

Reinforcement: 17th.

HISTORY SHEET

Unit.	Rank.	Surname.	Christian Name.	No.
<u>3rd Coy</u> <u>3rd Bn. (C) B.R.</u>	<u>Pte.</u> <u>Rfm. / Corp.</u>	<u>Farrelly</u>	<u>Patrick</u>	<u>26588</u>

Occupation: <u>Farmer.</u>	Religion: <u>Methodist</u>	Last New Zealand address: <u>Paeroa Thames</u>
Last employer: <u>James Farrelly</u>	<u>R. 2. 91</u>	<u>Auckland</u>

Name, relationship, and address of next-of-kin (if not resident in New Zealand, insert also name and address of nearest relative in New Zealand):
James Farrelly (father)
Mill Road
Paeroa
Thames

Service	No. <u>26588</u> Rank: <u>1/4th</u>	Officer Entry.	Home Service.
	Name: <u>Patrick Farrelly</u>		Years. Days.
	Address: <u>Paeroa</u>		<u>196</u>
			Foreign Service: <u>1 261</u>
		Total Service: <u>2 92</u>	

Periods of Service.	Theatres of Operation.
In New Zealand: <u>1</u> years <u>196</u> days.	Australasian
Overseas ... <u>1</u> years <u>261</u> days.	Egyptian
Total service ... <u>2</u> years <u>457</u> days.	Egyptian E.F.
Date commenced duty: <u>30.5.16</u>	Balkan
Date finally discharged: <u>29.8.18</u>	Western } <u>917-918</u>
	European }
	Asiatic

Decorations: _____

The foregoing particulars are correct.
 BRITISH WAR MEDAL
 VICTORY MEDAL ... Signature: _____

MEDAL ACTION COMPLETE
31 OCT 1923

N.B. Do not omit to advise this office of any future change of address.

1,000 pads/8/20—12058

Total service ... <u>2</u> years <u>457</u> days.	Balkan
Date commenced duty: <u>30.5.16</u>	Western } <u>917-918</u>
Date finally discharged: <u>29.8.18</u>	European }
	Asiatic

- Killed in action ...
- Died of wounds* / sickness*
- Missing ...
- Prisoner ...
- Injuries in or by the Service ...

928
29.11.20

Decorations: _____

The foregoing particulars are correct.
 BRITISH WAR MEDAL
 VICTORY MEDAL ... Signature: P. Farrelly

N.B. Do not omit to advise this office of any future change of address.

ON HISTORY SHEET

9.11.20

Discharge ...	Final: <u>29 Aug 1918</u> (Date.)
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Pension ...

No. 26588

Zealand address:
Thames
Ruckland

Officer Entry.	Home Service.	
	Years.	Days.
		196
	Foreign Service:	
	1	261
	Total Service:	
	2	92

Service ...

13.	30.5.18	25-9-16	118	
FOREIGN	25, 9, 16	12.6.18	1	261
Ret. Mahens	12.6.18			
H. 2.	13.6.18	29.8.18	78	
			<u>2</u>	<u>92</u>

Wounds ...

CABLE No.	Date.	Where Soldier located.	Message and Remarks.
			5930
5940	16.4.18	"	wnd d/fu a/18 april 5 th 1918 checked for near

No. 26588 Rank: Lt/Col
Name: Patrick Farrell
Address: Paeroa

Sick ...

Periods of Service.	Theatres of Operation.
In New Zealand: ... years 196 days.	Australasian
Overseas ... 1 years 861 days.	Egyptian
Total service ... 2 years 92 days.	Egyptian E.F.
Date commenced duty: 30.5.16	Balkan
Date finally discharged: 29.8.18	Western European } 1914-1918
	Asiatic

Killed in action ...

Died of wounds*
sickness*

Missing ...

Prisoner ...

Injuries in or by the Service ...

Discharge ...

Decorations:

The foregoing particulars are correct.

BRITISH WAR MEDAL

VICTORY MEDAL

Signature: P. Farrell

N.B. Do not omit to advise this office of any future change of address.

Final: 29 Aug 1918 (Date.)

Pension ...

atched to soldier 22 OCT 1920
 Headquarters Form No. 3A

No.
 26588

Zealand address:
 Thames
 Auckland

Accy
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 Na
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 Ze
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 of
 in

22 OCT 1920 1921
 Officer in Charge
 J. W. HUTCHEN

Dear Sir,—
 As it is hoped that it may shortly be possible to issue the British War Medal and Illuminated Certificate of Service, it is desired to give you an opportunity of agreeing with the information held by this office concerning yourself, and which will be contained on the medal and certificate or other documents yet to be issued, as medals and documents once issued can only be altered at the recipient's expense.

Will you please, therefore, check the particulars on the back hereof and return this form complete to me as early as possible after appending your signature in the space provided at the foot.

Yours faithfully,
 J. W. HUTCHEN

Wellington.

Service ...

Ke
 4.5

Wounds ...

No.
 593
 594

Sick ...

Killed in action ...

Died of wounds*
 sickness*

Missing ...

Prisoner ...

Injuries in or by the
 Service ...

*Desch being no longer physically fit for
 war service on acc of wounds recd in action*

Discharge ...

Provisional : _____
 (Date.)
 Final : 29 Aug 1918
 (Date.)

Intended address : Paeroa

Pension ...

* Strike out words not required.

Casualty Form - Active Service.

Regiment or Corps **3rd Bn 3rd N.Z. (R) Bde** **a' Coy**

Rank **2/Lt** Surname **Farrelly** Christian Name **Patrick**

Religion Age on Enlistment years months

Enlisted (a) **30.5.16** Terms of Service (a) **Duration of War** Service reckons from (a) **30.5.16**

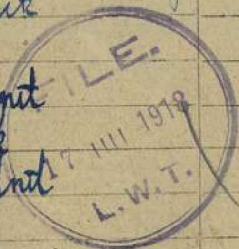
Date of promotion to present rank Date of appointment to lance rank **28.3.18**

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and rate **9 Jul 1918**

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	Wellington	25-9-16	Embark Roll
			Disembarked	Deponhot	21-11-16	Disembark "
21-11-16	o/c NZ Rep Group	Marched in	Shang		21-11-16	Nom. "
8-1-17	do	Left for France.	do		7-1-17	" "
13-1-17	o/c NZ 3rd Bde	Marched in	Staples		9-1-17	2/R 46837
10-2-17	o/c 3rd Bn.	Joined Bn. & posted to a' Coy	In the Field		8-2-17	B213 (7/64)
21-4-17	do	to 16th Svc	do		21-4-17	B213
21-4-17	o/c NZ Field Amb.	Admitted	do		21-4-17	A36 48848
22-6-17	o/c 3rd Bn.	Rejoined Unit	do		9-5-17	14/6664
19-5-17	do	to 16th Svc	do		14-5-17	B213
19-5-17	do	Rejoined Unit	do		18-5-17	B213 (22/226)
22-6-17	do	to 16th Svc	do		21-5-17	14/6664
26-5-17	o/c NZ Field Amb.	Admitted	do		22-5-17	B3649567

