Unit A.M.C.T.D.No 10 *Rank* Captain *Name* Panton, Leonard Arthur Cattan

COPY

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (*a*) What is your Surname ? Panton

   (*b*) What are your Christian Names ? Leonard Arthur Cattanach

2. (*a*) Where were you born ? (State place and country) Winnipeg Man Canada

   (*b*) What is your present address ? 482 Wellington Crescent Winnipe Canada

3. What is the date of your birth ? June 3rd 1882

4. What is (*a*) the name of your next-of-kin ? Helen Beresford Panton

   (*b*) the address of your next-of-kin ? 482 Wellington Crescent Winnipe Canada

   (*c*) the relationship of your next-of-kin ? Wife

5. What is your profession or occupation ? Physician and Surgeon

6. What is your religion ? C of E

7. Are you willing to be vaccinated or re-vaccinated and inoculated ? Yes

8. To what Unit of the Active Militia do you belong ? Yes

9. State particulars of any former Military Service 7 years 16th Field Battery C F

10. Are you willing to serve in the R.A.M.C. Guelph Ontario one year

CANADIAN OVER-SEAS EXPEDITIONARY FORCE ? Yes

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

P C Panton
.....(*Signature of Officer.*)

Taken on strength (place) Winnipeg Man

(date) December # 4th 1916

Canada Kenyon
.....
(*Signature of Commanding Officer.*)

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 December 4th 191 6

Place Winnipeg Man

Canada Kenyon
.....
Medical Officer.

*Insert here "fit" or "unfit

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

PANTON LEONARD ARTHUR CATTANACH CAPT. C.A.M.C. 1860

DEMOB

MB

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

I.D. number No. d'identification	Surname Nom de famille	Given names Prénoms
CAPT	PANTON	LEONARD ARTHUR CATTANACH

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 7557

SURNAME. Panton.

CARD NO. 10 4

CHRISTIAN NAMES Leonard Arthur. C

S.O.S. (Demob) 15-9-19 10

FOLL.

R 02295 of 3-12-19

REGL. NO. RANK Capt.

also D 03118 of 8-12-19

UNIT C. A. M. C. Training Depot No 10 10 A D M S Staff & Sub staff

FORMER CORPS (7 yrs) 16th Fld Bty. C F. A. R. A. M. C (1 yr)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Panton. Mrs Helen. B.

RELATIONSHIP TO SOLDIER Wife.

ADDR 172 Lilac St. 4 Lilac Apts.
Winnipeg, Man.

S.A.A.P. 30-6-17.

COUNTRY OF BIRTH Canada Winnipeg. Man DATE June. 3rd. 1882.

PLACE OF ATTESTATION Winnipeg Man DATE Dec. 4th. 1916

L. L. 10437. M. & D. 7253. M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Physician & Surgeon. RELIGION Church of England.

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Winnipeg. Man DATE Dec. 4th 1916

Present Address: 482 Wellington Crescent. Winnipeg. Man.

M. F. W. 71—500M.—8-18.
1772—39—961.

NAME Panton Leonard Arthur Cattanach

REGIMENTAL NO. RANK Capt.

ENLISTED AT Winnipeg Man PROMOTIONS, &c. AND DATE

DATE Dec 4/1916

IF SERVED PREVIOUSLY, STATE UNIT, &c. 4 yr 16th Field Battery C.F.A.

MARRIED, WIDOWER, OR SINGLE Married

NEXT OF KIN Helen Beresford Panton RELATIONSHIP Wife

ADDRESS OF 482 Wellington Crescent Winnipeg Man

ASSIGNMENT OF PAY $ C. TO Religion Church of Eng

ADDRESS

Occupation Physic & Surgeon

SEPARATION ALLOWANCE, ENTITLED OR NOT Category B2.

