Card

ATTESTATION PAPER.

No. 724038

109th ~~OVERSEAS BATTALION,~~ C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

DUPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... McHugh
1a. What are your Christian names? ..... Francis
1b. What is your present address? ..... RR No 2 Ennismore
2. In what Town, Township or Parish, and in what Country were you born? ..... London Eng.
3. What is the name of your next-of kin? ..... Thos McHugh
4. What is the address of your next-of-kin? ..... Charleroi Pa US
4a. What is the relationship of your next-of-kin? ..... brother
5. What is the date of your birth? ..... Jan 28 1898
6. What is your Trade or Calling? ..... Farmer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ~~Thos~~ Francis McHugh, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Frank McHugh (Signature of Recruit)

Date Mar 6 1916. W. J. Thorn Capt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Francis McHugh, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Frank McHugh (Signature of Recruit)

Date Mar 6 1916. W. J. Thorn Capt (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Omemee this Sixth day of March 1916

R. J. Mulligan (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Francis McHugh on Enlistment.

Apparent Age 18 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 3½ ins.

Chest measurement.
- Girth when fully expanded ..... 35 ins.
- Range of expansion ..... 3 ins.

Complexion fair

Eyes blue

Hair brown

Religious denominations.
- Church of England .....
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic Yes
- Jewish .....
- Other denominations .....
  (Denomination to be stated.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

slight - umbilical protusion

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date March 6 1916.

Place Brewer

J McCuaig Capt.
Medical Officer
109th Overseas Battalion, C. E. F.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Francis McHugh having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Lt. Col. (Signature of Officer)
O.C. 109th Overseas Battalion, C. E. F.

Date MAR 6 1916 191

REGIMENTAL DOCUMENTS

NAME McHugh, Frank REGT. NO. 72483 UNIT 102th B. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	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)				17121	
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
3	misc					
1	M7467					
1	Card					
3	Gas cards					
1	Cert					
1	B122					
1	Cert					

W. 2589
100M-11-19
1772-59-1377

REGT'L No. 724038

H. Q. FILE No. 649.

NAME McHugh Francis

RANK AND CORPS Pte 5th Bn form 109 5th Bn

FOLLOWS No.

FOLLOWS

CABLE NO.	CABLE DATE	U.S.A. NATURE OF CASUALTY
13-7 M6169	9-10-17	Still dangerously ill - 7 Gen Hospt St. Omer, Sept 30, 1917 ✓
8-1 M6241	23-10-17	Still Dang ill. 7 Gen Hosp St Omer Oct 14th 1917. ✓
M6307 54-1 30-6.	7-11-17	Still Dang ill #7 Gen. Hosp St. Omer Oct. 28th 1917. ✓
M6422	27-11-17	Still Dang. ill no. 7 Gen. Hosp. St. Omer. nov. 18th. 1917. ✓
3-3 M6489	9-12-17	Still Dang ill 7 Gen. Hosp. St Omer 2-12-17
2-3. M.6573.	1st 1-18	Dang. Ill. 1st Eastern General Hosp Cambridge Dec 31st 1917. ✓

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
			Miscell units.
a-84-1	No 7 Gen "St Omer Still. Dang. Ill	2-12-17	G.S.W. multiple
B 89-1-1st	2 East Gen. Cambridge	12-12-17	Sev. legs head arm, hand & shldr
B100-1.	1st East Gen Cambridge Danger Ill.	31-12-17.	S.W. legs head arm + shldr. Hands
B123 "	Slight Improvement Still Dang. Ill.	25-1-18	S.W. Legs. Head, Arm, Hand. Shldr.
B159-1	Rem. from dang ill list	8-2-18	S.W. Legs, head, arm, hand, shldr. 5-4-18
B226-1	16 Can Gen., Orpington	28-5-18	S.W. Legs L. Leg ampt.
B259-1	Ex 5 Can. Gen. Kirkdale, Lpool	6-7-18	" " " " "
B332-13	Invalided to Canada Ross	20-9-18	" " " " "

NAME Mc Hugh, Francis.

REGT'L. No. 724038

H. Q. FILE No 649

RANK AND CORPS 5th Bn

FOLLOWS No. FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
A-26 6-1	29-1-18	Slightly improved 1st Eastern Hosp Cambridge Jan 25th 1918 ✓

L. L. 31493. M. & D. 8476.

M. F. W. 42 100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

Reg. No. 724038 Name McHugh F. 44

Rank Pte Corps 54th Age 20 Service C 3/12 E 24/12 F 5/12

Ledger No. Serial No. C 15472 44

HOSPITALS	DATE	DIAGNOSIS
Military Halifax		Gsw L leg & R arm amp L leg
Th Gr O.H Toronto	5-10-18	1 a.K
" Mil whitby	13-1-19	
" D O H Toronto	9-6-19	
Dis Unit for Dis	19 3 20	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

No. 724038 RANK Pte NAME McHugh. J.

T. O. S: 6-3-16. UNIT 109th. Battalion.
D. O. S. 10-3-16.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Mar. 6	Mar. 31	✓		
April.		✓		
May.		✓		
June.		✓		
July.		✓		

UNIT SAILED
JUL 23 1916

Form R. 149.
7136—250m—7/2/17.

Name McHUGH Frank *Rank* Pte. *Reg. No.* 724038

Unit 5th Bn.

Next of Kin U.S.A.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
16-7-17.	DANG. WDED 7 C.C.S.	(Not stated)		A701	M.5739	C8342 18-7-17
27.7.17	Dang Sick			A709	M 5810	
	cr. 7 Gen. Hos. W Ouse Sgw. mat					
12.8.17	Still Dang Sick		do	A725	5912	20.8.17
2.9.17	— do —	H.O. 683	do	A6	M 6031	
16.9.17	W°	(H.W. 736)		A18		
30.9.17	D°	(H.W. 800)		A		
14.10.17	D°	(H.W. 849)		A		
note	(Cancel entry on a 43. see A42)			a		
28.10.17	Still Dang Sick	W°	(H.W. 925) D°	a		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-11-17	Still Dang. Hl.	(H.W. 1024)	"			
	cro 1 Bt. Hb. St Omer	Gen. mot.		a	mb422	
2-12-17	do. do.	(HW 11.00)	"	a	7a.6489	
9-12-17	do. do.	(HW 11.22)	do.			
12-12-17	do.	Trans to England (P. 96856)	do.			
12-12-17	1st Lt. G. H. Bambridge S-W. Legs Head, Arm, Hand & Shoulder	(8277)		B	89 mb573	
31-12-17	Dang Hl 1st Lt. G. H. Bambridge (2888)			B	100	
25-1-18	Still do. (slight improvement) do. 1st Lt. G. H. Bambridge (Lt from Nov 25-1-18)			B	129	426
8-2-18	Rem. from Dang. Hl hot 1st Lt. G. H. Bambridge	do.		B	5423	
28-5-18	16 Bt. H. Ecrington	S.W. Legs & Amp.			8236	18786
6-7-18	5. Lan. G. H. Kirkdale	do			8255	20980
20-9-18	mral. to Canada					2534

Number 724038 Rank Pte

Surname Mc HUGH

Christian Name Frank.

Units 5th Bn Can Inf Theatre of War France

Date of Service 23-5-17

Remarks

Latest Address 198927 Charleroi Pa. U.S.A.

Roll No B

200m.-2-21.M. Page 10039

..., ship, and date of arrival.....

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued Yes / No Date..... Character on discharge.....

Previous occupation..... Date and place of enlistment.....

Diagnosis..... Date of Medical Boards.....

Date	Remarks

*—Name will be given in full; surname first.

L.

*Name McHugh Frank. Rank Pte. Regtl. No. 724038

Original unit ..... Present unit Sask Regt. Depot. M. or S. Age 20. Religion R.C. Fyle Depot ..... Ref. H.Q. .....

Port, ship, and date of arrival Halifax. "Neuralia" 1-10-18.

Next of kin Mother, Mrs. T. McHugh, Charleroi. P.A., U.S.A.

Address on leave Same

Address on discharge Same

Transportation issued Yes No Date..... Character on discharge .....

Previous occupation Farmer, Date and place of enlistment Mar. 6-16. Omemee, Ont.

Diagnosis GSW both legs, right f'arm & head Amp. left thigh Date of Medical Boards 10-3-20

Date.	Remarks.	Pt. 2 Order No.
TOS 20-9-18	Posted to Hos. Sec. 1-10-18.	173
9-10-18	Clearing DEPOT to M.O.H. as from 5-10-18	175
	Entitled to wear 3 blue chevrons	#205
	Sub. from 30-11-18 to 14-12-18 (M.O.H?)	H.S. 231
	A.W.L. from 12 noon 14-12-18 (M.O.H.)	H.S.#245

*—Name will be given in full; surname first.

(over)

Date.	Remarks.		Pt. 2 Order No.
	M.O.H. to Hos. Sec. 3-1-19 (A.W.L. 21 days)		H.S.# 7
	Hos. Sec. to M.O.H. 6-1-19		H.S.9
	D.M.H. to W.M.H. 13-1-19		H.S.#16
	AWL from 10 p.m. 14-12-18 till 10 p.m. 6-1-19 Dismissed		
	Med. Reasons Auth G.O.C. MD#2 24-1-19 (whitby)		H.S. 45
	W.M.H. to D.O.H. 9-6-19		H.S.162
	A.W.L. 10 p.m. 4-7-19. (D.O.H.)	H.S.	192.
	A.R. 192 Cancelled - error. (D.O.H.)	H.S.	195
	Sub. D.O.H. 9-8-19. to 8-9-19.	H.S.	224
	W.S.G. submitted to P.O. Roll #6.		
20-12-19	Subs. to 3-1-20.	H.S.	356
16-3-20	D.O.H. to Cas. Co.	H.S.	76

19-3-20. SOS. DISCH."MED.UNFIT"(ENTITLED TO 183 days W.S.G.) [illegible]77.

M.F.W. 192.
60M-3-18 (D.P.) 353.
1772-39-1243.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname: McHugh | Christian Name or Names: J. | Reg. No. 724038.

Rank: Pte | Unit: 5th Batt | Co. Sask. Regt. | Troop | Batty.

Hospital: 7 Cas Clearing Station | Date of Admission: 16.7.17

Transferred: 7 Gen. St. Omer. | Hosp. 27.7.17.

1. E. G. H. Cambridge | Hosp. 12.12.17.

16. C. G. H. Orpington | Hosp. 28-5-18

2. C. G. Liverpool | Hosp. 6.7.18

Diagnosis: G. S. W. Multiple

(1) S.W. Legs. Head, arm. Hand & shldr.

Later Diagnosis (if changed)

(2) S.W. Legs, L. Leg Ampt.

(3)

Additional Diagnosis: if more than one state present

DISPOSITION		Date
C.L. 18.7.17 A.701		
31.7.17 A709.	REMARKS	
" 20.8.17 A725	Dangerously Wd.	16.7.17
10-9-17 A6	Dang ill " 2-9-17	Ill. 27.7.17.
		12.8.17
24.9.17 - A18	Still Dang Ill -	16.9.17.
9.10.17 A31	" " "	30.9.17
22-10-17 A42	still Dang. ill	14-10-17
23.10.17 A43	-deleted	14.10.17
25-10-17 A45.	Note:- Please delete entry on Ch. A43.	
6.11.17. A55.(1)	Still Dangerly Ill.	28.10.17.
27.11.17 A73.	Still Dang Ill.	18.11.17.
10.12.17. A.84 (1)	Still Dang Ill.	2.12.17.
15.12.17. B89 (1)	Dang. ill.	31-12-17

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1. 1st		
2.		
3.		
4.		
5.		
6.		
7.		

b. L. 28-1-18 B123 Slt. Imp. Still Dang. ill 25-1-18
11-3-18 B159 Rem. from dang. ill list 8-2-18
30-5-18 B226.
9.7.18 B229-1
1.10.18 B332.3

Dual to Canada. 20.9.18

CONTINUATION OF ORIGINAL

Army Form B. 178.

MEDICAL HISTORY of—

Surname McHUGH, *Christian Names* FRACIS

TABLE I.—General Table.

Birthplace { Parish ..... County .....

Examined { on ..... day of ..... 191....., at .....

Declared Age ..... years ..... days.

Trade or Occupation .....

Height ..... feet ..... inches. Weight ..... lbs.

Colour of Hair ..... Complexion .....

" Eyes .....

Chest Measurement { Girth when fully expanded ..... inches. Range of expansion ..... inches.

