

[illegible]

Notes Form N.S. 158 and other accompanying documents must remain permanently attached to this record. Sub T. m. 1. 12

Serial No. .... R.A.F. Form 36A.  
N.S. (M.C.) 14.

**MEDICAL EXAMINATION RECORD AND MEDICAL HISTORY SHEET**

Surname LAWRENCE N.S. Registration No. WDP 4040 Army No. 4853829 Enlisted at .....

Christian Names Leslie .....

Born at—Parish Widson County Beds Posted to ..... Date .....

Examined at HIGH WYCOMBE Date 1 JUL 1941 Transferred to ..... Date .....

Declared date of birth 26.8.1925 .....

Trade or Occupation Pipe Fitter mech. .....

Other Information

Medical  
Orderly

**Part I. PHYSICAL CONDITION ON EXAMINATION.**

Weight..... 97 lbs. Height..... 5 ft. 3 7/8 inches

Colour of Hair..... Colour of Eyes.....

Complexion.....

External Marks.....

Vaccination: Age..... No. of Marks.....

Inoculation: Typhoid..... Diphtheria.....

Tetanus..... Other.....

Urine: Appearance..... Albumen.....

Sp. Gr..... 'Sugar.....

Medical  
Examiner  
No. 1.

Grade  
T

Initials  
M

Past history :  
Tubercle  
Rheumatic Fever  
Fits  
Other salient facts  
(e.g. Breakdowns, Gastric Symptoms)  
Mental and Nervous Condition

Reflexes: Pupils  
Plantar Reflexes  
Natural  
Vision R  
Eyes

Knee Jerks  
Ankle Jerks  
Romberg's Test  
With glasses in use

Stable

6/5 L 6/5 R

CHAIRMAN'S REMARKS

(i) Visual Standard *1* *Physical*

(ii) Hearing Standard *1* *development*

(iii) Other remarks. *Poor physique.*  
*Chest clear. no history of*  
*illness. H*  
*For special observation*  
*during training.*

(iv) Details of Medical Certificates.

Medical Examiner No. 2	Ears	R.....	
	Hearing	R.....	
	Nose, Throat	.....	Teeth
	Physical Development	.....	
	History of Injuries or Operations	.....	
Grade	Flat Foot	.....	
	Knock Knee	.....	
	Hammer Toe	.....	
	Other Deformities of Legs	.....	
	Deformities of other Joints	.....	
Initials	Movement of Joints	.....	

Varicose Veins.....	✓
Venereal and Skin Diseases .....	✓
Ext. Genitals, Perineum, Piles .....	✓
Hernia .....	✓

Medical Examiner No. 3

Pulse Rate 100

Condition of Heart

E.T.T. (if taken)

Grade L

Chest Measurement { Maximum 31 1/2 inches  
Range of Expansion 3 1/2 inches

Suggested Lungs

Final Abdomen

Grade 11

Additional Examinations and confirmation of abnormalities

Initials

B.P. (if taken)  
S D

Examined and placed in: II (Two) R. Kelsall  
Signature.....  
Chairman of N.S. Medical Board.

\* Insert Grade—see M.R.B.1., para 6.

*Parts II and III for use of Service authorities only.*

## Part II. DENTAL CONDITION ON ENLISTMENT.

Upper,

NOTATION.

87654321	12345678
87654321	12345678

Lower

Oral Hygiene.....

Remarks.....

Signature, Dental Officer.....

Part III. Became non-effective by .....

Date.....

Signature.....