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O. No.	 DATE	REMARKS IF IN HOSPITAL, NOTE NAME, &c.
Transferred A.M.C. to A.D.M.S. Sub Staff	#10	Feb 1st/19	C.O. 26 para 309
part two orders	32	A.D.M.S. Ord. 11 para 80	
S.O.S. On Gen Demob		September 15th, 1919.	R.O. 2295
C.O. 285 A.D.M.S. Part Two Daily Orders #311			

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps A.M.C. No.10. Tr. Depot.C.E.F.

Regimental No. ..... Rank Captain Name Panton, Leonard Arthur Cattanach.

Enlisted (a) 4/12/16 Terms of Service (a) C.E.F. C.E.F. Service reckons from (a) 4/12/16

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

Extended ..... Re-engaged ..... Qualification (b) PHYSICIAN

NAMC 1 year
W. 31.12.15

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		EMBARKED			
		DISEMBARKED			
8-12-17	aals MD10	Proceeded on special duty in connection with Medical Services in connection with Chinese Labor Corps to Weihaiwei China 8.12.17 Embarked Vancouver 20.12.17. Authority H.Q. Wire 9285 Co. 289. 8.12.17			
5.5.18.		Returned from duty in China with Chinese Labor Corps. 5.5.18.			

G J Chapman Major
for A. M. C.
Asst. Director Medical Services M. D. 10

G J Chapman Major
for A. M. C.
Asst. Director Medical Services M. D. 10

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
1.2.19		Transferred from #10 Camc Depot to #10 ADMS staff & sub staff. C.O. 26.			
					Major Camc O/c Camc TD 10.
		S.O.S. On Gen Demob September 15th, 1919. R.O. 2295 C.O. 285 A.D.M.S. Part Two Daily order #311			
		W J Chapman Major for #10. A.D.M.S. STAFF & SUB STAFF.			
					Maj Gen Lisl. Camc 1.1.23 vij. Mo. B L.1.1.4.21

CANADIAN EXPEDITIONARY FORCE

N.J.A. 10-42.
L.B.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Captain.

(Name in full) Leonard Arthur Cathcart PATON.

Enlisted in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the [redacted]

day of [redacted] 191 AND WAS APPOINTED to COMMISSIONED RANK

in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE on the Fourth day

of December 191 6.

He SERVED in CANADA, and Hoi-Hai-Hei China, with the Canadian Army Medical Corps.

and was STRUCK OFF THE STRENGTH on the Fifteenth day

of September 191 9. by reason of General Demobilization.

Dated at Ottawa, this Tenth day

of February 191 1920.

O.M.

Lt.Col.

for. Director of Personal Services.

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

TH

MEDICAL HISTORY SHEET

COPY

Surname Panton *Christian Name* Leonard Arthur Cattanach

Examined { on 4th day of December 1916 / at Winnipeg

Birthplace { City or Town Winnipeg / County Manitoba

Apparent age 34

Trade or occupation Phys, and Surgeon

Height 5 feet 6 ½ Inches

Weight 142 lbs.

Chest measurement { Minimum 34 inches / Maximum expansion 37 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left / Number 2

When Vaccinated last 1915

(*a*) Marks indicating congential peculiarities or previous disease None

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

Approved by [signature]

Rank M.O.

Date	Fit or Unfit	Examined for Re-Engagement
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

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

Date	Result	Anti-Typhoid Inoculations, Etc.
26/5/14	OK	[signature] M.O.
		M.O.
		M.O.

Enlisted on 4th *day of* December 1916 *at* Winnipeg Man

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	A.M.C.T.D.No 10	....		Dec 4th ~~###~~ 1916
Transferred to	To A.D.M.S. #10 Sub Staff			1/2/19

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Panton Christian Name Leonard Arthur Cattanach

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

M. F. W. 129.
50m.—7/17.
1772—39—1142.

Card

CENTRAL REGISTRY No. 33-P-12 NOV 28 1918 MILITARY HEADQUARTERS WINNIPEG

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

☞ Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Capt. Name Leonard Arthur Cattanach Surname PANTON

Unit of Corps C. A.M.C. (If a soldier) Regtl. No.

