



RECEIVED
JUN 1 1918
A. D. M. S. M. O. 10

APPROVED
JUN 1 1918
A. D. M. S. M. O. 10

Paterson Corp

Paterson Corp

4
133
243
L

406

RECEIVED
JUN 1 1918
A. D. M. S. M. O. 10

[Signature]
A. D. M. S. M. O. 10

and 6-10

A.F.B. 158

C.E.T.D. 1-4-17

TLH.

Surname COLLINS,
Rank Lieut & Sig'l Officer.
Promotion

Christian Names George Donald.

Name and Address of Next-of-Kin Mother.
Mrs. M.G. Collins,
Broadview, Sask. Canada.

Unit 29th Bn.
Place of birth Kenora, Ont.
Married (Yes or No)
Appointments

M

Handwritten notes:
C.E.T.D.
C.E.T.D.
A.C.

-SAILED 23-8-16 H Q 593-6.T

Date of leaving Canada

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				
2-9-16	G.O.C.				
	C.T.D.	Taken on strength & posted to G.H.S.	Gen. List	30-8-16	D.O. 4663. D.O. 4635.
29-9-16	do	Transferred to C.E.T.D.		24-9-16	Pt. Ford 233 (C.E.T.D.)
2-10-16	do	Attd to O. & I. A.		24-9-16	D.O. 5156. D.O. 5107 Cancelled by D.O. 5155
		Having transferred to C.M.S.			Cancelled by Pt. Ford 235.
30-9-16	C.E.T.D.	is attached to C.E.T.D.		24-9-16	Pt. Ford 233.
19-10-16	A.M.S.	Admitted Mil. Hosp.	Discharged Shorncliffe	10-9-16	C.F. 499.
14-1-17	% Beau.	is attached to Div Headquarters Bramshott		8-9-16	C.F. 499 Arthritis
30-1-17	A.M.S.	Adm. Mil. Hosp. Bramshott	Discharged	14-1-17	R.O. 134.
13-2-17	A.G.	Transfd. to C.E.T.D.		30-1-17	C.F. 592 Bronc. Ac.
18-4-17	L.R.O.	Adm. Can. Mil. Hospital Bramshott	Dischd	26-1-17	C.F. 586 C.E.T.D. Pt. Ford 25.
19/4/17	brov.	S.O.S. on reporting to London for return to Canada		31-1-17	R.O. 294 app. R.O. 714
14-6-17	A.G.	Returned to Canada (Permanently unfit)		11-4-17	Cl 660
				10-4-17	CL 651 (abscess)
				9-4-17	R.O. 1531
				4-5-17	R.O. 1694 R.O. 2384
		Sailed for Canada via S.S. Franconia			A.F.B. 103. 4-15-17

(4028)

Fill in only.—Unit, Number, Rank and No.

Casualty Form—Active Service.

Unit, Regiment or Corps. 229th Battalion

Regimental No. Rank Lieut Name Gollens Geo Donald
C. E. F.

Enlisted (a) 5.5.16 Terms of Service (a) Service reckons from (a)

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

Extended. Re-engaged. Qualification (b)

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				
<u>18.4.18</u>		<p>T. O. S. of No. 10 District Depot, Part 2 Order No. <u>1</u> Para <u>1</u> <u>W. Wood</u> Major G. C. No. 10 District Depot.</p>			
<u>6.9.18</u>		<p>S.O.S. No. 10 DISTRICT DEPOT D.O. <u>156</u> PARA. <u>1107</u>. <u>W. Wood</u> For O.C. No. 10 District Depot <u>Re. 7.9.18</u></p>			

(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.

Name Collins F. D. Lieut.

M. F. W. 41
1 OM-7-16
1772-39 889 ✓
~~332-124-127~~
~~649-12130~~

temp OK

Regimental No. _____ Name and address of next-of-kin Broadview, Sask.
 Unit Engineers
 Date of enlistment C.O.M. I to C.E.I. 4-5-17
 Place of " R.O. 1068 S.O.S. 6 $\frac{9}{18}$ Res. of. off. 7 $\frac{9}{18}$ R.O. 1119
 Married (yes or no) Nil Date and place discharged Permanently unfit
 Amount of pay assigned monthly \$ Nil Reason for discharge _____
 To whom payable _____ Character on discharge _____
Grampian 4-5-17-14-5-17 Pub. Exp. (21) L.P.C. clear 30-4-17

b 5351-M. & D. 6880.

Date		PAY			Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate			Amount	No.					
1-5-17	31-7-17	92	2.00	184.00	92	60	5520	119.00							L.P.C. No. - 190 * sub. from 15-5-17 1031-717 78 days at 1.50 * Messing in England * Messing on board 11.00 on charged messing at boat 4-5-17 to 14-5-17
1-5-17	3-5-17	(3)						3.00	35920	20278 $\frac{8}{17}$	34820		1100	35920	
								1100	11.00	24856 $\frac{7}{17}$	1100				

Transferred to MP 12. L.P.C. paid Payment 8-8-17

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

W. A. G. M.

Name *Collins*
Surname

G. D.
Christian Name

Regimental Number

Rank *Lieut*

Address (in full)

W. A. G. M.

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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		

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

Remarks:

Reg. No.

Rank, *Lieut.*

Name, *Collins, George Donald*

Unit, *229th. Bn. & C. E. T. D.*

This form to be completed and filed with
the M/N *Officer's* documents.

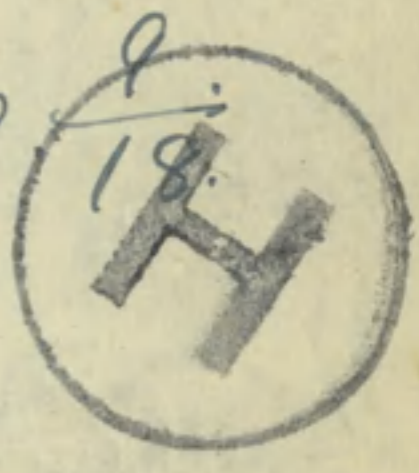
H. Q. File Reference, *332-124-122*

Date Struck Off Strength, *6-9-18*

Reason, *Medically unfit.*

Military District, *10*

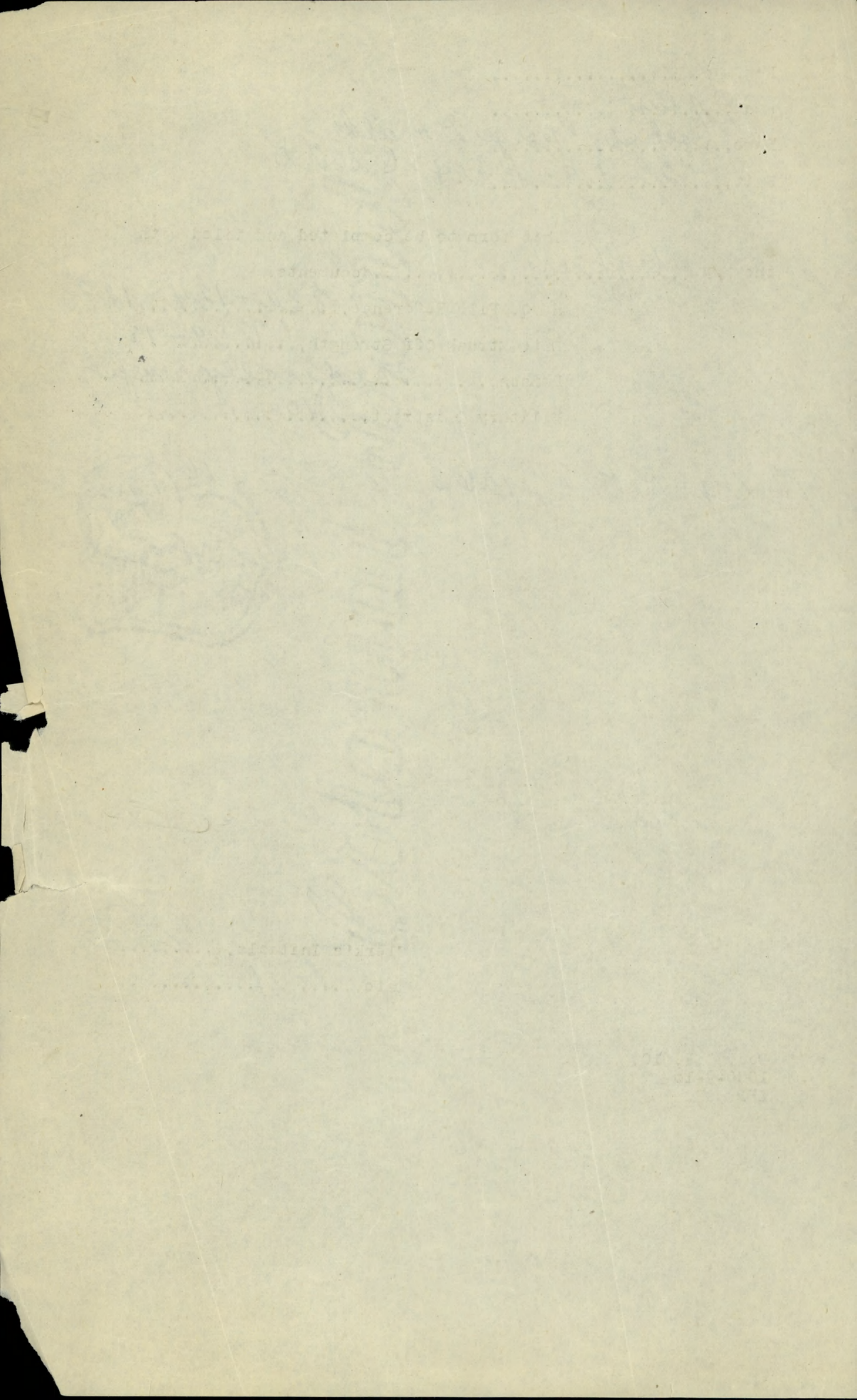
Auth. R.O. # 1068 Dated 16



Hollern 31-1-22

Clerk's Initials, *Amad*

Date, *1-10-18*



The signature of each Officer composing the Board, &c. should be attached at the end of the Proceedings.

PROCEEDINGS OF A MEDICAL BOARD assembled

at Discharge Depot, Que.

on the 24th day of May, 1917 by order of

A. S. (Stamper)

for the purpose of examining and reporting upon the present state of health of

Lieut. G. H. Collins

MILITARY DEFENCE
MAY 24 1917
H. Q. 17-2-39-274
33-124-122

PRESIDENT. Maj. W. M. Carrick

MEMBERS { M. F. Coghlan Capt.
K. C. Cairns Capt.