Entered Ledger 72



(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. 8695-M(2733 2000in 9/17 (25611) C. P. & S., Ltd., Form B/103 E/1807. P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B-213, Army Form A-36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B-213, Army Form A-36, or other official documents.
Date	From whom received				
23-6-17	o/c 3rd. Bn.	Rejoined Unit	In the Field	29-5-17	B213 (27/265)
28-9-17	do	Detached to Bde. School	do	28-9-17	B213. (41/431)
6-10-17	do	Rejoined Unit	do	5-10-17	B213. (42/437)
13-10-17	do	Detached to Recruit Camp.	do	9-10-17	B213. (42/437)
27-10-17	do	Rejoined Unit	do	20-10-17	B213. (45/469)
6-4-18	do	Prvt Lance Corporal	do	28-3-18	B213. (16/159)
13-4-18	do	Wounded in Action	do	4-4-18	B213.
5-4-18	o/c NO1 NZ Field Amb.	Admitted	do	5-4-18	A36 29717 (26788) ^{slit neck & Rt forearm}
6-4-18	o/c NO56 CEF	Admitted	do	5-4-18	A36 X9858
6-4-18	o/c NO8 Stat Hosp.	Admitted	Weymouth	6-4-18	W3034 X9818
9-4-18	do	Embarked for U.K.	do	9-4-18	W3083 W110
13-4-18	Hqrs NZEF	Adjm. NO1 NZ Gen. Hosp	Brockhurst	9-4-18	S/R W81
9-5-18	do	Classified by Med. Board placed on NZ Roll	U.K.	3-5-18	N/R 17 11 W1026 16984
7-5-18	do	Embarked for NZ. per H.S. Makino.	Bournemouth	3-5-18	^{slit Rt Arm & face - Ulna.} N/R. 17 5 W943 16936.

ENTERED ON HISTORY SHEET
B7 15-7-18

MILITARY HISTORY SHEET.

No. *26588*

Name: *Lavelly Patrick*

H Coy 14 B Co

	Country.	From	To	Years.	Days.	Initials of Officer making Entry.
1. Service record ...	<i>NZ Foreign</i>	<i>20/5/16</i>	<i>24.9.16</i>			<i>[Signature]</i>
2. Certificates ...						
3. Passed classes of instruction [†] <small>† This includes any authorized class of instruction.</small>						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
8. Medals and decorations	Name of Medal.		Clasps.		Date of Grant.	
9. Injuries in or by the Service						
10. Name and address of next-of-kin	<i>(Father) James Lavelly Mill Road Paroo, N.S.W.</i>					
11. Particulars as to Marriage.	(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow. (b.) Place and Date of Marriage. (c.) Name of Officiating Minister or Registrar.					
	(a.)	(b.)	(c.)			
12. Particulars as to Children.	Christian Names.		Date and Place of Birth.		Where registered.	

NOTE.—These entries are to be made from time to time as they occur, and initialed by the officer making the entry.

Intended place of residence on discharge:

New Zealand

File No. WG 1961

RECEIVED
WAR 17
12 JUL 1982
BASE RECORDS
WELLINGTON

DEPARTMENT OF INTERNAL AFFAIRS
NOTIFICATION OF DEATH

Name: FARRELLY (Surname) PATRICK (Christian Names)

Service No. 26588 Highest Rank Attained: lane Corporal

*Service: 1st WW Army.
(State Army, Navy, or Air Force)

Regiment or Corps: NZ R. I. B. Brigade

War Service (Yes or No): yes †Overseas †Home Only †Both

(If overseas since 1948 state area): No

Decorations (if any): N.I.

Place of Death: WHAKATANE Date of Death: 11. 6. 1982

*If known to have served in two or more Services please state.
†Delete as required.

Base Records.

To S/O Manning, Defence H.Q., Wellington.

Please verify and complete the above particulars (where blanks exist) and return urgently to

(STRIKE OUT ADDRESSES WHICH DO NOT APPLY)

~~The Secretary,
Department of Internal Affairs,
Private Bag,
Wellington.~~

~~The District Officer,
Department of Internal Affairs,
P.O. Box 1308,
Christchurch.~~

~~The District Officer,
Department of Internal Affairs,
P.O. Box 2220,
Auckland.~~

~~The District Officer,
Department of Internal Affairs,
P.O. Box 927,
Dunedin.~~

~~The District Officer,
Department of Internal Affairs,
P.O. Box 1146,
Rotorua.~~

Date: 9 JUL 1982

Signature: [Signature]
for Secretary for Internal Affairs.

Checked and returned as requested.

Date: 14/7/82 Signature: [Signature]

**NEW FILE
BEGINS**

REINFORCEMENTS. N.Z. RIFLE BRIGADE, (Form No. 1.)
BATTALION.
NEW ZEALAND EXPEDITIONARY FORCE.

PERSONAL RECORD of *(P/c)*

(Surname)

Farrelly

(Christian name)

Patrick

REGIMENT: *A Coy 17th Rfmb*

GROUP: _____ NUMBER: _____

1st NZEF	Army No
Registration No. <i>26589</i>	
2nd NZEF	
RF-1F	

PREVIOUS PAPERS: _____

SUBSEQUENT PAPERS: _____

DISCHARGED. *29.8.18 m?*

NO LONGER PHYSICALLY FIT FOR WAR SERVICE.
ON ACCOUNT OF WOUNDS
RECEIVED IN ACTION.

✓

NEW ZEALAND EXPEDITIONARY FORCE.

13075
9/8/18
R

SHOULD THIS CERTIFICATE BE LOST OR MISLAIN NO DUPLICATE OF IT CAN BE OBTAINED.

N.B.—(1.) This Certificate is issued without alteration or erasure of any kind.
(2.) Any person finding this Certificate is requested to forward it to Headquarters, Military Forces, Wellington, N.Z.

Certificate of Discharge of No. <u>26588</u> Rank: <u>Lance Corporal</u>	
Name: <u>Patrick Farrelly</u>	
Unit: <u>New Zealand Rifle Brigade</u>	
Born at <u>Wellington, New Zealand</u>	
Attested at <u>Trentham</u>	on the <u>31st May</u> , 19 <u>18</u>
Duty with the Forces commenced on the <u>30th May</u> , 19 <u>18</u>	
He is discharged in consequence of NO LONGER PHYSICALLY FIT FOR WAR SERVICE ON ACCOUNT OF WOUNDS RECEIVED IN ACTION.	
Home service: _____ years <u>196</u> days.	Total service: <u>2</u> years <u>92</u> days.
Active service: <u>1</u> years <u>261</u> days.	
Non-effective periods: _____ (Not included in above total.)	
Place: <u>WELLINGTON.</u>	Signature: <u>JA</u>
Date: <u>29th August</u> , 19 <u>18</u>	For Major-General, Commanding New Zealand Military Forces.

