3786

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER	ENGLISH NAME	AGENCY	NATION
~~6472~~ 4648	Jesse Dort	Rosebud	Sioux

BAND	INDIAN NAME	HOME ADDRESS
		Dort, Cut Meat, S. Dak.

PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.
FATHER, L	MOTHER, L	Full	19	5-7½	137	36	31	M.

ARRIVED AT SCHOOL	FOR WHAT PERIOD	DATE DISCHARGED	CAUSE OF DISCHARGE
Oct. 8, 1911	Five years	9-10-12	Failed to return

TO COUNTRY	PATRONS NAME AND ADDRESS	FROM COUNTRY
5-20-12	Home on Leave	

THE SHAW-WALKER CO., MUSKEGON 121071

Months in school before Carlisle, 108

Grade entered at Carlisle, ...

Grade at date of Discharge, ...

Trade or Industry, ...

Church, Catholic

Miles to school - 7

NAME Foot, Jesse Sex { Male. ~~Female.~~

Tribe { Full / 1/2 } Sioux State South Dakota Sept. 15th., 1911

Age 20 years Respiration 18 Condition of, Eyes Good

Height 5 ft. 10 1/2 ins. Mensuration { Insp. 35 / Exp. 31 Ears Good

Weight 160 lbs. Throat Good

Temperature 98.6 Vaccination Yes Cervical glands Good

Pulse 72 Vision Good Skin Good

Inspection Good

Palpation Good

Percussion Good

Auscultation Good

Heart Good

~~(Menstruation)~~

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	Yes	Good		
Mother	Yes	Good		
Brothers 3	Yes	Good	Yes	Pneumonia
			Yes	Baby Don't know
Sisters 3	Yes	Good	Yes	Baby Don't know
			Yes	Baby Don't know

Personal history Attend Lower CutMeat School 10 years. Always had good health.

Present condition Good

W. R. Bebout, M. D.

☞This form is for the record of the physical condition of pupils of boarding or nonreservation Indian schools. It should be filled in by the school physician at the time of the admission of the pupil.

Physicians in the field should use this form to record the examination of pupils for transfer to nonreservation schools. It should accompany the pupils' transfer blanks.

The reverse side is intended as a card-index case-record for use by all Service physicians.

6—1955

CASE RECORD, 5—354.

Name ....

Age .... *Sex* {*Male.* / *Female.*} *Tribe* {*Full* / *1/*} .... *Residence* ....

(*On* ...., *19*.....)

DATE.		SYMPTOMS.				TREATMENT.	DIAGNOSIS.	REMARKS.
19....		T.	P.	R.				History, progress, and termination of the disease.

6—1955

NAME Jesse Foot

Sex { Male. / Female. }

Tribe { Full / 1/1 } Sioux State So Dak. Oct 9, 1911

Age 20 years	Respiration 3	Condition of, Eyes Ok
Height 5 ft. 7 1/2 ins.	Mensuration { Insp. 36 / Exp. 31 }	Ears Ok
Weight 137 lbs.		Throat Ok
Temperature 98.6	Vaccination Oct 9 - 11	Cervical glands Ok
Pulse	Vision	Skin Ok

Inspection Ok

Palpation Ok

Percussion Ok

Auscultation Ok

Heart Ok

(~~Menstruation~~)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	yes	well		
Mother	"	"		
Brothers	2	"	2	?
Sisters	1	"		

Personal history ?

Present condition Good -

Elmer Frew, M. D.

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(*On* ...., *19*.....)

DATE.	SYMPTOMS.				TREATMENT.	DIAGNOSIS.	REMARKS.
19.....	T.	P.	R.				History, progress, and termination of the disease.

6—1955

117

BRIEF.

Application of

Jesse Foot

FOR THE ENROLLMENT OF

Himself

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

NAME OF AGENCY FROM WHICH PUPIL CAME:

Rosebud, South Dakota

Date of enrollment September, 1911 191

Term of enrollment Five (5) years

Printed by Carlisle Indians.

Application for Enrollment in a Non-reservation School.

(For a child enrolled at an Agency)

For and in consideration of the Government of the United States assuming the care, education, and maintenance in the United States Indian School at Carlisle, Pa.

of Jesse Foot (Name of Child); male (Sex); date of birth April, 1892

Sioux (Tribe).

NAME OF FATHER (Both Indian and English)	Living or Dead	TRIBE	BAND	DEGREE OF INDIAN BLOOD
Foote	L	Sioux		Full
NAME OF MOTHER				
Ogalalla	L	"		Full

I, Jesse Foot, do hereby voluntarily consent and agree to my enrollment in said school for a period of five (Not less than 3) years, and also obligate myself to abide by all the rules and regulations for Indian Schools.

The said child has been enrolled in the following schools:

	NAME OF SCHOOL	DATE OF ENROLLMENT	DATE OF DISCHARGE	CAUSE	GRADE
1.	Lower Cut Meat Day	1898	1908		
2.	Rosebud Boarding	1908	1909		
3.	" "	1910	1911		
4.					

Jesse Foot
(Parent, guardian, or next of kin)

P. O. address: Cut Meat,
South Dakota

Two Witnesses:

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find him to be in proper physical condition to attend school, and not afflicted with tuberculosis or any disease which would be a menace to the health of other pupils.

This 15 day of September, 1911

William R. Belcourt

Physician at Rosebud Agency.

CERTIFICATE OF AGENT OR SUPERINTENDENT.

I hereby certify that the statements made in the foregoing application and certificate, to the best of my knowledge and belief, are true, that the consent of .....
(Parent, guardian, or next of kin.)
was voluntary, and I recommend the transfer of said child.

This ..... day of ....., 19....

.....

Agent or Superintendent.

SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a non-reservation school. The Superintendent of the nonreservation school will retain the original for his files, and the duplicate shall be deposited in the Agency records. The agent will then send to the Commissioner of Indian Affairs his certificate as provided by law. All the blanks must be properly filled in every case.

NOTE.—Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.

INDORSEMENTS.

The laws relating to the transfer of Indian children from reservations and schools are as follows:

That hereafter no Indian child shall be sent from any Indian reservation to a school beyond the State or Territory in which said reservation is situated without the voluntary consent of the father or mother of such child if either of them is living, and if neither of them is living without the voluntary consent of the next of kin of such child. Such consent shall be made before the agent of the reservation, and he shall send to the Commissioner of Indian Affairs his certificate that such consent has been voluntarily given before such child shall be removed from such reservation. And it shall be unlawful for any Indian agent or other employee of the Government to induce, or seek to induce, by withholding rations or by other improper means, the parents or next of kin of any Indian to consent to the removal of any Indian child beyond the limits of any reservation. (28 Stats., p. 906.)