Physical Development .....

Vaccination Marks { Arm, Number — RIGHT ..... | LEFT .....

When Vaccinated .....

Vision { R.E.—V = ... L.E.—V = ... With Glasses { R ..... L .....

Identification Marks, such as Tattoo, Moles, Scars, etc. :—

.....

.....

Defects or Ailments :—

.....

.....

Examined and found—

Fit for Grade { I. II. III. IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at .....

On ..... day of ..... 191.....

Enlisted { at ..... on ..... day of ..... 191.....

	Corps	Regtl. No.
Joined on enlistment		724038
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date	Brief details and Signature

Special Remarks :

.....

.....

.....

.....

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Became non-effective by .....

on ..... day of ..... 191.....

(*Signature*) .....

(*Rank*) .....

W3610/P526 550m 1/18 M&CLd. **E2426.**

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	5	JUL	1918	20	SEP	1918	Gsw. both legs amp. left.		Awaiting sailing to Canada	D McLellan Maj Can
H.M.S. "Renalia"	20	9	18	1	10	18	do	12	No change in condition	Hawkshaw Capt. CAMC

CASE HISTORY SHEET.

MILITARY ORTHOPOEDIC HOSP. Hospital. Station.

No. 472038 Rank Pte. Name McKeah Frank Age 20

Unit 5th Completed years of service (Where and how long) F 5/12 E 24/12 C 2/12 3/12

Date of admission Date of discharge

Diagnosis Amp. L. Leg S.W. R. arm Place of origin Loos

CONDITION ON ADMISSION AND PROGRESS OF CASE

Oct 29 1918. Have leather peg. - has large flabby stump L thigh & near close to ischial tuberosity. will need artificial leg as for disarticulation at hip.

[illegible]

5-11-18 Has some voluntary spasmodic contraction of the ext. digitorum and the ant tibial muscles. Ant tibial reacts to 3 mf. Continue galvanism as permits and ant tibial groups. follow with massage. No analgesia.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

TREATMENT (Especially any specific or special form.) Muscular cutaneous and Ant. tibial hyperalgesia. Return in 2 months. [illegible]

30/11 Going on leave to U.S.A. [illegible]

CONDITION ON DISCHARGE (and disposal made of case.)

Date 5/10/18

Medical Officer i/c case.
Capt Brown

MILITARY ORTHOPOEDIC HOSP.

B1847

M. F. B. 313a.
200M.—5-18.
1772-39-439.

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 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 124038 Rank Private Name McHugh Frank

Enlisted (a) 6.3.16 Terms of Service (a) D of W. Service reckons from (a) 6.3.16

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) Farmer.

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				
		Embarked Canada	Halifax	24.7.16.	
		Disembarked England	Liverpool	31.7.16.	
8/12/16	O.C. 109th Bn	Transferred to 124th Bn.	Witley	8/12/16	A W Aselting Capt. ADJUTANT 109th Overseas Battalion, C. E. F. W.O. Pt II, # 343
					A W Aselting Capt. ADJUTANT 109th Overseas Battalion, C. E. F.
9-12-16	124th. Bn.	Taken on strength of 124th. Bn., C.E.F.	Witley Camp	8-12-16	Part III Orders 265 A.W. Eastmure Lieut. MAJOR & ADJUTANT, 124th BATTALION C.E.F.
2.2.17	124th Bn. C.E.F.	Transferred to 128th Battalion, C.E.F.	Witley Camp	26.1.17	Part II Orders # 33 A.W. Eastmure Lieut. Asst. Adjt. 124 Can. Pioneer Bn

(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 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.
5/2/17.	128th	T.O.S. from 124th Bn	Witley	~~2/1/17~~ 28/1/17	B/O. 36.
MAY 23 1917	128th	Proceeded Overseas for service with 5th Battn.	Witley MAY 23 1917		Part II, D.O. 143
			R. Ellworthington CAPT. & ADJT. for O.C. 128TH (MOOSE JAW'S) CANADIAN INF. BN.		
25.5.17	C. B. D.	ARRIVED C. B. D.	FRANCE	24/5/17	N. R. D 25/5/17
9.6.17	C. B. D.	LEFT C. B. D. FOR	5 Bn.	9.6.17	PART II ORDERS No. 68 D 9.6.17
30.6.17	O. C. ..... BN	ARRIVED 5 Bn BN.	F. L.	27.6.17	N. R. D 9-6-17
27.7.17	5TH CAN BN.	Wounded to hospital	"	16.7.17	B. 213 D 30-6-17
25.7.17	7 Gen	SW. Mult. S.	adm	25.7.17	B 213. D. C. S. 509 d/- W3034.
22.7.17	2 CFA	SW. both Leg. Frac R Hand, Head.	adm	16.7.17	A36. DCS 512.
"	7 CCS	SW Mult.	To 7 CCS adm	"	A36. DCS 516.
"	"	" "	To 10 Y Bagg	27.7.17	
29.7.17	7 Gen	" "	adm	29.7.17	W3034
12.8.17	"	Dang. Ill.	7 Gen	12.8.17	2690 SR. 29-11-17
19.8.17					
2.9.17					
16.9.17					
23.9.17					
30.9.17					
14.10.17					
21.10.17	SR.				
26.11.17	K3/17/32.				
11.12.17	7 Gen	Gsw Mult.	To England	11.12.17	C1592

CERTIFIED CORRECT. 3-JUL 1917 CAN. RECORDS, LONDON.

Army Form B. 103. Regimental Number 734038

Casualty Form—Active Service.

Regiment or Corps 5th Canadian Bn

Rank Pte Surname McHugh Christian Name Frank

Religion ..... Age on Enlistment ..... years ..... months

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

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) .....

or Corps Trade and rate .....

Occupation ..... Signature of Officer

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 ...			
		Disembarked ...			
13.12.17	7 Gen	Gen Hosp (Camp) to England per H/S St Patrick		13/12/17	W3083 Pro 153 dy 27.12.17
		Posted To Saskatchewan Regt Depot. Bramshott			
				LIEUT. FOR LT-COL. A.A.G.	
17.12.17	S.R.D	T.O.S from 5th Bn	Bshott	12.12.17	Pro 292
					LIEUT. FOR LT. COL. I/C RECORDS, C.O.M.F.

(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.

W. 8635—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1897. P.T.O.

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				
20-7-18	T.O.S. No. 2 District Depot, Part II, D.O. No. 173				
					Lieut. and Asst. Adj.
					For O.C. No. 2 District Depot
	S.O.S. DIS. #2 D.D. 19th March 1920 Pt. 11 D.O.#77				
		R. A. Stewart Maj. for O. C. No. 2 D. D.			

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	724038	Pte.	McStugh.	Frank
Year	Unit.		Age.	Service.
	5th Leinr. Bdrs.		20	3 3/12

Station and Date. 27/5/18

Disease Continued

Forearm.

Lower third. a wound between ulna and Radius for three inches in lower third. extending across the carpal bones over wrist to back of hand very limits movement of wrist.

wound on phalangal metacarpal bone of index finger finger hand healed. but joint anchylosed

~~Distal~~ phalanx of 4th finger had been fractured union taken place but position and alignment poor.

wound on palmar surface of right hand extending from between 4 & 5th fingers 2 in palmar surface for 1½ inches.

movement of hand and fingers limited.

wound at ~~anterior~~ posterior portion of left parietal bone from entrance of bullet. wound which passed downwards & to a little to the right of middle line under the mandible, bullet passed through palate and tongue. apparently ~~no~~ accidentally slight injury to ~~left~~ eyelid and left very slightly affected partial atrophy of muscle about ~~upper~~ the area of eye (left)

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	
16/6/18	Small shot on stump opened and pus wounds
20 -	wound healing. Movements of fingers improving.
	C. H. Dudley. Capt.
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	ON ADMISSION
July 5. 1918.	Completely healed stump upper third L. thigh transverse scar good stump. Scar on face 2" external to outer end of left eyebrow and another below chin, path of bullet. It missed the eye & passed through tongue. Sight is fairly good but says it is somewhat dim. Complains of deafness. Scar on R. Knee but has limited movement. Drop foot R. Wound R wrist. Has some flexion R thumb, sensation good but otherwise very little use of any part hand or fingers. Invalided to Canada. D McLellan

#724038, Pte. McHugh, F. D.O.H.
Condition when finally boarded for discharge Mar.12th,1920.

Wounded G.S.W. Multiple 16/7/17 at Loos, France, Fracture of skull, rt. hand. left leg, right leg, etc. Left thigh amputated at No.7 General, St.Omer, 29/9/17. Reamputated at Abbotts Riplin,V.A.D., 15/4/18. No subsequent reamputation. Resection of nerve ending in scar at D.O.H.,14/7/19. 1. Amputation lt.thigh-Lt.thigh amputated 4" from perineum. Well healed, transverse scar; 5" transverse scar 4" above end of stump on post.aspect. Extension of stump limited to perpendicular. Atrophy of Glutens Maximus and consequent prominence of tuber Ischii has made the making of a wearable artificial leg very difficult and many unsuccessful attempts have been made. Final result is not too bad and is wearing the leg daily. Obj:-Leg is pretty painful to wear on account of tender scars but can wear it an hr. every day and it is getting gradually more comfortable. 2.G.S.W.Rt. Hand & Forearm- Multiple healed wds rt. elbow, forearm and rt. wrist. Wrist - Passively the wrist cannot be extended past the horizontal and flexed only 15°. Voluntary attempts to flex the carpus result in radial flexion only. Thumb - Well united fracture proximal phalanx and injury of metacarpo-phalangeal joint resulting in limitation of movement A.G.F.5" Thumb to base of ring finger. Index - Partial ankylosis of meta-phal.jt. remaining jts, active flexion 45°each. Middle - False jt. in metacarpal allowing 45° active flexion of finger. Full active flexion of remaining jts Ring - Proximal Phalanx was fractured but now well united. Adjacent phal. can only be extended 135°. Minimus-Ankylosis of prox.inter.phl.jt.in 45° flexion. Musculo spiral supply is intact. Deformity is due to movement of extensor tendons in the scar at wrist. This is a badly shattered hand and of not much use. Hard to use a cane in getting around on artificial leg. Can write very slightly. 3. G.S.W.Right Thigh, Knee & Foot - Multiple wds. over right thigh, knee and leg. All healed. Full movement, rt. hip. Greatest angle of flexion of knee120°. Full extension, in fact, slight hyperextension. At ankle jt.-Plantarflexion of foot 140°; passive dorsiflexion 80°. Has a foot drop with returning power. Active dorsiflexion slight and variable but improving. Active inversion and eversion of foot is about 50% normal. Brace for foot drop has been discarded. Wears a special orthopaedic show which supports the arch. Subjective:- Can bear weight on this leg off and on with periods of resting, all day, uses crutches. No pain. Recovering injury to External Popliteal. Sensation normal. 4. Left Eye - Depressed healed scar of entrance of bullet in lt. parietal region 2" behind angle of left eye. X-Ray shows considerable loss of bone at this point. Orbit is noticeably retracted inits socket. The eye ball is intact. There is loss of sensation over left side of upper lip. Specialist's Report 18-6-19 - Diagnosis - Hyp. astigmatism with subacute conjuncitivits. Duration - 2 years. Disability - 10% due to serv.

724038

DUPLICATE.

MEDICAL HISTORY SHEET.

DUPLICATE

Surname McHugh Christian Name Francis

Examined on 6th day of March 1916. at Onemee

Birthplace City or Town London County England

Apparent age 18 years.

Trade or occupation Farmer

Height 5 Feet 3½ Inches.

Weight 120 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. None Left. Four Number Four.

When Vaccinated last June 26th 1916

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection Slight umbilical protrusion

Approved by J McCulloch Capt. Medical Officer Rank 109th Overseas Battalion, C.E.F.

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.
26.6.16	Good	J McCulloch M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
25/4/16	Good	J McCulloch M.O.
2/5/16	Good	J McCulloch M.O.
10/5/16	"	J McCulloch M.O.
T.A.B.	25.9.16.	H O Board

Enlisted on 6th day of March 1916 at Onemee

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Bn. C.E.F.	724038		6.3.16
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.