Born at Winnipeg, Man. on, (date) June 3, 1882

Signature (for identification) [signature]

The examination is to be made jointly by two Medical Officers.

DEPT. MILITIA & DEFENCE DEC 10 1918 H.Q. CANADA

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 137 lbs. Colour of eyes Blue

Height 5 ft. 6½ in. Identification Marks 3 scars abdomen small scar outer surface left hip.

2. NUTRITION AND DIATHESIS?

Good, no particular diathesis.

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?

Normal, no

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

Normal, no

Ass't Director Medical Services No. NOV 28 1918 Mlty. Dist. No. 10, Winnipeg

5. HEART? Normal

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? Intermittence or Irregularity? No-NO Muscular Tone? Good

6. ARTERIES.—(a) Any hardening or nodulation? No-No

(b) Blood Pressure. Systolic 105 - Diastolic 65

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).
Subject to recurrent attacks of indigestion since having penetrating wound of abdomen in 1915 while on service. Attacks about every six month
Teeth good tonsils good.

8. GENITO-URINARY SYSTEM? Normal

Urinalysis—S.G.? 1019 Reaction? Acid Albumen? No Sugar? No

APPROVED NOV 29 1918 [signature] M.D. No. 10 WINNIPEG, MAN.

9. SKIN, MIDDLE EAR, EYE or any other part? No- No- No-No

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. Ventral hernia in wound scar left abdomen, degree slight.

11. Opinion as to the health and physical condition of the one examined? Category B.2

Examined at Winnipeg, Man. Signed [signature] M. O.

Date Nov. 28, 1918. Signed [signature] Capt. M. O.

[signature] Capt. Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding

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

SEP 16 1919

2-P-

M. M. HOSPITAL

REQUISITION FOR TREATMENT OR EXAMINATION. Date 11-9-19

Reg'tal No. Rank Capt. Name Panton L. A. C. Unit CAMC

Bed Ward 21

Injury or disease Part affected

Treatment or Exam

Barium series please.

J. P. Dewosse Capt.

Report

Stomach at level of the 2nd lumbar, empties by two openings, one by a gasto-duodenostomy at level of cardiac orifice, other bysmall opening still patent at pylorus,
2- hours,-barium empties freely,
6- hours,-about 2 oz. barium still in stomach, remainder in ileum, caecum, & colon down to thedescending colon, some adhesions about the caecum,
24- hours- some barium about the hepatic flexure, ileum empty, stomach empty, remaindding bulk in sigmoid where there is a constriction apparently,
30- hours,-barium has been evacuated mostly, only traces left in colon

J. H. Conklin Capt

Signed

M. F. W. 2509.
50m-4-19.M.
1772-39-1276.

5. Copies

2185

Unit

Part affected

Report

Signed

HOSPITAL

REQUISITION FOR TREATMENT OR EXAMINATION. Date Sept. I7/I9

Reg'tal No. Rank Capt. Name Panton Unit C.A.M.C.

Bed Ward A. D. M. S.

Injury or disease Part affected Stomach & Hip

Treatment or Exam

S. copies

Report A large piece of shrapnel lying in the left iliac fossa.

[signature]

Capt. CAMC.

M. F. W. 2509.
50m-4-I9.M.
I772-39.I276.

Signed

B. P. C. FOLIO
FALSE DOCKET
SEP 18 1919
2

HOSPITAL .....

REQUISITION FOR TREATMENT OR EXAMINATION. Date .....

Hospital No. ..... Rank ..... Name ..... Unit .....

Bed ..... Ward .....

Injury or disease ..... Part affected .....

Treatment or Exam	Report

Signed .....

M. F. W. 2539.
50m-4.19.M.
1172-39.1216.

L. L. J. 310—M. & D. 6574.

4-12-16

MILITIA AND DEFENCE

200

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Helen B. Pantan,

Address ~~482 Wellington Cres.~~,
Winnipeg, Man.
#4 Lilac Apts, 172 Lilac St

Relation to Soldier
wife, child or mother } wife

Name of Soldier Pantan, L.a.C.