The Board having assembled pursuant to order, proceed to examine the

above-named officer and find that he is suffering from

mild condition of Chronic Bronchitis and a discharging sinus in rt.

groin from psoas abscess

The abscess is of 5 yrs standing but at the time of enlistment had temporarily healed.

He states that his bronchitis has improved rapidly in few wks past.

He still has slight morning cough with small amt. expectoration. No report available on sputum analysis.

The opinion of the Board upon the questions herein is as follows:-

(1) Is the officer fit for service? * no

(2) If not so fit, how long is the disability likely to continue? Bronchitis should practically disappear in 3 months but it is impossible to state duration of Psoas abscess.

(3) To what extent does it prevent his earning a livelihood? Bronchitis 1/10 Abscess 1/5

SIGNATURES W. M. Carrick Major
M. F. Coghlan Capt.
K. C. Cairns Capt.

B. P. C. FOLIO
FALSE DOCKET
H

* If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

24

26

Handwritten scribbles and initials in the bottom right corner.

PROCEEDINGS OF A MEDICAL BOARD

on the order of

for the purpose of examining and reporting upon the present state of health of

PRESIDENT

MEMBERS

The Board having assembled pursuant to order, proceed to examine the

above-named officer and find that

The opinion of the Board upon the question herein is as follows:

(1) Is the officer fit for service?

(2) If not so fit, how long is the disability likely to continue?

(3) To what extent does it prevent his earning a livelihood?

EXAMINER

The signature of each Officer composing the Board, &c. should be attached at the end of the Proceedings.

PROCEEDINGS OF A MEDICAL BOARD assembled

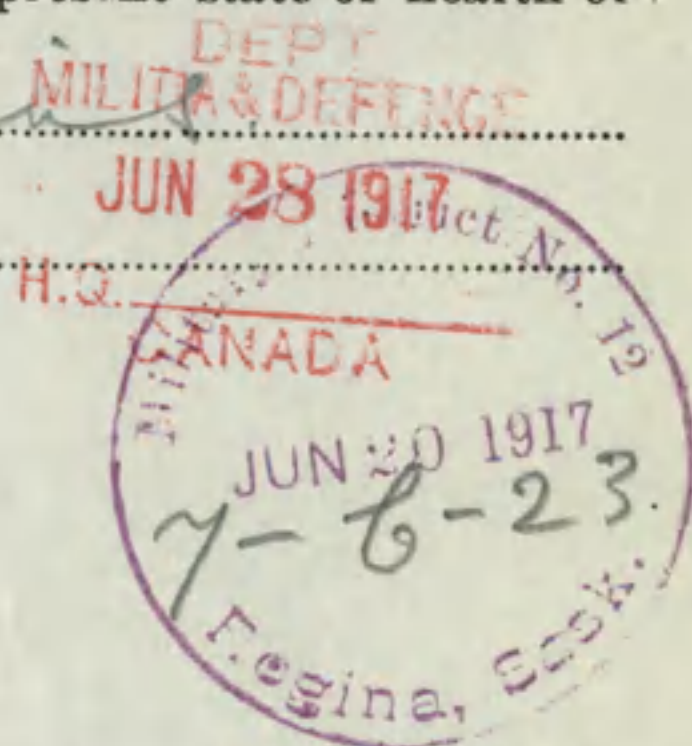
at Regina

on the 12th June 1917 by order of

A. D. M. 1. M. D. No. 12.

for the purpose of examining and reporting upon the present state of health of

Lieut G. D. Collins



PRESIDENT E. E. Kells Lt. A.M.C.

MEMBERS H. G. George Lt. A.M.C.

The Board having assembled pursuant to order, proceed to examine the above-named officer and find that...

...he was returned to Canada from Eng. on May 13 1917. History of

...Psoas Abscess 5 yrs. ago with drainage.

...In Eng. developed a feeling of stiffness in back

...with some pain in sacro-sciatic region. Several

...weeks later boarded for discharge. Middle

...of Feb. incision & drainage from Right groin.

Present Condition. - Feels good with exception

...of slight pain in back on slight exertion.

...Sinus right groin still draining.

...Tenderness over spine - last 3 lumbar vertebrae

...Heart & lungs - normal. Normal weight

...no other physical signs.

The opinion of the Board upon the questions herein is as follows:-

(1) Is the officer fit for service? * ho

(2) If not so fit, how long is the disability likely to continue? Indefinite.

Radical operation might shorten an

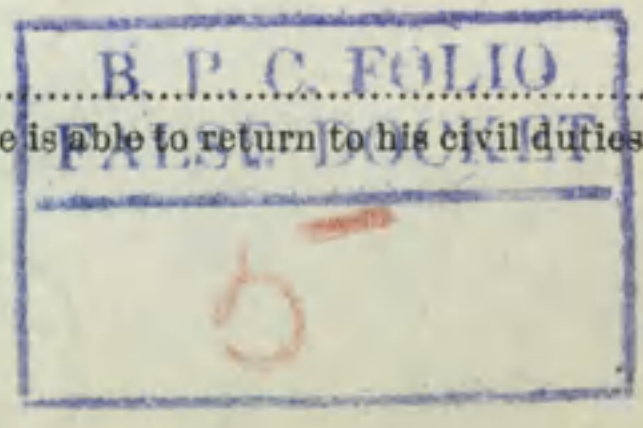
orthopedic surgeon should be consulted.

APPROVED [Signature] Major, A.M.C.

(3) To what extent does it prevent his earning a livelihood? 100%

SIGNATURES [Signatures of E. E. Kells and H. G. George]

* If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

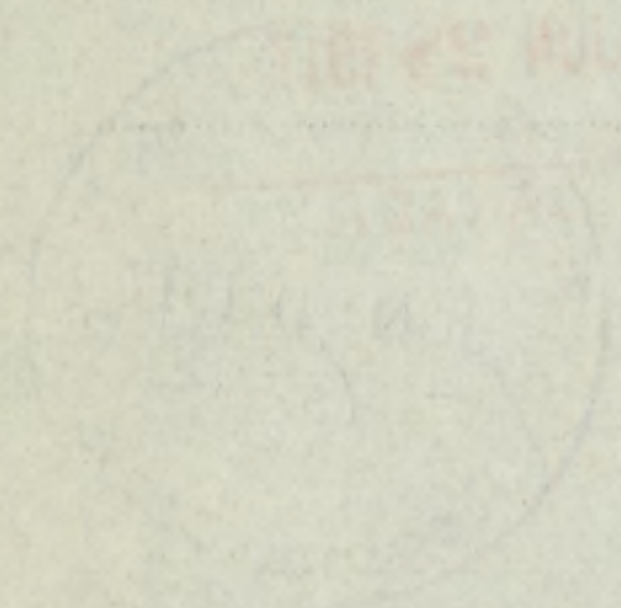


PROCEEDINGS OF A MEDICAL BOARD

on the 10th day of August 1912

for the purpose of examining and reporting upon the present status of health of

JUL 25 1912



The Board having assembled pursuant to order granted to examine the

above named subject and find that

the said subject is suffering from

the disease of

and that the said subject is

in a state of

and that the said subject is

and that the said subject is

and that the said subject is

and that the said subject is

and that the said subject is

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REC'D
JUL 25 1912

Deer Lodge.

FOR OFFICERS ONLY.

CONFIDENTIAL.

The signature of each Officer composing the Board, &c. should be attached at the end of the Proceedings.

PROCEEDINGS OF A MEDICAL BOARD assembled at Casualty Clearing Depot. M.D. No.10

on the 19th day of November 1917

A. D. M. S. M.D. No.10

DEPT. of MILITIA & DEFENCE

DEC - 8 1917

for the purpose of examining and reporting upon the present state of health of Lieut. George Donald Collins. (Canadian Engineers)

PRESIDENT. Capt. Gilbert H. Lansdown. C.A.M.C.

MEMBERS { Capt. E.S. Moorhead. C.A.M.C.

Capt. John H. R. Bond.

The Board having assembled pursuant to order, proceed to examine the above-named officer and find that he has a discharging sinus in the right groin. There is less discharge than there was six months ago, but the discharge is constant and purulent still. He is wearing a back brace for the tenderness of the spine over the lumbar region. This condition of the spine is shown by Xray to be Hypertrophic Arthritis of 1.2.3. lumbar vertabrae. Von Pirquet test was weakly positive. He states that he has had less pain in the spine and that the discharge from the groin is less since wearing the brace. General health better. Has gained 5 lbs. since Sept. weight 135 lbs.

The opinion of the Board upon the questions herein is as follows:—

(1) Is the officer fit for service? * No

(2) If not so fit, how long is the disability likely to continue? Minimum period of two months.

We recommend that he be given a further period of convalescence. two months.

(3) To what extent does it prevent his earning a livelihood?

RECEIVED NOV 21 1917 A. D. M. S. M. D. -10

APPROVED OCT 10 1917 M. F. B. 380.

SIGNATURES

Handwritten signatures of Capt. G.H. Lansdown, Capt. E.S. Moorhead, and Capt. J.H.R. Bond.

APPROVED FALSE DOCKET NOV 28 1917 Major, A.M.C. A.D.M.S., M.D.No. 10 WINNIPEG, MAN.

To Be Reboarded Jan 19 1918

Casualty Clearing Depot, W.D. No. 10

1915, day of November 1915

A. E. M. S. W.D. No. 10

Lieut. George Donald Collins (Canadian Engineer)

Capt. Gilbert W. Mansdown, C.A.M.C.

Capt. S. Moorhead, C.A.M.C.

Capt. John R. Bond

... has a discharging injury

in the right groin. There is less discharge than

there was six months ago, but the discharge is constant

and persistent still. He is wearing a back brace for

the tenderness of the spine over the lumbar region

The condition of the spine is shown by X-ray to be

hypertrophic arthritis of L. 3, 4, 5, lumbar vertebrae.

Van Rijnout test was weakly positive. He stated that he

has had less pain in the spine and that the discharge

from the groin is less since wearing the brace.

General health better. Has gained 1 lb. since last

weight 135 lbs.

Minimum period of

two months.

It is recommended that he be given a further period of convalescence

two months.

(6) To what extent he is prepared to return to duty

...

...

...

...

To Be Reported

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
		Lieut	Collins	Geo. D.
Year	Unit.	Age.	Service.	
	Signalling C.E.I.D.	32	13 months	

Station and Date.
Coimbra
5/1/17

Disease *Isoas Abscess, Spinal Ibc*
Trouble began about 1911 with pain in back, unable to bend - Diagnosis not possible was almost unable to walk owing to pain. One year later abscess pointed in right groin and has open and closed many times during past four years. Owing to development of an abscess 3 months ago the wound reopened discharged a lot of pus and closed again quickly.
Spinal column in lumbar region is quite rigid - muscles of spine rigid. Scar in groin closed.
Ganglia of right wrist - no signs of Ibc elsewhere.