Certificate of Character

on Discharge from the Expeditionary Force.

NOTE.—To qualify for a very good character the soldier must perform not less than two and a half years' full service.

The conduct and character of the soldier named on the front hereof while with the Expeditionary Force have been, according to the records:—

G.
B.R. 148 and 154 despatched with
discharge and ~~medal~~
Date: 26. 8. 18. Initials: JWD

Medals and decorations: { NO MEDAL ISSUED AT DATE OF DISCHARGE.

Commanding Officer.

DESCRIPTION OF THE SOLDIER ON ENLISTMENT.

Age: 25 ³/₁₂ years Height: 5 feet 10 inches
 Complexion: Fair Eyes: Blue
 Hair: Fair Trade or occupation: Farmer
 Marks or scars (whether on face or other parts of body): _____

PROCEEDINGS OF A PROVISIONAL MEDICAL BOARD

Assembled on board the Troopship Maheko at the
Port of Auckland, by order of Commandant, New Zealand Military
Forces, for the purpose of examining and recommending treatment for—

No. 26588 Rank: Lt Col Name: Farrelly Patrick

Unit: _____

J. M. Christie Lt Col President
C. M. Quinn Lt Col Members

1. The Board, having assembled, receive from the medical officer in charge of the above soldier his report on the case, together with previous medical papers, examine and attach same to the proceedings.

2. The Board finds that the soldier is suffering from the following disability:

L. Sw Rt arm & back neck

3. The Board finds that the soldier is still requiring treatment, and recommends he receive treatment—

(a.) As an in-patient of hospital, convalescent home, or sanatorium at _____

(b.) As an out-patient of hospital at Thames - 28 days
whilst residing at Parua
7 days

(c.) Under private arrangements, at his own request, which is in writing attached, whilst residing at _____

4. The Board finds the soldier is no longer requiring treatment, and recommends _____

(Signatures)

J. M. Christie Lt Col President

C. M. Quinn Lt Col Members

Date: _____

Approved. _____

Wellington,

For Surgeon-General,
Director-General Medical Services.

Date: _____

MEDICAL CASE-SHEET.

[5,000/11/16-18162

No. in Admission
and
Discharge
Bo

Regimental No.

Surname:

Christian Name:

Age:

26588

Farrelly, P.

27

Year:

Rank:

Unit:

Service:

2/cpl

N.3. R. B.

Date and
Station:

Disease:

G. S. W. R. Arm 2 Fract. Ulna.

No. 2: HOSPITAL-SHIP No. 1

MAY 3 1918

Awarmanick.

MAHENO

Present Condition: General health good.
Wds healed 3 weeks ago.
Movements good.
No nerve lesion
A small piece of shell
case in back of neck.

F. Reid

Capt N.2.M.C.

MEDICAL TRANSFER CERTIFICATE. (To accompany a Man Transferred from one Hospital to another).

Army Book 172.

Extract from Admission and Discharge Book of..... Hospital at..... Date.....

No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of			DATES.		Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
					Age last birth-day.	Service.	Service in the command.	Admitted into Hospital.	Transferred.			
	N.Z.R.B.	3	26598	LT. FARRELLY. P.	27	24 12	15 12	9/4/18	9 MAY 1919	RC.	G.S.W. Right Arm Fr. Ultra	"Maheno."

Whether the Patient

- (a) Was transferred from an Expeditionary Force.....
- (b) Has already been granted 10 days' furlough.....
- (c) Was admitted whilst on short leave from Overseas.....
- (d) Was admitted from a Home Service Unit.....

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officers.

Wd. healed: Requires active movement of the arm & hand
 of arm: Johnson Major home.

Medical Officer in Charge.

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S. 56

Date of entry 5.4.18.

Eye bullet 2d R

Forearm

Not returned
Eye S
Cap

No. of Hospital

No. 8 Staty. Hospl.

Date of entry

7/4/18

6- APR 1918

Bullet wtd. 7 inch
2 week. + Rt forearm
w/ medicinal
usage

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

Opinion of the Medical Board

Notes.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Minister of Pensions should be in possession of the most reliable information to enable him to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) *The rates of pension vary directly according to whether the disability is, (A) caused or aggravated by service in the present war, (B) due to causes not connected with present war, viz. (1) earlier active service, (2) climatic disease in pre-war service, (3) ordinary military service before the war. It is, therefore, essential when assigning the cause of a disability to differentials between them.*

(iv.) In answering question 21 the Board should be careful to discriminate between a disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

- | | |
|---|--|
| 1. (a.) State whether the disability is clearly attributable to— | |
| (i.) Service during the present war ; | Yes |
| (ii.) Climate ; | No |
| (iii.) Ordinary military service ; | No |
| (iv.) Want of proper care on the man's part, e.g., intemperance, misconduct, &c. ; or | No |
| (v.) Whether it is constitutional or hereditary. | No |
| (b.) If due to one of the first three of these causes, to what specific conditions do the Board attribute it? | G.S.Wd. |
| 22. Has the disability been aggravated by any of the conditions mentioned in Question 21, and if so, which? | See 21 |
| 23. Is the disability permanent? | No |
| 24. If not permanent, how soon do the Board recommend re-examination? | 6 months. |
| 25. What is the degree of disablement at which, in the Board's opinion, he should be assessed for pension purposes at present? | 100% for 3 months. |
| <i>Degrees of disablement should be expressed in the following percentages:— 100, 80, 70, 60, 50, 40, 30, 20, less than 20, or nil.</i> | 50% for 3 mths. |
| 26. If an operation was advised and declined, was the refusal unreasonable? | Not applicable. |
| 27. Do the Board recommend— | |
| (a) Discharge as permanently unfit, or | |
| (b) Change to England? | Change to H.E. unfit active service |
| 28. If discharge is recommended it should be stated whether further medical treatment (including orthopaedic training) is desirable in a— | 12 mths. |
| (a) Sanatorium ; | |
| (b) Hospital ; | |
| (c) Convalescent home ; | |
| (d) Asylum ; or | |
| (e) Other institution either as an in-patient or an out-patient, and if so the period for which recommended. | (b) Yes. Orthopaedic treatment 3 mths |
| 29. With reference to Army Council Instruction No. 144 of 1917, is any surgical appliance recommended? | No |
| 30. Does the man require the constant attendance of another person? | No |

Signatures:—

(Sgd) F.C. Fenwick, Lt. Col. President.