Regtl. No.

Rank Captain.

Corps A.M.C. I.D. # 10

To what Corps belonging
when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 5 ACCOUNT

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

200

M. F. W. 11a.
50m.—6-16.
1772—39—818.

Sheet No. 2. Helen B. Pantan PAYMENTS. wife

Name of Soldier Pantan, L. A. C. Captain.

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917	N 29130	76		76 R
Feb.		Z 32782	40		40
March		S 35742	40	276	40
April		~~C 2345~~ Q 3527	~~40~~ 40		40 C 2345 Cancelled RE-WRITE
May	15 Jun B	Z 4994	40		40 1/4 Lilac Apts, 172 Lilac St.
June	V 9687	~~Z 8296~~	~~40~~ 40		40 Z 8296 Cancd. Winnipeg, Man RE-WRITE
July		Z 11987	40		40 Bo
Aug.		J 15199	40		M
Sept		R 18905	40		T
Oct.		W 20931	40		B
Nov.		Y 23386	40		T
Dec.		Q 28045	40		W
Jan.	1918		516		F.M.M. D10 paying from 1-1-18
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

Form P. 812
1m 1/8/19

— Duplicate —

CR. FILE NO. [illegible]

ASSIGNED PAY *and/or* SEPARATION ALLOWANCE

Payable to Mrs Helen B Panton Wife *Name* Panton L. A. C.

Address c/o Capt L. A. C. Panton
H. 2. M.D. 10.

From Canada: No. ..... *Rank* ..... *Unit* .....

Rank	Authority	Unit
Capt		Canc.
	Staff M.D. 10.	

ASSIGNED PAY

Authority ..... *Dol.* ..... *Effect* .....

" ..... " .....

" ..... " .....

" ..... " .....

Month	Cheque No.	Assigned Pay	Amount Separation Allce.	Total A.P. and S.A.	REMARKS
JAN. 19					
FEB.					
MARCH					
APRIL					
MAY					
JUNE					
JULY pd 1/8/19	4528	120	80		Credit note 481. d/ 4/4/19
AUG. " 5/8/19	8552	60	40		" " — d/ 5/8/19
SEPT. " 25/9/19	9264	60	40		To enable return to Canada.
OCT.					
NOV.		240	160.		
DEC.					
JAN.					
FEB.					
MARCH					
APRIL					
MAY					
JUNE					
JULY					
AUG.					

S. A. & A. P.
OCT 20 1919
H. R.

Make envelope
D.P.

Name

Rank

Unit

Month	Cheque No.	Assigned Pay	Separation Allowance	Total A.P. and S.A.	

Form P. 812
2m. 4548 9/4/18

C.R. FILE NO. 93.

ASSIGNED PAY and/or SEPARATION ALLOWANCE

Payable to Mrs Helen B. Panton

Address c/o Dr C W Beresford.
Market House Narborough.
near Leicester England.

Name Panton L. C. C.

From Canada: No. ..... Rank ..... Unit .....

Rank	Authority	Unit
Capt.		Can C.
	# 10	M.D. Staff

ASSIGNED PAY

Authority ..... Dol ..... Effect .....

" ..... " .....

" ..... " .....

" ..... " .....

Month	Cheque No.	Assigned Pay	Amount Separation Allce.	Total A.P. and S.A.	REMARKS
JAN. 191					
FEB.					
MARCH					
APRIL					
MAY					
JUNE					
JULY	pd 1-8-19 4598	120	80	200	Credit Note HP 1 1st 19.
AUG.	pd 1-8-19 8553	60	HO	100	Credit Note 1-8-19
SEPT.	25-9-19 9364	60	HO.		
OCT.					from Oct 1st to be paid in Canada
NOV.			Duplicate. 25-9-19		
DEC.					
JAN.					
FEB.					
MARCH					
APRIL					
MAY					
JUNE					
JULY					
AUG.					