J.R. Goodall
D.A.D.M.

24 46
 B.P.C. FORM
 FALSE DOCKET

(9) Is your Father alive? *yes*

If so, state name and address

M. G. Collins Broadview Sask.

(10) Is your Mother alive? *YES.*

If so, state name and address

MRS. M. G. COLLINS. BROADVIEW. P. O. SASK. CANADA.

(11) If your Mother is a widow *no*

Are you her sole support, or not? *no*

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

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

*Mrs M. G. Collins
Broadview Sask*

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

(15) Are you insured? *yes*

If so, in what Company? *O.R.T.*

Have you made arrangements for payment of your Insurance premium? *yes*

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

A. J. [Signature]

Date.....

*Officer Commanding. Lt. Col.
Com'd'g 229 Overseas Battn.*

To be made out in duplicate.

H.Q. 54-21-23-53

MILITARY
SEP 28 1918
H.Q. CANADA

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins. 229th. OVERSEAS BATTALION.

(2) Regimental Number

(3) Full Name of Soldier. GEORGE DONALD COLLINS.

(4) Place of Birth. KENORA. ONTARIO. CANADA.

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

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address. Broadview
 Sask

(7) Are you a widower? No

(8) Have you any children? None

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

Also their names and ages.....

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Collins Christian Name Herge J.

Examined { on 19 day of Nov. 1916
 at Broadview
 Birthplace { City or Town Kenora
 County Ont

Approved by C.H. Christie
W. W. W. W. W.
 Rank Capt. Canad. M.O.
 AUG - 3 1917

Apparent age 30
 Trade or occupation Telegrapher
 Height 5 Feet 7 Inches.
 Weight 140 Lbs.
 Chest measurement { Minimum 34 inches.
 Maximum expansion 3 inches.
 Physical development Fair
 Small-Pox Marks None

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
<u>Aug 15/16</u>	<u>fit.</u>	<u>C.H. Christie</u> M.O.
		<u>19 APR 1917</u> M.O.
		<u>5-JUL-1917</u> M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left 2
 Number 2
 When Vaccinated last 1895
 (a) Marks indicating congenital peculiarities or previous disease None

Date.	Result.	VACCINATIONS.
<u>3/7/16</u>	<u>OK.</u>	<u>C.H. Christie</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection None

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>29/7/16</u>	<u>OK.</u>	<u>C.H. Christie</u> M.O.
<u>5/8/16</u>	<u>OK.</u>	<u>C.H. Christie</u> M.O.
		M.O.

Enlisted on 19 day of November 1916 at Broadview

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>229th O/B</u>	<u>1099361</u> <u>Lieut.</u>		<u>19th November 1916</u>
Transferred to				

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.

CANADIAN

Surname *Collins* Christian Name *George*

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				
<i>Bramshott</i>		<i>25</i>	<i>1</i>	<i>17</i>	<i>30</i>	<i>1</i>	<i>17</i>	<i>Bronchitis</i>	<i>6</i>	<i>Moderate attack. Complete recovery</i>	<i>J. G. Park Captain</i> <i>J. G.</i>
<i>Bramshott</i>		<i>10</i>	<i>4</i>	<i>17</i>	<i>11</i>	<i>4</i>	<i>17</i>	<i>Toas Abscess</i>	<i>2</i>	<i>Discharging sinus present in right groin</i>	<i>J. P. Irwin Capt</i>

Unit **229th. O.B.C.E.F.** Rank **LIEUT.** Name **GEORGE. DONALD. COLLINS.**

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

DEPT. MILITIA & DEFENCE
AUG - 8 1917
H.Q. CANADA

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (a) What is your Surname? **COLLINS.**
- (b) What are your Christian Names? **GEORGE. DONALD.**
2. (a) Where were you born? (State place and country) **KENORA. ONTARIO. CANADA.**
- (b) What is your present address? **BROADVIEW. SASK. CANADA.**
3. What is the date of your birth? **OCTOBER. 26th. 1884.**
4. What is (a) the name of your next-of-kin? **MRS. M. G. COLLINS.**
- (b) the address of your next-of-kin? **BROADVIEW. P. O. SASK. CANADA.**
- (c) the relationship of your next-of-kin? **MOTHER.**
5. What is your profession or occupation? **TELEGRAPH OPERATOR.**
6. What is your religion? **CATHOLIC.**
7. Are you willing to be vaccinated or re-vaccinated and inoculated? **YES.**
8. To what Unit of the Active Militia do you belong? **60th. RIFLES OF CANADA.**
9. State particulars of any former Military Service **16th. LIGHT HORSE. 1917-8.**
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.

Geo D Collins (Signature of Officer)

Taken on strength (place) **BROADVIEW. SA SK.**

(date) **NOVEMBER. 23rd. 1915.**

H. DAVISON PICKETT.

(Signature of Commanding Officer.)

Lt. Col.

Com'd'g 229 Overseas Batta.

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 **JULY. 4th.** 1916.

Place **CAMP HUGHES. MAN.**

C. H. CHRISTIE. CAPT. C.A.M.C.

Medical Officer.

*Insert here "fit" or "unfit"

Di 8-17
yes

OFFICERS' DEPARTMENT PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICERS

Answers

1. (a) YES

GROUP 10 (A)

ADDRESS: ...

BROADVIEW, 2300, CANADA

OCTOBER 23RD 1918

MRS. M. G. COLLINS

BROADVIEW, E. O. 2300, CANADA

NOTE

REGIMENTAL OFFICER

COPY

YES

TO THE COMMANDING OFFICER, ...

1015-1016

BROADVIEW, CANADA

NOVEMBER 23RD 1918

R. DAVISON

Commanding Officer

STATEMENT OF MEDICAL EXAMINATION

I have examined ...

... CANADIAN OVERSEAS EXPEDITIONARY FORCE

DATE: ...

D. H. ...

Medical Officer

MAILED ...

MEDICAL CASE-HISTORY SHEET.

HOSPITAL Wp2 Gen STATION Winnipeg
 No. Rank Lieut Name Hollins G. D. Age 33
 Unit G. E Service 8th 12 C 9th 12 E
 Date of Admission 28th / 3 / 18. Date of Discharge June 15 1918
 Diagnosis Potts disease Spine Other Tuberculosis
 Date of Origin Dec 1916 Place of Origin Crowborough Camp Eng

CAUSE OF ILLNESS OR INJURY: heavy work and camp conditions

HISTORY OF PRESENT ILLNESS OR INJURY. 1911 - Proso abscess in right groin opened
 (Is Illness or Injury result of Service?) cleaned out some drainage - healed up
and felt well. In time no felt in usual good health in early part
Feb. 1912. Felt well and signed up in Dec 4-1915 - drilled re.
Jan 1917 Dec 1916 - had pain in back and had another proso
abscess opened in Jan 1917. Invalided to Canada 1917.

CONDITION ON ADMISSION. Had Kyphosis affecting lumbar vertebra (3rd 4) the proso
 abscess was discharging & had elevation of temperature. no cough
Diarrhoea 1st month - 3 or 4 stools. on admission - Diarrhoea ceased
middle of April - Proso abscess still discharging

TREATMENT. April 1-1918 - Bone graft to spine - wound opened and
discharged requiring daily dressings

CONDITION ON DISCHARGE FROM HOSPITAL. Associated anaemia - wound of
back still requires occasional dressing - occasional
attacks of diarrhoea

A. Walker Capt
 Medical Officer i/c Case.

Date June 14/18

31062
L

MEDICAL CASE HISTORY SHEET

Hospital No. _____
 Unit _____
 Date of Admission _____
 Date of Discharge _____
 Place of Origin _____
 Cause of Injury or Illness _____

History of Present Illness or Injury
 (A brief summary of the case)

Condition on Admission _____

Treatment

Condition on Discharge from Hospital _____

Medical Officer in Charge

MADE IN CANADA

R 6.1
Orthopedic

MANITOBA MILITARY
Convalescent Hospital
MAR 11 1918
TUXEDO PARK

MEDICAL CASE-HISTORY SHEET.

HOSPITAL..... STATION Winnipeg Man
 No..... Rank Lieut Name Collins Leo Donald Age 33
 Unit C.E. Service 6. 6.
17. 9.
 Date of Admission 11/3/18 Date of Discharge 15/6/18 28/3/18
 Diagnosis Caries Lumbar Vertebrae
 Date of Origin 3/1/17 Place of Origin England

CAUSE OF ILLNESS OR INJURY:

HISTORY OF PRESENT ILLNESS OR INJURY.

(Is Illness or Injury result of Service?)

Tubercular caries of spine. lumbar region. Psoas abscess.

CONDITION ON ADMISSION.

Patient running a constant temperature ~~range~~ of 100° to 102° or 3. Appetite capricious. Has diarrhoea that is being kept in check by medication. Patient emaciated.

TREATMENT.

CONDITION ON DISCHARGE FROM HOSPITAL.

Condition as above. Being sent to St. Boniface for bone trans-plantation from ~~from~~ tibia to spine.

H.P.M. Shail Lt Col.
Medical Officer i/c Case.

Date 28/3/18

238200

MEDICAL CASE-HISTORY SHEET

Name: *James P. ...*
 Station: *...*
 Date of Admission: *...*
 Date of Discharge: *...*
 Date of Death: *...*
 Place of Origin: *...*

History of Present Illness or Injury
 (A brief, factual record of events)
...
 Location of Admission: *...*

Treatment:
...
 Discharge from Hospital: *...*

Medical Officer in Charge: *...*
 Date: *...*
 M. R. 212
 201-212
 1923

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.
44
Year

Regimental No.

Rank.

Surname.

Christian Name.

Lieut

Collins

G. S.

Unit.

Age.

Service.

Card Engine

32

13/12

Station and Date.

Disease

Bronchitis

Barracks

Previous History - Neg.

26/1/17

Present Condition - Began about Jan 11-17 with usual sympt. of La Grippe, but managed to carry on - spending much of time in room. Since admission to Hosp. has coughed much, more when in bed. Chilly sensations. T.P.R. normal.
Capt. D. A. Wehle

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

S
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>146</i> Year <i>1917</i>	Regimental No.	Rank. <i>Lieut</i>	Surname. <i>Collins</i>	Christian Name. <i>G. D.</i>
		Unit. <i>Canadian Engineer</i>	Age. <i>32</i>	Service. <i>16/12</i>
Station and Date. <i>Bramshott.</i> <i>April 11. 17</i>	Disease <i>Paras aium Right Side.</i> <i>Had an operation for paras abscess five years ago. It healed up in about five months and broke down several times.</i> <i>There is now a discharging sinus. It has been boarded and is being sent back to Canada.</i> <div style="text-align: right;"><i>J.R. Irwin capt.</i></div>			

*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.