Station No. 1 H.E. Gen Hosp. BROCKENHURST.

" T.D.H. Stout, Maj. R.M.C. Members.

Date 20.4.18. HEADQUARTERS, N.Z.E.F., 9, SOUTHAMPTON ROW, W.C.

" D.S. Fenwick, Capt. R.M.C.

Approved

(Sgd) BERNARD BYERS Lt. Col. ADM.S. Administrative Medical Officer.

Station →* 28 APR. 1918 *

Date A. D. M. S.

This form must only be used in dealing with a Returned Soldier.

The Board will consist of two members. The President should be an officer of the New Zealand Medical Corps, and the member also if possible. The President of the Board has the power to call in the advice of a specialist if it is required.

PROCEEDINGS OF A MEDICAL BOARD

Assembled at Ilam Hospital Ilam on the 1st August 1918 by the order of the Commandant, N.Z. Military Forces, for the purpose of examining and reporting upon the present state of health of—

No. 26588 Rank L/cpl. Name: Patrick Jarrelley
Unit: NZ R.B. Address: Paeona

Major G Lapraik President

ELIGIBLE FOR S.B. O. No.

Capt D B Walsh Members.

1. The Board, having assembled pursuant to order, proceed to examine the above-named soldier, and find that he has been suffering from—

Disability. Can full compensation be paid to him.

(a.) Original disability P.S. W. neck & right arm

(b.) Was the original disability, in the opinion of the Board, due to causes existing prior to enlistment?

(a.) Hereditary no

(b.) Acquired no

(c.) Specific cause gunshot

(d.) Consequent disabilities fracture of right humerus & consequent loss of movement of upper extremity

Progress. Has it fully.

2. Progress

Medical Papers.

Have all reports which have not been submitted.

Negligence.

Answer "Yes" or "No" to each question.

3. Copies of previous Medical Board reports have been submitted:

(a.) Overseas. (b.) New Zealand District. (c.) Army Form B. (D.) Report of medical officer of hospital where soldier has been undergoing treatment.

A. W. 3179
B.R. 39.
B.R. 40.

4. Is it the opinion of the Board that the soldier—

(a.) Is suffering from disease contracted by his own actions? no

(b.) Having previously been passed as fit for sick leave now requires further treatment by reason of his own actions or neglect? no

(c.) Is by neglect or his mode of life in any way impeding his recovery? no

If answer in affirmative, specify cause

Active Service.

Answer "Should be" or "Should not be" or "No" to each question.

5. Is the soldier fit for Active Service? no

6. If not fit, how long is disability likely to be continued? 6 months

(i) Territorial Service? yes

Territorial Service.

Answer "Yes" or "No" to each question.

7. Is the soldier fit for (i) Territorial Service? yes

(ii) Home Service? yes

8. If not fit, how long is disability likely to be continued? yes - light

9. Is the soldier fit for civil employment? Specify if confined to light duties or sedentary work

10. If not fit, how long is disability likely to be continued? yes

11. Was the disability contracted in the service? yes

12. Was it caused by military duty?

13. If disability is not contracted in service nor caused by military duties, was it aggravated by them? yes

14. If replies to 11, 12, and 13 are all in the negative, give reasons for so finding? ...

6 JUL 1918

15. Was it contractual under circumstances over which he had no control? ...

yes

Recommendations must be made under more than one heading in 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.

16. The Board recommends that the soldier receive further treatment—

- (a.) As an in-patient of Hospital at ...
- (b.) As Hospital out-patient at ...
- (c.) In Convalescent Home at ...
- (d.) Under private arrangements at own request at ...

17. The Board recommends that the soldier be granted sick leave for (period not to exceed twenty-eight days) ...

18. The Board recommends that the soldier returns to duty ...

Note—All entries when 24 hr. duty will refer to Admissions Hospital, Brooke Street, Wellington.

19. The Board recommends that the soldier be discharged from the Expeditionary Force.

Note—Twenty-one days leave will be granted by the Defence Department representing the Board if the soldier desires to or to a home, provided the above condition of the soldier's return to service is in certain cases it may be withheld awaiting instructions from local Board.

20. The Board further recommends that subsequent to his discharge the soldier receive further treatment under the care of the Public Health Department—

- (1.) As an in-patient of Hospital or Sanatorium at ...
- (2.) As an out-patient of Hospital at ...
- (3.) In Convalescent Home at ...

Should only be used in case of a soldier who is returned to the public health department after discharge.

PENSION.

21. Does the Board recommend that the soldier be considered for a pension? ...

yes

If no pension recommended, briefly state the reason—

22. In the opinion of the Board the soldier's capacity for earning a full livelihood in the general labour market is lessened at present by ...

one half

23. The Board is of the opinion that the disability will continue in the degree noted—

- (a.) Permanently ...
- (b.) For an estimated period of 3 months, when the scale of pensions (if granted) should come up for revision ...

24. Does the Board consider the soldier requires the services of an attendant? ...

- (a.) Permanently ...
- (b.) For an estimated period of (months) ...
- (c.) Reasons for this recommendation, and nature of attendant required ...

Answers to 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.

Questions 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.

James
August 1st 1918

Reshafiak, President.
L.B. Walsh, Members.

H. Sturges, for Surgeon-General, Director-General of Medical Services.

Place: WELLINGTON.

6-8-18

This form must only be used in dealing with a Returned Soldier.

The Board will consist of two members. The President should be an officer of the New Zealand Medical Corps, and the member also if possible. The President of the Board has the power to call in the advice of a specialist if it is required.

PROCEEDINGS OF A MEDICAL BOARD

Assembled at St James Hospital St James on the 11th July 1918
by the order of the Commandant N.Z. Military Forces, for the purpose of examining and reporting upon the present state of health of—

No. 26 586 Rank: 1/Cpl Name: Jarvelly Patrick
Unit: NZ R B Address: Dacron

Majr S Shapiro NZMC President.
Capt D B Walsh NZMC Members.

1. The Board, having assembled pursuant to order, proceed to examine the above named soldier, and find that he has been suffering from—

Disability
Detailed description to be paid to file

- (a.) Original disability
- (b.) Was the original disability, in the opinion of the Board, due to causes existing prior to enlistment?
 - (i) Hereditary
 - (ii) Acquired
- (c.) Specific cause
- (d.) Consequent disabilities

P L W Right arm
inert

no

gunshot wound

fracture of right
ulna & radius
in inert employment

Progress
Report fully

2. Progress

Medical Papers

State all reports which have not been submitted

Regulations
Answer "Yes" or "No" to each question

3. Copies of previous Medical Board reports have been submitted:

- (a.) Overseas. (b.) New Zealand Board. (c.) Army Form B 103. (d.) Report of medical officer of hospital where soldier has been undergoing treatment.