M. F. B. 313.
150M.—8-15.
H. Q. 1772-39-439.

Surname McHugh Christian Name Thomas

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
D.O.H.								G.S.W. Right leg. " " Arm. Amp. Left leg		Wearing boot with splint for Right leg. Measures for artificial leg & peg for Left leg. To have massage & manipulation for right arm & hand	W. Wood Lt Capt
Whitley, W.H.	13/1/19	13	1	19	9	6	19	G.S.W. Right leg " " Arm Amp. Left leg.		advise transfer to Christie St. Hospital Toronto for further treatment as recommended by Col Gilmore	B.A. Broughton Capt.
D.O.H		9	6	19				Amp. L. thigh. G.S.W. Head. Rt arm.		Artificial leg provided. In discharge.	Hare Bromley Capt.

180
49
131

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class a
No. 81269

DISCHARGE CERTIFICATE

EG

THIS IS TO CERTIFY that No. #724038 (Rank) PTE

Name (in full) McHUGH, Frank. enlisted in

the 109th Battalion C.E.F.

CANADIAN EXPEDITIONARY FORCE at Omemee, Ont. on the 6th.

day of March 1916

HE served in ENGLAND & FRANCE::::::

and is now discharged from the service by reason of ~~Demobilization~~. Medical Unfitness.

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

Age 22 Yrs. 2 Mons.	Marks or Scars Vacc. scars left Arm.
Height 5' 6½"	Amputation Left Thigh.
Complexion Clear	G.S.W. BOTH LEGS, RIGHT HAND, HEAD 16-7-17
Eyes Blue	G.S.W. LEFT THIGH 16-7-17 (AMP).
Hair Brown.	GOLD STRIPE ONE 1

F. McHugh
Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
MAR 19 1920
TORONTO

R. Mitchell Maj.
for O. C. No. 2 D. D.
Issuing Officer

Rank

Date 19th March. 19 20

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a.
100M-3-19.
H.Q. 1772-39-882.

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. District.

CASE HISTORY SHEET.

Hospital ..... Station.

No. 724038 Rank Pte. Name Pte. Hugh. H. Age 20

Unit ..... Completed years of service (Where and how long) 5/12 8/12 10/12

Date of admission ..... Date of discharge .....

Diagnosis ..... Place of origin .....

CONDITION ON ADMISSION AND PROGRESS OF CASE 13-1-19 J. A. Alton Lt

Wounded 16-7-17 - 1st amput. for gas gangrene 29-9-17 - reamput. 16-4-18, Measured for leg & peg 9-1-19. Stump healed since about middle of may. Cicatrix - post flaps - good Stump - Hip mobt fair but hampered by scar on buttock near lower ~~natal~~ fold - this is somewhat tender & may give trouble in wearing art. leg.

Amput. L. thigh
Lt. below pop.

Wassermann Negative

II. Rt hand wounded same time also wrist. Irregular 6" scar over dorsum of wrist & hand. Wrist very stiff About 15° of movt possible no circumduction Thumb & 1st two fingers can be fully extended & about 1/4 flexed. Ring & little finger held 1/3 flexed & he has no power over them. Some paraesthesia of little finger. Fracture prod. phalanx ring finger united in bad position.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

III. Rifle bullet entered left temple and passed down & to rt under l. eye thru roof of mouth near centre of hard palate & passed thru tongue was then removed a little to rt of mid line in neck. (floor of mouth).

TREATMENT (Especially any specific or special form.)

IV. Rt ext pop. nerve hit by shrapnel - There is obviously recovery going on. Foot drop for which he wears stop. ft. ankle splint

CONDITION ON DISCHARGE (and disposal made of case.) Outer side leg & foot paraesthetic formication. Knee H.G.E 180° H.G.E. 120

Flat foot (reducing) arch support ordered.

X ray hand & knee massage hand - massage & elec. (faradic) to leg.

Date ..... H. Wright
Medical Officer i/c case.

M. F. B. 313a.
200M. - 5-18.
1772-39-439.

P.T.O.

18-1-19. X-ray shows: erosion of articulating surface inner condyle of femur & erosion of articular surface of head of 1st prox. phalanx of hand. Also large metal fb. in palm of hand & posteriorly on dorsal side.

26-1-19- Seen by Major G.B. Robertson advises Bunion Splint for rt. foot to keep gr. toe & 2nd toes apart. Has not had leg yet.

5-2-19- Pt knocked his (rt) knee today and complains of a great deal of pain when he tries to fully straighten it in walking - no pain when resting. No swelling or other sign of inflammation.

6-2-19- Knee is much easier today - He is resting as much as possible. Bunion Splint has not arrived.

9-2-19- Still has a lot of pain in knee - transfer to Inf. #1 as bed pt for a few days.

11-2-19- Easier but still somewhat painful.

21-2-19- Soreness of knee has disappeared.

8/3/19. Needs new boot and ankle brace.

19/3/19. Seen by Lt. Col. Gilmour who agrees that excision of scar on buttock is necessary before a satisfactory leg can be worn but advises that pt wait for op'n till major Simpson comes.

10.4.19. Seen by Maj. Simpson who is going to excise scar soon as convenient.

15.4.19. Seen by Lt Col. Starr who does not think scar should be touched but advises heavily padded peg leg with gap where scar is sensitive.

16.4.19. Peg leg ordered.

16/5/19 Peg leg received unable to wear it on account of tender scar. G.R.C.

CASE HISTORY SHEET.

Davisville Military Hospital. N. Toronto Station.

No. 724038 Rank Pte. Name Pte. McHugh T. Age 20.

Unit 5th Completed years of service (Where and how long) 7. 5/12 C 2 4/12 C 5/12

Date of admission 6-1-19 Date of discharge

Diagnosis Amp. L Leg - G.S.W. R. Knee R. Arm Place of origin Lens (6-7-17)

CONDITION ON ADMISSION AND PROGRESS OF CASE

Has been measured for artificial leg & peg.
Supplied with splint for right leg & to have electrical massage.
To have massage & movements for Right Arm.

Whitby Military Hosp - (con'd)

4/6/19. Seen by Col Gilmore who recommends transferring patient to Dominion Orthopaedic Hospital for further treatment.

G.P.V. Crongton Capt

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

DAVISVILLE MILITARY HOSPITAL JAN 6 1919

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

M. F. B. 313a.
200M.-5-18.
1772-39-439.

CASE HISTORY SHEET.

Dominion Orthopaedic Hospital. Toronto Station.

No. 724038 Rank Pte Name McHugh, F. Age 21

Unit D.D. #2 Completed years of service Where and how long } F. 12/12 E 19/12 C. 8/12

Date of admission 9-6-19 Date of discharge

Diagnosis Amp L. thigh, Drop R. Foot - G.S. W. R. arm Place of origin Loos - 16-7-16

CONDITION ON ADMISSION AND PROGRESS OF CASE

June 15/19. This man is evidently a problem of long standing. To see Col Starr at Specialist Clinic. V.F.S.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

M. F. B. 313a.
100M.—6-18.
1772—39-139.

CASE HISTORY SHEET.

Dominion Orthop. Hospital. Toronto Station.

No. Rank Name McHugh Age

Unit Completed years of service (Where and how long) F. E. C.

Date of admission Date of discharge

Diagnosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

G.S.W. Head

17/6 - Bullet entered left temporal region 2" behind angle of left eye - passed downward ~~the~~ under left eye & through palate, emerging to the right under the chin.

There is considerable loss of bone ~~in Compto~~ in temporal region at point of entrance of bullet. Wound quite healed.

Complains of diminution of vision and some discomfort in nose.

To Eye Specialist for Report
To Nose " " "

17/6 See x ray examination

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

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

CASE HISTORY SHEET.

Dominion Orthop. Hospital. Toronto Station.

No. 724038 Rank Pte Name Mc Hugh Age

Unit 5th Bn Completed years of service (Where and how long) F. E. C.

Date of admission 9/6/19 Date of discharge

Diagnosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

Amp. left thigh. L.A.K. 4" from perineum

1/6 - Well healed transverse scar.
Has neither peg or leg.

There is a transverse scar 5" in length on back of stump about 4" from the end which is tender and will prevent free use of leg when received. Scar due to pressure sore.

Stump will not extend past perpendicular
Complains of a tender nerve bud on outer & posterior part of stump, under the pressure scar.
To Sgm for measurements and pulley weights
~~Peg Ordered today~~

Col Starr 15/4/19 - advises against excision of scar on back of stump & suggests a heavily padded peg leg with a gap where scar is sensitive.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.)

TREATMENT (Especially any specific or special form)

1. Special peg leg ordered today 15/6/-
2. Massage
3. Pulley Lifts and Manipulations

24/6/- Limb factory say they cannot make special peg ordered.

Artifl Leg ordered today.

CONDITION ON DISCHARGE, (and disposal made of case)

7/7/- Leg now in the mouth. Satisfactory so far.

July 14th 1919. after repeated efforts to obtain satisfactory painless walker in the hospital found this scar is pressed upon by all others. Would advise excision of scar (which contains a nerve bud). and

Date

Medical Officer i/c case.

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

July 18/1919. Operation Col. Menzies & Capt. Brown.
Corners of the scar at the end of the stump excised.
Small cutaneous nerve bud removed from scar at back of stump.

9/9/- Stump looks very well. Excessive tenderness of scar high up posteriorly has disappeared following operation & nerve ending.
To Davisville re leg.

9/10/- New bucket started today. Factory have had bad luck in fitting.

25/10/- To x ray for description of bony deformity congenital (?) in fragment of femoral stump.

29/10/ !!! No deformity - this was a prominent ~~bone tuberosity~~ tuberosity produced due to atrophy of gluteus max.
Write Swanger as to prospects of making a leg.

7/11/- Mr Hugh is to see Dr McMurrich and Stevenson on 19/11/- with reference to possibility of fitting him with a leg.

21/11/- Saw Dr McMurrich & Stevenson & new bucket to be made.

CASE HISTORY SHEET.

Hospital. Station.

No. Rank Name Mc Smyth. Age

Unit Completed years of service (Where and how long)

Date of admission Date of discharge

Diagnosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE G.S.W. Rt leg (Contd)

16/1/20 Back drop splint to be discontinued. No treatment advised for right leg.
Ordered one left old pattern
One right boot with stiff inside leather ankle support.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

M. F. B. 313a.
100M.—6 18.
1772—39 4.39.

CASE HISTORY SHEET.

Dominion Orthop. Hospital. Toronto Station.

No. Rank Name McHugh Age

Unit Completed years of service {Where and how long} F. E. C.

Date of admission Date of discharge

Diagnosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE

G.S.W. Right leg and knee

1916 - Two round scars over front of patella + laterally. One just below spine of tibia. Leg cannot be flexed past 75°. Full extension. Possibly a slight hyperextension

He has a foot drop.
No active eversion.
Strong inversion
Strong Plantar flexion
Fallen arch.

Some sensory changes on outer side of leg.

Wears a special boot fitted with a lock to prevent foot drop, and steel bars running up leg to a leather band above the calf.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

To Capt Harris for report on Rt Popl Nerve injury

TREATMENT

(Especially any specific or special form.)

June 13. 1919. Muscle Reaction

	Voluntl	Faradic	Galvanic	Rt.
Ant Tib	nil	nil	nil to all	nil to 3
Peroneal	nil	nil	he can stand	nil to 3.
Calf Group.	+	+		

CONDITION ON DISCHARGE, Hyperaesthesia Ext Pop. area.

(and disposal made of case.)

Diagnosis. Injury to Rt Ext Pop. Cannot find the site of injury unless it is due to his scar close to his sacrum.

Date

Medical Officer i/c case.

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

Recommendation.
Heat massage, ultraviolet & galvanism to Rt Ext Pop. supply.

17/6/ - Receives - Radiant Heat 5/1.
Interrupted Galvanism
to Ext Popliteal supply

Massage to scar on posterior
aspect of thigh.

7/7/ - Treatment discontinued -

5/1/20 - Return of power in extensors of
right leg. To Capt Dale for Report &
examination

6-1-20.

	Volunt	Faradic	Galv.	R.J.C.
Peroneal Grp	+	nil	+	+.25mf
Ant Tibial Grp (Except Ext Hallucis Long.)	+	nil	+	+.25mf
Calf Grp	+	+	+	———

Sensation normal area of musculo cutaneus area.

Diagnosis. Injury Ext Popliteal fibres - Recovering

Treat - May discard foot drop splint in two weeks.
Would not suggest any treatment.

CASE HISTORY SHEET.

Dominion Orthop. Hospital. Toronto Station.

No. ..... Rank ..... Name Mr Hugh. Age .....

Unit ..... Completed years of service (Where and how long) F. E. C.

Date of admission ..... Date of discharge .....

Diagnosis ..... Place of origin .....