Name..... Rank.....

Unit.....

Month		Cheque No.	Assigned Pay	Separation Allowance	Total A.P. and S.A.	
Forward						
SEPT.						
OCT.						
NOV.						
DEC.						
JAN.	1919					
FEB.						
MARCH						
APRIL						
MAY						
JUNE						
JULY						
AUG.						
SEPT.						
OCT.						
NOV.						
DEC.						
JAN.	1920					
FEB.						
MARCH						
APRIL						
MAY						
JUNE						
JULY						
AUG.						
SEPT.						
OCT.						
NOV.						
DEC.						

B. P. C. ORIGINAL

MILITIA & DEFENCE SEP 28 1919 H.Q. CANADA

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

RECEIVED SEP 20 1919 M.D. 10 DIST. LACUNA OFFICE

#10 ADMS Staff & Sub-staff STATION Winnipeg M.D. 10 DATE Sept. 15th 1919

1. 1 (a) Unit C.A.M.C. (b) Regimental No. (c) Rank Captain

(d) Surname PANTON (e) Christian name Leonard Arthur Cattanach

(f) Home address 1262 Frederick St. North Battleford, Sask

(g) Next of Kin Helen B. Panton (h) Relationship wife

(i) Address of Next of Kin as above

2. Age last birthday 37 Date of birth 3rd June 1882

3. Enlistment, or Appointment (if an Officer) (a) Place London, Eng. (R.A.M.C.) Winnipeg, Man. (C.E.F.) (b) Date 18th June 1915 4th Dec. 1916

4. Personal description:

(a) Height 5' 6½" (b) Weight 130 (stripped) (c) Complexion Dark

(d) Colour of hair D. Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Burn scar 1" in diameter left hip

5. Former trade or occupation Physician & surgeon

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	89

		Periods From	Periods To
Canada	C.E.F.	4th Dec. 1916	15th Sept. 1919 except
England	R.A.M.C.	18th June 1915	10th July 1915
		31st Jan 1916	18th June 1916
France or other theatres of War	Gallipoli	10th July 1915	31st Jan. 1916

(15th Dec. 1917 – 2nd May 1918 duty with C.L.C. Weihaiwei, China)

7. Original disease, or injury Penetrating G.S.W. of abdomen

(a) Date of origin 31st Dec. 1915 (b) Place of origin Cape Helles, Gallipoli

(c) Cause Fragment H.E. Shell.

Asst. Director Medical Services No. SEP 18 1919 WEST DIST. No. 10, WINNIPEG

M. F. B. 227.
400M—11-18.
1772-39-117.

102

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

1. Weakness of abdominal wall with defect in musculature.
2. Impaired function of intestinal tract.
3. Recurrent attacks of sciatic & myalgic pain left thigh with difficulty in walking.

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

1. Large scar left abdomen from 2" below ant end 9th rib to pubes about 1" wide in lower part. At its left margin, 2½" below level of umbilicus is a distinct bulging 1½" in diameter over which there is a marked impulse on coughing. The muscular tissue of the abdominal wall is missing over this area, the margins of the opening being well circumscribed. The musculature is also very thin over the wide portion of the scar, i.e. the lower two thirds. It is necessary for the examinee to wear an abdominal support with pad constantly. Heavy lifting, horseback riding, riding in motor car over rough roads etc cause soreness in the area described and give rise to acute pain in abdomen.

2. Tenderness over abdomen particularly marked on left side. Marked tendency to become constipated. Has to be exceedingly regular in his habits and take a laxative once or twice a week. If he does not do so has marked abdominal pains and soreness. Has had to go to bed on several occasions when pain became severe. The tendency & constipation is apparently due to constriction of bowel from adhesions. X-ray report attached.

3. Exposure to cold and dampness or walking long distances give rise to considerable pain in muscles of upper thigh and along sciatic nerve. No objective signs except area of hyperesthesia front & outer surfaces left thigh. Pain in region left hip. X-ray report attached.