4. Is it the opinion of the Board that the soldier—

- (a.) Is suffering from disease contracted by his own actions?
- (b.) Having previously been passed as fit for sick leave now requires further treatment by reason of his own actions or neglect?
- (c.) Is by neglect or his mode of life in any way impeding his recovery?

If answer in affirmative, specify cause

Bsk of skin 1/19

no

no

no

no
6 months

Active Service
Answer "Yes" or "No" to each question

5. Is the soldier fit for Active Service?
6. If not fit, how long is disability likely to be continued?

Territorial Service

7. Is the soldier fit for (i) Territorial Service? (ii) Home Service?

Civil Employment
Answer "Yes" or "No" to each question

8. If not fit, how long is disability likely to be continued?
9. Is the soldier fit for civil employment? specify if confined to light duties or sedentary work
10. If not fit, how long is disability likely to be continued?

11. Was the disability contracted in the service?

12. Was it caused by military duty?
13. If disability is not contracted in service nor caused by military duty, was it aggravated by them?

yes

yes

yes

yes

yes



NEW ZEALAND EXPEDITIONARY FORCE.

ATTESTATION OF

No. 26588 Name: Farrelly Patrick Regiment or Unit: H. Coy. 17th Inf.

Questions to be put to the recruit before enlistment.

- | | |
|--|---|
| 1. What is your name? ... | 1. <u>Farrelly Patrick</u> |
| 2. Where were you born? ... | 2. <u>Wellington New Zealand.</u> |
| 3. Are you a British subject? ... | 3. <u>Yes.</u> |
| 4. What is the date of your birth? ... | 4. <u>12th Feb. 1891</u> |
| 5. What is your trade or calling? ... | 5. <u>Farmer.</u> |
| 6. Are you an indentured apprentice? If so, where, and to whom? | 6. <u>No.</u> |
| 7. What was the address at which you last resided? ... | 7. <u>Parson House, Auckland</u> |
| 8. Have you passed the Fourth Educational Standard or its equivalent? | 8. <u>Yes.</u> |
| 9. What is the name and address of your present or last employer? | 9. <u>James Farrelly Parson House, Auckland</u> |
| 10. Are you married? ... | 10. <u>No.</u> |
| 11. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? | 11. <u>No.</u> |
| 12. Do you now belong to any military or naval force? If so, to what corps? | 12. <u>No.</u> |
| 13. Have you ever served in any military or naval force? If so, state which and cause of discharge. | 13. <u>No.</u> |
| 14. Have you truly stated the whole (if any) of your previous service? | 14. <u>Yes.</u> |
| 15. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? | 15. <u>No.</u> |
| 16. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? | 16. <u>No.</u> |
| 17. Are you willing to be vaccinated or revaccinated and inoculated? | 17. <u>Yes.</u> |
| 18. Are you willing to serve in the Expeditionary Force in or beyond the Dominion of New Zealand under the following conditions, provided your services should so long be required: For the term of the present European war and for such further period as is necessary to bring the Expeditionary Force back to New Zealand and to disband it? | 18. <u>Yes.</u> |

Note.—Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, Patrick Farrelly, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.

Signature of Recruit: Patrick Farrelly
Signature of Witness: _____

Oath to be taken by recruit on attestation.

I, Patrick Farrelly, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, his Heirs and Successors, and that I will faithfully serve in the New Zealand Military Forces, according to my liability under the Defence Act, and that I will observe and obey all orders of His Majesty, his Heirs and Successors, and of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Magistrate or Attesting Officer.

The above questions were read to the above-named 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 Teatiam, N.Z. on this 9th day of March, 1916.

Signature of Attesting Officer: H. B. Denton

If any alteration is required on this page of the Attestation, the Attesting Officer should be requested to make it and initial the alteration.

Description of Pitman Lemley on Enlistment.

Apparent age: 25 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Height: 5 feet 10 inches.

Weight: 164 lb.

Chest-measurement: { Minimum, 30 inches.
Maximum, 39 inches.

Complexion: Fair

Colour of eyes: Blue

Colour of hair: Fair

Religious profession: Roman Catholic

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

No

Medical Examination.

Sight: Right eye, Normal
Left eye, Normal
Hearing: Right ear, Normal
Left ear, Normal
Colour-vision: Normal
Are his limbs well formed? Yes
Are the movements of all his joints full and perfect? Yes
Is his chest well formed? Yes
Is his heart normal? Yes
Are his lungs normal? Yes
What is the condition of the teeth? Good
Have you had any illnesses? No

Is he free from hernia? Yes
Is he free from varicocele? Yes
Is he free from varicose veins? Yes
Is he free from hæmorrhoids? Yes
Is he free from inveterate or contagious skin-disease? Yes
Is there a distinct mark of vaccination? Yes
Is he in good bodily and mental health and free from any physical defect likely to interfere with the efficient performance of his duties? Yes
Are there any slight defects, but not sufficient to cause rejection? No
Have you ever had a fit? No

Remarks.

Certificate of Medical Examination.

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

I consider him fit for service in the New Zealand Expeditionary Force.

May 31st 1916

J. H. Smith, Medical Officer.

Address: Tea-tree Military Camp.



NEW ZEALAND EXPEDITIONARY FORCE.

ATTESTATION OF

No. 26588 Name: Farrelly, Patrick Regiment or Unit: 4 Coy 17/55

Questions to be put to the recruit before enlistment.

- | | |
|--|-----------------------------------|
| 1. What is your name? | 1. <u>Patrick Farrelly</u> |
| 2. Where were you born? | 2. <u>Wellington</u> |
| 3. Are you a British subject? | 3. <u>Yes</u> |
| 4. What is the date of your birth?... .. | 4. <u>12th February 1891</u> |
| 5. What is your trade or calling? | 5. <u>Farmer</u> |
| 6. Are you an indentured apprentice? If so, where, and to whom? | 6. <u>No</u> |
| 7. What was the address at which you last resided? ... | 7. <u>Hamilton</u> |
| 8. Have you passed the Fourth Educational Standard or its equivalent? | 8. <u>Yes</u> |
| 9. What is the name and address of your present or last employer? | 9. <u>Dillicar Bros; Hamilton</u> |
| 10. Are you married? | 10. <u>No</u> |
| 11. Have you ever been sentenced to imprisonment by the Civil power? If so, when and where? | 11. <u>No</u> |
| 12. Do you now belong to any military or naval force? If so, to what corps? | 12. <u>No</u> |
| 13. Have you ever served in any military or naval force? If so, state which and cause of discharge. | 13. <u>No</u> |
| 14. Have you truly stated the whole (if any) of your previous service? | 14. <u>Yes</u> |
| 15. Have you been registered for compulsory military training under the Defence Act, 1909? If so, where? | 15. <u>No</u> |
| 16. Have you ever been rejected as unfit for the military or naval forces of the Crown? If so, on what grounds? | 16. <u>No</u> |
| 17. Are you willing to be vaccinated or revaccinated and inoculated? | 17. <u>Yes</u> |
| 18. Are you willing to serve in the Expeditionary Force in or beyond the Dominion of New Zealand under the following conditions, provided your services should so long be required: For the term of the present European war and for such further period as is necessary to bring the Expeditionary Force back to New Zealand and to disband it? | 18. <u>Yes</u> |

NOTE.—Your discharge will not be granted before your return to New Zealand unless permission for discharge elsewhere be obtained from the G.O.C. the New Zealand Expeditionary Force.