Provided, that hereafter no Indian child shall be taken from any school in any State or Territory to a school in any other State against its will or without the written consent of its parents. (29 Stats., p. 348.)

The rules provide that—

A pupil who has been regularly enrolled in a nonreservation school must not be taken to any other nonreservation school without the consent of both Superintendents and the Commissioner of Indian Affairs, and Superintendents will be held to strict accountability for such pupils taken to their schools.

An Indian boy or girl 18 years old and over may, without the consent of parents or others, personally sign the application form on its being changed to suit the case.

This form is to be used only in transfers from reservations, or Indian schools, to nonreservation schools.

3786

March 12, 1913.

Name Jane Frost,
(Please give name by which enrolled and also present or married name.)

Tribe Sioux

Present Address Cut Meat, S.D.

Former Address
(Address from which we heard from you last.)

Present Occupation Ranching

Remarks: I am enjoying the ranch life as this is the chief industry of my country.

1—567 a

Department of the Interior.

Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

6—3305

January 24, 1914.

Name Jesse Foot
(Please give name by which enrolled and also present or married name.)

Tribe Sioux

Present Address Cut Meat, S. D.

Former Address " " "
(Address from which we heard from you last.)

Present Occupation Farming

Remarks: I am very glad I received the arrow every time

1—567 a

Department of the Interior.

Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania

6—3305

Foote, Jesse 3786

Father's file - Mr. Foote 6906

Agent's file 903

Correspondence 7329

"Y AND E" ROCH. 117 REPORT AFTER LEAVING CARLISLE 563757 3M-2-11

NAME AT CARLISLE Jessie Foot

PRESENT NAME

DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
1913	Self	Cut Meat, S.D.	Rancher		
1914	"	"	Farming		

NO. .....

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1912

TRIBE ..... FULL. ONE .....

NAME Jessie Foote

AGE .....

DIAGNOSIS Rheumatism

ADMITTED Jan 20/12 DISCHARGED Jan 27/12

RESULT Cured

VISITING PHYSICIAN:

Allen

RESIDENT PHYSICIAN:

.....

REMARKS:

Case No.

DIAGNOSIS

Rheumatism,

Revise

Notes of Case

Name Jessie Foot. M.F.

Age S.M.W.

Nativity

Occupation Student

Residence Carlisle Pa

Date of admission Jan. 20, '11,

Diet

Soft

full

Treatment

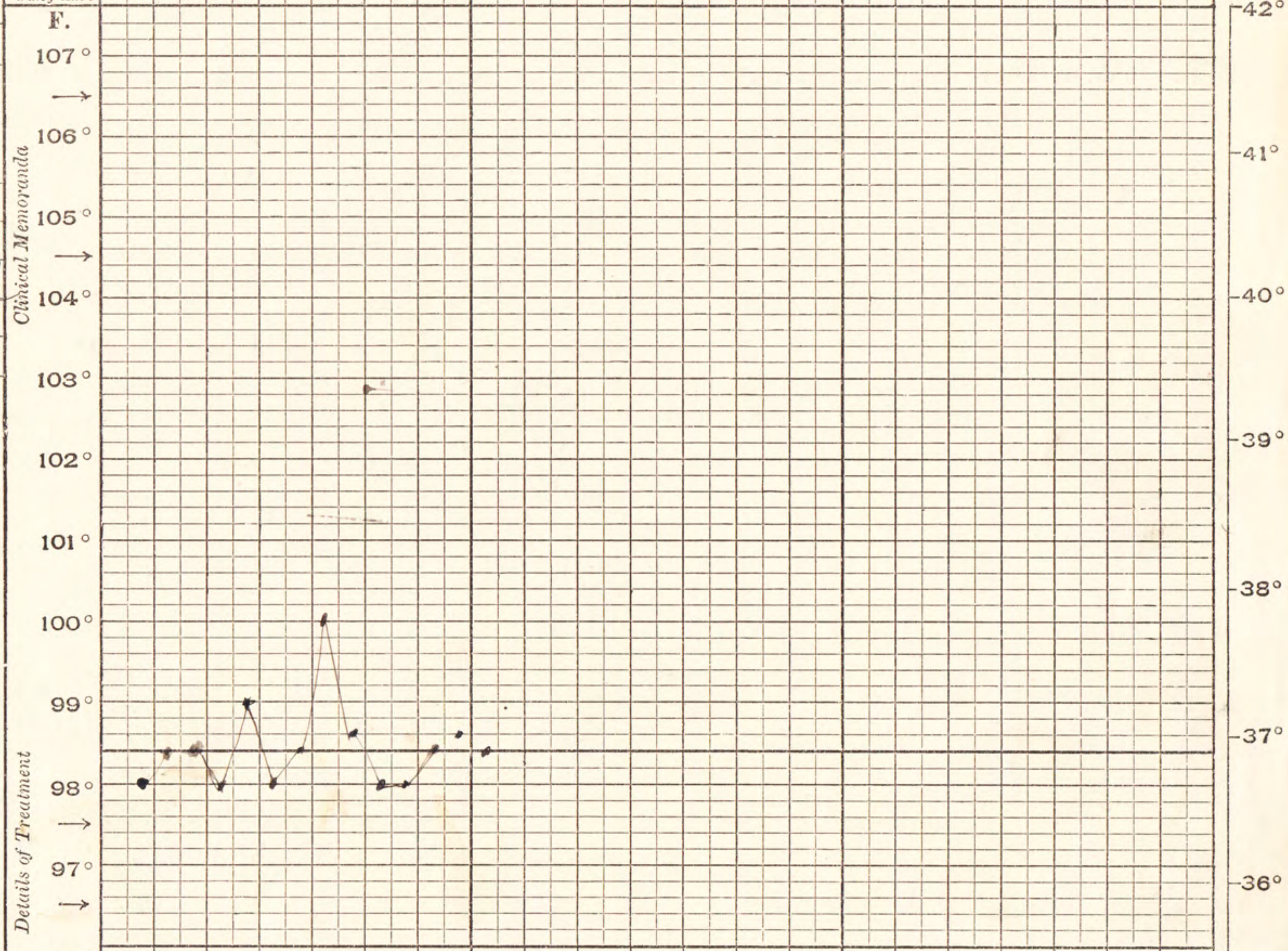
Phenacetin & Salol Tablet Every 3 hours

Sit Up.