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

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

Special Senses No — Respiratory System No — Integumentary System No

Disturbances of Mentality No — Digestive System No — Muscular System No

Osseous and Joint Systems No — Any other general condition No

10. (a) History (of the condition referred to in Section 9 (a).) 1&2. In December 1915 while serving with R.A.M.C. on Gallipoli was wounded by a shell fragment which penetrated abdomen & perforated intestine. Was operated on at C.C.S. and two segments of bowel resected. Bowel was united by end & end anastomosis in both resections. Two drainage tubes inserted, one at pubes and one at site of original wound. These were both left in for about one week. Transferred to Rad El Tin Hospital, Alexandria Egypt 4th Jan. 1916 and from there to England 22nd Jan. 1916 arriving England 31st Jan 1916. To No 1. Southern Gen'l Hospital Birmingham and discharged to light duty 10th May 1916. Relinquished commission R.A.M.C. June 1916 and returned to Canada. Rejoined C.E.F. 4th Dec 1916. On duty since.

3. M. F. which penetrated abdomen lodged in left iliac fossa, removal considered not advisable after X-ray in England Feby 1916. When he first got out of bed at that time had impaired use of right lower extremity, due apparently to pressure on sciatic nerve, also had considerable sciatic pain. This condition gradually improved and was able to walk naturally & without discomfort by May 1916. Condition was attributed to a haematoma which gradually absorbed. Present recurrent attacks are only disability. Never had sciatica or any similar condition before enlisting.

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

Recurrent attacks indigestion 1904–1914 due to duodenal ulcer. Gastro-enterostomy performed Sept. 1914 which relieved all symptoms.
Appendectomy, May 1915, complete recovery, no disability.
Burn outer aspect Left hip, caused by hot water bottle during operation C.E.F. 1915. No disability.

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

Scars of operations for gastro-enterostomy & appendectomy on right abdomen.

11.—(*a*) Did the disabling condition have its origin before enlistment? 1, 2, & 3 yes, before C.E.F. service but not before service with R.A.M.C.

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

1, 2, & 3 Not aggravated by C.E.F. service.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1, 2, & 3 (a) No. No (b) No

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1, 2, & 3 Permanent

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

Operative & hospital treatment as stated in sec. 10 (a)

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? 1, 2 & 3 No
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Not fully. Could not do general practice in country on account of long drives and irregular hours.
(If not, briefly state why)

17. Recommendations

Categorized C 3.

W. A. Hennessy Capt.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

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

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

I complain in addition of Nil.

L. A. Paxton Capt.
Rank.
Signature of invalid examined.

R.P.C. FOLIO
CASE POCKET

SEC 'C' SEP 29 1919

OPINION OF THE MEDICAL BOARD

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

Yes.

19. Is the invalid fit for

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

20. It is certified that the invalid

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

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

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

Category C3.

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

G W Stokes Capt — President.

PLACE Winnipeg MD 10.

W A Murray Capt } Members

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness..... Signed.....

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

.....President.

PLACE..... } Members

DATE.....

APPROVED BY

W J Chapman
Assistant Director of Medical Services.

DATE SEP 18 1919

APPROVED BY

Director-General of Medical Services.

DATE

P.1780

AUDITOR | PAYMASTER

M. OR S. — PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES — REGT. NO. — RANK Capt. NAME (IN FULL) Panton L. A. C.

(15)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes. — DATE EFFECTIVE

TO WHOM PAID Mrs. Helen B. Panton — RELATIONSHIP

ADDRESS ~~To Dr. L. C. Beresford~~

14/11/19. North Battleford ~~Markgate House, Marborough~~ Sask ~~Nr Leicester, Eng.~~

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Soldier still on Strength		

ORIGINAL UNIT C.E.F. C.A.M.C. — IF IN P.F. WHAT UNIT? (C.A.M.C. 14 year).

PLACE OF ATTESTATION Winnipeg — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION Dec. 4/1916 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ — DATE EFFECTIVE

WSG.

