## MEDICAL HISTORY SHEET OF

No.		Surname		Chi	ristian 1	Name	S									
PART FOR FI	5.—Bo	ARDS; COURT	s of Inquiry; Examinations vice, Extension, Re-engage-		PA	RT (	3.—P	RESCRI	PTION	v F	OR SPI	ECTACLE	S			
MENT (	OR CON ISSUE	TINUANCE OF	SERVICE, ANTI-RABIC TREAT-		Vision without glasses	Sph.	Cyl	Axis Standar Notatio		th	Ophth	. Centre	Date of E			
Date			ails, and signature	R.								No. (or rements)	Date of Is			
		THE PARTY.		L.												
		*			Signatu	re of	M.O	*								
		4	-	R.							Frame measur	No. (or rements)	Date of Is			
				L.												
						Signature of M.O.										
					PART 7.—PROTECTIVE INOCULATION AND VACCINATIO											
	************			Nature of Vaccine— "T.A.B.," Smallpox, Influenza, Cholera, etc. 1s					Date of Dose 2ndDose			Signature of Medical Office				
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			1													
			-Particulars of Dental T	1					ENLI	STM	ENT					
Place		Date	Particulars of Tr	reatment, Dentures, etc.							Signature of Dental Officer					
										****						
											************					
	************												***************************************			
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mus/B 178	5A/1							Wt	501/104		500	0.000	************			
								37.6-41	304/166	ou 1	,500m.	3/42 D.P.	W. 51-443			

HIGHOLW York NIS 158 and other accompanying documents must remain permanently MEDICAL at BOOM Rights record. Supplied Mad Eyam 1 Many 44

Army Form B1 Mainus
(Revised)
Naval Form B215
R.A.F. Form 36A.

Serial No	* 2 3 3 1	N.S. (M.C.) 14.									
MEDICAL EXAMINATION RECORD AND MEDICAL HISTORY SHEET											
	0'										
Surname	AWRENCE N.S. Registration No WOD HOU	Army X48.53 8 2 YEnlisted at									
Christian Names Leslie											
Born at-Par	rish Julen County Buch	Posted to Date									
Examined at	HIGH WYCOMBE Date - 1 JUI 1840	Transferred to Date Other Information									
	te of birth 26.8.1925.	Other Information									
Trade or Oc	cupation Pepe Tetters mate.	Control State Control									
-		MEDICAL EXAMINERS' REMARKS AND ADDITIONAL CLINICAL									
Medical Orderly	Part I. Physical Condition on Examination.	Notes									
	Weight 4.7 lbs, Height 5.1, inches	(see M.R.B.1., para, 89).									
4	Colour of Hair Mallon Colour of Eyes Colour of Eyes										
100	Complexion Sale Me Sale May Way w	houpill.									
0	Vaccination: Age	in superior									
0	Inoculation: Typhoid Diphtheria										
1-	Tetanus A. Other										
	Urine: Appearance Clear Albumen Albumen										
1	Sp. Gr. Sugar Sugar										
Medical Examiner	Past history:	10									
No. 1.	Tubercle O Rheumatic Fever O	in H,									
	Fits 0	m, lt									
Grade	Other salient facts	o examined Ht.									
T	(e.g. Breakdowns, Gastric Symptoms)										
1	Mental and Nervous Condition	00 1									
	Statte .	P //									
Initials /	Reflexes: Pupils Knee Jerks Ankle Jerks										
m	Plantar Reflexes Romberg's Test.	CHAIRMAN'S REMARKS									
	Vision R. Natural With glasses in use	(i) Visual Standard / Physical									
111	Eyes	1 Development									
		(ii) Hearing Standard									
Medical Examiner	Ears R	(iii) Other remarks. Poor physique.									
No. 2	Hearing R. Teeth	Chest clear. ho history 7.									
	Physical Development	Ulues: #									
	History of Injuries or Operations	To thecial Ovarwation									
4	190	during trains									
Grade	Flat Foot	(iv) Details of Medical Certificates training.									
	Knock Knee										
1	Hammer Toe Other Deformities of Legs										
1	Deformities of other Joints										
Talalala.	Movement of Joints										
Initials	Varicose Veins										
0.0											
VIR S	Venereal and Skin Diseases	Parts II and III for use of Service authorities only.									
0	Ext. Genitals, Perineum, Piles	Parts II and III for use of Service authorities only.  Part II. Dental Condition on Enlistment.									
	Ext. Genitals, Perineum, Piles  Hernia										
Medical	Ext. Genitals, Perineum, Piles  Hernia  Pulse Rate										
Examiner	Ext. Genitals, Perineum, Piles  Hernia  Pulse Rate  Condition of Heart										
and the second second second	Ext. Genitals, Perineum, Piles  Hernia  Pulse Rate  Condition of Heart										
Examiner No. 3	Ext. Genitals, Perincum, Piles Hernia  Pulse Rate Condition of Heart  E.T.T. (if taken)	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Examiner	Ext. Genitals, Perincum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  (Maximum 31/2 inches	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Examiner No. 3	Ext. Genitals, Perineum, Piles  Hernia  Pulse Rate  Condition of Heart	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Examiner No. 3	Ext. Genitals, Perincum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  Chest Measurement {    Maximum   31/2   inches     Range of Expansion   3/2   inches     Lungs	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Grade Suggested Final	Ext. Genitals, Perincum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  Chest Measurement {    Maximum   31/2	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Examiner No. 3  Grade  Suggested	Ext. Genitals, Perineum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  Chest Measurement {  Maximum 31/2 inches  Range of Expansion 3/2 inches  Lungs  Abdomen  Additional Examinations and confirmation of abnormalities	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Grade Suggested Final	Ext. Genitals, Perineum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  Chest Measurement {  Maximum 31/2 inches  Range of Expansion 3/2 inches  Lungs  Abdomen  Additional Examinations and confirmation of abnormalities	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Grade Suggested Final	Ext. Genitals, Perincum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  Chest Measurement {  Maximum 31/2 inches  Range of Expansion 3/2 inches  Lungs  Abdomen  Additional Examinations and confirmation of abnormalities	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Grade Suggested Final Grade	Ext. Genitals, Perineum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  Chest Measurement {	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									
Grade Suggested Final Grade Initials	Ext. Genitals, Perincum, Piles  Hernia  Pulse Rate  Condition of Heart  E.T.T. (if taken)  Chest Measurement {	Part II. DENTAL CONDITION ON ENLISTMENT.  O O O O O O O O O O O O O O O O O O O									

\* Insert Grade—see M.R.B.1, para 6.