Manitoba Military Hospital. Tuxedo Park Station.

No. Rank *1st Lieut.* Name *Collins, Geo. Donald* Age *33*.

Unit *C. C. S.* Completed years of service } *9/12 C. 9/12 C.*
Where and how long

Date of admission *6-8-18* Date of discharge *6-9-18*

Diagnosis *Caries (Y.B) Spine* Place of origin *January 1917, Bramshott, Eng.*

CONDITION ON ADMISSION AND PROGRESS OF CASE

at WGH
Aug. 15, 1918; Bone grafting operation on 1-5-18 for old Pott's disease. Discharging in right groin for many months before operation was performed. Patient had been repeatedly urged to have operation done but did not give his consent until last April. Uninterrupted recovery from operation. Discharge continues. Ordered to have bedside lifted a foot at head, and also to be up part of each day. DR GALLOWAY.

Sept. 5, 1918; Stereo of left hip region ordered. Large amount of infiltration about Poupert's ligament. Discharge continues free. LT. COL. H.P.H. GALLOWAY.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

Negative
Negative

TREATMENT

(Especially any specific or special form.)

daily dressings
Free air.

CONDITION ON DISCHARGE

(and disposal made of case.)

practically the same as on admission. Can get up & go about discharge from right ptosis almost slight cough & elevation of temperature 10 p.m. for treatment
Date *Sept 11/18* *W. Houghhead*
Medical Officer i/c case.

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

No. _____ Rank Lieut. Name Collins, G. D. 191 7

Local Unit Signalling C.E.T.D. Overseas Unit _____ Age 32

Examination held in Bramshott area. 13 1/2 service

DISABILITY.

Overseas—Local.
(scratch one out)

Classification

PRESENT CONDITION.

This officer suffers from lumbar spinal tuberculosis and has had permanent scars therefrom. His lumbar spine is held quite rigid and he has pain in scars back rest position. He also has a bronchitis which has been troubling him for two weeks, last discharge 3 months ago. Wolens of weight recently.

Board recommends:

1. Fit for Duty. Class. 2 C.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

C.E. Copple ^{Pres.} Pres.

Members J.R. Irvine Capt.

Approved.

Bramshott 20-1- 191 7 H. Stewart Maj

for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

Birmingham

101

Approved

Members

Free

Signature

2. Discharge

1. Full for Permanent Base Date

3. Full for Base Date

4. Full for Base Date

5. Full for Base Date

Board recommended

PRESENT CONDITION

(attached one only)

Overseas—Local

DISABILITY

Examination held in Birmingham area

Local Unit

Overseas Unit

Age

No

Rank

Name

101

STANDING MEDICAL BOARD, BIRMINGHAM

BY

EXAMINATION

PROCEEDINGS OF A MEDICAL BOARD

assembled at Bramshott. on 30-1-17.

by order of G. O. C. CANADIANS.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut. G. D. Collins. (Corps) C. E.

Age 32 Service 13/12 Disability Bronchitis, Psoas Abscess Rt.

Date of commencement of leave granted for present disability None granted.

Date on which placed on half-pay for present disability Not applicable.

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this officer suffers from the above disability for which he has been treated in Bramshott Military Hospital, from 26-1-17. to date. His cough is much better. He has been classified 2 C.

Address:- Reserve Co'y., Canadian Engineers, Bramshott.

The opinion of the Board upon the questions herein is as follows:—

- (1.) a. Is the officer fit for "General Service"? No.
- b. If not so fit, how long is he likely to be unfit? Permanently.
- (2.) a. If unfit for General Service, is he fit for service at home? No.
- b. If not so fit, how long is he likely to be unfit for service at home? Permanently.
- c. If unfit for General Service at home, is he fit for light duty at home? No.
- d. If not so fit, how long is he likely to be unfit for light duty at home? Permanently.
- (3.) Was the disability contracted in the service? No.
- (4.) Was it contracted under circumstances over which he had no control? Yes.
- (5.) Was it caused by military service? No.
- (6.) If caused by military service, to what specific conditions is it attributed? No.
- (7.) If the disability was not caused by military service, was it aggravated by it? Yes.

Bramshott Camp, Hants.

31 JAN. 1917

APPROVED.

[Signature] Signatures

[Signature] President.

[Signature] Members.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

FOR OFFICERS ONLY

Confidential.

PROCEEDINGS OF A MEDICAL BOARD

RECEIVED
FEB 18 1918
A. D. M. S. M. P. - 10

MAR - 2 1918
CANADA

The signature of each Officer composing the Board, &c. should be attached at the end of the Proceeding.

assembled at Winnipeg, Man
on the 12 th day of February 1918 by order.

for the purpose of examining and reporting upon the present state of health of Lieut. George Donald Collins.

Canadian Engineers C.E.F.

PRESIDENT Capt. Gilbert H. Lansdown C.A.M.C.

MEMBERS. Capt. E.S. Moorhead Capt.
Lieut. A.S. McCann.

The Board having assembled pursuant to order, proceed

to examine the above-named officer and find that He has Tubercular disease of the spine, Pyamic Infection January 4/18. Temperature Feb. 11th 102° F. Feb. 12th 100.8° F. Anemic and Sallow. Has lost flesh Discharging sinus in Groin, thin odorous pus. Had psoas abscess in 1912, which healed. Recurred after attending French School of Instruction in England in the wet. This man is at present a patient at St. Boniface Hospital.

The opinion of the Board upon the questions herein is as follows:-

- (1) Is the officer fit for service? No
- (2) If not so fit, how long is the disability likely to continue? Minimum period of three months.

We recommend that he be sent to Ninette Sanitarium for treatment in open air.

APPROVED
MAR 4 1918
This order is
keep (3) P.D. C.M.S.

To what extent does it prevent his earning a livelihood? 75%

To Be Reproduced

Signatures

app

APPROVED
A.S. McCann

G.H. Lansdown
E.S. Moorhead

If an officer of the Active Militia sick or injured at Annual Training, etc., state if he is able to return to his civil duties.

B. P. C. FOLIO
7

M.F.B.380.

ES

C. J. Fortin

2/28
1918
507

OFFICERS ONLY

PROCEEDINGS

PROCEEDINGS OF A MEDICAL BOARD

Q. R.

MAR 2 1918

The signatures of each
Officer composing the
Board, should be attached
at the end of the Proceedings.

assembled at
Winnipeg, Man

on the
13th day of February 1918
by order.

for the purpose of examining and reporting upon the present
state of health of Lieut. George David Collins,
Canadian Infantry C.E.F.

President
Capt. Gilbert B. Macdonald C.A.M.C.

MEMBERS
Capt. E. E. Montford C.M.C.

Lieut. G. D. Collins

The Board having assembled pursuant to order, proceed

to examine the above-named officer and find that he has
contracted disease of the nature of Pyaemia Infection
January 1918. Temperature 102.4 Feb.
1918 100.8 Feb. 1918. Anemia and Edema. Has lost flesh
and is suffering from it. This disease was
contracted in 1915, which he had. Occurred after
attending British School of Instruction in England in
the West. This man is at present a patient at St.
Bartholomew Hospital.

The opinion of the Board upon the questions herein is as follows:-

(1) Is the officer fit for service?

(2) If not so fit, how long is the disability likely to continue?

Minimum period of three months.

Is it recommended that he be sent to the front for
further treatment in any way?

(3) To what extent does it prevent his earning a livelihood?

Signatures

PROCEEDINGS OF A MEDICAL BOARD
MAY 2 1918

It is recommended that the above-named officer be returned to his civil duties.

U.F.B. 380.

18-4-18.

U.F. 1723-39-374.

PROCEEDINGS OF A MEDICAL BOARD

DEPT MILITIA & DEFENCE

30-1-FEB 14 1917

H.Q. CANADA

332-124-122

assembled at Bramshott. on _____

by order of G. O. C. CANADIANS.

for the purpose of examining and reporting upon the present state of health of
 (Rank and Name) Lieut. G. D. Collins. (Corps) C. E.
 Age 32 Service 13/12 Disability Bronchitis, Psoas Abscess Rt.
 Date of commencement of leave granted for present disability None granted.
 Date on which placed on half-pay for present disability Not applicable.

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this Officer suffers from the above disability for which he has been treated in Bramshott Military Hospital, from 26-1-17. to date. His cough is much better. He has been classified 2 C.

Address:- Reserve Co'y., Canadian Engineers, Bramshott.

The opinion of the Board upon the questions herein is as follows:—

- (1) a. Is the officer fit for "General Service"? No.
- b. If not so fit, how long is he likely to be unfit? Permanently.
- (2) a. If unfit for General Service, is he fit for service at home? No.
- b. If not so fit, how long is he likely to be unfit for service at home? Permanently.
- c. If unfit for General Service at home, is he fit for light duty at home? No.
- d. If not so fit, how long is he likely to be unfit for light duty at home? Permanently.
- (3) Was the disability contracted in the service? No.
- (4) Was it contracted under circumstances over which he had no control? Yes.
- (5) Was it caused by military service? No.
- (6) If caused by military service, to what specific conditions is it attributed? No.
- (7) If the disability was not caused by military service, was it aggravated by it? No.

Bramshott Camp, Hants.

31 JAN. 1917

APPROVED.

Signatures
[Signature] Major,
 B.A.M.S. for A.D.M.S.,
 Canadian Tropic, Bramshott Camp

[Signature] President.
[Signature] Members.
[Signature] Members.

I concur in the findings of the Board of Medical Officers
 were recorded
 Lieut.-Colonel, A.D.M.S.
 for
 Canadian Expeditionary Force.

FALSE DOCKET
 327

[P.T.O.]

141-217
R. C. FEB 14 1917

L. / 2 / 41 /
8/22

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

No. _____ Rank Lieut. Name Collins, G. O. 191 7

Local Unit Signal Coy C.E.T.D. Overseas Unit _____ Age 32

DEPT. MILITIA & DEFENCE
AUG - 8 1917
H.Q. CANADA

Examination held in Bramshott area. 1 1/2 service

DISABILITY.

Overseas—Local.
(scratch one out)

Classification

PRESENT CONDITION.

This officer suffers from lumbar spinal tuberculosis and has had a permanent proso abscess therefore. His lumbar spine is held quite rigid and he has pain in abscess track night & day. He also has a bronchitis which has been troubling him for two weeks. Last discharge 3 months ago. Holds present recently.