CONDITION ON ADMISSION AND PROGRESS OF CASE

1916. GSW. Right Hand

Six inch scar over back of right wrist & hand extending to centre of dorsum.

Passively the wrist cannot be extended past the horizontal, & flexed only 15°. On attempting to extend the carpus voluntarily, the result is a radial flexion, not a true dorsi-flexion

Thumb - United fracture with ankylosis of meta-carpo phalangeal joint in full extension. Can touch base of ring finger with tip of thumb

Index finger - Partial ankylosis of metacarpo ph. joint. Interphalangeal joints can be actively flexed 45° each. Full voluntary extension

Middle finger - False joint in metacarpal just proximal to metacarpo-ph. joint. 45° active flexion at this false joint. Remaining interphalangeal joints have almost full active flexion. Cannot actively extend this finger to the horizontal, although same is easy, passively, & can be hyperextended

Ring finger - Proximal phalanx was fractured with injury to proximal interphalangeal joint which now cannot be extended past 45°. Remaining interphalangeal & metacarpo-ph. joints normal

Little finger - Ankylosis of proximal interphalangeal joint in 45° flexion. Full flexion & extension metacarpo ph. joint & distal interphalangeal joint.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases)

TREATMENT (Especially any specific or specific form)

CONDITION ON DISCHARGE (and disposal made of case)

Very fair grip.
Strong wrist flexion.

Date .....

Medical Officer i/c case.

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

P.T.O.

To Capt. Harris for report as to whether Musculo Spiral nerve is injured.

June 13. 1919.

Musculo spiral supply is not act. The deformity is due to involvement of the extensor tendons in the scar at the wrist.

H. Ramsbotham Capt.

17/6/- See x ray plates.

Receives - Muscle function training of this hand

H. Alex. Brown Capt.

7/7/- Treatment discontinued.

CASE HISTORY SHEET.

Dominion Orthop. Hospital. Toronto Station.

No. 74038 Rank Name Pte McHugh Age

Unit 5th Bn Completed years of service (Where and how long) F. 8/12 E. 19/12 C. 12/12

Date of admission 9/6/19 Date of discharge 19/8/20

Diagnosis Amp L. Leg K. Drop Foot G.S.W. R. arm Place of origin Lood 16-7-17

CONDITION ON ADMISSION AND PROGRESS OF CASE

Pte McHugh Wounded 16/7/17
5th Bn
74038

I Amp left thigh
II G.S.W. Head. Diminution of vision
III G.S.W. Right hand trouble
IV G.S.W. Right knee leg. Foot drop.

The different disabilities of this patient are annotated on different sheets -
In making notes - kindly keep separate.

H. A. W. Brown
Capt.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Medical Officer i/c case.

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

C1542

#724038, Pte. McHugh, F. D.O.H.
Condition when finally boarded for discharge Mar.12th,1920.

Wounded G.S.W. Multiple 16/7/17 at Loos, France, Fracture of skull, rt. hand, left leg, right leg, etc. Left thigh amputated at No.7 General, St.Omer, 29/9/17. Reamputated at Abbotts Riplin,V.A.D., 15/4/18. No subsequent reamputation. Resection of nerve ending in scar at D.O.H.,14/7/19. 1. Amputation lt.thigh-Lt.thigh amputated 4" from perineum. Well healed, transverse scar; 5" transverse scar 4" above end of stump on post.aspect. Extension of stump limited to perpendicular. Atrophy of Glutens Maximus and consequent prominence of tuber Ischii has made the making of a wearable artificial leg very difficult and many unsuccessful attempts have been made. Final result is not t o bad and is wearing the leg daily. Obj:-Leg is pretty painful to wear on account of tender scars but can wear it an hr. every day and it is getting gradually more comfortable. 2.G.S.W.Rt. Hand & Forearm- Multiple healed wds rt. elbow, forearm and rt. wrist. Wrist - Passively the wrist cannot be extended past the horizontal and flexed only 15°. Voluntary attempts to flex the carpus result in radial flexion only. Thumb - Well united fracture proximal phalanx and injury of metacarpo-phalangeal joint resulting in limitation of movement A.G.F.5 Thumb to base of ring finger. Index - Partial ankylosis of meta-phal.jt. remaining jts, active flexion 45° each. Middle - False jt. in metacarpal allowing 45° active flexion of finger. Full active flexion of remaining jts Ring - Proximal Phalanx was fractured but now well united. Adjacent phal. can only be extended 135°. Minimus-Ankylosis of prox.inter.phl.jt.in 45° flexion. Musculo spiral supply is intact. Deformity is due to movement of extensor tendons in the scar at wrist. This is a badly shattered hand and of not much use. Hard to use a cane in getting around on artificial leg. Can write very slightly. 3. G.S.W.Right Thigh, Knee & Foot - Multiple wds. over right thigh, knee and leg. All healed. Full movement, rt. hip. Greatest angle of flexion of knee120°. Full extension, in fact, slight hyperextension. At ankle jt.-Plantarflexion of foot 140°; passive dorsiflexion 80°. Has a foot drop with returning power. Active dorsiflexion slight and variable but improving. Active inversion and eversion of foot is about 50% normal. Brace for foot drop has been discarded. Wears a special orthopaedic show which supports the arch. Subjective:- Can bear weight on this leg off and on with periods of resting, all day, uses crutches. No pain. Recovering injury to External Popliteal. Sensation normal. 4. Left Eye - Depressed healed scar of entrance of bullet in lt. parietal region 2" behind angle of left eye. X-Ray shows considerable loss of bone at this point. Orbit is noticeably retracted inits socket. The eye ball is intact. There is loss of sensation over left side of upper lip. Specialist's Report 18-6-19 - Diagnosis - Hyp. astigmatism with subacute conjuncitivits. Duration - 2 years. Disability - 10% due to serv.

Major & Registrar
For O. C. Dominion Orthopaedic Hospital

MEDICAL CASE SHEET (OPHTHALMOLOGY)

MILITARY HOSPITAL Toronto General

DATE June 18th/1919.

NAME McHugh, F. RANK Pte. NUMBER 724038 UNIT DOH Christie St. AGE 21

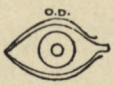
HISTORY G.S.W. left side of head, July 1917.

SYMPTOMS Twitching left lid.

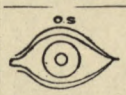
GLASSES WORN No

OBJECTIVE EXAMINATION

EXTERNAL APPEARANCE

OD 

N.

OS 

Palpebral aperture sl.wider than O.D.
Sl. conjunctival injection - Scar lt. temple

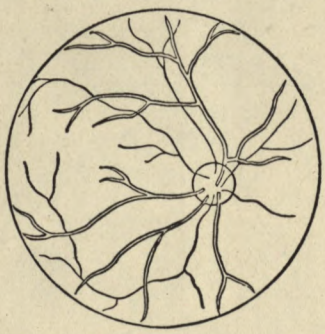
RETINOSCOPY AND OPHTHALMOMETER

OD

OS

OPHTHALMOMOSCOPE

FUNDUS	LENS	CORNEA
N	N	N
N	N	N



FIELDS

Diagnosis - H. Astig. O.S.
Duration - Subacute Conjunctivitis
Disability - 10%
Due to Service - Yes
Aggravated by Service -

MUSCLE BALANCE

TENSION

(sgd) DER

SUBJECTIVE EXAMINATION

TRIAL CASE

	BEFORE	SPH.	CYL.	AX.	AFTER
OD	V 6/6				V
OS	V 6/9 +				V

P.P. P.R. A. ACC. PRESBYOPIA

GLASSES PRESCRIBED

OD

OS

(sgd) F.A.Aylesworth,
~~Ophthalmic Surgeon~~
Military Wards,
TGH

TREATMENT:—

Two drops.

M. F. W. 144.
10M.—6-18.
1772-39-1173.

To be made out in duplicate. H.Q. 54-21-23-53

DUPLICATE

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 109th Bn. Victoria and Haliburton

(2) Regimental Number 724038

(3) Full Name of Soldier Frank McHugh

(4) Place of Birth Sheffield England

(5) Are you married, or not? Not

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

(b) Present Postal Address

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address

(10) Is your Mother alive? No

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

(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.

Thomas McHugh (Brother)
Lock #4 Pa. Washington Co.
U. S. A

(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? No

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

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

Date JUL 17 1916

Lt. Col.
Officer Commanding.
O. C. 108th Overseas Battalion, C. E. F.

MEDICAL CASE SHEET (OPHTHALMOLOGY)

MILITARY HOSPITAL Toronto General

DATE June 18th/1919.

NAME McHugh, F. RANK Pte. NUMBER 724038 UNIT DOH ~~Christie St.~~ AGE 21

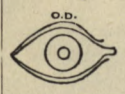
HISTORY: G.S.W. left side of head, July 1917.

SYMPTOMS Twitching left lid.

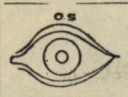
GLASSES WORN No

OBJECTIVE EXAMINATION

EXTERNAL APPEARANCE

OD 

N.

OS 

Palpebral aperture sl.wider than O.D.
Sl. conjunctival injection - Scar lt. temple

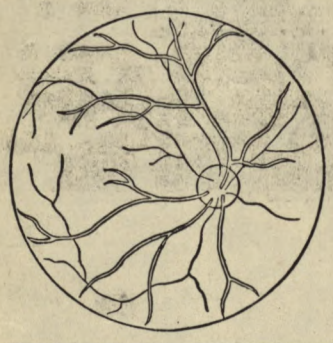
RETINOSCOPY AND OPHTHALMOMETER

OD

OS

OPHTHALMOMOSCOPE

FUNDUS	LENS	CORNEA
N	N	N
N	N	N



FIELDS

Diagnosis - H. Astig. O.S.
Duration - Subacute Conjunctivitis
Disability -10%
Due to Service - Yes
Aggravated by Service -

MUSCLE BALANCE

TENSION

(sgd) DER

SUBJECTIVE EXAMINATION

TRIAL CASE

	BEFORE	SPH.	CYL.	AX.	AFTER
OD V	6/6				V
OS V	6/9 +				V

P.P. P.R. A. ACC. PRESBYOPIA

GLASSES PRESCRIBED

OD

OS

(sgd) F.A.Aylesworth,
~~Ophthalmic Surgeon~~
Military Wards,
TGH

TREATMENT:—

Two drops.

M. F. W. 144.
10M.—6-18.
1772-39-1173.

Section 9(a) Continued.

Subjective:- Can bear weight on this leg off andon with periods of resting, all day, uses crutches. No pain.

	Volunt.	Farad.	Galv.	L.J.C.
Peroneals	+	nil	+	+0.25 m.f.
Ant. Tib. {except lt.ball long.	+	nil	+	+0.25 m.f.
Calf	+	+	+	

Recovering injury to External Popliteal. Sensation normal.

4. Left Eye - Depressed healed scar of entrance of bullet in left parietal region 2" behind angle of left eye. X-Ray shows considerable loss of bone at this point. Orbit is noticeably retracted in its socket. The eye ball is intact. There is loss of sensation over left side of upper lip. Specialist's report 18/6/19 - Diagnosis - Hyp. astigmatism with subacute conjunctivitis. Duration - 2 years. Disability - 10% due to service.

M. F. W. 41
100M-1-18.
1772-39-889.

Name Pte McHugh. J.

Regimental No. 724038

Unit 109 Bn.

Date of enlistment

Place of "

Married (yes or no) No.

Amount of pay assigned monthly $ Nil.

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Aug 1	Oct 31	92	1	92	92	10	920	526 70								Joshua D Pistell N.S. 1/10-18 Do 173
									627 90	40090		627 90			627 90	526 70 C.L.P.C.
Nov	30	30	1	30	30	10	3		33	42646	33				33	
Dec	31	31	1	31	31	10	310	12 50								Seb. 30/11 to 14/12 Do. 231
									46 10	94405		46 10			46 10	

TRANSFER

M. F. W. 41
100M-1-18.
1772-39-339.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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.	Date					

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. M-713

Name McHugh, Frank.

Regt'l No. 724038 Rank Pte. File Numbers { PM. 25-75 E / PM. 25-McH. F. J.

Former Units S.R.D. Original Unit 109th Bn.

Date of arrival in Canada 1.10.18 Boat Newralia Port of Disembarkation Halifax

Rates of Pay:—Regt'l. 1.00 Field .10 Date of arrival in M.D. 2.

Separation Allowance. Date paid to Nil Rate Nil If continued by Chief Paymaster, England Nil.