Result

Date	20	21	22	23	24	25	26	27
Bowels (number of movements) M / E		1 / 1	0 / .	1 /	1 / 1	0 /	1 / 1	1 /
Urine Daily Am't								
Day of Dis.								
Pulse	78	64 / 66	64 / 80	66 / 62	66 / 62	60	60	74
Resp.								

Clinical Memoranda — Details of Treatment



Published by J. B. Lippincott Company, Philadelphia, Pa.

Patient ..... Carlisle, Pa., ... 191 ..... Physician .....

Address ..... Nurse .....

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
				2 00	Phenacetin + Sal	3.00	milk		
				4 "	" "				
				6 "	" "	5:30	Soft.		
					Jan. 24.				
9:00	100	66		8 00	Phenac + salol.	6:30	Soft.		
4. "	98.6	62				12 00	Soft.		
						3 "	milk		
						5:30	Soft.		
					Jan 25				
9:00	98	60		8 00	Phena + salol.	6:30	Full.		
4 "	98			4 "	" "	12 00	Soft.		
						5:30	Soft.		
					Jan 26.				
9:00	98⁴			12 "	Phena + sal.	6:30	Soft.	7:00	(No clock to take
4. "	98.6	60		4 "	" "	12 00	Full		pulse.)
						5:30	Full		
					Jan 27, 12				
				8 00	Phena + salol				

Patient ..... Carlisle, Pa., Jan 21, 1912, Physician .....

Address ..... Nurse .....

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:30	98	64		9:00	Phena & Salol	6:30	Milk, Coffee		Complains of spitting up blood and a pain in the chest.
				12:00	" "				
				3:00	" "	12:00	Soft.		
4:00	98⁴	66		4:00	" "	5:30	Soft.		
				6:00	" "	9.00	milk		
				6.00					
					Jan. 22.				
8:00	98	64		8 m	Phena & Salol	6:30	Soft		
				10 "	" "				
				12 m	" "	12:00	Soft		
				2:00	" "				
4 m	99	60		4 m					
				6 m	" "	6:00	Soft.		
				7:00	" "				
					Jan 23.				
7:00	98	66		8:00	$MgSO_4$ ℥ ii	6:30	Soft		
				8:00	Phena & salol.				
				10:00	" "				
4 m	98⁴	62		12 m	" "	1:00	Soft		

NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1912.

TRIBE FULL. ONE

NAME Jesse Fowler

AGE

DIAGNOSIS Pulmonary Tuberculosis

ADMITTED Feb 14 DISCHARGED May 20.

RESULT Greatly Improved (Sent Home)

VISITING PHYSICIAN: A R Allen

RESIDENT PHYSICIAN: H B Frahm

REMARKS:

Case No.

DIAGNOSIS

Revise

Notes of Case

Name *Jesse Foote* M.F.

Age S.M.W.

Nativity

Occupation

Residence

Date of admission *Feb. 14.*

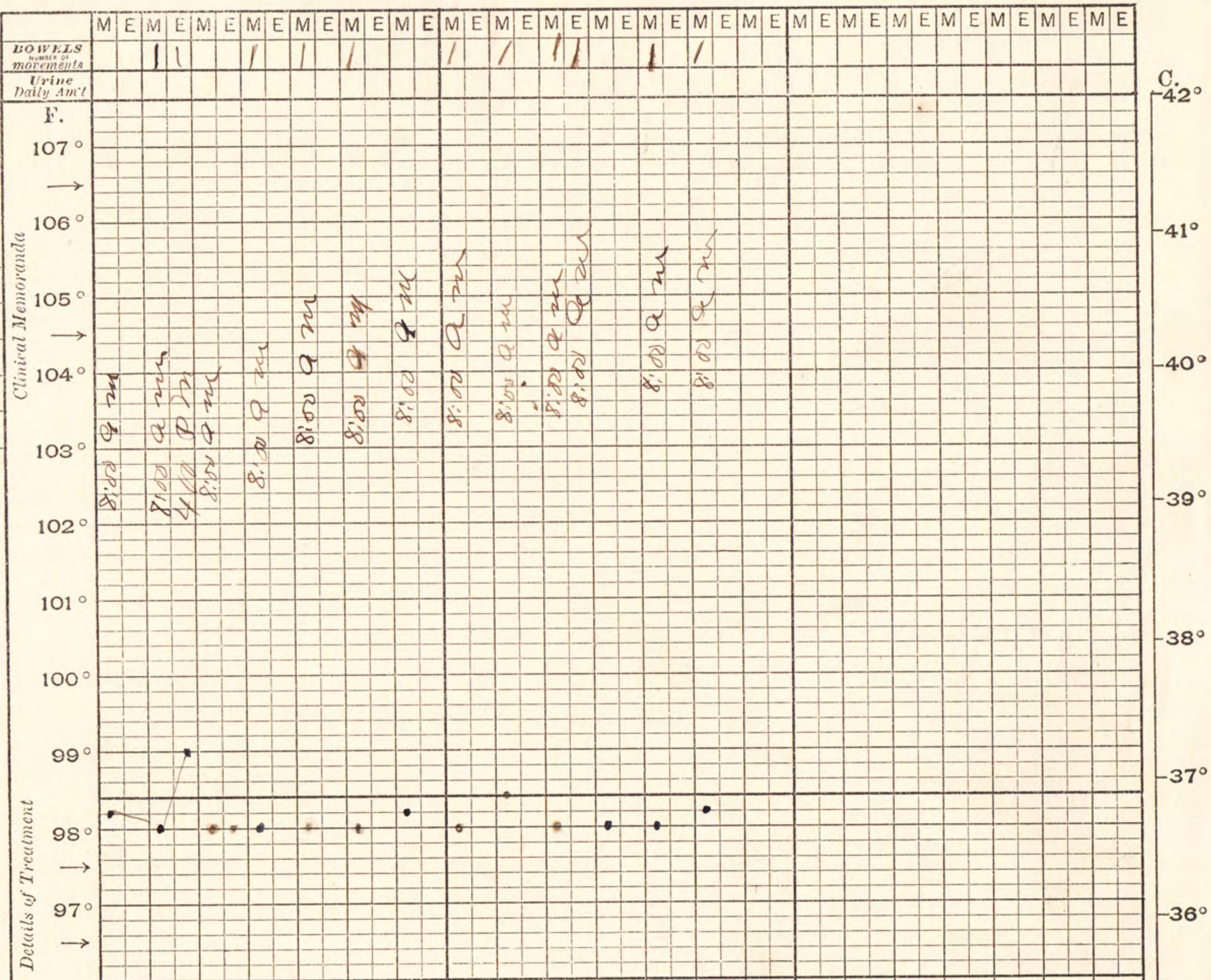
Diet

Full

Extra milk + eggs.

