

*Home*

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Oeterchij - Lillian* DATE *3/24* 19 *09*

AGE..... YEARS { NEW RETURNED } STUDENT. TRIBE..... STATE.....

DEGREE OF INDIAN BLOOD.....

INSPECTION.....

PALPATION.....

PERCUSSION.....

AUSCULTATION { RESONANCE.....  
RESP. MURMUR.....

HEART SOUNDS.....

MENSURATION { INSP. .... RESPIRATION..... PULSE.....  
EXP. ....

TEMPERATURE..... degs. HEIGHT..... FT..... IN. WEIGHT..... LBS.

VISION..... VACCINATION.....

MENSTRUATION.....

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER.....				
MOTHER.....				
BROTHERS {				
SISTERS {				

PERSONAL HISTORY:

.....

REMARKS: *Returned from country with an advanced tuberculosis. Sent home Mch-26-1909.*



5685

CARLISLE INDIAN INDUSTRIAL SCHOOL.  
DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT.

Dead

NUMBER 2138	ENGLISH NAME Lillian Otter Chief	AGENCY Crow Agency, Mont.	NATION Crow
BAND	INDIAN NAME	HOME ADDRESS Otter Chief, Crow Agency, Mont.	
PARENTS LIVING OR DEAD	BLOOD Full	AGE 14	HEIGHT 5-4 <sup>3</sup> / <sub>4</sub>
FATHER, Living	MOTHER, Dead	WEIGHT 121	FORCED INSE. 33 <sup>1</sup> / <sub>2</sub>
ARRIVED AT SCHOOL August 22, 1906	FOR WHAT PERIOD Five > 15 Years	DATE DISCHARGED 3-26-'09	CAUSE OF DISCHARGE Sick
TO COUNTRY	PATRONS NAME AND ADDRESS		FROM COUNTRY
May 2, 1907	F. M. Bousal, Glenolden, Pa.		7-22-'07
8-2, 8-'08	Mrs. Geo. Kerr, Sr. Downingtown, Pa.		3-27-'09

SHAW-WALKER MUSKOGON 5478

Months in school before Carlisle, .....

Grade entered at Carlisle, ..... 2<sup>nd</sup> .....

Grade at date of Discharge, ..... 3<sup>rd</sup> .....

Trade or Industry, ..... Housework .....

Church, ..... Prot. .... no choice .....