Assigned Pay. Date paid to Nil Rate Nil If continued by Chief Paymaster, England Nil.

Name and address of Beneficiary { Nil.

Pay claimed on English L.P.C. to 31-7-18 to be paid by new Unit from 1.8.18

Name of new Unit #2 District Depot Date L.P.C. forwarded to new Unit 17/10/18

A.P. Charged on Eng. L.P.C. to - Nil.

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out: On Boat		At Cl. Depot ~~&c.~~ A.P.		OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT: Credit		Debit		REMARKS
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	
591	42			591	42													
										2	43							A.R. - 6422 - 23.7.18.
										2	43							" 8041 - 13.8.18.
										2	43							" 10045 - 3.9.18.
										2	43							" 748 - 17.9.18.
						5	00											" 19 Halifax 1.10.18.
						50	00											Halifax - 1.10.18.
				591	42							64	72					
								Credit Bal.				526	70					
				591	42							591	42	526	70			

E.B.S. 11.10.18.
R.J.S. 14.10.18

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers { .....
.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field.....Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Assigned Pay. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Name and address of Beneficiary { .....
.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

P. 559

Married or Single: Single

Place of Birth: London Eng.

Name and Address of Next of Kin: Thos McHugh, Charleroi Pa. U.S.A.

Relationship of Next of Kin: Brother

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 724038 Rank: Pte Name: McHugh Frank

If in Permt. Corps What Unit: Unit: 109th Bn

Permanent Force Allowances

Place of Attestation: Owen Sound Ont.

Date of Attestation: Mar. 6 - 1916

Transferred to	Date	Authority
124th Bn.	21.1.17	11943
128th Bn	11-2-17	12.16. 2033
5th Bn	21.9.17	B/01148
S.P.D.	14/2/18	292 17/12/18

Assigned Pay Monthly $ — Date Effective:

Payable to — Relationship:

Assigned Pay Monthly $ — Date Effective:

Payable to — Relationship:

Stop-Payment Form (Assigned Pay) Rendered (Date) — Effective — Reason:

Discharge Date and Place — Reason and Authority:

Account Transferred to Non-Effective Branch (Date):

Account Transferred to Officers' Pay-Branch (Date):

G.J.

Date 1916	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
July 31													Balance from Canada																		21 10				
Aug 1-31	31	1.00	31		10		310							21 10	2110																				
Sep.	30		30				3								3410	5	9/8/16							974						974	4546				
Oct	31		31		31		310								33	38	31/8/16	69	15/9/16					730	730					1460	6386				
Nov	30		30				3								3410	109	30/9/16	148	15/10/16					730	730					1460	8336				
Dec	31		31				310								1223 0									24 34	14 60					3892					
1917 Jan	20	1.1	14 30 22												33	177	31/10/16							974						974	10662	61			
															2211 40	279	30.11.16							417											
															34 10	22	31/11/16							730						1217	12855	76 50			
															22									46 25						60 85					
															2211 40																150 55				
21-31	11	1.10	12	10											12 10	440	15/1	474	29/1					487	24	33				29 20	133 45	92 ·	41 45		
Feb	10	1.10	11	·											11 ·															90 05	144 45				
															234 50																				
11-28	18	1.10	19	80											19 80			439	26/3/17						7	30				7 30	156 95	106 ·	50 95		
Mch 1/15	15	1.10	16	50											16 50																173 45				
" 16/31	16	1.10	17	60											17 60			517	29/3/17						9	73									
															288 40			475	12/3/17						7	30	38	93		55 96	135 09	121 50	13 59		
Apr 1/30	30	1.10	33	00											33 00					394	22/12/16	124th Batt.					7	30		7 30	160 79	136 50	24 29		
																				412	17/2/17	128th Bn.													
			300	30										21 10	321 40									51 12	63	26	46	23		160 61	160 79	136 50	24 39		

A0 343-8.12.16 Pt. 124th
Pt. 21.1.17

724038, Pte. McHugh Frank

Date 1917	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
			30	30										21	10	321	40								51 12	63 26	46 23				160 61	160 79		136 50	24 29	
																		71	27/4/17						9 74										
May 1/31	31	1.0	34	10											34	10		33	15/4/17						7 30				56	17 60	177 29		151 50	25 79	D4005-838
																		205	28/5/17						4 87										
June 1/30	30	1.0	33	00											33	00		137	17/6/17						7 30				36	12 53	197 76		166 50	31 26	D4005/1037
July 1/31	31	1.0	34	10											34	10															231 86		181 50	50 36	
Aug 1/31	31	1.0	34	10											34	10															265 96				
Sept 1/20	20	1.0	22	00											22	00															287 96				Transfd 5th Batt 21.9.17 B0143
			457	60										21	10	478	70								50 33	63 26	46 23			97	190 74					
21/30.	10	1.0	11	00.												11	00	496	6/7			65	9/6	1 280.	2 68		4 46.			7 14	291 82.				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
	Bal b/f Down ~~291 82~~								291 82.		
Oct	Pt pay	34 10							325 92		
		34 10									
Nov	" " Nov	33		P.O. A.P. 1142 c.c. Ashford 25/8/17		2 67					
	" " Dec	34 10							390 35		
		67 10				2 67					
1918 Jan	Pt pay	34 10		P 12608 5th Bn 2/1/18		4 87			419 58	270	
Feb	"	34 10				4 87					
		30 80									
		30 8									
				HR 18972 7/2 Lr		4 87			445 51		
						4 87					
Mch	Pte pay	34 10		HR 26381. 7/3 Lr		9 73			469 88	300.00	
		34 10				9 73					

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAME:- McHugh Frank
EFFECTIVE DATE:-	EFFECTIVE DATE:-	NUMBER:- 72H038
AMOUNT:-	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 109th

DATE ACCOUNT FIRST OPENED:- 1. 8. 16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			SRD
	1/8/18	31/8/18	NEF

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK.

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
		Nil				Cr. Bal $591.42	

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Discharged to Canada Orp. 18 ago Invalided

1918 MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Bal fwd								469 88	300	
Ap	Pte pay	33		H R946 6/4 £2	9 73				493 15		
		33			9 73						
May	Pte pay	34 10		H R5779 4/5 £2	9 73				517 52	320	
		34 10			9 73						
June	Pte pay	33		a R2299 5/6 16 C GH	4 87						
		33 00		1 2590 25/6	4 86				496 98		
July	Pte pay	34 10			53 54						
	S. Turlo 1/5/18 1/7/18	44 53									
	Inton Dep. Pay 31/5/18	15 81							591 42		
		127 44			53 54						
				a R6422 23/7 5 C GH Ton LPC	2 43				588 99		
		94 44			2 43				621 99		
Aug				a/R 8041 13/8/18 #5 C GH	2 43				619 56		
					2 43						
Sept				a/R 10045 3/9/18 #5 C.G.H.	2 43						
				Pr 748 17/9/18	2 43				614 70		
					4 86						
Oct.				33.00 credited in July Bal Cr Col.		33 00			581 70		
				Bal carried forward to Aug 621.99 Should be 588.99							

CANADIAN
ASSIGNED PAY AUDITED
for ass
H.A. Smith
AUDIT CLERK
DATE 14/3/19

NUMBER RANK NAME

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation

DEPARTMENT OF VETERANS AFFAIRS

MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION

AVIS DE DÉCÈS

TO:
À:

DATE 5/10/76

NAME
NOM McHugh, Frank

Service No.
Matricule No 724038 Army-W.W.1

CPC No.
CCP No 198922

WVA No.
AAC No

Information Received from:
Information reçue de: Letter from daughter - Baldock

Date of Death
Date du Décès 6/9/76 Hertshire, England - 15/9/76

Place
Endroit N/K

Distribution: WSR-DASG
VI - ASS
DO - BD
HO - BC

Pour le chef,

Beverly Ann Beasley

for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 (Rev. 2/70) BIL.

NR 1895
26.3.20

24-Me-304

War Service Badge
Class a
No. 81269

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

EG.

1. No. #724038
2. Rank PRIVATE.
3. Name McHUGH, Frank.
4. Unit 109th Battalion C.E.F. (#2 D.D.)
5. Date of Discharge MAR 19 1920 Place TORONTO, ONT.
6. Reason for Discharge "MEDICALLY UNFIT"
7. Authority (#2 D.D. Part 11 Daily Order #77)
8. Proposed Residence after Discharge Charleroi, P.A., U.S.A.
9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?

F. McHugh
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date MAR 19 1920

No. 2 DISTRICT DEPOT
MAR 19 1920
TORONTO

Medical Documents forwarded to ~~S. O. R.~~ or B. P. C. on 26.3.20

Signature [illegible] Maj.
for O. C. Discharging Unit.)

M.F.B. 218a—50M. -2-19 —1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT #2

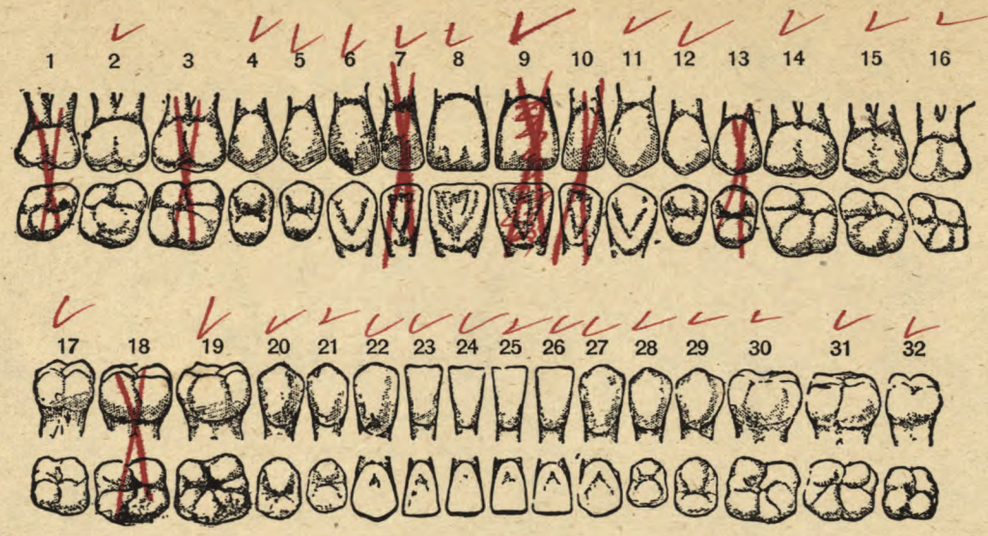
NAME OF SOLDIER F. Mc Hugh

RANK Pte

No. 124038

REGIMENT

M.F.B. 465.
200M—6-18.
1772-39-950.



F. Mc Hugh.

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	June 11/19		Dentally fit																			O.K.
	March 12/20		Final Board Exam. 20-0.44 Toronto																	H. A. Hakim, Capt. Per L.D.D.		
			Required partial denture Given Artificial																			

5

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.

STATION D.O.H. TORONTO DATE 10-3-20

1. 1 (a) Unit D.D.#2 (b) Regimental No. 724038 (c) Rank Private

(d) Surname Mc H U G H (e) Christian name FRANK

(f) Home address Charleroi P.O., U.S.A.

(g) Next of Kin J.T. McHUGH (h) Relationship Brother

(i) Address of Next of Kin Same

2. Age last birthday 22 Date of birth 28-1-1898

3. Enlistment, or Appointment (if an Officer) (a) Place Omemee, Ont. (b) Date 6-3-16

4. Personal description:

(a) Height 5' 6½" (b) Weight 120 lbs. (stripped) (c) Complexion Clear

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

Amputation left thigh.

5. Former trade or occupation Farmer

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	4

	Periods From	Periods To
Canada	6/3/16	21/7/16
England	21/7/16	15/3/17
France or other theatres of War	15/3/17	12/12/17
England	12/12/17	20/9/18
Canada	20/9/18	10/3/20

7. Original disease, or injury

G.S.W. Both legs, right forearm and Head.

(a) Date of origin 16/7/17 (b) Place of origin France

(c) Cause G.S.W.

M. F. B. 227.

300M.—8-18.
1772-39-117.

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. Amputation left thigh.
2. Partial loss of function rt. forearm and hand.
3. Partial loss of function rt. thigh, knee & foot.
4. Partial loss of function left eye.