Treatment

Result



Day of Dis.																			
Pulse.	82	78 / 80	72	78	82	84	78	82	88	82	84	72	74						
Resp.	26	30 / 34	28	26	26	24	24	26	28	26	28	26	28						
Date.	8	9	10	11	12	13	14	15	16	17	18	19	20						

Published by J. B. Lippincott Company, Philadelphia, Pa.

Patient Jesse Foote Carlisle, Pa., May 20 1912 Physician

Address Carlisle Nurse Pearl Bowser

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8:00	98.1	74	28						

Patient Jesse Foote Carlisle, Pa., May 10 1912 Physician

Address Nurse Pearl Bonser

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8:00	98	72	28					400	not here.
					May 11				
8:00	98	78	26						
					May 12				
8:00	98	82	26					1000	not here
					~~May 13~~			300	" "
8:00	98	84	24						
						10:00	milk.		
					May 14			400	not here.
8:00	98.2	78	24						
					May 15				
8:00	98	82	26					400	not here.
					May 16				
8:00	98.3	84	26						
					May 17			400	not here.
8:00	98	82	26						
								900	not here
								400	" "
								900	" "

Patient Jess Foote Carlisle, Pa., April 80 191 Physician

Address Nurse

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
4th	98	60	28						
					May 1				
8:00	99.6	72	28					4th	not here
					May 2			9:00	" "
8:00	98.4	74	30					4:00	not here.
					may 4th				
8:00	98	76	30						
					May 6th			4:00	not here
8:00	98.2	78	28						
					May 7.			4th	not here.
						9:00	milk		
					may 8th				
8:00	98.1	82	26						
					may 9th			4th	not here.
8:00	98	78	30						
4th	99	80	84						
								8th	milk
								9:00	milk

Patient ..... Carlisle, Pa., April 24 191 Physician .....

Address ..... Nurse .....

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
730	98½	70	30			630	Full		
						1200	"		
						530	"		
					April 25				
						630	Full	not here for temperature	
						1200	Full	400	not here
					Apr. 26				
						630	Full		
						1200	Full	400	not here
					April 27				
						630	Full		
						1200	"	400	not here
						530	"		
					April 28	630	Full		
						1200	"		
						530	"		
					April 29	630	Full	7.30	not here
400	98⁴	80	30						

Patient ..... Carlisle, Pa., April 18 191 Physician .....

Address ..... Nurse .....

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
630	98	70	88			800	milk	900	milk
						1080	Full		
						900	milk		
					April 19				
730	98	74	88			630	Full	900	milk
						300	milk		
600	98[4]	80	30			1200	Full		
						580	Full		
					April 20				
760	98	70	30			630	Full	960	milk
						1200	Full	300	not hers
760	98	70	30		April 21	630	Full	400	" "
						1200	"		
					April 22	630	Full	760	not hers
						1200	Full	300	not hers
						1530	Full	400	" "
					April 23				
760	984	70	80			630	Full	400	" "

Patient ..... Carlisle, Pa., April 13 191 Physician .....

Address ..... Nurse .....

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
700	98.4	80	34			630	Full	300	not here
						1200	"	401	not here
						530	"		
					April 14				
700	98.4	70	32			630	Full	900	milk
400	98	70	84			1200	"		
						530	"		
					April 15				
700	98	70	32			630	Full	900	milk & eggs
						1200	"	400	not here
						530	"		
					April 16				
730	98	70	30			630	Full	300	not here
						900	milk	400	not here
						1200	Full		
						531	"		
					April 17				
730	98.4	70	30			630	Full	900	milk
						900	milk	400	not here

Patient ..... Carlisle, Pa., April 8 191 Physician .....

Address ..... Nurse .....

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
700	98.4	70	80			630	Fluid	900	milk
						1200	"	400	not here
						530	"		
					April 9				
700	98.4	70	80			630	Full	1000	milk
						1200	"	400	not here
						530	"		
					April 10				
700	98.4	76	30			630	Full	900	milk
						1200	"		
400	100	64	30			530	"		
					April 11				
700	98	70	32			630	Full	900	milk & egg
						1200	"	400	not here
						530	"		
					April 12				
700	98.4	80	34			630	Full	900	milk & egg.
						5 in milk			
								4	

Patient ..... Carlisle, Pa., April 8 191 Physician .....

Address ..... Nurse .....

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
						630	not here.		not here to have temperature taken
						1200	Full		
						530	Full		
					April 4				
730	98½	80	34			630	Full	40	not here
						1200	"		
						530	"		
					April 5				
730	98⅘	86	32			630	Full		
						1200	"	400	not here
						530	"		
					April 6				
760	98½	80	34			630	Full		
						1200	"	400	not here
						530	"		
					April 7				
760	98½	80	34			630	Full	407	not here
						1200	"		
						480	"		

Patient Jesse Forte Carlisle, Pa., Mar 29 191 Physician Dr. Frolic

Address Nurse Eva Simone

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	98.2	68	20			8.30	Full		
						12:00	"	10:00	not here to nourishment
						3.00	milk.		
						5.30	Full	900	Not here.
					Mar. 30				
7:00	98	74	20			8.30	"		
						12:00	"	10:00	not here to nourish
						5.30	"		
					Mar 31				
7:00	98.6	74	20			8.30	"	1000	Not here.
						12.00	"	300	Not here.
						5.30	"	4--	Not here
					April 1			900	" "
7.30	98.4	80	84			6.30	Full		
						8.00	——	8.00	Not here
					April 2				
7.30	98.4	70	34			6.30	Full	8.00	not here.
								4.00	" "

Patient Jesse Rourke Carlisle, Pa., Mar 26 1912 Physician Dr Fralick

Address Nurse Eva Lumm

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7 AM	98.6	70				6:30	Full.		
						12 M	"	10 AM	not here for Nourishment
3:00	~~98~~	70				3:00			
						5:30	"		
					Mar 27				
7 AM	99	70				6:30	"		
						12 M	"		
3:00	98.4	~~80~~ 70	19			5:30	"		
					Mar 28				
7 AM	98.4	80	18			6:30	"		
						10 AM		10 AM	not here for Nourishment
						12 M	"		
						3 PM	"		
						5:30	"	9 PM	" " "