PAYABLE TO — RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS: Imperial Bank 14/11/19. Main Bannatyne North Battleford Wpg. Sask

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE 15/9 — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT		7/6																								20.00					S.	D.		20 ** o/s. P.A. left to be recovered from Lt. L.C.
	183 days	5/**			915 00		240 00	1155 00		Nov. 13						170 4122						150 -								765 00		220 00		S/C clsr in pay clsr ~~Nov~~ PAO
										Nov. 13						170 4123						150 -								615 00				S/C clsr in 2 pay - WSG
										Nov 13						170 4124								40 -								180 00		S/C clsr in 1st pay - S/A
										Dec. 28								1828847		150 -									465 -	6			150 3rd Payt WSG
																				3		80 -								100 -	6	80 2nd — — S/A
										Jan. 15								1831375		56 -									409 -	8			56 Part 4th — —
																				6		40 -								60 -	6	40 4th Payt. WSG S/A
										- 26.														409 -					NIL					409 D. H.Q. 377-10-20 Auth. D.P.M. P. 361
										Feb. 16.								1835389		40 -										20				40 5th Payt. WSG
										Mch. 1								1836480		20 -														Total —
								1155 -												506 -		220 -		429 -					1155 -					

AUDITED MAR. 3 1920 Audit Clerk D.O. 10

171 C CLOSED

Certified War Service Gratuity Account Completed.

Lieut.

200M-3-19.—L. L. 58768—H. & D. 9983.
M. F. W. 2596.
1772-39-1298.

Certificate Rec'd

AUDITOR | PAYMASTER

M. & R S. Married

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

REGT. No. RANK Captain NAME (IN FULL) PANTON, L. A. C

NEXT OF KIN: Mrs Helen B Panton — RELATIONSHIP: Wife
ADDRESS: Suite 4. 172 Lilac Street, Winnipeg Man

IS SEPARATION ALLOWANCE PAID? Yes — DATE EFFECTIVE

TO WHOM PAID: Mrs Helen B Panton — RELATIONSHIP: Wife
ADDRESS: Suite 4. 172 Lilac Street, WINNIPEG, MAN.
(c/o D C W Beresford, Markyate House, Narborough, Near Leicester England)

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Increased Pay & allow	1.4.19	PC 809

ORIGINAL UNIT C.E.F.: C.A.M.C. (Rank 1 Mar) — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)
PLACE OF ATTESTATION: WINNIPEG, MAN. — TRANSFERRED TO — DATE — AUTHORITY
DATE OF ATTESTATION: December 4 1916 — TRANSFERRED TO — DATE — AUTHORITY
ASSIGNED PAY $ 600 — DATE EFFECTIVE

PAYABLE TO: Mrs Helen B Panton — RELATIONSHIP: Wife
ADDRESS: Suite 4. 172 Lilac Street, WINNIPEG, MAN.

ANY CHANGE IN ASSIGNEE OR ADDRESS: c/o Dr C W Beresford, Markyate House, Narborough, OVERSEAS Near Leicester England