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. Amputation left thigh - Left thigh amputated 4" from perineum. Well healed, transverse scar; 5" transverse scar 4" above end of stump on post. aspect. Extension of stump limited to perpendicular. Atrophy of Glutens Maximus and consequent prominence of tuber Ischii has made the making of a wearable artificial leg very difficult, and many unsuccessful attempts have been made. Final result is not too bad and is wearing the leg daily. Objective: Leg is pretty painful to wear on account of tender scars but can wear it an hour every day and it is getting gradually more comfortable.
2. G.S.W. Right Hand & Forearm - Multiple healed wounds right elbow, forearm and right wrist. Wrist - Passively the wrist cannot be extended past the horizontal and flexed only 15°. Voluntary attempts to flex the carpus result in radial flexion only. Thumb - Well united fracture proximal phalanx and injury of metacarpo-phalangeal joint resulting in limitation of movement A.G.F. 5° Thumb to base of ring finger. Index - Partial ankylosis of meta-phal. jt. remaining joints, active flexion 45° each. Middle - False joint in metacarpal allowing 45° active flexion of finger. Full active flexion of remaining joints. Ring - Prox. Phalanx was fractured but now well united. Adjacent phalanx can only be extended 135°. Minimus - Ankylosis of prox. inter. ph. joint in 45° flexion. Musculo spiral supply is intact. Deformity is due to movement of extensor tendons in the scar at wrist. This is a badly shattered hand and of not much use. Hard to use a cane in getting around on artificial leg. Can write very slightly.
3. G.S.W. Right Thigh, Knee & Foot - Multiple wds over right thigh, knee & leg. All healed. Full movement rt. hip. Greatest angle of Flexion of knee 120°. Full extension, in fact, slight hyperextension. At ankle jt. Plantar flexion of foot 140°; passive dorsiflexion 80°. Has a foot drop with returning power. Active dorsiflexion, slight and variable but improving. Act. inversion and eversion of foot is about 50% normal. Brace for foot drop has been discarded. Wears a special orthopaedic shoe which supports the arch.

(*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*).)

Wounded G.S.W. Multiple 16/7/17 at Loos. Fracture of skull, right hand, left leg, right leg etc. Left thigh amputated at No.7 General, St.Omer, 29/9/17. Reamputated at Abbotts Riplin, V.A.D., 15/4/18. No subsequent reamputation. Resection of nerve ending in scar at D.O.H., 14/7/19.

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*).)

Nil

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

See Sec. 9(a)

11.—(*a*) Did the disabling condition have its origin before enlistment? No

(*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.)

Not Applicable

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1, 2, 3, 4 - 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, 4 - Permanent.

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

Hospitalization.....(France 16/7/17 to 12/12/17
(England 12/12/17 to 20/9/18
(Canada 20/9/18 to 10/3/20

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

No

16. Can the former trade or occupation be resumed? No
(If not, briefly state why)

17. Recommendations

Discharge medically unfit for service.

H. W. Brown 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 F. McHugh, Pte. 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

F. McHugh Pte.
Signature of invalid examined. Rank.

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.

We Concur

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.)

We recommend that he be discharged "Having been found medically unfit for service."

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.

President.

PLACE Dominion Orthopaedic Hospital, Toronto.

DATE March 12th, 1920.

Members

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.....

DATE.....

Members

APPROVED BY

Assistant Director of Medical Services.

DATE 16. 3. 20

APPROVED BY

Director-General of Medical Services.

DATE.....

JRL.

ONTARIO MILITARY HOSPITAL

NOTICE OF TRANSFER OF PATIENTS TO DIFFERENT BED OR WARD

All but last Bed Column to be filled in and sent to the A.& D.Office before transfer is made. No transfer to be made after 10 a.m.

Number	Rank	Name	Regiment	Ward Trans from	Bed from	Ward Trans to	Bed to	Remarks
4746	Pte	C. Jones	Dyck F.D.	8	13	8	51	
2199	Pte	Nunns	1a. 9. R	8	51	8	13	

Date Apr 25 17. D.N. Kennedy M.O.

724038 Pte.
McHugh W.

Ontario Military Hospital
Orpington, Kent.
June 20th 1918

SPECIAL EYE REPORT.

R.V. 6/12 less 6/6 with X 25 D.S.
L.V. 6/18 = 6/18 X with 50 D.S.

Hears ordinary voice at 18 feet in each ear.

(Sgd) J.G.Sutherland
Capt. CAMC.

Disposal advised- A as to eyes & ears

Section 9(a) Continued.

Subjective:- Can bear weight on this leg off andon with periods of resting, all day, uses crutches. No pain.

	Volunt.	Farad.	Galv.	J.C.
Peroneals	+	nil	+	+0.25 m.f.
Ant. Tib. (except lt.ball long.	+	nil	+	+0.25 m.f.
Calf	+	+	+	

Recovering injury to External Popliteal. Sensation normal.

4. Left Eye - Depressed healed scar of entrance of bullet in left parietal region 2" behind angle of left eye. X-Ray shows considerable loss of bone at this point. Orbit is noticeably retracted in its socket. The eye ball is intact. There is loss of sensation over left side of upper lip. Specialist's report 18/6/19 - Diagnosis - Hyp. astigmatism with subacute conjunctivitis. Duration - 2 years. Disability - 10% due to service.

4.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 5th Can. Batt. Military Hospital C.A.M.H.

No. 42 4038 Rank and Name Pte H. Hough Age 20 Service

Disease Lt Arm Bullet Wt Date of admission 24/5/18 Date of discharge Result

Dates of Observation: May 27, 28, 29, 30; July 1, 2, 3

Days of Disease

Temperature Fahrenheit: 107°, 106°, 105°, 104°, 103°, 102°, 101°, 100°, 99°, 98°, 97°

Time A.M.P.M.

Pulse per Minute: 88, 90, 92, 96, 84, 86, 80, 84, 78

Respirations per Minute

Motions per 24 hours

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps__________ Military Hospital__________

No.__________ Rank and Name__________ Age__________ Service__________

Disease__________ Date of admission__________ Date of discharge__________ Result__________

Dates of Observation																															
Days of Disease																															
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107° ·8 ·6 ·4 ·2																															
106° ·8 ·6 ·4 ·2																															
105° ·8 ·6 ·4 ·2																															
104° ·8 ·6 ·4 ·2																															
103° ·8 ·6 ·4 ·2																															
102° ·8 ·6 ·4 ·2																															
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99° ·8 ·6 ·4 ·2																															
98° ·8 ·6 ·4 ·2																															
97° ·8 ·6 ·4 ·2																															
·8 ·6																															
Pulse per Minute																															
Respirations per Minute																															
Motions per 24 hours																															

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature__________ In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

4

Army Form B. 181

Corps 5th Can Batt. Military Hospital

No. 424038 Rank and Name Pte. H. McHugh Age 20 Service

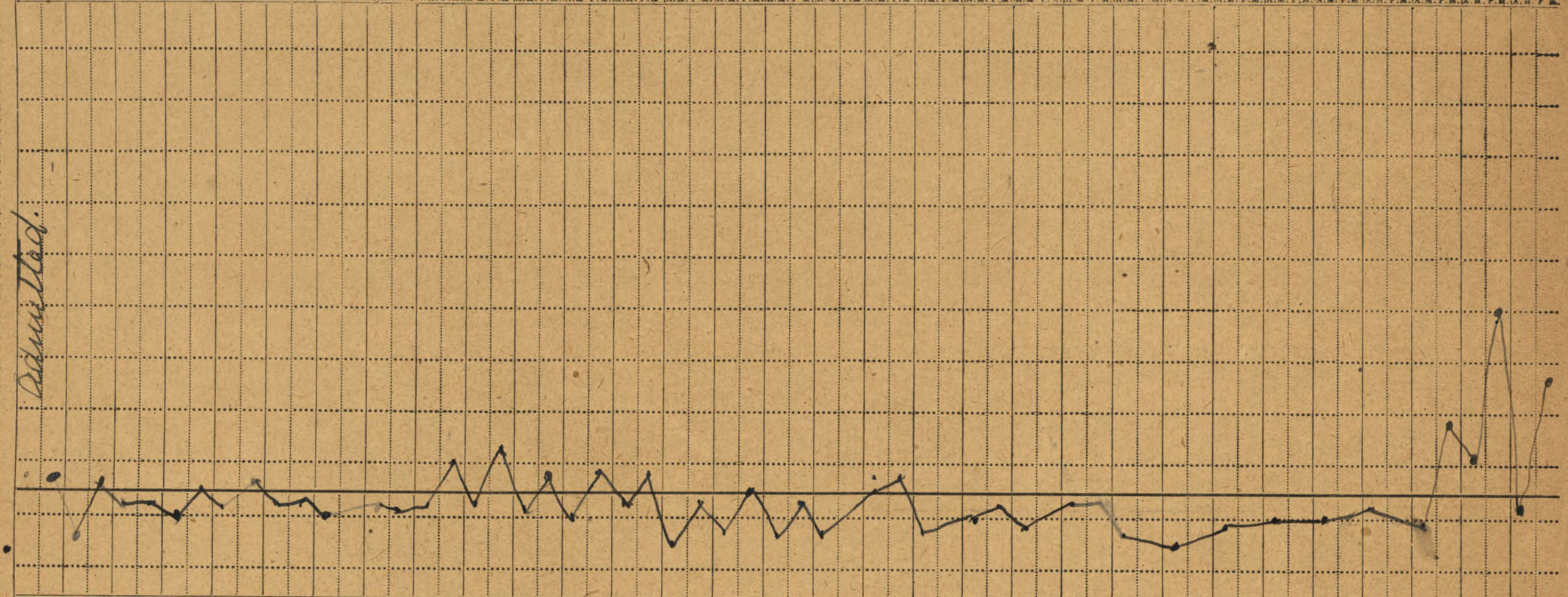
Disease G.S.W. Both legs Date of admission May 24/15 Date of discharge Result

May 27 leg amp

Dates of Observation: 24, 28, 29, 30, 31, June 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26

Days of Disease

Temperature Fahrenheit — Time A.M. P.M.



Pulse per Minute

Respirations per Minute

Motions per 24 hours

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature In charge of case.

724038

MEDICAL HISTORY SHEET

ORIGINAL

ORIGINAL

Surname McHugh Christian Name Frances

Examined on 6 day of Mar 1916 at Owenne

Birthplace City or Town London County England

Apparent age 18

Trade or occupation farmer

Height 5 Feet 3½ Inches.

Weight 120 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 35 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks Arm Right. none Left. Four. Number 0 Four.

When Vaccinated last — 1914 June 26th 1916

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection slight umbilical protrusion

Approved by J McCulloch Capt. Medical Officer Rank M.O. 109th Overseas Battalion, C. E. F.

Date	Fit or Unfit	Examined for Re-engagement,
		15 DEC 1917
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
26.6.16	Good.	J McCulloch M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
25/4/16	Good	J McCulloch M.O.
25/5/16	Good	J McCulloch M.O.
10/5/16	"	J McCulloch M.O.
14/5 25/9/16	"	H Lloyd

Enlisted on 6 day of Mar 1916 at Owenne

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Bn C.E.F.	724038		6-3-16
Transferred to	124th OVERSEAS BATTALION C.E.F. 124th Bn C.E.F. 5TH			27.1.17 MAY 23 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT. Dominion Military Orthopaedic Hospital Charlotte St., Toronto DO..... MAR 12 1920	19 JUN 1918	G.S. w Head, R. Leg R. Arm. R. Leg 1. Amp. left thigh 2. Partial amputation R. arm 3. " " " R. leg 4. " " " left leg	Invalid to Canada H McMillan Capt. RAMC We recommend that he be discharge having been found medically unfi for service. W.E. Morrison Jos. Rogers Capt.

CANADIAN

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.

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
1st EASTERN GENERAL HOSPITAL CAMBRIDGE		12	12	17	27	5	18	S.W. legs	166	Invalided to Can Military Hospl Orpington	W. F. Vanvelle. Lt. Col. R.A.M.C. (T.) Registrar, for Col. Cdg. 1st Eastern General Hospital, Cambridge.
		27	5	18				G.S.W. head abdomen and legs.		Left leg amputation in upper third of thigh. Slight discharge doing satisfactorily. Rt leg. Two wounds immediately over and to inner border of Patella a third about two inches below. Flexion of knee limited to 18 degrees. Muscles emaciated so that he has not proper use of leg. Left forearm and hand. Two wounds on upper third and one in middle third no disability. Wound for three inches below ulna. Wounds on lower 1/3 extending across forearm on to the metacarpals causing very limited movement and partial ankylosis. Approximate phalanx of 4th finger fractured in poor position. Wound (bullet) passing from temporal portion of left parietal bone exit to right of median line below mandible. Slight defect to left eye and hearing.	Honourably Dispd

Surname M Gough Christian Name M Gough

Forms
I. 1237
12

Synopsis

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	724038	Pte	McHugh	F

Unit.	Age.	Service.
5th Bn	20	2 5/12

Station and Date.