Patient Jesse Forte Carlisle, Pa., Mar 22 1912 Physician Dr. Fralic

Address Nurse Eva Simons

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	98	76				6:30	Tea		
						12:00	"	10:00	Jot here for nourishment
						5:30	"		
					Mar 23				
7:00	98	80				6:30	"		(not here all
						10:00	"		after-noon.)
						5:30	"		
					Mar. 24				
7:00	98[1]	76				6:30	"		
						12:00	"		
						5:30	"		
						9:00	Milk		
					Mar 25-				
7:00	98[4]	72				6:30	Tea		(not here all
						12:00	"		after-noon)
						5:30	"		

Patient Jesse Forte Carlisle, Pa., Mar 18 1912 Physician Dr. Fralic

Address Nurse Eva Simons

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7 A.M.	98.6	64				6:30	Full	10 A.M.	not here for nourishment
						12 M.	"		
						5:30	"	9 A.M.	" " " "
					Mar 19				
7 A.M.	98.6	76				6:30	Full		
						12 M.	"	10 A.M.	not here for nourishment
						5:30	"		not here all afternoon.
					Mar 20				
7 A.M.	98	70				6:30	"		
						12 M.	"	10 A.M.	not here for nourishment
						5:30	"		
					Mar 21				
7 A.M.	98.6	70				6:30	"		
						12 M.	"	10 A.M.	" " " "
						5:30	"		
								9 A.M.	" " " "

Patient Jesse Foltz Carlisle, Pa., Mar. 14 1912 Physician Dr. F. Zahn

Address Nurse Ena Simon

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	98	74				6:30	Full		
						12:00	Full	10:00	not here for nourishment
						5:30	"	9:00	" " "
					Mar 15				
7:00	98[1]	70				6:30	"		
						12:00	"	10:00	" " "
						5:30	"		not here all after-noon.
					Mar 16				
7:00	98	68				6:30	Full		
						12:00	"	10:00	not here for noon meal
						5:30	"		
						9:00	milk		
					Mar 18 ~~20~~				
7:00	98	68				6:30	Full		
						12:00	"		
						5:30	"	9:00	Milk. not here all afternoon

Patient Jesse Foote Carlisle, Pa., Mar 11 1912 Physician Dr. Fralic

Address Nurse Lura Simone

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	98.6	70				6:30	Full		Up for breakfast-
						12:00	"	10:00	not here for nourishment
						5:30	"		
									not here all afternoon.
									for Not Here.
					Mar 12				
7:00	99	78				6:30	Full		
						12:00	"	10:00	not here for nourishment-
						5:30	"		
									not here all
					Mar 13				afternoon
7:00	98.6	64				6:30	"		
						12:00	"	10:00	not here for nourishment-
						5:30	"	8:00	" " " " "
									& not for use
									after noon.)

Patient Jesse Fiota Carlisle, Pa., Mar 7 1912 Physician Dr. Fralic

Address Nurse Eva Simon

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	98	72				1:30	Full		
						12:00	"	10:00	not here for nourishment
						5:30	"		
					Mar 8			3:00	(not here all after-noon)
7:00	98.4	70				6:30	"		
						12:00	"	10:00	not here.
						5:30	"		
									not here all after noon.
					Mar 9				
7:00	98	74				6:30	Full		
						12:00	"	10:00	not here for nourishment
						5:30	"		
					Mar 10				
7:00	98	64				6:30	no breakfast		Complains of pain in region of heart - Remained in bed all day.
4:00	98.6	60				5:30	Tea Same bread + butter		

Patient Jesse Foote Carlisle, Pa., Mar 4 191 Physician Dr. Fralei

Address Nurse Eva Simon

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7:00	98⅖	76				6:30	F. ale.		not here all
						10:00	egg & milk		after - noon.
						12:00	F. ale		
						5:30	..		
					Mar. 3				
7:00	98⅖	76				6:30	F. ale.		
						10:00	egg & milk		
						12:00	F ale		
						5:30	..		
					Mar 4				
7:00	98	70				6:30	F. ale.		
						10:00		10:00	not here for nourishment
						12:00	..		
						5:30	..		not here all after - noon.
								6:00	Not here

Patient Jesse Foote Carlisle, Pa., Mar. 1 1912 Physician Dr. Fraker

Address Nurse Eva Lamoin

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
				9:00	Phen. & Salol	10:00	egg & milk		
				12:00	" " "	12.00	milk, Soup		not here
				3:00	———		toast beans		
				6:00	" " "		potatoes		
						3:00	milk.		
						5:30	egg, tea, Sauce		
							potato gravy		
					Mar 2				
7:00	98[6]	72				6:30	coffee, oatmeal	12:00	not here
							toast gravy	3:00	" " all
						10:00	egg & milk		after noon.
						12:00	Full		
						5:30	"		
7:00	98	84			Mar 3				
				8:00	Phen & Salol	7:00	Full.		
						12:00	"		
						5:30	"		
						9:00	"		

Patient Jesse Forte Carlisle, Pa., Feb 27 1912 Physician Dr Frabi

Address Nurse Eva Simon

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
				900	Rhenad Salol	5-30	Full.	900	Milk.
					Feb 28				
7:00	98[6]	90		9:00	Phena & Salol	6-30	Full		
						10-00	egg + milk		
						12-00	Full		
						5-30	"	5-30	did not eat any supper.
					Feb 29				
7:00	100[2]	88		9:00	Phena & Salol	6.30	no Breakfast	6:30	Would not eat any breakfast. Complain of pain in vicinity of heart.
						10-00	milk		
						12-00	milk Soup bread + but- potato pea		
4.00	100	90				3:00	milk.		
						5:30	tea bread + but. potato Sauce		
					March 1				
7:00	98[6]	70				8.30	Coffee, oatmeal, egg, gravy-bread.		

Patient Jesse Foote Carlisle, Pa., Feb 24 1912 Physician Dr Fralic

Address Nurse Eva Simon

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7.00	98.4	80				6.30	Full		not here all afternoon.
						10 a	Light milk		
						12 m	Full		
						5.30	"		
						9.00	Egg & Milk		
					Feb 25				
7 a	98.6	91				6.30	Full		
						12-a	"		
						5.30	"		
					Feb 26				
7.a	99	90		12.00	Phenacetin & salol	6.30	"		
				3.00	" " "	10.00	"		
				6.00	" " "	12 m	"		
						2.00	milk		
						5.30	Full		
					Feb 27				
7.a	98.6	70		9.00	Phenacetin & Salol	6.30	"		
				12.00	" " "	10.a	egg & milk		
				3.00	" " "	12 m	milk hominy potato bread & butter		

Patient Jesse Fowler Carlisle, Pa., Feb 21 1912 Physician Dr. Frahi

Address Nurse Eva Simone

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
2.00	98⁴	76				6.30	Full		
4/6	98.4	74				10.00	not here for milk		
						12.00	Soup & ca. potat & milk		
						5.30	Full		
					Feb 22				
7.00	98	78				6.30	"		not here all all after-noon.
10.00	97.6	62				10.00	milk		
						12.00	Full		
						5.30	"		
					Feb 23				
2.00	98	70				6.30	Full		(not here all after-noon.)
						10.00	egg & milk		
						12.00	Full		
						5.30	"		
						9.00	Milk.		