I, Patrick Farrelly, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagement made.

Signature of Recruit: Patrick Farrelly
 Signature of Witness: J. Bennett

Oath to be taken by recruit on attestation.

I, Patrick Farrelly, do sincerely promise and swear that I will be faithful and bear true allegiance to our Sovereign Lord the King, his Heirs and Successors, and that I will faithfully serve in the New Zealand Military Forces, according to my liability under the Defence Act, and that I will observe and obey all orders of His Majesty, his Heirs and Successors, and of the Generals and Officers set over me, until I shall be lawfully discharged. So help me, God.

Certificate of Magistrate or Attesting Officer.

The above questions were read to the above-named 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 Hamilton, N.Z., on this 31st day of May, 1916

Signature of Attesting Officer: _____

If any alteration is required on this page of the Attestation, the Attesting Officer should be requested to make it and initial the alteration.

2

Description of Petrick Fenelly on Enlistment.

Apparent age: 25 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Service.)
 Height: 5 feet 9³/₄ inches.
 Weight: 158 lb.
 Chest-measurement: (Minimum, 35¹/₂ inches.
 (Maximum, 38 inches.)
 Complexion: Fair
 Colour of eyes: Blue & Grey
 Colour of hair: Fair
 Religious profession: Roman Catholic

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

Note chest up ear

Medical Examination.

Sight: Right eye, Normal
 Left eye, Normal
 Hearing: Right ear, Normal
 Left ear, Normal
 Colour-vision: Normal
 Are his limbs well formed? Yes
 Are the movements of all his joints full and perfect? Yes
 Is his chest well formed? Yes
 Is his heart normal? Yes
 Are his lungs normal? Yes
 What is the condition of the teeth? No
 Have you had any illnesses? No

Is he free from hernia? Yes
 Is he free from varicocele? Yes
 Is he free from varicose veins? Yes
 Is he free from hæmorrhoids? Yes
 Is he free from inveterate or contagious skin-disease? Yes
 Is there a distinct mark of vaccination? Yes
 Is he in good bodily and mental health and free from any physical defect likely to interfere with the efficient performance of his duties? Yes
 Are there any slight defects, but not sufficient to cause rejection? No
 Have you ever had a fit? No

Remarks.

Certificate of Medical Examination.

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

I consider him fit for service in the New Zealand Expeditionary Force.

May 15th, 1916

P. Roman, Medical Officer.

Address: Hamilton

MILITARY HISTORY SHEET.

No. 26588

Name: Farrelly Patrick

H Coy 14 B Co

	Country.	From	To	Years.	Days.	Initials of Officer making Entry
1. Service record ...	<u>Foreign</u>	<u>24.9.16</u> <u>25.9.16</u>				
2. Certificates ...						
3. Passed classes of instruction ...						
4. Active service ...						
5. Wounded ...						
6. Effects of wounds ...						
7. Special instances of gallant or meritorious conduct						
8. Medals and decorations	Name of Medal.	Clasp.	Date of Grant.			
9. Injuries in or by the Service						
10. Name and address of next-of-kin						
11. Particulars as to Marriage.	(a.) Christian and Surname of Woman to whom married, and whether Spinster or Widow. (b.) Place and Date of Marriage. (c.) Name of Officiating Minister or Registrar.					
12. Particulars as to Children.	(a.)		(b.)		(c.)	
	Christian Names	Date and Place of Birth.		Where registered.		

(Father) James Farrelly
Chill Road
Paroa
Hawke's Bay

NOTE.—These entries are to be made from time to time as they occur, and initialled by the officer making the entry.

Intended place of residence on discharge:

New Zealand

STATEMENT OF THE SERVICES OF No. 26598 NAME: Farrelly P.

Regiment or Corps.	Promotions, Reductions, Casualties, &c.	Rank.	Date.	Signature of Officer certifying Correctness of Entries.
H. 17.	Posted to R.O. 536	Plt	30.5.16	<i>[Signature]</i>
"	DISEMBKD. <u>Seven post</u> DISEMBKN. ROLL No. <u>17</u>	"	31 31.11.16	Ryle
5 <u>6</u> Res. Battalion	Coy. Posted to <u>Sling 713</u>	"	"	70

MEDICAL HISTORY

OF

Surname: Farrelly

Christian Name: Patrick

Examined: (On <u>15th</u> day of <u>May</u> , 191 <u>6</u>)	Approved by
(At <u>Hamilton</u>)	<u>P. Noonan</u>
Birthplace: (Town, <u>Wellington</u>)	Medical Officer, <u>Hamilton</u>
(Country, <u>N.Z.</u>)	
Declared age: <u>25</u>	Examined for re-engagement:
Trade or occupation: <u>Farmer</u>	_____ day of _____, 191
Height: <u>5</u> ft <u>9³/₄</u> in.	* Considered:
Weight: <u>158</u> lb.	_____
Chest-measurement: (Minimum, <u>35¹/₂</u> in.)	Medical Officer, _____
(Maximum expansion, <u>38¹/₂</u> in.)	* If unfit, state disability.
Physical development: _____	
Small-pox marks: _____	Re-vaccinated on _____ day of _____, 191
(Right. Left.)	Arm: _____ Number: _____
Vaccination marks: (Ar.o., <u>Present</u>)	Result: _____
(Number, _____)	_____
When vaccinated: _____	Medical Officer, _____
Marks indicating congenital peculiarities or previous disease:	

Enlisted on 30th day of May, 1916 at **TRENTHAM**

	Corps.	Regimental No.	Date.
Joined on enlistment	<u>A. Coy 17th Rfls</u>	<u>26588</u>	<u>30-5-16</u>
Transferred to			

PROPOSED FOR DISCHARGE 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 Services on the man becoming non-effective, the date and cause being stated at the foot of next page.