No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

July 5. 1918

Disease GSW both legs amp. Left

PATIENT STATES: Previous occupation

ENLISTED AT Lindsay. Ont.

ARRIVED IN ENGLAND July 31. 1916

ARRIVED IN FRANCE March. 15. 1917

WOUNDED AT Loos. 16. 7. 17. by fragments of shrapnel, and a bullet wound in face shrapnel wounds of L. thigh middle third, Rt knee R. fore arm multiple wounds from elbow to wrist.

Hospitals

16.7.17. No 2 Can Field ambulance

16.7.17. No 7. C.C.S. 9 days

25.7.17. No 7. General Hospital

12.12.17. 1st Cast Gen Cambridge 166 days

25.5.18. 16th Can Gen Orpington

5.7.18. No 5 Can Gen Liverpool

OPERATIONS. In C.C.S. bullet removed from chin arm cleaned and drained and left leg cleaned F.B. removed & Thomas splint applied

Sept. 29.1917. L thigh amputated middle third

Apr 15. 1918. Re amputation.

July 5. 1918. ON ADMISSION Completely healed stump upper third L. thigh, transverse scar. good stump. Scar on face 2" external to outer end of left eyebrow and another below chin, path of bullet. It missed the eye and passed through tongue. Sight is fairly good, but says it is somewhat dim

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

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.

(over)

Station and Date.	
	Complains of deafness. Scar on R. knee but has limited movement. Drop foot R. Wound R. wrist. Has some flexion R thumb sensation good but otherwise very little use of any part of hand or fingers
	Extracts from previous histories
	X-ray Rt knee. (no date.)
	No damage to bone.
	F.B. near head of Fibula
	Femur C. F. root near middle third
	F.B. posterior.
	Wrist Two large pieces of shell
	C/pound fracture lower end radius
	Fracture 1st and 2nd metacarpals
	and 3rd phalanx of 4th finger
	F.B. present.
27.7.17	Col. given. Incision of post. aspect of thigh F.B. removed and pieces of bone. Hodgin Splint applied
2.8.17	Incision anterior & Post aspect of Rt. forarm two pieces of shell removed
15.8.17	General condition improving, very nervous still
29.9.17	Condition not improving satisfactory amputation through of left thigh
12.12.17	Transferred 1st Gen. ~~Hospital~~ Sandridge
15.4.18	Re Amputation of left thigh because fleshy part contracted and end of femur projected through skin

D McLellan
Maj Camc

Forms
I. 1237
12

Bed 4

Army Form I. 1237.

6 CAN GEN MH LIVERPOOL

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank	Surname.	Christian Name.
	724038	Pte	McHugh	J.

Year	Unit	Age	Service.
	5 Can Batt.	20.	3y 12.

Station and Date.

Disease S.I.O. Both legs. (Bract. thigh). Head hand arm & shoulder.

29/5/18 Enlisted 6/3/16. proceeded to France 15/3/17. reported wounded at Loos. 16/7/17. 1st dressing 16/7/17 at No. 2 Can. Fld Amb. transferred 16/7/17 to No. 7 C.C.S. transferred 18/7/17. to No. 7 General Hospital. Temp. 102 Pulse 108. Wound ant. aspect of thigh very foul. Wound of knee. fairly clean. Synovitis of knee. arch very dirty - also mouth. X Ray Rt knee. no damage to bone. F. B. rear. head of fibula. Femur. Comp'd fracture middle 1/3. F. B. Posterior. Wrist two large pieces of shell - Comp'd fracture lower end radius. Fracture of 1st 2nd & 3rd metacarpals and 3rd phalanx of 4th finger. F.B present.

27/7/17 - C.C.S. given. Incision of Post. aspect of thigh F B removed and Pieces of bone. Modified Splint applied

8/8/17 Incision anterior & Post. aspect of right forarm. two Pieces of shell removed

15/8/17 General Condition improving, very nervous still.

29/9/17 - Condition not improving retrograding amputation through fracture of left thigh.

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

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.

12/12/17 transferred 1st Eastern General Hospital Cambridge.
15/4/18 Re amputation of left thigh, because fleshy parts contracted and bone end of femur protruded through skin.
transferred to Oms. 27/8/18.

Past illness. none to record.

Present Disability - Left thigh amputated leaving about 1/3. Slight discharge but progressing satisfactorily.
Rt. leg, Three wounds healed
1st on the External and anterior surface of middle third of rt. thigh apparently no disability
Two wounds one immediately below the right Patella and other immediately to internal edge of Patella a third wound about two inches below the patella on anterior surface of tibia
Limited movement of knee joint
Flexion about 18 degrees.
Muscles of leg emaciated so that has not proper use of them.
Hand and forearm.
Forearm. On upper third of Rt. forearm two wounds on ulnar surface healed no disability. Middle third one wound no disability.

NAME McHugh Francis

REGT'L No. 724038

H. Q. FILE No. 649.

RANK AND CORPS Pte. 5th Bn. formerly 109th Bde.

FOLLOWS No.

FOLLOWS

CABLE NO.	CABLE DATE	U.S.O. NATURE OF CASUALTY
M5739 2.S	18-7-17	Dangerously wounded 7 Base Sta. July 16th 1917.
M5810 2-3.	30-7-17	Dangerously ill 7th General Hosp. St Omer July 27th 1917 GSW's multiple
M5912 4-3	19-8-17	Still dang. ill No 7 Gen. Hosp. St. Omer Aug. 12th 1917
14-6. M6031	9-9-17	Still dang ill 7th Gen Hosp St Omer Sept 2nd 1917.
5-8 M6101.	23-9-17	Still dang. ill 7 Gen. Hosp St Omer Sept 16th 1917

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 17;2-39-8s3.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 701	No 7 Casualty Clear. Station	16-7-17	Dang. wounded
a 709	No 7 Gen. St Omer Dang. ill	27-7-17	G.S.W. multiple
a 725	No 7 Gen. St Omer Still Ser. ill	12-8-17	G.S.W. multiple
a-6-	7 Gen Hosp. St Omer Still Dang ill.	2-9-17	G.S.W. Multiple
a 18-1	7. Gen. St. Omer	16-9-17	Still Dang. ill
a 31-(1	No 7 Gen. St Omer.	30-9-17	G.S.W. multiple Still dang. ill
a 42.	Still " " " ill	14-10-17	G.S.W. multiple
a 43	No 7 Gen. St Omer	14-10-17	" " Still dang. ill
a 55-(1	No 7 Gen. St Omer Still dang. ill	28-10-17	G.S.W. mult.
a 73-1	No 7 Gen. St Omer	18-11-17	Still Dang ill. G.S.W. multiple

Cancelled

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.

STATION D.O.H. TORONTO DATE 10-3-20

1. 1 (a) Unit D.D.#2 (b) Regimental No. 724038 (c) Rank Private

(d) Surname Mc H U G H (e) Christian name FRANK

(f) Home address Charleroi P.O., U.S.A.

(g) Next of Kin J.T. McHUGH (h) Relationship Brother

(i) Address of Next of Kin Same

2. Age last birthday 22 Date of birth 28-1-1898

3. Enlistment, or Appointment (if an Officer) (a) Place Omemee, Ont. (b) Date 6-3-16

4. Personal description:

(a) Height 5' 6½" (b) Weight 120 lbs. (stripped) (c) Complexion Clear

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

Amputation left thigh.

5. Former trade or occupation Farmer

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	4

	Periods	
	From	To
Canada	6/3/16	21/7/16
England	21/7/16	15/3/17
France or other theatres of War	15/3/17	12/12/17
England	12/12/17	20/9/18
Canada	20/9/18	10/3/20

7. Original disease, or injury

G.S.W. Both legs, right forearm and Head.

(a) Date of origin 16/7/17 (b) Place of origin France

(c) Cause G.S.W.

M. F. B. 227.

300M.—8-18.
1772-39-117.

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. Amputation left thigh.
2. Partial loss of function rt. forearm and hand.
3. Partial loss of function rt. thigh, knee & foot.
4. Partial loss of function left eye.

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. Amputation left thigh - Left thigh amputated 4" from perineum. Well healed, transverse scar; 5" transverse scar 4" above end of stump on post. aspect. Extension of stump limited to perpendicular. Atrophy of Glutens Maximus and consequent prominence of tuber Ischii has made the making of a wearable artificial leg very difficult, and many unsuccessful attempts have been made. Final result is not too bad and is wearing the leg daily. Objective: Leg is pretty painful to wear on account of tender scars but can wear it an hour every day and it is getting gradually more comfortable.
2. G.S.W. Right Hand & Forearm - Multiple healed wounds right elbow, forearm and right wrist. Wrist - Passively the wrist cannot be extended past the horizontal and flexed only 15°. Voluntary attempts to flex the carpus result in radial flexion only. Thumb - Well united fracture proximal phalanx and injury of metacarpo-phalangeal joint resulting in limitation of movement A.G.F. 5° Thumb to base of ring finger. Index - Partial ankylosis of meta-phal.jt. remaining joints, active flexion 45° each. Middle - False joint in metacarpal all being 45° active flexion of finger. Full active flexion of remaining joints. Ring - Prox. Phalanx was fractured but now well united. Adjacent phalanx can only be extended 135°. Minimus - Ankylosis of prox. inter.ph. joint in 45° flexion. Musculo spiral supply is intact. Deformity is due to movement of extensor tendons in the scar at wrist. This is a badly shattered hand and of not much use. Hard to use a cane in getting around on artificial leg. Can write very slightly.
3. G.S.W. Right Thigh, Knee & Foot - Multiple wds over right thigh, knee & leg. All healed. Full movement rt. hip. Greatest angle of Flexion of knee 120°. Full extension, in fact, slight hyperextension. At ankle it-Plantar flexion of foot 140°; passive dorsiflexion 80°. Has a foot drop with returning power. Active dorsiflexion, slight and variable but improving. Act. inversion and eversion of foot is about 50% normal. Brace for foot drop has been discarded. Wears a special orthopaedic shoe which supports the arch.

(*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*).)

Wounded G.S.W. Multiple 16/7/17 at Loos, Fracture of skull, right hand, left leg, right leg etc. Left thigh amputated at No.7 General, St.Omer, 29/9/17. Reamputated at Abbotts Riplin, V.A.D., 15/4/18. No subsequent reamputation. Resection of nerve ending in scar at D.O.H., 14/7/19.

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*).)

Nil

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

See Sec. 9(a)

11.—(*a*) Did the disabling condition have its origin before enlistment? No

(*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.)

Not Applicable

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? 1, 2, 3, 4 - 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, 4 - Permanent.

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

(France 16/7/17 to 12/12/17

Hospitalization.....(England 12/12/17 to 20/9/18

(Canada 20/9/18 to 10/3/20

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

No

16. Can the former trade or occupation be resumed? No
(If not, briefly state why)

17. Recommendations

Discharge medically unfit for service.

H. W. Brown 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 F. McHugh, Pte. 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

F. McHugh Rank. Pte

Signature of invalid examined.

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.

We Concur

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.)

We recommend that he be discharged "Having been found medically unfit for service."

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.

President.

PLACE Dominion Orthopaedic Hospital, Toronto.

DATE March 12th, 1920.

Members

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.....

DATE.....

Members

APPROVED BY

Assistant Director of Medical Services.

DATE 16. 3. 20.

APPROVED BY

Director-General of Medical Services.

DATE.....

JRL.

R—122

A.C. Rank Pte Name McHUGH, Frank. Reg'l No. 724038

Unit 109th. Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Omemee, March. 6th. 1916. Place of Birth London, Eng.,

Name and Address, Next-of-Kin Thos McHugh.