Board recommends:

1. Fit for Duty. Class. 2 C.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

C. E. Cornish Pres.

Members J. R. Irvine Capt.

Approved.

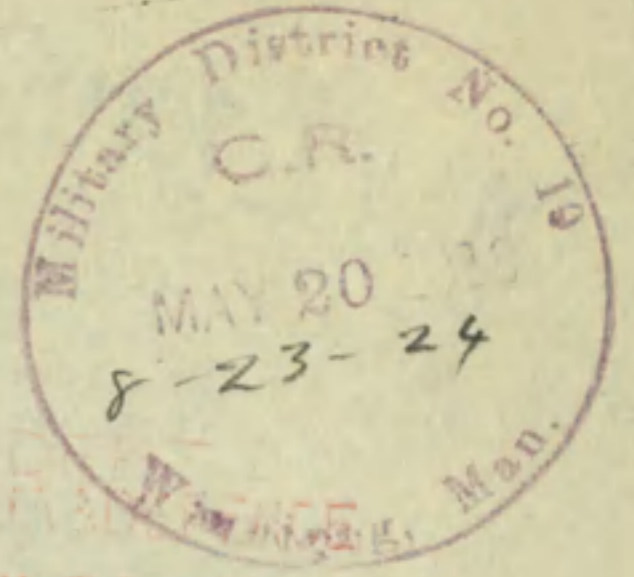
Bramshott 20-1- 191 7

B. R. C. FULTON
FALSE DOCKET
for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

49
X

Winnipeg General Hospital.

FOR ALL RANKS
PROCEEDINGS OF A MEDICAL BOARD
(short form)



Place Winnipeg, Man.

MAY 26 1918
Date May 16th 1918.
CANADA

Number _____ Rank _____ Lieut. Name **George Donald COLLINS.**
 Copps I. S. C. 229th Age 33 Religion Roman Catholic
 C.E. (signals)

(1) Disability **Potts Caries; psoas abscess. Transplantation of bone performed April 1st 1918.**

(2) Incurred _____
 (Cancel Overseas
 One) ~~Canada~~

(3) Category "D" 3

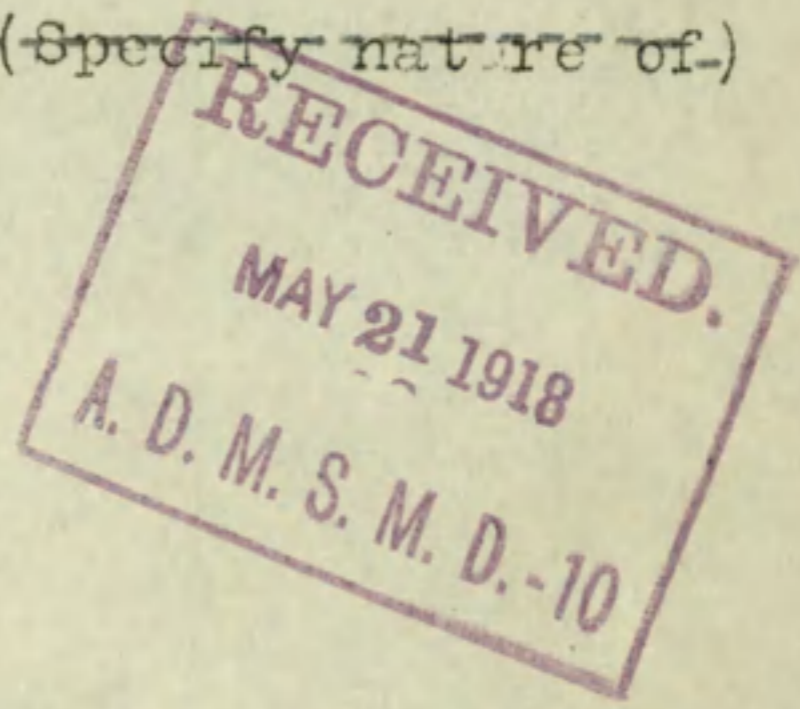
(4) Recommendations - That he remain under treatment for a minimum period of two months.
 (a) Treatment (specify nature of) **Surgical and Hygienic.**

~~(b) Return to duty~~

(a) General

(b) Special (Specify nature of)

(c) Special



W. W. ... Capt. President

J. Shanks Capt

Place Winnipeg, Man. Date May 16th 1918.

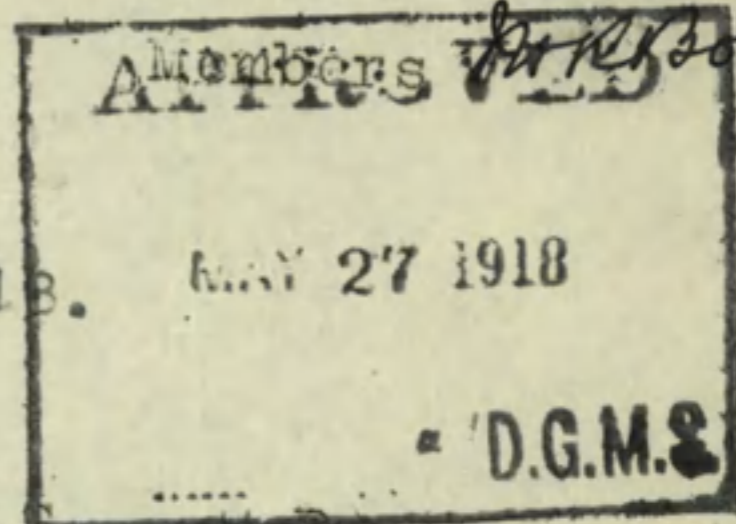
MAY 27 1918

APPROVED

Approved
MAY 21 1918

W. W. ... Major, A.M.C.

A. D. M. S. or camp

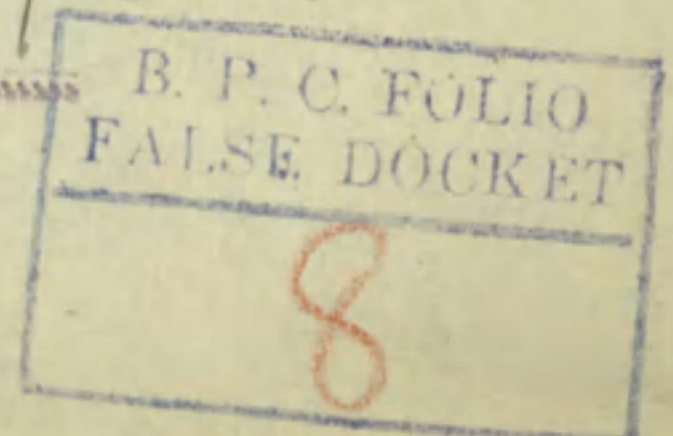


ES Place Winnipeg, Man. Date _____
WINNIPEG, MAN.

NOTE WHERE NOT APPLICABLE IF NECESSARY MAKE SPECIAL RECORD

F.W. 180
20m-1-18(M)
H.Q. 1772-39-1213

To Be Reboarded *July 16-18*



MAY 27 1918

PROCEEDINGS OF A BOARD
OF HEALTH
Held at
New York City

1918
MAY 27 1918
M.B.C.

Place: New York City
Date: May 27, 1918
Name: George Donald
Address: 1234
Occupation: Clerk
Age: 25
Sex: Male
Color: White
Religion: Roman Catholic
Marital Status: Single
Education: High School
Previous Residence: New York City
Previous Occupation: Clerk
Previous Residence: New York City
Previous Occupation: Clerk

(1) Examination - The patient was examined for a period of two hours by the Board of Health and Hygiene.

(a) General
(b) Special
(c) Physical

Approved
M.B.C.

1

CERTIFIED CORRECT

Casualty Form—Active Service.

4 - JUL 1917 Regiment or Corps 229th Bn C.E.F. Regimental Number _____
 Rank Lieut. Surname Collins, Christian Name G.D. George Donald
 Religion _____ Age on Enlistment _____ years _____ months.
 Enlisted (a) 4/7/16 Terms of Service (a) 10y W. Service reckons from (a) 4/7/16
 Date of promotion to present rank _____ Date of appointment to lance rank 23-8-16
 Extended { } Re-engaged { } Qualification (b) _____
 or Corps Trade and Rate _____

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...	Halifax	21-8-16	S.S. Olympic
		Disembarked...	Liverpool	30-8-16	
		-----	-----	-----	-----
		Posted to G.M. School	Shorncliffe	30-8-16	D.O. CTD. No. 4635 d/2-9-16.
29-9-16.	G.O.C. Troops	Transferred to the C.E.T.D. C.T.D.	Shorncliffe	24-9-16	D.O. CTD. No. 5107 d/29-9-16.
		-----	-----	-----	-----
4-10-16	C.E.T.D.	Attached to C.E.T.D.			D.O. 5156
		Trans. from G.M.S.	S. Schiffe	20-9-16	
18-1-17	Ob. C.E.T.D.	On command 4th Div C.E. Res. Coy Bramshott	Crowborough	16-1-17	Part of Order #14
21.2.17	C.E.T.D.	Ceases to be attached to C.E.T.D.	Crowborough	31.1.17	Part of Order #44

(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) Signaller, Shoeing-smith, &c.
 (B99130) W 15012-5156 J. P. & Co., Ltd. Forms/B103/3. [P.T.O.]

Report	Date	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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
	21.2.17	C E T D	Japan on strength of C E T D	Comdrough 31.1.17		Plt. Bida L. H. H.
	22.4.17	C E T D	from General Staff S.O. & RECEIVED from proceeded to London for return to Canada	Creche 9.4.17		Lieut. C. B. of Creche for Adjutant, C. E. T. D. No. 94 C.R. 1531
	27/7/17	NO. #12	J.O. for treatment	Agave 27/7/17		Adjutant, C. E. T. D. No. 49/608 Minesweeping Capt. G. Adjutant, M. H. C. C.
	1-9-17	1st Lt	on strength of "F" Unit, M. H. C. C.			

T.O.S. No. 10 DISTRICT DEPOT
 S.O.S. No. 10 DISTRICT DEPOT
 D.O. 15-6
 PARA 1
 55. Clarkston
 For O.C. No. 10 District Depot

LT. COL.
 OFFICER COMMANDING "G" UNIT.
 MILITARY HOSPITALS COMMISSION COMMAND

Collins. G. D.

Lieut. 129th. Bn. att. Gen. list.
(. HQ. C.E. Bramshott).

Mil. Hosp. Shorncliffe. 8-9-16.
Can. Mil. Hosp. Bramshott. 26-1-17.
Bramshott Mil. Hosp. 10-4-17.

Arthritis.

N.Y.D. (Q).

Bronchitis. Q. ac.