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE: W Peg — DATE: 15-9-19 — REASON: Demob. — AUTHORITY: P.C. 311 — IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	5.17 $	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																				
MAR 31																																				
1 April	30	5.00	150.00		51.00		40.00		241.00				30/1430		16/1	16			60.21		70.00		60.00 / 40.00				10.79				241.00						a/c Capt. L.A. April $400.00 "1 April 19 — On Command to Port Arthur 7.32 pm April 29/19 — B078 C.O. 92 — Other Chgs $10.77 C.S.D. attached — On Command "Braemar" 4.30 pm April 24/19 — B083 C.O. 96 — Returned from On Command 9.00 pm April 25 — Returned On Comm'd Port Arthur 1.00 pm April 22 — S.A. & A. P.20 April 1-5 1/5/19 — To L.A. & A.C. #10 C.A.M.C. Debt. $10.77 28/4/19 — Increased Pay April 1 to May 31/19 $20.00 — On Command to Duty Winnipeg 12.00 Noon June 2/19 — S.D.O.O. on Command June 2 June — @ 30/- M.T.S. 2608 — Other Chgs $10.00 Adj. of Incr. pay June 1-30/19 A.D. Thereon $10.00
May	31	5.00	155.00		52.10		40.00		241.10		7/51	15	28/14	28			70.00		77.70				60.00 / 40.00								247.70						
June	30	7.50	225.00		76.50 / 204.35		40.00		545.85		10/11	12	18/14	26			204.35		281.50												485.85		60.00				
July	31	7.00	217.00		57.70		40.00		309.10		35/1	15	28				109.20						60.00 June / 40.00 / 40.00 / 40.50 July / 60.00 / 40.00								549.10		200.00		20.00		
Aug	31	7.00	217.00		200.00 / 32.70		40.00		509.70		1	8	5/6	27			20.00		209.70				60.00 / 40.00								329.70		-		-		
Sept	30	7.00	210.00		51.00		40.00		301.00		2		7/0				70.50						60.00 / 40.00								170.50		130.50				
Oct					130.50				130.50		Subsistence Jays						W. S. L. Fleet Earned 12 4/7						Debit Bal 20/-								150.50		20.00				
			1174.00		871.45		240.00		2285.45								474.05		629.11		70.00		400.00				601.79				2174.95		220.00		210.50		

First Payment 2 W.S.C. & R.A.F. 15.00 19-9-19

Certified War Service Gratuity Account Completed.

Capt.

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

Date of Enlistment 4-12-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment Dec 1/17.

RATE OF SEPARATION ALLOWANCE

40			

RATE OF ASSIGNMENT

45			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Capt. Promoted Reverted Discharge

Soldier's Name L.A.C. Pantan.

Battalion A.M.C. T.D. #10.

Beneficiary Helen B. Pantan

Relationship Wife.

Address #4 Lilac Apts. 172 Lilac St, Winnipeg, Man.

PARTICULARS OF ASSIGNMENT

Name Helen B. Panton

Address ~~Suite 4~~ 172 Lilac St. Winnipeg Man.

Suite 3 Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31	—	516	—	516	
Jan/18	Z 65984	40		40	
Feb 18	D 71775	40		40	
Feb	U 75456	135	135	135	mailed 21/2/18
~~March~~	~~P 93843~~	~~40~~	✓ ~~XX~~	~~40~~	~~ASB~~
March	G 4277	40		40	mailed 19-4-18
April	P 9459	40	✓	40	✓ ✓
~~May~~	~~U 12249~~	~~40~~		~~40~~	✓
~~June~~	~~O 25194~~	~~40~~		~~40~~	
	~~K 33901~~	~~40~~		~~40~~	Canc. 19 7/18.

REMARKS 14157-L-6.

~~P.M.M.D. #10 Paying from 1-1-18.?~~

A.P. Cheque for $135 issued in Feb to pay for arrears fr 1/12/17 to 28/2/18

A.P. Closed 28/2/18 auth P.M.L.M.D. #10 on File 14157-L-6

P 93843 Cancelled a G.L. 24/3/18

L.P. 3657 for $40 to adj. S.A. for March zend

G 4277 $40 mailed 17/4/18

S.A account closed. 30/4/18 Auth

P.M.L.M.D. #10 rec 10/5/18. File 1415-L-6

P.M.M.D #10 Paying from 1 5/18 - 13/5/18 -

U 12249 Can CCO 81. Rend. 16 5/18 ✓ M.R.O 28 Rend.

19/5/18

O 25194 Can C.C.O 100 Rend 17/6/18

Can 20/6/18.

K 33901 cancelled L.P. 2503 Ck Order 17 6/18

Destroy M.R.O L.P. 15 issued 17 7/18 M.T. Gr

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128.
400M. 6-7—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128.
4'OM. 6-7-1772-38-1141.
L. L. 22320—M. & D. 7993.