Charleroi, PA. U.S.A. Relationship Brother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 7076
File R.L.
Category Hlc

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	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.
C		Arrived in England per H.M.T. 2810 31-7-16			
8.12.16	OC 109th Bn	SOS on tfer to 124th Bn	Witley	8.12.16	PII D.O. 343
9.12.16	OC 124th	TOS " " fr 109th		"	" 265
2-2-17	"	Tfd to 128th Bn.		26-1-17	" 33
5-2-17	O.C. 128th	T.O.S from 124th	Witley	28-1-17	PtII D.O. 36
23-5-17	do	S.O.S on trans to 5th Bn Ch Has	"	23-5-17	PII 143 & 5th Bn PII 68 dy 7-6-17
18-7-17	5th Bn	Adm No 7 Base Bearing Station (Dangerously Wounded)	Field	16-7-17	62a 701
31-7-17	"	Trans No 7 General Hospital (Dangerously Ill)	St Omer	27-7-17	62a 709
20-8-17	— " —	Still Dangerously Ill. — " —	— " —	12-8-17	62a 725.
8-9-17	Sask Regt	Still Dangerously Ill — " —	— " —	2-9-17	62a 6

724038 McHugh T.

Report. Date.	Report. From whom received.	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.
22.9.17	Sask Regt	No 7 Gen Hosp. (Still ~~Dangerously~~ Dangerously Ill)	St Omer	16-9-17	B2A18 GSW Mult
8.10.17	"	Still Dangerously ill	"	30-9-17	B2A31 "
20-10-17	✓	Still Dangerously ill	✓	14-10-17	CLA42 ~~CLA43~~ Cancelled CLA45
5-11-17	✓	Still Dangerously ill	✓	28-10-17	CLA55 GSW. MULT
26-11-17	✓	Still Dangerously ill	✓	18-11-17	CLA73 ✓
8-12.17	"	Still dangerously ill	✓	2-12-17	CLA84 ✓
14-12-17	✓	Adm 1st Eastern Gen Hospital	Cambridge	12-12-17	CLB89. SW. Head, Legs, Arm Hand & Shoulder
17-12-17	S.R Depot	T.O.S on posting from 5th Bn	Pk B'Shott	12-12-17	PII292 & 5th Bn PII153d/27-12-17
31-12-17	Sask Regt	Dangerously ill (1st Eastern Gen Hosp	Cambridge	31-12-17	CLB100 SW. Legs Head Arm Hand & Shldr
1 1018	SR	Invalided to Canada		20.9.18	CLB332
4 1018	SRD	S.S. Stu. C.B.7 Canada pt for further Medical treatment	Bshott	20 9 18	D02255

No. 2 DISTRICT DEPOT

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 724038 | RANK Pte | NAME (IN FULL) McHugh, F. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? no. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
	#1	

ORIGINAL UNIT C.E.F. 109 Bn. | IF IN P.F. WHAT UNIT? | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ nil. | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 19-3-20 | REASON M.U. | AUTHORITY D.O. 77 | IF ENTITLED TO POST DISCHARGE PAY 183 dys

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	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																																					Dec P.L.
Jan 1 31st	31	1.10	34	10					34	10	46146				50018		15				19	10									34	10					
Feb 1	28	1.10	30	80					30	80	52061						15														15	-			15	80	
Mar	31	1.10	34	10			15	80	49	90	130302				136130		15	80			34	10									49	90					
Apr	30	1.10	33						33		137024				138837		15				18	-									33						
May	31	1.10	34	10					34	10					141861						34	10									34	10					
June	30	1.10	33	-					33	-					73-246 144395						33	-									33	-					
July	31	1.10	34	10					34	10					98287 147127						34	10									34	10					
Aug	31	1.10	34	10	24	80			58	90	107 8/8 147903				122 149858		35	-			23	90									58	90					Subs. 9-8 to 8-9 100 224
Sept	30	1.10	33						33						148 152246						33	-									33	-					WR7
Oct	31	1.10	34	10					34	10					154178 172 25.10						34	10									34	10					WR7
Nov.	30	1.10	33	-					33	-					197 173513						33	-									33	-					WR7
Dec	31	1.10	34	10					34	10					219-19 178 132						34	10									34	10					
Jan	31	1.10	34	10	12	00			46	10					94166 251-28.1						46	10									46	10					Subs. 20/12 to 31/1. D.O. 356.
Feb	29	1.10	31	90					31	90	324519 274-24.2						31	90													31	90					
Mar	19	1.10	20	90	35	-			55	90	183-294 326688						55	90													55	90					
			188	10	47	-			235	10							87	80			147	30									235	10					

CAPT.
PAYMASTER, No. 2 DISTRICT DEPOT

60m.-11-18 L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

No. 2 DISTRICT DEPOT

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 724038 RANK Pte NAME (IN FULL) McHugh. Frank.

(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? no | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
	# 2	

ORIGINAL UNIT C.E.F. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 6.3.19 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ~~631 Washington Ave Charleroi, Pa. U.S.A.~~ | D.O.H. Toronto

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Toronto | DATE 19-3-20 | REASON M.U. | AUTHORITY D.O. 77 | IF ENTITLED TO POST DISCHARGE PAY 183 days

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																																					
					W.S.G.	S.A.																					W.S.G.	S.A.									
Dec	184	1.10			420				420								AR.	Date	Cheque No.								140		140		AMOUNT DUE SOLDIER DEPENDENT 280					
																	183	2/1/19	155705								140		210		210					
																	200	22-11/19	174519								70		280		140					
																	229	2-1/20	180242								70		350		70					
																	257	4/2	20	95715							70		420		Nil					
																	280	2/3	20	325805																	
									420																		420		420								

Cook 80
BC
Cook
DC

H. C. Roome Capt.
PAYMASTER, No. 2 DISTRICT DEPOT

200M-3-19.—L. L. 58728-H. & D. 9985.
M. F. W. 2596.
1772-39-1398.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.....

No.

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid .....

No.

20. Have you been issued with a War Service Badge? If so, what class? Yes Class A.

21. Have you, during the present war, served in the Imperial Forces? No

22. Are you entitled to received, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled .....

23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ..... No.

(b) If so, was such reversion in consequence of misconduct or inefficiency?.....

24. Are you now serving in the C.E.F. ..... If not, give:—(a) Date of discharge .....(b) Reason for discharge .....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... No.

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit .....

Yes. 5th Bn in France May 1917 to ~~Dec~~ July 16/1917

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? .....

(b) If so, are you in receipt of full pay and allowances from that Department? .....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: F. McHugh

Place of Residence: 631 Washington Ave Charleroi Pa USA.

Declared before me at:

This 16th day of Oct. 19.19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths.

R. H. Shedd
Major Regimental Paymaster

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
	Nil			

183 days

Certified Correct.

District Paymaster.

CERTIFIED PARTICULARS AGREE WITH DOCUMENTS.
Captain & Adjutant,
No. 2 District Depot.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names Frank 2. Surname McHugh

3. Rank Pte 4. Original Unit 109th Bn 5. Reg. No. 724038

6. Address, in full, to which future payments of gratuity are to be forwarded 631 Washington Ave Charleroi Pa USA

7. Date of enlistment in the C.E.F. Mch 6/1916

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge No

9. Relationship of such dependent No

10. Present address, in full, of such dependent No

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
109th Bn to Eng: July 23rd/1916 to Mch 1917

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No

14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served
3 Years 208 days.

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No.

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

Reserved for M.H.C.

Regt. No. 724038 Rank Pte Surname McHUGH Christian Name FRANK

Unit or Corps—(a) Overseas from United Kingdom 5th Btn. (b) In United Kingdom 109th Btn.

Born at—Town Pittsburg County or Province Pennsylvania Country U.S.A.

Date of Birth—Day 28th Month January Year 1898 Age 20 yrs. 5 months.

Joined at Omeemee Ont. Canada. Date 6/6/16

Former Trade or Occupation Farmer

Permanent marks or peculiarities that will serve for future identification

Scars of Wounds

Height—feet 5 inches 6 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) F. McHugh

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted.*) (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) Amputation - Left Thigh Upper Third.

Disabilities Group (b) Partial Ankylosis Right Knee.

Disabilities Group (c). Loss of function of Right Arm.
Slight defect to Hearing and Sight on Left side.

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	G.S.W. of Left leg.	Loos	16/7/17
(*ii.*) As to Group (*b*) above.	G.S.W. of Right Leg	Loos	16/7/17
(*iii.*) As to Group (*c*) above.	G.S.W. of Right Arm G.S.W. Head	Loos ,,	16/7/17

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service? NO

(*i.*) As to Group (*a*) above? If yes, has Active Service aggravated it?

(*ii.*) As to Group (*b*) above? If yes, has Active Service aggravated it?

(*iii.*) As to Group (*c*) above? If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? Yes

(*ii.*) As to Group (*b*) above? Yes

(*iii.*) As to Group (*c*) above? Yes

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? Yes (*ii.*) While off duty?

(*iii.*) Was a Court of Inquiry held (*iv.*) Where? (*v.*) When?

(*vi.*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*).

He states:- wounded at Loos 16/7/17. Reported to No. 2 Can. Fld.Amb. 16/7/17. Transferred 16/7/17 to No. 7 C.C.S. Transferred 16/7/17 to No. 7 Gen. Hosp. Temp.102, Pulse 108. Wound Ant. aspect Left Thigh very foul. Wound of Rt. knee clean. Synovitis of Knee. Arm very dirty also mouth. X-ray of rt.knee nil. F.B. near head of fibula. Femur, left, compd. fracture middle third. F.B. posterior. Wrist two large pieces of shell. Compd. fracture lower end of radius. Fracture of 1st, 2nd & 3rd metacarpal and 3rd phalanx of 4th finger. F.B. present. Bullet wound entering temporal portion of parietal bone, exit to right of medial line below mandibles. Transferred 12/12/17 1st Eastern Gen. Hosp, Cambridge. 15/4/18 Re-amputation of left thigh because distal and protruding through skin. 27/5/18 transferred to No. 16 Can. Gen. Hosp. Orpington.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Dig. G.U. Circ. Resp. systems normal. Slightly nervous. Left thigh amp. leaving about 1/3. Slight discharge - progressing satisfactory. Right leg - four wounds: 1st antero external surface - no disability. Two wounds, one immediately over and one to inner surface of the patella. The 4th about 2" below. Flexion about 18°. Muscles of leg emaciated so that he has not proper use of leg. Forearm & hand: two wounds on upper third and one on middle third, no disability. Wound for 3" between radius and ulna extending across carpals and metacarpals. Limited movement of wrist and hand; partial ankylosis. Phalanx (approximal) fracture alignment poor, callus formed. Through & through bullet wound entering temporal portion of left parietal bone, exit to right of medial line below mandibles. Defective hearing & sight - left.ear and eye. Prognosis: not fit for further service.

8. OPERATION. (*i.*) Was one performed? YES

(*ii.*) If so, state what. Incisions 27/7/17 & 6/8/17. Amputations 29/9/17 & 15/4/18.

(*iii.*) Was one advised and declined? NO

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? Yes

(*ii.*) If so, describe. One biscupid on left upper jaw and two molar on right jaw as result of bullet wound 16/7/17.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty?

(*b*) Fit for base duty?

(*c*) Invalid to Canada? YES

(*d*) Discharge from the Service as permanently unfit?

Date of Report 8/6/18 191 Signed W.H.Dudley Capt. CAMC.

Officer in medical charge of case.

Station ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.

I have satisfied myself of the general accuracy of the above Report, and concur therein ~~XXXX~~

(Sgd) D.W.McPherson Col. CAMC. {Officer i/c ~~XXXX~~ Hospital ~~XXXXX~~} Strike out one of these.

ONTARIO MILITARY HOSPITAL ORPINGTON, KENT. 19 JUN 1918

Dated at ORPINGTON, KENT. Station, on 191

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)?
If not, indicate it.

Yes.

12. Is the cause of the disability fully indicated in Part I. (2)?
If not, indicate it.

Yes.

13. Was the disability caused or aggravated by—
(a) Negligence of the Soldier — Caused? No. Aggravated? No.
(b) Misconduct of the Soldier — Caused? No. Aggravated? No.

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

Not app.

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

Not app.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent?

Not app.

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

Not app.

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? No.
(*b*) Fit for base duty? No.
(*c*) Invalid to Canada? Yes.
(*d*) Discharge from service as permanently unfit? No.

Classification for the Military Hospitals Commission.

G.

Date of Board 19 JUN 1918

ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.

Station

President.

Signatures of the Board.
A.H.maclaren, Capt. CAMC.
D.W.Davis, Capt. CAMC.
H.W.Martin, Capt. CAMC.

Approved [signature] Major, O.A.M.C.
A.D.M.S.

A.D.M.S. CANADIANS, LONDON AREA, LONDON.

Dated at for A.D.M.S., Canadians, London Area. Station 22 JUN 1918 191

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

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