Psoas Abscess. *R*

Discharged:-. 10-9-16.

do. 30-1-17.

do. 11-4-17.

C.L. 19-10-16. 499.
30-1-17. 586-3.
6-2-17. 592-4.
15-2-17. 600-3.
18-4-17. 651-3.
28-4-17. 660-2.

A.M.D. 2 DEPT.

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

VR

Surname	Christian Name	Reg. No.
COLLINS.	G. D.	
Rank	Unit	
Lieut.	C.E.	

MEDICAL BOARD held at	Date	Serial No.
(1) Bramshott.	30-1-17.	

Other Medical Boards at	Date	Serial No.
(2)		
(3)		
(4)		
(5)		

Condition found by Board

Disposition Recommended

(1)	Perm. unfit.
(2)	
(3)	
(4)	
(5)	

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

2-C-3

Regt. No. Rank *Lieut* Name *Collins Ho. Donald,*

Unit *CE* Age *33* Serial No. in A. & D. Book *3. D.*

Married or Single *Single* Religion *R.C.*

Total Service Where AND HOW LONG *6. 17. 12 6. 7. 12* Date and Place of Origin *3/1/17 England*

Disease or Injury *Varies Lumbar Vertebrae,*

Operations *1918 from grafting operation for old G. O. Th. disease at W. G. H.*

Result of Operations

(a) Date of Arrival at Hospital as an Admission *11/3/18* *DUE TO SERVICE

(b) As a Transfer (state where from) *NOT DUE TO SERVICE
NAME OF HOSPITAL

Date of Discharge to Unit

Date of Discharge as an Invalid

Date of Death

Date of Transfer (state where to) *28/3/18 Janolopy Ten Hoop,*
NAME OF HOSPITAL

Other Independent Conditions Diagnosed

*Cross out condition not applicable

M. F. W. 142.
25M-3-18.
1772-39-1171.

OFFICERS.

mother Broadview

Sask.

[OVER]

2-C-3

REMARKS

11/3/18.

Tubercular Caries of spine, Lumbar region, Psoas abscess. Patient running a constant temperature of 100° to 102° or 3 , appetite capricious, Has diarrhoea that is being kept in check by medication. Patient emaciated.

28/3/18. Condition as above. Being sent to St Bourfae for bone transplantation from tibia to spine.

See Card # 115-D.

2-C-3
Regt. No. Rank **Lieut** Name **Collins, George Donald**

Unit **CE** Age **33** Serial No. in A. & D. Book **115-D**

Married or Single **Single** Religion **RC**

Total Service Where AND HOW LONG **C 12 E 12** Date and Place of Origin **Jan'y 1914, England**

Disease or Injury **Caries (TB) spine**

Operations **1/5718 Bone grafting operation for old Pott's disease at W. G. H.**

Result of Operations

(a) Date of Arrival at Hospital as an Admission **6-8-18** *DUE TO SERVICE

(b) As a Transfer (state where from) *NOT DUE TO SERVICE
NAME OF HOSPITAL

Date of Discharge to Unit

Date of Discharge as an Invalid **6-9-18 #10 00066 ... E**

Date of Death

Date of Transfer (state where to)
NAME OF HOSPITAL

Other Independent Conditions Diagnosed

*Cross out condition not applicable

M. F. W. 142, 25M-3-18, 1772-39-1171
Kin: Mother - Broadview Sack

[OVER]

2-C-3

REMARKS From Card 3 D.

Aug 15/18 Bone grafting operation on 1-5-18 for old Pott's disease, Discharging in right groin for many months before operation was performed. Patient had been repeatedly urged to have operation done but did not give his consent until last April, Uninterrupted recovery from operation, Discharge continues, Ordered to have bedside lifted a foot at head, and also to be up part of each day.

Sept 5/18. Stereos of left hip region ordered, Large amount of infiltration about Pouporth's ligament, Discharge continues free.

Sept 6/18. Condition practically the same as on admission, Can get up and go about, discharge from right Psoas abscess, slight cough and elevation of temperature.

2-e-2
 Name COLLINS, GEORGE DONALD Rank Lieut. Regt. No. Unit "G"
 Battn. Can. Eng. Camp or O. S. O.S. ~~XXXXXXX~~ Single H. Q. File R.C.
 Next of kin Mother, Mrs Collins, Broadview, Sask.
 Discharged to Class D. of D. Conduct.....
 Pension awarded..... Date of first payment.....
 Address on discharge.....
 Diagnosis..... Date boarded.....

DATE	CLASS	REMARKS	Part 2 Order
3-10-17	II	Admitted to Deer Lodge Hospital	255-1850
23-12-17		Transferred to Out-Patient	328-2308
3-1-18		Re-admitted to Deer Lodge Hospital	4-16
11-2-18		Transferred to St. Boniface Hospital	43-242
12-3-18		XXXXXXXXXXXXX Deer Lodge	71-425
13-3-18		Transferred from St. Bon. Hosp. to M.M.C.H.	72-436

58095

WAR SERVICE BADGES.

INFORMATION REQUIRED

File No.

To Director of Records.

Re Application for War Service Badge Class & Class

No. Rank Name

Unit Address

(Strike out answer which does not apply)

Service over 3 months - ~~yes~~ - ~~no~~

Service in Canada Yes. - ~~No~~

Service in England Yes. - ~~No~~

Service in France ~~Yes.~~ - No

Retained for duty)

in Canada) Yes. - No.

Discharged Yes. - No.

If discharged, state reason

Med. Unfit -

R.O. 1068 of 16-9-18

Age 30 Complexion Eyes Hair

Badge issued Class No.

" " " B No. 39791

Badge Refused

W.138-100m.10-17.

1772-39-1167.(M).

16-12-18. A.D.

APPROVED

S.O.S. 6-9-18

5000

WAR SERVICE RECORDS

INFORMATION REQUIRED File No.

To Director of Records

To Application for War Service Badge Class

Name

Address

(Strike out number which does not apply)
Service over 3 years - Yes - No

Service in Canada Yes - No

Service in England Yes - No

Service in France Yes - No

Helped for ()

in Canada Yes - No

Discharged Yes - No

If discharged, state reason

Age at Commission Yes - No

Badge issued Yes - No

Badge retained

W. 188-100m. 10-17

1778-50-113 (M)

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Telegraph Operator

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

Returned to Canada per S.S. "Grampian" May 4-1917. Permanently unfit (auth J. 331).

MEDICAL EXAMINATION.

PLACE

Camp Hughes, Man

DATE

July 4th 1916.

Present Address:-

Broadview Sask.

SURNAME.

Collins

649-6-12180.

CARD NO.

CHRISTIAN NAMES

George Donald

S.O.S. Dis. (M.A.) 6-9-18

REGL. No.

RANK

Lieut + Sig'l Officer

W.O. 156 of 20-9-18

UNIT

229th Bn.

~~*"G" Unit M.H.C.C.*~~

10. 21. 20

FORMER CORPS

60th Rifles 16th Lt Horse. 1907-08

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Collins, Mrs M. G.

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Broadview, Sask.

COUNTRY OF BIRTH

Canada, Kenora. Ont

DATE

Oct 26th 1884

PLACE OF ATTESTATION

Broadview, Sask.

DATE

Nov 23rd 1915.

Trans from 229th Bn to G Unit M.H.C.C. 29-8-17. Auth No. 593.3-29. Letter M.H.C.C. 59-17.

L. L. 6915. M. & D. 6994.

Q. 22-8-16 ⁵²⁷

M. F. W. 22. 100M. -8-16. H. Q. 1772-39-339.

R.C. 4-5-17.

J.L.



No.

RANK

Serjeant

NAME

Collins G. D.

T. O. S. *27-7-17*

UNIT

"H" Unit M. G. C. C.

212/834.

M. D. *12*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917</i>	<i>1917</i>			
<i>Aug as acct.</i>				
<i>Sept as acct.</i>				

JUL 9

56483

Serial Desp. 1923 Reqn. No.

Plaque Desp. NOV 10 1923 n. No. 49724

P

B

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

Number.....

Rank

LIEUT

Surname.....

COLLINS

Christian Name.....

GEORGE DONALD

Unit.....

Theatre of War

ENG.

Date of Service.....

23.8.16.

4.5.17

Remarks.....

cc.

Latest Address.....

Broadview

Sask.

Roll No.

a

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

G. A. 18698 Deep

*1871
23
1871*

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
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3. In answering the questions, Medical Officers will carefully obtain and record the officer'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 officer concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space at the foot of this page.
5. The nomenclature of diseases to be followed is that 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.

FORM TO BE USED FOR OFFICERS

MEDICAL HISTORY OF AN INVALID

Station.....

Date.....

1. (a) Unit
(b) Rank
(c) Surname (d) Christian name
2. Age last birthday Date of birth
3. Date of appointment to the C. E. F. (for officers of the C. E. F.)
Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training)
4. Personal description:
(a) Height (b) Weight
(c) Complexion (d) Colour of hair
(e) Colour of eyes (f) Scars or tattoo marks
5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners)
(b) Address of O. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa, is to be sent
6. Former trade or occupation

7. Service	Years	Days
	PERIODS	
	From	To

8. Disease or disability (use authorized nomenclature)
(a) Date of origin (b) Place of origin
(c) Cause
9. Present condition. (Important, to be a full description of the present condition or conditions.)

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

Notes Continued

Dec. 1917. Patient still gaining wt. Looking better. But Abscess is still slightly discharging.

Jan. 17-18. Consulted with Dr. Mothers Giant Camp. Who considers the condition strongly suspicious of T.B. Patient going home for few days for change. Patient has not done so well during last few weeks. He looks worried. + wants to exclude himself. He has lost weight also Pain in back must have increased judging by the guarded attitude while walking. Patient denies increase of Pain.

10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8. [Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

11. To what extent, state in percentages, is incapacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each and that due to all combined.

12. Did the disability arise on or off duty?

13. Was a Court of Inquiry held?

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

Yes No (If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

(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.)

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

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

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

19. Can the former trade or occupation be resumed?

20. Recommendations.

Medical Officer by whom the case is brought forward.

(Sections 8, 9 and 10 are to be read to the Officer.)

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

Signature of Officer examined.

OPINION OF THE MEDICAL BOARD

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

22. Is the Officer 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.)

23. It is certified that the Officer (a) Does require treatment. (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.)

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

Station..... Date..... } Members. President.

APPROVED BY Date..... Assistant Director of Medical Services.

APPROVED BY Date..... Director General of Medical Services.