Surname:

Jarrell

Christian Name: Cecelia

Station or Troopship.	Date of Arrival at the Station or of Embarkation.	Days of						Disease.	Number of Days in Hospital.	REMARKS ON NATURE OF DISEASE: How induced, if mild or severe, if completely recovered from, whether any particular treatment was adopted. In venereal disease, 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.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day.	Mon.	Year.	Day.	Mon.	Year.				
TRENTHAM	30-5-16										
Seatherston									1st Inoculation 19-7-16	W. H. Smith	
do									2nd do 29-7-16	H. H. Smith	
Transport No 64	25-8-18								Vaccinated-11.10.16	W. J. Davidson	

14. If replies to 11, 13, and 15 are all in the negative, give reasons for so finding

15. Was it contracted under circumstances over which he had no control?

Recommendations made under more than one heading in 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

16. The Board recommends that the soldier receives further treatment—

- (a) As an in-patient of Hospital at ...
- (b) As hospital out-patient at ...
- (c) In Convalescent Home at ...
- (d) Under PRIVATE ARRANGEMENTS at own request at ...

17. The Board recommends that the soldier be granted sick-leave for (period not to exceed twenty-eight days)...

18. The Board recommends that the soldier returns to duty...

NOTE—All soldiers when on the duty will report to Adjutant-General, Public Health Department.

19. The Board recommends that the soldier be discharged from the Expeditionary Force.

NOTE—Furlough leave will be granted by the Defence Department representative attending the Board if recommendation is of 19 in nature, provided the local conditions of the soldier entitle him to receive it. In doubtful cases it may be withheld awaiting instructions from High Command.

20. The Board further recommends that subsequent to his discharge the soldier receive further treatment under the care of the Public Health Department—

- (a) As an in-patient of Hospital or Sanatorium at ...
- (b) As an out-patient of Hospital at ...
- (c) In Convalescent Home at ...

Should only be used in the case of a soldier returning to duty after his discharge

PENSION.

20. Does the Board recommend that the soldier be considered for a pension?

If no pension recommended, briefly state the reason...

21. In the opinion of the Board the soldier's capacity for earning a full livelihood in the general labour market is assessed at present by

22. The Board is of the opinion that the disability will continue in the degree noted

- (a) Permanently
- For an estimated period of ... months, when the scale of pension (if granted) should come up for revision

Answer one of questions (a) and (b) only. State out what not required.

23. Does the Board consider the soldier requires the services of an attendant?

- (a) Permanently
- (b) For an estimated period of (months)...
- (c) Reasons for this recommendation, and nature of attendant required

Questions (a), (b), (c) will not be answered unless (a) stipulated is required.

Yes

28 days

W. James
Daly 11th 1918

D. S. Hapgood President.
A. B. Watkins Members.

A. C. Valentini for Surgeon-General, Director-General of Medical Services.

Approved.

Place: WELLINGTON.

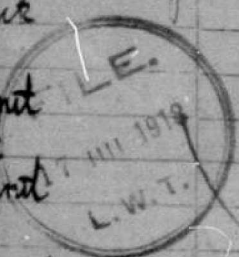
Date: 17 JUL 1918

Casualty Form - Active Service.

Regiment or Corps 3rd Bn 3rd N.Z. (R.I.B.) Christian Name A'Boy Patrick
 Rank Lt Col Surname Farrelly
 Religion Age on Enlistment years months
 Enlisted (a) 30.5.16 Terms of Service (a) Duration of War Service reckons from (a) 30.5.16
 Date of promotion to present rank Date of appointment to lance rank 25.3.18
 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	Wellington	25.9.16	Embark Roll
			Disembarked	Deerport	21.11.16	Disembark "
21.11.16	o/c NZ Reg Group	Marched in	Sumg	21.11.16	Nom. "	
8.1.17	do	left for France.	do	7.1.17	"	
13.1.17	o/c NZ SV 9 Bn	Marched in	Staples	9.1.17	S/R 46837	
10.2.17	o/c 3rd Bn.	Joined Bn & posted to A'Boy	On the field	8.2.17	B213 (764)	
21.4.17	o/c do	to HQ of Sub	do	21.4.17	B213	
21.4.17	o/c NO 3 NZ Field Amb.	Admitted	do	21.4.17	A36	Inf Med
22.6.17	o/c 3rd Bn.	Rejoined Unit	do	9.5.17	U3848	Inf Med
19.5.17	do	to HQ of Sub	do	14.5.17	U3848	Inf Med
19.5.17	do	Rejoined Unit	do	18.5.17	B213	
22.6.17	do	to HQ of Sub	do	21.5.17	B213	
26.5.17	o/c NO 3 NZ Field Amb.	Admitted	do	22.5.17	A36 49567	Inf Med

Entered Led for 7924



(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 inserted.
 (b) Signaller, Shewing Smith, &c.

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form R.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 R.213, Army Form A.36, or other official documents.
Date	From whom received				
23.6.17	o/c 3rd. Bn.	Rejoined Unit	In the Field	29.5.17	B213 (37/265)
28.9.17	do	Detached to Bde. School	do	28.9.17	B213 (41/431)
6.10.17	do	Rejoined Unit	do	5.10.17	B213 (42/437)
13.10.17	do	Detached to Regt. Camp.	do	9.10.17	B213 (42/437)
27.10.17	do	Rejoined Unit	do	20.10.17	B213 (45/449)
6.4.18	do	Unit Lance Corporal	do	28.3.18	B213 (16/159)
13.4.18	do	Wounded in Action	do	4.4.18	B213
5.4.18	o/c NO1 NZ Field Bn.	Admitted	do	5.4.18	A36 19717 (22788) <i>sh. Neck - Rt Forearm</i>
6.4.18	o/c NO5 B Coy	Admitted	do	5.4.18	A36 19858 <i>do</i>
6.4.18	o/c NO8 that Coy	Admitted	Homeuse	6.4.18	H3034 19818 <i>do</i>
9.4.18	do	Embarked for U.K.	do	9.4.18	H3083 1110 <i>do</i>
13.4.18	o/c NZEF	Adm. No. 1 NZ Gen. Hosp.	Brockhurst	9.4.18	S/R 1181 <i>do</i>
9.5.18	do	Classified by med. Board. placed on N.Z. Roll	U.K.	3.5.18	N/R 17/11/H1026 16984
7.5.18	do	Employed for N.Z. per his memo.	Plymouth	3.5.18	N/R 17/5/H1943 16936 <i>o/c Rt Arm Frac. Ulna.</i>

ENTERED ON HISTORY SHEET
157 15-7-17

This form must only be used in dealing with a Returned Soldier.

The Board will consist of 3 members. The President should be an officer of the New Zealand Medical Corps, and the member also if possible. The President of the Board has the power to call in the advice of a specialist if it is required.

PROCEEDINGS OF A MEDICAL BOARD
H. M. HOSPITAL SHIP MAHENO

28 MAY 1918

Assembled at

by the order of the Commandant N.Z. Military Forces, for the purpose of examining and reporting upon the present state of health of—

No. 26588, Rank: L/Corporal Name: FARRELLY P.