Patient Jesse Foot Carlisle, Pa., Feb. 18 1912 Physician Dr. Fralic

Address Nurse Eva Simons

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7.00	98⁶	74				6.30	Full		
						10.00	Milk.		
						12-00	Full		
4.00	98	80				2.00	Milk		
						5-30	Full		
						9.00	milk		
					Feb. 19				
7.00	97	80				6.30	Full		
10.00	98⁴	66				10.00	milk + egg		
4.00	98.4	70				12.00	Full		
						5.30	"		
						10.00	———		Not here.
					Feb 20				
7.00	98⁴	80				6.30	"		
						10.00	egg + milk		
						12.00	Full		
						5.30	"		

Patient Jesse Forte Carlisle, Pa., Feb. 14 1912 Physician Dr. Finalie

Address Nurse Eva Simons.

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
11.00	98⅘	72				12 n	Full -		
2:00	99	74				3:00	milk.		
						3:30	Full		
					Feb 15 -				
7.00	98⅖	72				6.30	"		
10.00	98⅘	64				10.00	milk		
						12 n.	Full		
						3:00	milk.		
						3:30	Full		
					Feb 16				
7.00	98⅖	70				6.30	"		
[illegible]	98⅘	66				10.00	ice cream		
						12.00	Full		
						3:30	"		
					Feb 17				
7.00	98⅖	68				6.30	"		
400	[illegible]	6				10.00	egg & milk		
						12.00	Full		
						6.30	"		

temp q 3 hrs.

Case No.

DIAGNOSIS

T.B.?

Revise

Notes of Case

Name Jesse Foote *M.F.*

Age *S.M.W.*

Nativity

Occupation

Residence

Date of admission Feb 14

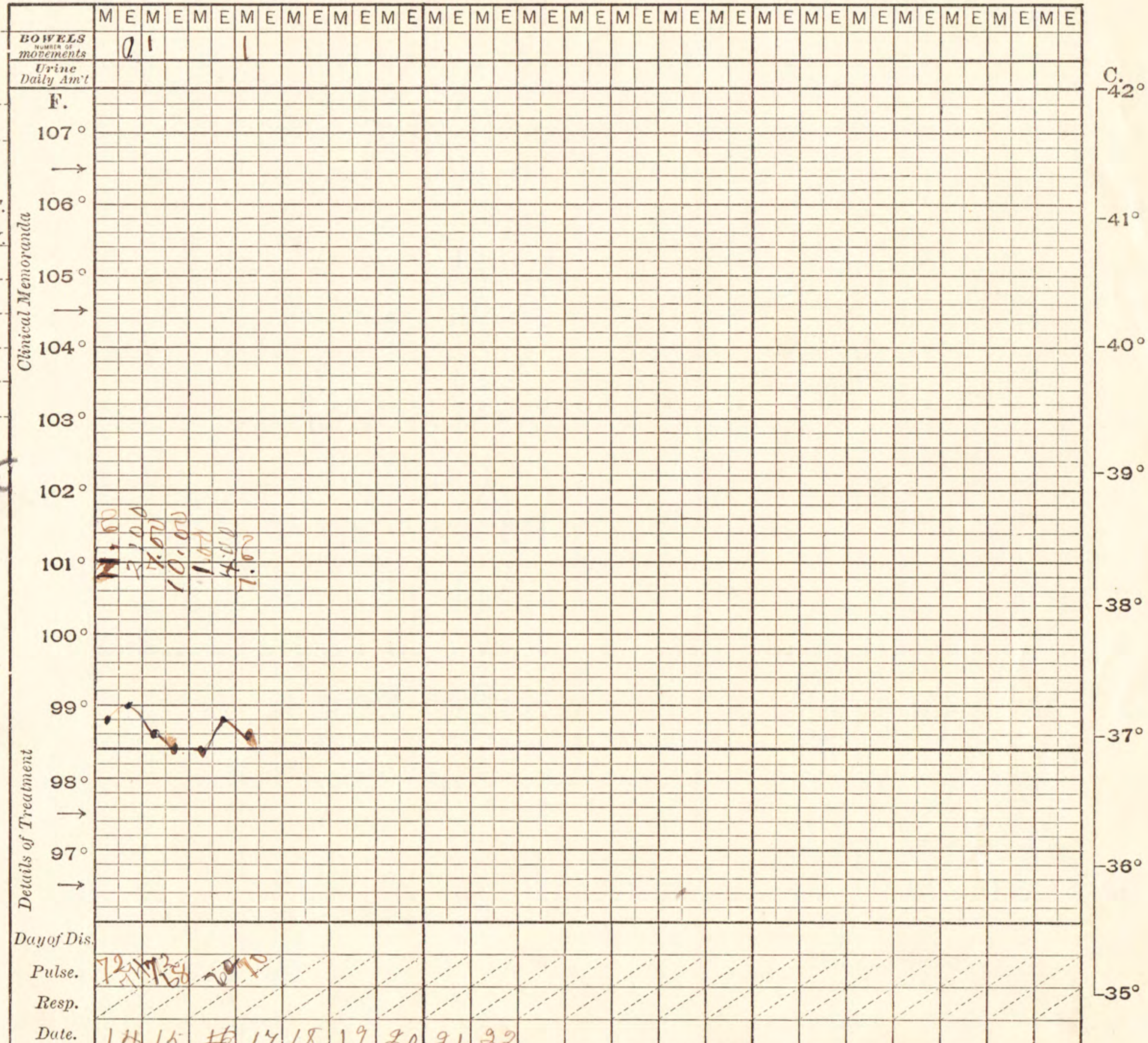
Diet

Full, with extra milk + eggs

Treatment

Sleep out doors
Temperature every 3 hrs

Result



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Case No.

DIAGNOSIS

Revise

Notes of Case

Name Jesse Fowler M.F.

Age S.M.W.

Nativity

Occupation Student

Residence 2nd-S Ch
Carlisle Pa.