SEP 25 1917

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4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space at the foot of this page.
5. The nomenclature of diseases to be followed is that 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.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR OFFICERS

MEDICAL HISTORY OF AN INVALID

Station Winnipeg DEPT MILITIA & DEFENCE
 Date August 30th 1917 SEP 25 1917

332-HQ-124-122

1. (a) Unit C.E. (d) Christian name George Donald
 (b) Rank Lieut.
 (c) Surname Collins
2. Age last birthday 32 Date of birth Oct. 26th 1884
3. Date of appointment to the C. E. F. (for officers of the C. E. F.) April 16th 1916
 Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training) April 16th 1916.
4. Personal description:
 (a) Height 5ft. 6 1/2 (b) Weight 128 lbs
 (c) Complexion Florid (d) Colour of hair Light
 (e) Colour of eyes Grey (f) Scars or tattoo marks Scar right groin
5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners) Broadview, Sask.
 (b) Address of O. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa, is to be sent O.C. "G" Unit M.H.C.C.
6. Former trade or occupation Station agent.

RECEIVED
 SEPT 13 1917
 A. D. M. S. M. D. 10

7. Service	PERIODS	
	From	To
	<u>April 16 1916</u>	<u>August 30th 1917</u>

8. Disease or disability (use authorized nomenclature) Tubercular disease of spine
 (a) Date of origin February 1912 (b) Place of origin Broadview, Sask.
 (c) Cause Unknown

9. Present condition. (Important, to be a full description of the present condition or conditions.)
pulse 72 temperature normal. slight tenderness over lumbar region Pain occurs only after exertion lasting over an hour or more. There is a sinus discharging in the right groin. Heart and lungs normal Locomotion good. Is not able to jumps or hop

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

B. P. C. FOLIO
FALSE DOCKET

15

106

10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8.
[Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

Scar 1 1/2 long right groin with sinus in middle of scar.

11. To what extent, state in percentages, is incapacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each and that due to all combined.

100%

12. Did the disability arise on or off duty? Off duty

13. Was a Court of Inquiry held? No

14. If the disabling condition had its origin before enlistment, has it been aggravated on service? ~~xxx~~ Pre-existed enlistment ~~xxx~~ It has been aggravated by service 50%
(If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? NO. NO. NO. NO.
(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.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions if there is more than one? minimum period of two months

17. Treatment (Case reports, general or special, should be secured and attached where possible).
Abscess in groin incised in February 1917. Invalided to Canada on May 5th 1917 No further treatment.

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

19. Can the former trade or occupation be resumed? No.

20. Recommendations.
That he be given appropriate treatment in Hospital.

Robert Jansdown
Medical Officer by whom the case is brought forward.

(Sections 8, 9 and 10 are to be read to the Officer.)

I, the undersigned *G.D. Collins* have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

G.D. Collins
Signature of Officer examined.

OPINION OF THE MEDICAL BOARD

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

Yes

22. Is the Officer fit for (a) ~~XXXXXX~~ (Category A.) (Yes or No.) No
(b) ~~XXXXXXXXXXXXXXXXXXXX~~ (" B.) (Yes or No.) No
(c) ~~XXXXXXXXXXXXXXXXXXXX~~ (" C.) (Yes or No.) No
(d) Temporarily unfit (" D.) (Yes or No.) yes
(e) Unfit for service in Categories A, B and C. (" E.) (Yes or No.) YES

23. It is certified that the Officer

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

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

That he be given appropriate treatment in Hospital. His condition pre-existed enlistment and has ~~not~~ been aggravated by service. *with*

Station Winnipeg, Man.

Date August 30th 1917.

APPROVED BY

Date

APPROVED BY

Date 27-9-17.

Robert Jansdown President.
John H.R. Bond Member.
Ellwood Capelle Member.
APPROVED
SEP 5-1917
G.D. Collins Assistant Director of Medical Services.

W.H. Ordwell Director General of Medical Services.

FALSE DOCKET
12

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FORM TO BE USED FOR OFFICERS

MEDICAL HISTORY OF AN INVALID

Station.....

Date.....

1. (a) Unit Engineers. Canadian
 (b) Rank Lieut
 (c) Surname Collins (d) Christian name George Donald
2. Age last birthday 32 Date of birth Oct 26/
3. Date of appointment to the C. E. F. (for officers of the C. E. F.) April 16/16
 Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training) April 16/16.
4. Personal description:
 (a) Height 5' 7 1/4" (b) Weight 140
 (c) Complexion Dark (d) Colour of hair Dark Brown
 (e) Colour of eyes Blue Grey (f) Scars or tattoo marks
5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners) Broadview Park.
 (b) Address of O. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa, is to be sent
6. Former trade or occupation C.P.R. Station Agent.

7. Service	PERIODS	
	From	To
	<u>Nov 20</u>	<u>April 16/16</u>

8. Disease or disability (use authorized nomenclature) Pain + stiffness in lower part of the back.
 (a) Date of origin Dec. 25/16. approx. (b) Place of origin Croborough, Eng.
 (c) Cause Doing Physical drill. Had old standing trouble Psoas abscess Jan. 1912.
9. Present condition. (Important, to be a full description of the present condition or conditions.)

Is wearing body brace received from The Mayo's. Has stiff spine involving first 3 or 4 Lumbar vertebrae. Has no pain on pressure. But has pain if rising on toes + suddenly falling on heels. There is no movement in affected spinal vertebrae.

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

And there is evidence of hyperplasia about the joints. There is slight projection of first or second lumbar spine.

M. F. B. 380. 50M.-6 17. 1772-30-274.

Start on page 4.

Hist: In 1911 felt slight pain in the back. + noticed that he was not able to stoop for base ball as easily as formerly.
 In 1912. a Psoas abscess developed and was opened in St. Boniface Hosp. Jan. 1912. The abscess healed in May. 1912. and developed + was opened again one year later and soon healed.
 Each opening relieved the pain in the back.

Has gone on for four years without much trouble except slight stiffness + pain at times. more so in damp weather.

Joined the Army. 1915 feeling fit. + keeping well until pain developed in the back while doing Physical drill at Croborough Camp. In three weeks time Psoas abscess developed and was opened up. (Feb. 1916). The abscess is almost healed at present time.

Present Condition: Looks only fair. Back stiff in lumbar region having no movement in first 3 or 4 vertebrae. There is pain on jarring the spine. There is evidence of hyperplasia about the joints involved. Patient has just returned from the Mayo's. + is wearing body brace supplied by them. In a letter from them dated Sept. 27/17 they are unable to diag. L.P. of the spine, but recommend that he wear the body brace continually.
 There is no doubt that the condition is L.P. of the spine, and am treating him on this line.

Notes: November -17. Still discharge from Psoas abscess. But Patient Putting out wt.

- 10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8.
[Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

- 11. To what extent, state in percentages, is incapacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each and that due to all combined.

- 12. Did the disability arise on or off duty?

- 13. Was a Court of Inquiry held?

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

Yes No

(If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)

- 15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

(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.)

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

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

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

- 19. Can the former trade or occupation be resumed?

- 20. Recommendations.

.....
Medical Officer by whom the case is brought forward.

(Sections 8, 9 and 10 are to be read to the Officer.)

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

.....
Signature of Officer examined.

OPINION OF THE MEDICAL BOARD

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

- 22. Is the Officer 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.)

- 23. It is certified that the Officer

- (a) Does require treatment.
 - (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.)

- 24. It is recommended that the Officer be discharged. (When not for discharge add special recommendation.)

..... *President.*
Station.....
Date..... } *Members.*

APPROVED BY

Date..... *Assistant Director of Medical Services.*

APPROVED BY

Date..... *Director General of Medical Services.*

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the officer'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 officer concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space at the foot of this page.
5. The nomenclature of diseases to be followed is that 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.

History of Case.

In 1911 felt slight pain in back, when he was not able to

stoop for base ball as easily as formerly.

In 1912, Potts abscess developed was opened in St. Boniface Hospital in Jan. In May 1912 abscess healed up and broke down a year later. Fresh opening relieved pain in back. Went on for four or five years without much trouble, except pain at times.

Joined Army 1915 feeling fit and keeping well until pain developed in the back while trench digging at Crowborough Camp, England. In three weeks time Potts abscess developed and was opened Feb. 1916.

Returned May 1917, went to Military District No. 12, transferred for treatment to Military District No. 10, Aug. 1917. Got permission to go to Doctor Mayo's Clinic for x-ray examination. Returned to Dear Lodge C.S. Sept. 1917. In Jan. 1918 developed la-grippe, lasted until Feb. went to St. Boniface for x-ray which was seen by Dr. Schick Galloway at St. Boniface in Feb. 1918. Came to Canada for 3 weeks, went to General Hospital March 20th for operation. Remained for 10 weeks, went home 2 months, returned to Canada 2 weeks ago, recommended for rest at home.

FORM TO BE USED FOR OFFICERS**MEDICAL HISTORY OF AN INVALID**

Station Can. Military Hospital.

Date 19th August, 1918.

1. (a) Unit 220th C.S.F.D. #10 District Depot.

(b) Rank Lieutenant

(c) Surname Collins (d) Christian name George Donald

2. Age last birthday 33 Date of birth Oct. 26th, 1884.

3. Date of appointment to the C. E. F. (for officers of the C. E. F.) May 15th, 1916.

Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training) May 15th 1916.

4. Personal description:

(a) Height 5' 7" (b) Weight 120 lb.

(c) Complexion Fair (d) Colour of hair Dark

(e) Colour of eyes Grey (f) Scars or tattoo marks operation scar on back

5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners) Broadview, Sask.

(b) Address of O. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa, is to be sent

6. Former trade or occupation C.P.R. Station Agent.

7. Service

Years Days

PERIODS

From

To

Dec. 4th

8. Disease or disability (use authorized nomenclature) Impaired function back and hips.

(a) Date of origin June 1912 (b) Place of origin Broadview, Sask.

(c) Cause Potts Disease.

9. Present condition. (Important, to be a full description of the present condition or conditions.)

Very poorly nourished, 95lb. underweight. Discharging Potts abscess, right side. Stiffness in lumbar region, especially following bone grafting operation, left thigh flexed. Pain across abdomen supra-pubic region. Pain in sacral region.

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

10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8. [Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

Scar on back 7 to 8 inches following operation April 1st, 1918. Contraction of flexors of thigh on left side. Slight cough which consists of clearing throat with slight expectoration. Bowels regular, nocturnal frequency of nucturation 3 or 4 times a night. There marked dability.

11. To what extent, state in percentages, is incapacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each and that due to all combined.

12. Did the disability arise on or off duty? Pre-existed enlistment.

13. Was a Court of Inquiry held? No

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

Yes 80% No

(If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No, No, No.

(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.)

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

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

9 mos. in England
Hosp. Canada 15 mos.

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

Yes, will require treatment sanatorium, or at home.