Unit: N.Z.R.B. Address: Paeroa. Auckland.

examined by

R. Tracy-Inglis, Colonel. N.Z.M.C. (President)

E. E. Porritt. Major. N.Z.M.C.

J. Reid... Captain. N.Z.M.C. (Members)

1. The Board, having assembled pursuant to order, proceed to examine the above-named soldier, and find that he has been suffering from—

Disability. Careful consideration to be paid to this.

(a) Original disability

GSW Right arm. and neck.

(b) Was the original disability, in the opinion of the Board, due to causes existing prior to enlistment?

No

(c) Hereditary

(d) Acquired

(e) Specific cause

GSW

(f) Consequent disabilities

Fract. ulna, small foreign body in back of neck.

Progress. Report fully.

2. Progress

Wds. healed, arm movements good, no nerve lesions.

Medical Papers.

3. Copies of previous Medical Board reports have been submitted:

Not all reports which have not been exhibited.

(a) Overseas (b) Reports of medical officer of hospital where soldier has been undergoing treatment.

Negligence. Answer "Yes" or "No" to each question.

4. Is it the opinion of the Board that the soldier—

(a) Is suffering from disease contracted by his own actions?

No

(b) Having previously been passed as fit for sick-leave now requires further treatment by reason of his own actions or neglect?

No

(c) Is by neglect or his mode of life in any way impeding his recovery?

No

If answer is affirmative, specify cause

Active Service. Answer should be "Frequently," "Occasionally," "Seldom," or "Never."

5. Is the soldier fit for Active Service? 6. If not fit, how long is disability likely to be continued?

No

Six months.

Territorial Service.

7. Is the soldier fit for (a) Territorial Service?

No

Civil Employment. Answer "Yes" or "No" to each question.

8. If not fit, how long is disability likely to be continued?

No

Three months

9. Is the soldier fit for civil employment? (specify if confined to light duties or sedentary work)

No

10. If not fit, how long is disability likely to be continued?

One month.

11. Was the disability contracted in the service?

Yes

12. Was it caused by military duty?

Yes

13. If disability is not contracted in service nor caused by military duties, was it aggravated by them?

14. If replies to 11, 12, and 13 are all in the negative, give reasons for so finding ...

15. Was it contracted under circumstances over which he had no control? ...

Yes

Recommendation
Should never be made unless more than one finding in 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

16. The Board recommends that the soldier receives further treatment—

- (a) As an in-patient of Hospital —
- (b) As Hospital Out-Patient —
- (c) In Convalescent Home —
- (d) Under Private Arrangements at own request —

Not Available

17. The Board recommends that the soldier be granted sick leave for a period not to exceed twenty-eight days.

Returns to Duty

18. The Board recommends that the soldier returns to duty

Discharge

19. The Board recommends that the soldier be discharged from the Expeditionary Force.

Treatment subsequent to discharge

19a. The Board further recommends that subsequent to his discharge, the soldier receive further treatment under the care of the Public Health Department—

- (1) As an in-patient of Hospital or Sanatorium at ...
- (2) As an out-patient of Hospital at ...
- (3) In Convalescent Home at ...

Pension

PENSION.

Questions 20, 21, 22, and 23 will be answered only in case of discharge.

20. Does the Board recommend that the soldier be granted pension?

If no pension recommended, briefly state the reason.

21. Does the Board recommend that the soldier's capacity for earning a full livelihood in the general labour market is assessed at ...

22. The Board is of the opinion that the disability will continue in the degree noted—

- (a) Permanently
- (b) For an estimated period of ... months, when the scale of pension (if granted) should come up for revision.

23. Does the Board consider the soldier requires the services of an attendant?

- (a) Permanently
- (b) For an estimated period of (months) ...
- (c) Reasons for this recommendation, and nature of attendant required

Questions 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

Place: H. S. MAHENO

Date: 28. MAY 1918

R. Gray, Dykes Col. N. Z. M. C.
W. C. Porritt Maj. N. Z. M. C.
F. Reid Capt. N. Z. M. C.

Approved:

Place: WELLINGTON.

Director-General of Medical Services.

Medical Report on an Invalid.

Station No. 1 N.Z. Gen. Hospital,
BROCKENHURST
Date 20.4.18.

N.Z. Rifle Brigade.

- | | |
|--|--|
| <p>1. Unit 26588</p> <p>2. Regimental No. L/Cpl.</p> <p>3. Rank FARRELLY, P.</p> <p>4. Name 27</p> <p>5. Age last birthday May 1916.</p> <p>6. Enlisted { on Hamilton.
at</p> | <p>7. Former Trade (or Occupation)</p> <p>7A. If with previous service in Army, state—</p> <p>(a) Former Unit;</p> <p>(b) Regimental No.;</p> <p>(c) Date of Discharge;</p> <p>(d) Cause of Discharge.</p> |
|--|--|

8. Disability in respect of which invaliding is Proposed.

(Other disabilities should be reported upon in answer to question No. 19).

G.S.W. R. arm; Fr. Ulna.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to general disease.

- 5.4.18.**
9. Date of origin of disability. **Somme**
10. Place of origin of disability.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. **Wounded by H.E.
9.4.17. No.1 N.Z.G.H.
Clean T & T wd R. forearm.**
12. Give your opinion as to the causation of the disability, stating whether in your opinion it is—
- (a) attributable to or aggravated by service during the present war, climate, or ordinary military service. (The specific condition to which it is attributed should be stated, see Notes on page 3). **Attributable to service during present war.**
- (b) constitutional or hereditary, and not aggravated by service during the present war. **No**
- (c) attributable to or aggravated by want of proper care on the man's part, e.g., intemperance, misconduct, &c. **No**

Clean T & T. wound R. forearm.
Movements good.
X ray: Long incomplete fracture of
ulna, with loose fragment 3" long;
No nerve lesion.

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

14. If the disability is an injury, was it caused—

- (a) In action? **Yes**
(b) On field service? **Yes**
(c) On duty? **Yes**
(d) Off duty? **No**

15. Was a Court of Inquiry held on the injury?

NO

If so—(a) When?

(b) Where?

(c) Opinion?

16. Was an operation performed? If so, what?

No

17. If not, was an operation advised and declined?

NO

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

Not applicable.

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding, and state whether they are attributable to or have been aggravated by service during the present war.

Slight GSW. neck: attributable to service during present war.

20. Do you recommend—

(a) ~~Discharge as~~ permanently unfit, or

~~(b) Change to~~ **H.E. for 6 mths. Yes.**

(Sgd) H. Simpson, Major M.Z.M.C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except* †

Station **No. 1 H.Z. Gen. Hosp. BROCKENHURST.**

(Sgd) F.C. Fenwick,

Officer in charge of Hospital.

Date **20.4.18.**

*Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