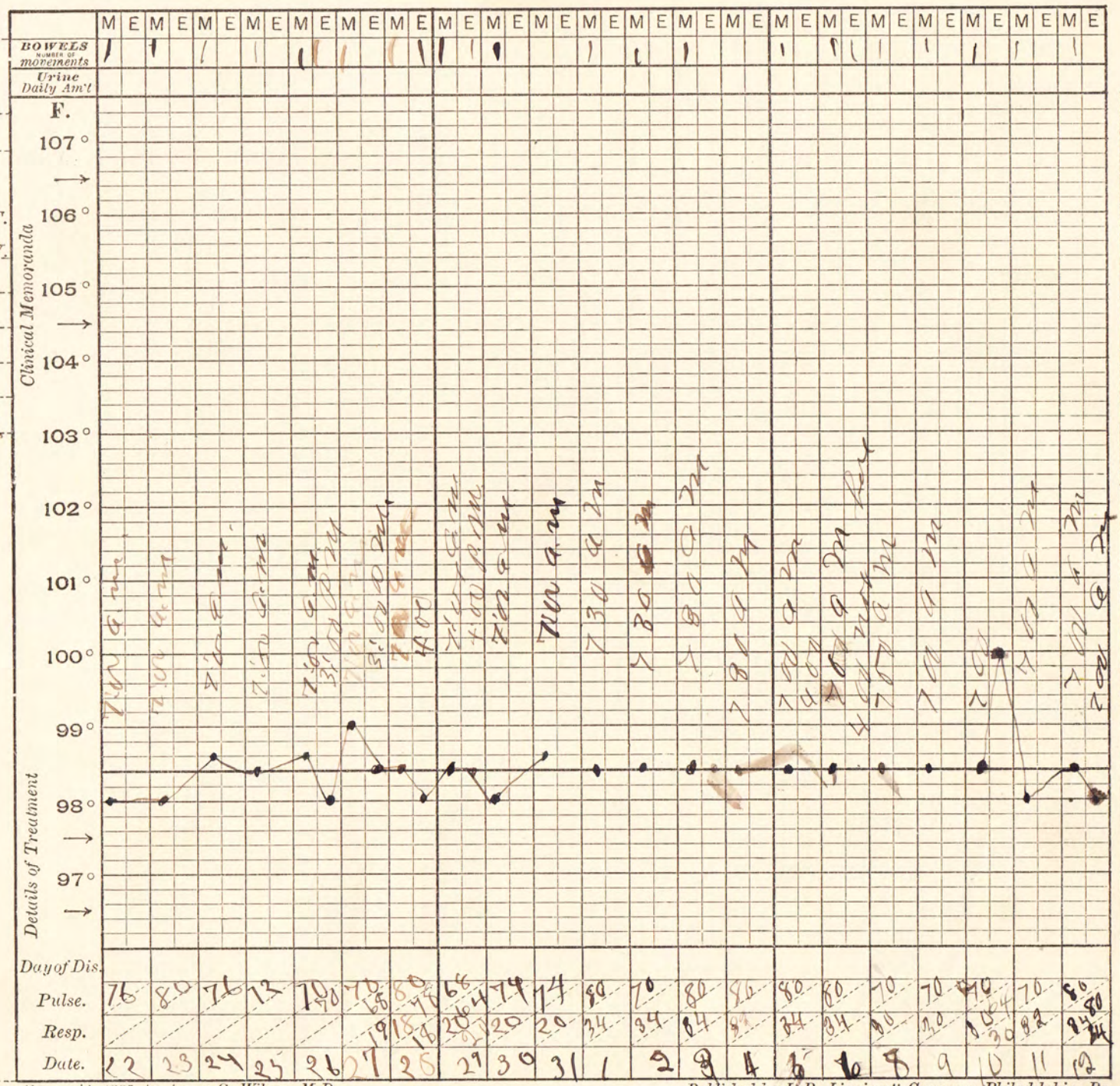
Date of admission Feb 14, 1912

Diet

Full -
Extra eggs + milk.

Treatment

Result



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Case No.

DIAGNOSIS

Revise

Notes of Case

Name Jesse Foote M.F.

Age S.M.W.

Nativity

Occupation Student

Residence Ind. Sch.
Carlisle Pa.