19. Can the former trade or occupation be resumed? No.

20. Recommendations. discharged as Medieally Unfit transferred to I.S.C. for attention.

M. Shorridge
Medical Officer by whom the case is brought forward.

(Sections 8, 9 and 10 are to be read to the Officer.)

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

Geo Collins
Signature of Officer examined.

OPINION OF THE MEDICAL BOARD

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

Yes

22. Is the Officer 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.)

23. It is certified that the Officer

- (a) Does require treatment.
 - (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.)

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

Discharged as medically unfit and transferred to the I.S.C

J. J. ... President.
W. B. ... Members.

Station M.M.H. Tuxedo.
Date 21st Aug 1918.

APPROVED BY

Date

Assistant Director of Medical Services.

APPROVED BY

Date

Director General of Medical Services.

6.9.18 SOS Med Unfit C.0221-3853 156-1107

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR OFFICERS

MEDICAL HISTORY OF AN INVALID

Station Man. Military Hospital.

Date 19th August, 1918.

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the officer'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 officer concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space at the foot of this page.
5. The nomenclature of diseases to be followed is that 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.

History of Case.

In 1911 felt slight pain in back, when he was not able to

stoop for base ball as easily as formerly.

In 1912, Psoas abscess developed was opened in St. Boniface Hospital in Jan. In May 1912 abscess healed up and broke down a year later. Each opening relieved pain in back. Went on for four or five years without much trouble, except pain at times.

Joined as Private, obtained commission in May 1916. Developed in the back while trench digging at Crowborough Camp, England. In three weeks time Psoas abscess developed and was opened Feb. 1916.

Returned May 1917, went to Military District No.12, transferred for treatment to Military District No.10, Aug.1917. Got permission to go to Rochester Mayo's Clinic for ~~xxx~~ examination. Returned to Deer Lodge C.H. Sept. 1917. In Jan. 1918 developed la-grippe, lasted until Feb. went to St. Boniface for one month. Was seen by Dr. ~~William~~ Galloway at St. Boniface in Mar. 1918. Came to Tuxedo for 3 weeks, went to General Hospital March 29th for operation

Remained for 10 weeks, went home 2 months, returned to Tuxedo 2 weeks ago, recommended for rest at home.

1. (a) Unit 229th C.E.T.D. #10 District Depot.
 (b) Rank Lieutenant
 (c) Surname Collins (d) Christian name George Donald
2. Age last birthday 33 Date of birth Oct. 26th, 1884.
3. Date of appointment to the C. E. F. (for officers of the C. E. F.) May 15th, 1916.
 Date of reporting for duty (for officers of the Active Militia attached to Units, for duty, or at Annual Training) May 15th 1916.
4. Personal description:
 (a) Height 5' 7 1/2" (b) Weight 120 lb.
 (c) Complexion fair (d) Colour of hair Dark
 (e) Colour of eyes Grey (f) Scars or tattoo marks operation scar on back
5. (a) Address after being struck off the strength of the C. E. F. or after resignation (for use of the Board of Pension Commissioners) Broadview, Sask.
 (b) Address of O. C. Unit to whom notification of decision of Board of Pension Commissioners, Ottawa, is to be sent
6. Former trade or occupation C.P.R. Station Agent.

7. Service	PERIODS	
	Years	Days
C.E.F.	From	To
	Dec. 4th	

8. Disease or disability (use authorized nomenclature) Impaired function back and hips.
 (a) Date of origin June 1912 (b) Place of origin Broadview, Sask.
 (c) Cause Potts Disease.
9. Present condition. (Important, to be a full description of the present condition or conditions.)

Very poorly nourished, 25lb. underweight. Discharging Psoas abscess, right side. Stiffness in lumbar region, especially following bone grafting operation, left thigh flexed. Pain across abdomen supra-pubic region. Pain in sacral region.

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

- 10. Give a full description of wounds, scars, deformities, signs or symptoms, or abnormal conditions present, but not included in answer 8.
[Answer to this question cannot be made without stripping the officer and subjecting him to a thorough physical examination.]

Scars on back 7 to 8 inches following operation April 1st, 1918. Contracted of flexors of thigh on left side. Slight cough which consists of clearing throat with slight expectoration. Bowels regular, nocturnal frequency of micturition 3 or 4 times a night. There marked debility.

- 11. To what extent, state in percentages, is incapacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each and that due to all combined.
- 12. Did the disability arise on or off duty? *Pre-existed enlistment.*
- 13. Was a Court of Inquiry held? *No*
- 14. If the disabling condition had its origin before enlistment, has it been aggravated on service?
Yes *00%* No
(If the answer is in the affirmative, state in percentages, to what extent the pensioner is incapacitated by that aggravation.)
- 15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? *No, No, No*
(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.)
- 16. What is the probable duration, in months, of the disability or of each of the disabling conditions if there is more than one? *Slight improvement probable in 6 months.*
- 17. Treatment (Case reports, general or special, should be secured and attached where possible).
*0 nos. in England
Hosp. Canada 15 nos.*
- 18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
Yes, will require treatment sanatorium, or at home.
- 19. Can the former trade or occupation be resumed? *No.*
- 20. Recommendations. *discharged as medically unfit transferred to I.S.C. for attention.*

M. S. Hughes
Medical Officer by whom the case is brought forward.

(Sections 8, 9 and 10 are to be read to the Officer.)
I, the undersigned..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Geo D Collins
Signature of Officer examined.

OPINION OF THE MEDICAL BOARD

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

Yes

- 22. Is the Officer 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.)
- 23. It is certified that the Officer
(a) Does require treatment.
(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.)
- 24. It is recommended that the Officer be discharged. (When not for discharge add special recommendation.)

Discharged as medically unfit and transferred to the I S C.

J. M. Patton Capt. President.
W. B. Johnson Capt. R.M.C. Members.

Station *M M H Tuxedo*
Date *21st Aug 1918.*

APPROVED BY

Date *AUG 31 1918*

APPROVED BY

Date

for Hancock Capt. R.M.C.
Assistant Director of Medical Services.

Director General of Medical Services.

1917-18

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

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

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

4612

Lieut

Name

Initials

Bank

Collins

S. D.

St. Montreal

DATE

PARTICULARS

1917-18

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

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

INITIALS

1917

*Apr 23rd Balance April P.O.
April pay.*

Bank. 2786.

108

108

*Refr to Canada
L.O. to 31/17
of to N.E. Ledger.
Dep P.O. and Manual
12/4
Transferred from Ledger 10 to 12
20th 17 Transferred from Ledger
12 to 4
Refr to Canada
L.O. to 30/17
of to N.E. Ledger.
Transferred from Ledger No 4 -
No 12 11 May 1917.*

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Name

Address

Initials

Amount. \$

Bank

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

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

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

INITIALS

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

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

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

9 dist

Lieut.

Name Collins

Initials G. D.

Bank of Montreal

1916-17

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS.
1916 Sept 5	Bank	7525		24 34				
14		7710		122 00				
19	Pay 18/8 - 30 9/16 R.		146 40					
Oct 19	Oct Pay R		111 60					
25	Bank	10998		111 60				
Nov 21	Nov Pay R.		108					
24	Bank	14190		108				
Dec 13	Dec Pay		111 60					
20	Bank			111 60				
1917 Jan 20	Jan Pay		111 60					
26	Bank	19288		111 60				
Feb 18	Feb Pay		100 80					
23	Bank			100 80				
March 23	Pay March		111 60					
	Bank			111 60				

NAME

ADDRESS

CITY

STATE

ZIP

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PROGRESS NOTES

SECTION F.

All Progress Notes must be signed and dated

Date

MANITOBA MILITARY CONVALESCENT HOSPITAL

WINNIPEG

SECTION A.

Date 13/3/18.

Name Collins, J. Donald Age 33 ~~Married~~ Single

Home Address

Town or City Winnipeg Province Manitoba Enlisted on 4/12/15 at Borden Sask.

Unit C.E. Rank and No. Lieut Previous Conduct

Diagnosis and Recommendations of previous Boards

Caries Lumbae vertebrae

Complaint if any, regarding pay

Complaint reported to

By

The above to be filled in by office when patient is admitted to hospital.

Date

REPORT OF ADMITTING OFFICER

SECTION B.

DATE 13/3/18

WEIGHT Present 120 Best 148 HEIGHT 5 ft. 6 in

CLASSIFICATION OF CASE

Indicate primary class by XX secondary by X

- 1. MEDICAL a. Cardiac b. Pulmonary c. Gas d. Nervous e. Gastro Intestinal f. Rheumatic g. Miscellaneous 2. SURGICAL 3. ORTHOPEDIC XX 4. SPECIAL 5. DENTAL 6. LABORATORY EXAMINATIONS REQUIRED a. Wasserman b. Blood c. Urine d. Sputum

GENERAL STATEMENT REGARDING CONDITION, COMPLAINT OR DISABILITY

General condition poor. Osseous abscess present. Patient wears spinal support

Signature of Admitting Officer

REPORT OF MEDICAL OFFICER

SECTION C.

Date

Special Questions for Soldiers' Aid Commission

- 1. Diagnosis 2. Degree of Disability (expressed by fraction) Permanent or otherwise 3. Can former occupation be resumed? If not, what class of work could be undertaken? 4. What military duty could he perform?

The above questions, Section C., are to be filled in by Officer in charge of case, but not until case is ready for discharge.

REPORT OF MEDICAL OFFICER
SECTION D.

PHYSICAL EXAMINATION
SECTION E.

Date

Date

1. COMPLAINT

DATE OF ORIGIN &
CAUSE OF DISABILITY

2. PREVIOUS HISTORY

Give short history of illnesses and mention if any physical disability or disease, having a bearing on present condition ante-dated enlistment

3. PERSONAL HISTORY

Alcohol, Tobacco,
Tea and Coffee,
Narcotics, etc.
State amounts.

Venereal Infection

Did patient reach
England or France
or remain in Canada?

4. PRESENT ILLNESS

If "Gassed" what kind?
Duration of exposure.
What were immediate
effects?

If wounds or injury
how caused?

Is condition due to
service or climate?
If not, was it aggravated
by them? How?

On or off duty?

In action or in
field service?

If due to exposure
on duty, what was nature?

Previous treatment and results.
Where treated?

Treatment recommended

Probable minimum duration of treatment?

Where may treatment be most satisfactory carried out?

In your opinion is this man sufficiently recovered to return to the colors at an early date?

Does his physical condition warrant his undertaking with benefit some employment, thus supporting himself partially or entirely?

Is he likely to make further improvement under treatment in the Military Convalescent Hospital or tributary institutions?

If his case is stationary, would it be better to arrange for ultimate disposition at the present time?

Signature of Medical Officer.