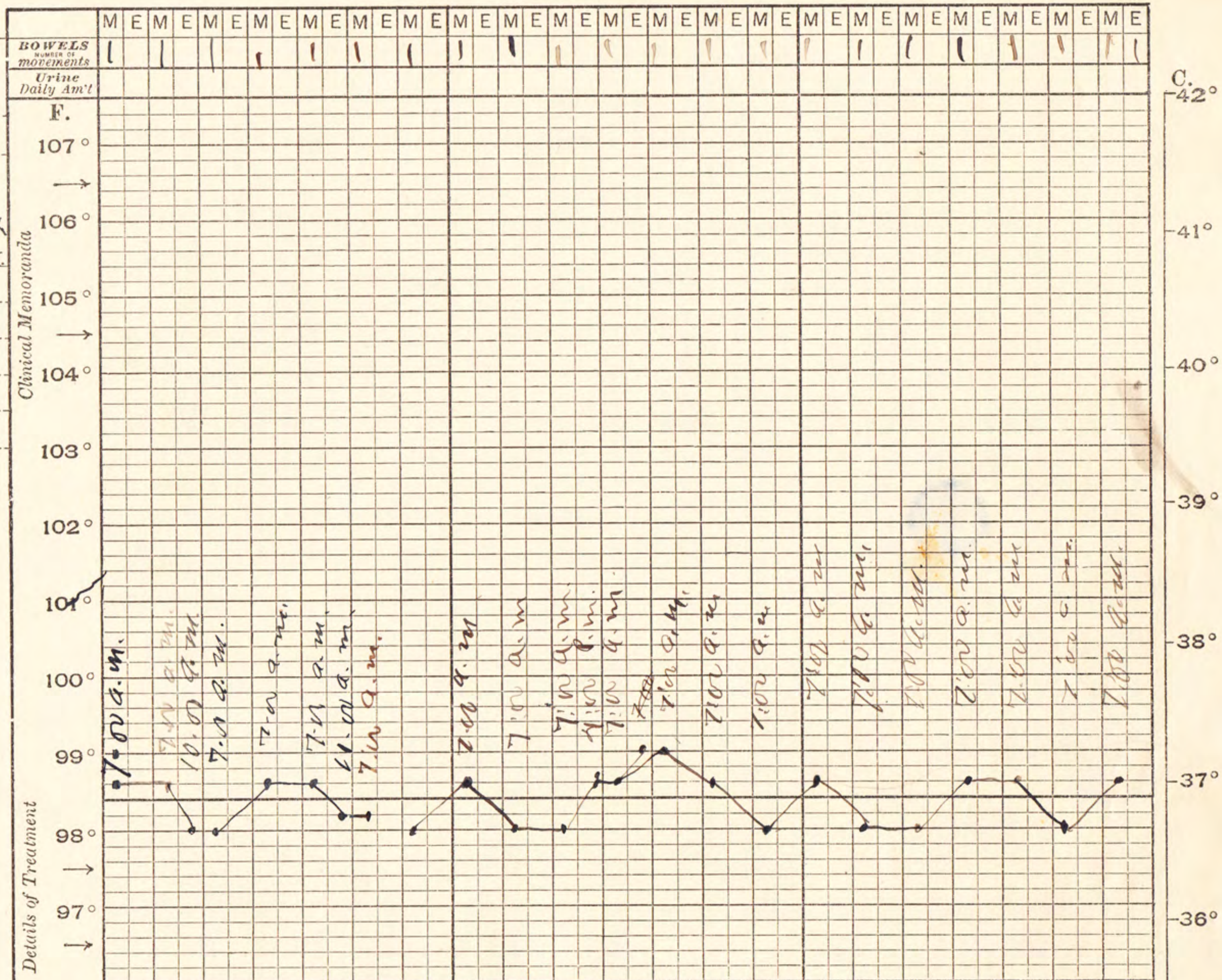
Date of admission Feb. 14, 1912

Diet

Full

Treatment

Extra eggs



Day of Dis.																					
Pulse.	70	72 / 68*	84	76	76 / 64	70	76	70	72	64 / 60	70	78	64	74	70	68	68	64	76	70	70
Resp.																					
Date.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21

Mar

Result

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Case No.

DIAGNOSIS

T. B. ?

Revise

Notes of Case

Name Jesse Foote M.F.

Age S.M.W.

Nativity

Occupation

Residence

Date of admission Feb. 14, 1912

Diet

Full - Extra egg + milk

Treatment

Sleep out-doors

Temperature q 3 hrs -

Salol & Phenacetin every 3 hrs

Result Feb -

BOWELS Number of movements

Urine Daily Amt

Clinical Memoranda

Details of Treatment

Day of Dis.

Pulse.

Resp.

Date.

F. 107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

C. 42° 41° 40° 39° 38° 37° 36° 35°

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Case No.

DIAGNOSIS

T.B.

Revise

Notes of Case

Name Jas Foat M.F.

Age S.M.W.

Nativity

Occupation Student

Residence Indian School

Carlisle Penn.

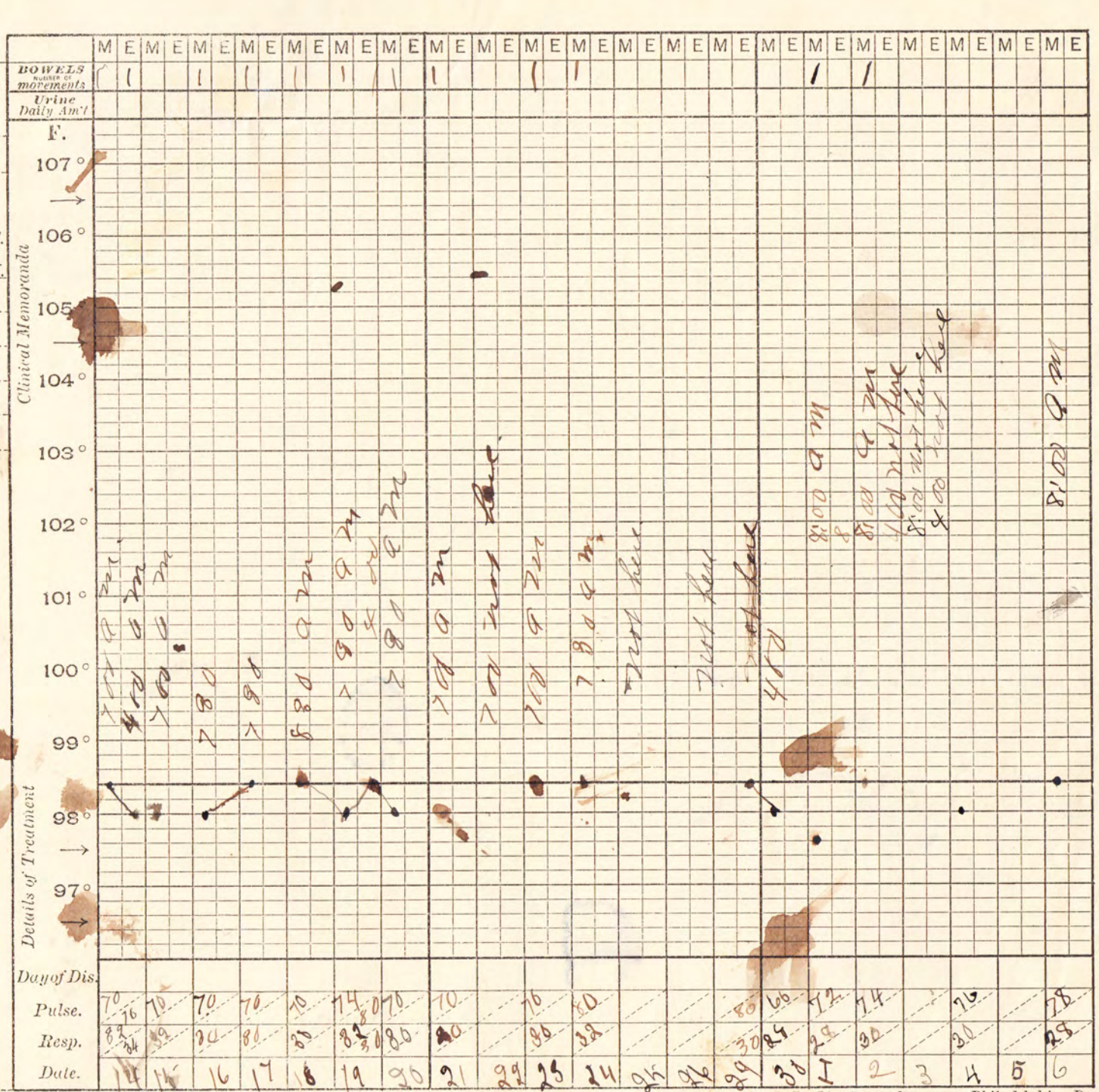
Date of admission Feb 14 1880

Diet

Free

Extra eggs & milk

Treatment



Result

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